

State of Wisconsin 2023 - 2024 LEGISLATURE

LRB-1239/1 SWB:cdc

## **2023 SENATE BILL 856**

December 26, 2023 - Introduced by Senators COWLES and JAMES, cosponsored by Representatives SORTWELL, BALDEH, GOEBEN, MURSAU, O'CONNOR and RODRIGUEZ. Referred to Committee on Transportation and Local Government.

AN ACT to amend 46.283 (5); and to create 46.283 (4) (k), 46.283 (6m) and

49.45 (3d) of the statutes; relating to: specialized transportation assistance

pilot program.

### Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to establish a specialized transportation assistance pilot program through which DHS may allow an aging and disability resource center (ADRC) to coordinate or contract with a mobility management organization to coordinate the provision of specialized transportation assistance services for individuals in need of those services. The bill requires DHS to divide the state into three regions to conduct the pilot program. Under the bill, specialized transportation assistance programs include nonemergency medical transportation (NEMT); transportation waiver services for individuals eligible through long-term care programs under the Medical Assistance program; specialized transportation assistance programs through the Department of Transportation; services provided to assist veterans with nonemergency medical transportation; or any other federal, state, or local program that provides specialized transportation assistance services to assist the elderly or individuals with disabilities or funding for such services.

The bill requires any ADRC that participates in the program to submit an annual report of its activities to DHS and to the Department of Transportation,

including a description of the number of individuals served by the program and the effect of the program on access to specialized transportation assistance services. The bill also requires DHS, in coordination with DOT, to submit an annual report to the legislature regarding the status of the program and any recommended changes, including information regarding whether the program should be continued. Under the bill, DOT is required, in coordination with DHS, to form an advisory group to advise both DOT and DHS regarding implementation pilot program, coordinate with the pilot regions, and provide recommendations regarding possible changes to the program.

Subject to any necessary federal approval, the bill also requires, in any contract for the arrangement and reimbursement of nonemergency medical transportation services to recipients of Medical Assistance, that DHS include provisions allowing providers of NEMT to offer transportation for purposes other than NEMT, to be paid for by the recipient of the transportation or another source, as an extension of an NEMT trip. Under the program, DHS would still provide reimbursement under the Medical Assistance program only for the NEMT portion of a trip, but a provider of NEMT services would be allowed to offer the Medical Assistance recipient—or another source on behalf of the recipient—the opportunity to pay to extend the transportation for other purposes as part of the same trip at the same rate offered for the NEMT under the Medical Assistance program.

Under the program, DHS must also include in the contract for NEMT services provisions requiring providers to collect, for both NEMT services and any extended services offered by a provider, information including, if applicable, trip log data, summary information on all calls for services and contacts with Medical Assistance recipients, encounter data based on Centers for Medicare and Medicaid Services 1500 claim form data, network provider information, accident and moving violation reports, vehicle reports, complaint summary reports, telecommunications system reports, annual fiscal audit reports, and daily reports including numbers of trips, canceled trips, denied trips, and complaints.

To the extent NEMT services for Medical Assistance recipients may be permitted to be coordinated with other transportation services needed by Medical Assistance recipients, an ADRC may include in its coordination services coordination of such specialized transportation assistance services for Medical Assistance recipients.

For further information see the state and local fiscal estimate, which will be printed as an appendix to this bill.

# The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

**SECTION 1.** 46.283 (4) (k) of the statutes is created to read:

46.283 (4) (k) If participating in the specialized transportation assistance

pilot program under sub. (6m), administer or contract with a mobility management organization to administer coordination of specialized transportation assistance services as described under sub. (6m). This paragraph does not apply after June 30, 2027.

**SECTION 2.** 46.283 (5) of the statutes is amended to read:

46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (1) (n), (4) (b), (bd), (bm), (gm), (pa), and (w), and (7) (b) and (md), the department may contract with organizations that meet standards under sub. (3) for performance of the duties under sub. (4) and shall distribute funds for services provided by resource centers, including services under sub. (6m).

**SECTION 3.** 46.283 (6m) of the statutes is created to read:

46.283 (6m) SPECIALIZED TRANSPORTATION ASSISTANCE PILOT PROGRAM. (a) The department shall establish a specialized transportation assistance pilot program through which the department may allow a resource center to coordinate or contract with a mobility management organization to coordinate the provision of specialized transportation assistance services for individuals in need of those services. The department shall divide the state into a northeast region, southeast region, and western regions to conduct the pilot program under this subsection. For purposes of the pilot program under this subsection, specialized transportation assistance services for individuals who meet financial and nonfinancial eligibility criteria for long-term care programs under the Medical Assistance program; any specialized transportation assistance program

administered or provided by the department of transportation and described under ch. 85, including state paratransit aid under s. 85.205, the county assistance program under s. 85.21, the tribal elderly transportation grant program under s. 85.215, or enhanced mobility program under s. 85.22; services provided to assist veterans with nonemergency medical transportation under s. 45.41 (4) (a) or 45.83 (1); or under any other federal, state, or local program that provides specialized transportation assistance services to assist the elderly or individuals with disabilities or funding for such services. A resource center or an organization contracted to provide coordination services under this subsection shall assist individuals with utilizing specialized transportation services by coordinating payment from existing local, state, and federal funding sources.

(b) To the extent permitted under s. 49.45 (3d), coordination of specialized transportation assistance services under this subsection may include coordination of nonemergency medical transportation available to recipients under the Medical Assistance program with other transportation services needed by these individuals.

(c) Any resource center that participates in the program under this subsection shall submit an annual report of its activities to the department and to the department of transportation, including a description of the number of individuals served by the program and the effect of the program on access to specialized transportation assistance services.

(d) Beginning on June 30, 2024, and annually thereafter, the department, in coordination with the department of transportation, shall submit a report to the chief clerk of each house of the legislature for distribution to the legislature under s.

13.172 (2) regarding the status of the program and any recommended changes, including information regarding whether the program should be continued.

(e) This subsection does not apply after June 30, 2027.

**SECTION 4.** 49.45 (3d) of the statutes is created to read:

49.45 (3d) COORDINATION OF MEDICAL ASSISTANCE NONEMERGENCY MEDICAL TRANSPORTATION WITH OTHER TRANSPORTATION. Subject to par. (c), the (a) department shall, to the extent permitted by the contract, modify the contract that is in effect on the effective date of this paragraph .... [LRB inserts date], for the arrangement and reimbursement of nonemergency medical transportation services to recipients of Medical Assistance under this subchapter to allow providers of nonemergency medical transportation to offer transportation for purposes other than nonemergency medical transportation, to be paid for by the recipient of the transportation, either directly or through another source, as an extension of a nonemergency medical transportation trip. Subject to par. (c), if the department establishes a new contract for the arrangement and reimbursement of nonemergency medical transportation services to recipients of Medical Assistance under this subchapter, the department shall include in the new contract provisions to allow providers of nonemergency medical transportation services to offer transportation for purposes other than nonemergency medical transportation, to be paid for by the recipient of the transportation, either directly or through another source, as an extension of a nonemergency medical transportation trip. Subject to par. (c), the department shall provide reimbursement under s. 49.46 (2) (b) 3. for only the nonemergency medical transportation portion of a trip, and the recipient of

Medical Assistance under this subchapter is responsible for payment of any remaining costs. The department shall require, in any contract provision regarding the arrangement and reimbursement of nonemergency medical transportation services to recipients of Medical Assistance under this subchapter, that if a provider of nonemergency medical transportation services chooses to offer the additional service described under this paragraph, the provider shall offer the service to the recipient at the same rate charged for nonemergency medical transportation.

(b) The department shall include in any contract provisions under this subsection a requirement that a nonemergency medical transportation provider submit to the department, for both nonemergency medical transportation services and any extended services offered as described under par. (a), information substantially similar to the information required under the original contract in effect on the effective date of this paragraph ..... [LRB inserts date], including, if applicable, trip log data, summary information on all calls for services and contacts with Medical Assistance recipients, encounter data based on Centers for Medicare and Medicaid Services 1500 claim form data, network provider information, accident and moving violation reports, vehicle reports, complaint summary reports, telecommunications system reports, annual fiscal audit reports, and daily reports including numbers of trips, canceled trips, denied trips, and complaints.

(c) The department shall submit to the federal department of health and human services any request for a state plan amendment, waiver of federal law, or other federal approval necessary to provide reimbursement under par. (a) and allow providers of nonemergency medical transportation services to offer transportation

for purposes other than nonemergency medical transportation to be paid for not by the Medical Assistance program under this subchapter, but by the recipient of the transportation, either directly or through another source, as an extension of a nonemergency medical transportation trip allowed under the Medical Assistance program. If the federal department of health and human services approves the request or if no federal approval is necessary, the department shall allow nonemergency medical transportation services providers to offer the services described under par. (a). If the federal department of health and human services disapproves the request, the department may not allow nonemergency medical transportation services providers to offer the services described under par. (a).

#### **SECTION 5. Nonstatutory provisions.**

(1) SPECIALIZED TRANSPORTATION SERVICES ADVISORY COUNCIL. The secretary of transportation shall form, in coordination with the department of health services, an advisory group to advise both the department of transportation and the department of health services regarding implementation of the specialized transportation services pilot program under s. 46.283 (6m), coordinate with the pilot regions established by the department of health services for the program, and provide recommendations regarding possible changes to the program.

(END)