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Maine Medicaid EMS Supplemental Payment Program

Blue-Ribbon Commission (BRC) Meeting

October 25, 2022

Introductions



Robert "Butch" Russell President, MAA

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About Sellers Dorsey

Client Types



States and Counties



Safety Net Hospitals



Academic Medical Centers



State Ambulance Associations & Providers



Medicaid Managed Care Plans



Medicaid Vendors



Physician practice plans



LTSS Providers

Successful Medicaid Financing Results

- Assisted states, counties, parishes, providers, and stakeholders to generate over \$19 billion in additional federal Medicaid funding
- Successfully designed and implemented start-to-finish Medicaid financing initiatives in 24 states, with two or more successful initiatives in 13 states
- Since 2017, Sellers Dorsey has secured CMS approval for 49 Sellers Dorseydesigned Medicaid financing initiatives in 18 states

FACTS on Maine Ambulance

- For many ambulance services, MaineCare reimbursement is below the cost of service leading to significant losses.
- In the post-pandemic environment, Maine ambulance services providers face severe workforce challenges.
- Even prior to the pandemic, the number of EMS personnel has steadily declined; the industry experienced a 20-30% turnover rate among its service providers nationwide in 2019.
- Especially in rural areas, underfunded ambulance services are unable to employ enough paramedics. This has also increased the gaps in coverage.

Supplemental Payment Programs

Types of Programs

- Governmental Providers
 - Intergovernmental Transfers (IGTs), Certified Public Expenditures (CPEs).
- Non-governmental Providers
 - Provider Assessment Programs

Potential Program Benefits

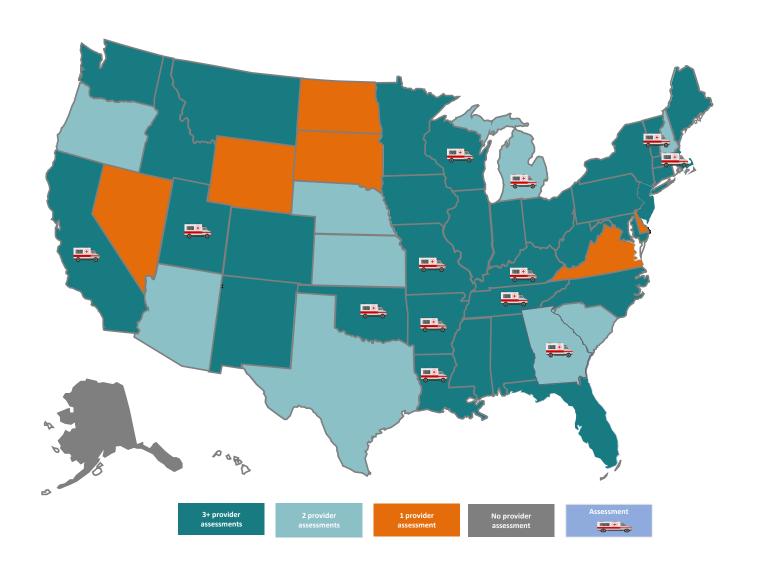
- With increased revenue, the ambulance industry can:
 - Pay their employees higher wages
 - Invest in recruiting and retaining employees
 - Increase and maintain inventory of equipment and other supplies
 - Conduct trainings to encourage best practices industry wide

What is a Provider Assessment?

A Medicaid financing mechanism that authorizes collecting revenue from specified categories of providers (class of service).

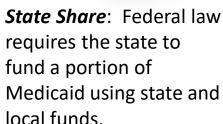
These new state funds are then matched with federal funds so that the state receives additional federal Medicaid dollars.

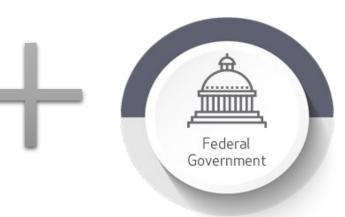
The assessment is then paid back to providers through lump-sum Medicaid payments (usually quarterly) based on providers' actual Medicaid volume.



Medicaid is Jointly Funded by States and the Federal Government

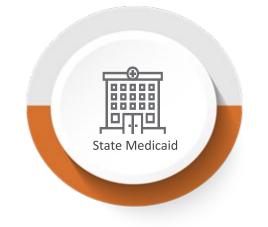






Federal Share: The Federal government guarantees matching funds to states for qualifying Medicaid expenditures via the Federal Medical Assistance Percentage (FMAP).

This varies by state from 50% to roughly 80%. In states that expanded Medicaid, the matching percentage for that is 90% federal.



State Medicaid: For example, the FMAP in Maine is 70%. For every dollar MaineCare pays to a provider of Medicaid services, about 70 cents are federal and 30 cents accounts for the state share.

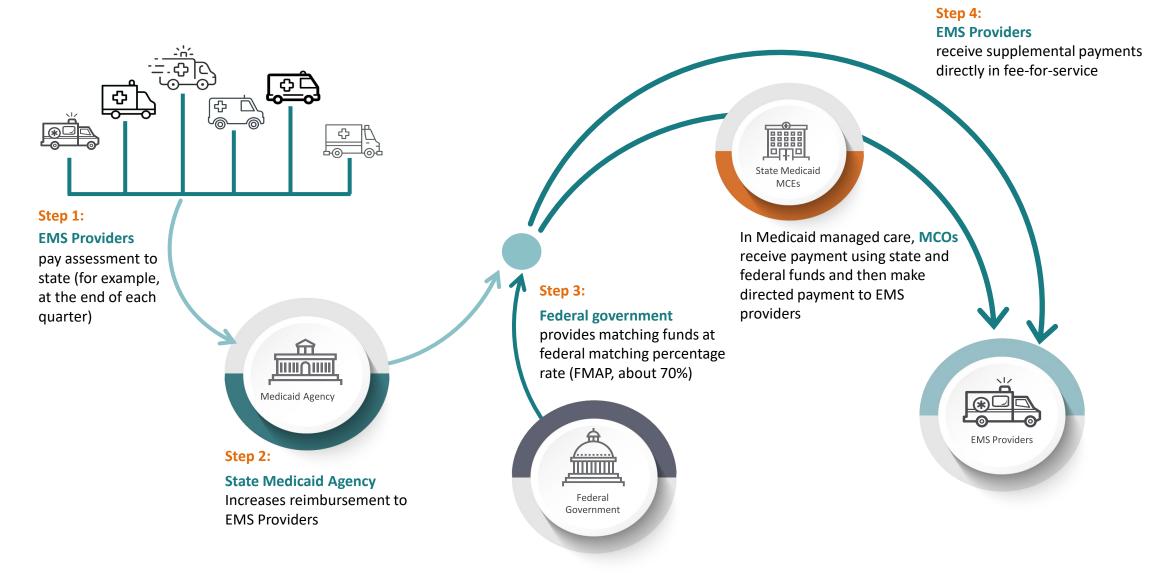
EMS Supplemental Payment Program

- The Maine Ambulance Association and Sellers Dorsey are developing a program to benefit all nongovernmental (profit, non-profit, and volunteer) ground ambulance providers in Maine.
 - Sellers Dorsey has been actively working in more than half a dozen states to implement ambulance assessment programs.
- Under the program, all nonmunicipal ground ambulance providers will pay an assessment to the state and the funds collected from this assessment will be matched by federal Medicaid dollars.
- The assessment must be:



The state will make supplemental payments to all nongovernmental ambulance providers. The industry will see Medicaid revenue increase by 50% to 100%.

EMS Supplemental Payment Program Overview Flowchart



EMS Supplemental Payment Program Implementation Timeline



Summer 22 - Fall 22



Winter 22 - Spring 23



Spring 23 - Fall 23



Winter 23 - Spring 24

- Program design and initial modeling
- Provider engagement and contracting
- Political strategy and drafting legislation

- Legislation introduced (and passed)
- Begin work with State Medicaid agency (MaineCare)

- Work with MaineCare to prepare and submit SPA and other regulatory documents
- Refine data modeling
- Implementation design

- CMS Approval
- First assessment collected
- First payments to providers

Phase 1: Program Design; Legislation

Phases 2 & 3: State and CMS Approval

Phase 4: Implementation

Open Discussion and Questions