

# Supplemental Payment Programs for Emergency Medical Services (EMS)



Medicaid payment rates for ambulance services are often 70 percent less than the cost of providing those services. With state budgets under significant pressure, the prospects for addressing this inequity with traditional measures are dim. However, there is another option. State Medicaid agencies and the Emergency Medical Services (EMS) community can work together to cover the shortfall by taking advantage of an innovative reimbursement mechanism offered by the federal government. Public Consulting Group (PCG) can show you how.

The EMS supplemental payment program—also known as Ground Emergency Medical Transportation (GEMT) and Public Emergency Medical Transportation (PEMT)—requires no additional spending by the state Medicaid agency beyond what it pays providers now. PCG works on behalf of EMS providers to establish a cost recovery program, gain state and federal approval, maximize revenue, accurately identify all allowable revenue sources, ensure compliance, and prepare annual cost reports. Using our extensive experience and [Web-Based Solution](#), our team will work with you to:

-  Complete Cost Reports
-  Prepare an audit trail
-  Assist with maintaining compliance
-  Facilitate trainings and ongoing support
-  Implement and expand programs
-  Perform cost of service analysis
-  Develop a detailed rate analysis

## EMS Cost Recovery Programs

-  **Illinois Ground Emergency Medical Transportation** | Assisted **18** EMS providers since 2019, the first year of the program, and generated over **\$1 million** of additional revenue.
-  **Florida Ground Emergency Medical Transportation** | Provided cost-recovery services to over **50** EMS providers, generating **\$135 million** in incremental Medicaid revenues since 2016.
-  **Oregon Ground Emergency Medical Transportation** | Assisted **19** EMS providers since 2019, generating **\$5.8 million** of additional revenue.
-  **Iowa Ground Emergency Medical Transportation** | Provided cost-reporting, policy, and audit compliance to **20** EMS providers since 2019 and generated **\$7.2 million**.
-  **Massachusetts Public Ambulance Certified Public Expenditure (CPE)** | Developed the CPE program for the MA Executive Office of Health and Human Services in 2013, generating over **\$80 million** in additional funding for nearly **104** EMS agencies from 2014 to 2021.
-  **Missouri Ground Emergency Medical Transportation** | Completed and submitted cost reports for **26** EMS providers in 2018 and 2019, generating over **\$7.6 million** in additional funding.
-  **Colorado EMS Supplemental Payment** | Developed a statewide program for the CO Department of Health Care Policy and Financing in 2018, generating over **\$59 million** in additional funding for **74** EMS agencies from 2018 to 2020.
-  **Texas Ambulance Services Supplemental Payment Program** | Designed the first ambulance supplemental payment program for the TX Health and Human Services Commission. From FY11–FY20, PCG helped **70** providers capture an estimated **\$380 million** in supplemental payments.
-  **Oklahoma Certified Public Expenditure (CPE)** | Worked with OK Ambulance Association and OK Health Care Authority to develop the CPE program in 2018. Helped **22** providers capture nearly **\$10 million** in supplemental payments in the first two years.

## Program Implementation and Expansion

PCG brings unmatched experience in not only the design and implementation of supplemental payment programs, but also the expansion of current programs to include additional service types, such as managed care. Several states have partnered with PCG to develop models and program designs that are currently being used to gain CMS approval. Examples of our supplemental payment program work are the standing up of GEMT programs in both the District of Columbia and Oklahoma, as well as the expansion of the Florida PEMT program to include managed care organizations (MCO). By working with PCG, you will be able to leverage this knowledge through both design and implementation.

### Program Services

- **Program initiation or expansion** — We will work with you to establish or expand the legal and operational ground to participate in the program.
- **Medicaid policy support** — Our team will help to ensure your program's compliance with state and federal guidelines by reviewing documentation and keeping you informed of any policy changes.
- **Managed care program implementation** — We can develop a framework to incorporate Medicaid managed care into currently operational Fee for Service GEMT/ PEMT programs.
- **Managed care program operation** — To ensure you receive the appropriate benefit and have met documentation requirements, we will monitor claims and cash flows of the managed care program.

## Already have a program in place?

If your state is currently participating in a supplemental payment program, PCG can work with you to improve your cost reporting experience by alleviating administrative burdens, creating an audit trail to ensure compliance, maximizing supplemental payment opportunities, and utilizing our web-based cost reporting tool to streamline the cost reporting process. The additional benefits PCG offers can lead to a more efficient, accurate, and less stressful cost reporting process.

## Web-Based Cost Reporting Tool

PCG has developed a web based cost reporting tool to calculate all the statistical information needed to complete the cost report and calculate supplemental reimbursements. Key benefits include:

- **Ensures compliance.** This tool is customizable to meet local requirements and allows you to export submission-ready cost reports in accordance with federally approved templates.
- **Increases efficiency.** Its user-friendly interface is designed to streamline data input and cost settlement calculations, and simplify report generation.
- **Improves accuracy.** The tool automatically implements real time validation checks for quality assurance and accuracy.
- **Creates audit trail.** This tool helps providers compile supporting documentation for their cost reports.

## Additional Services

**Cost of Service** | PCG can provide a cost of service analysis, which focuses on identifying the costs of both fire and EMS responses. With a department's fully integrated structure, it can be difficult to calculate the true costs of fire suppression and medical responses. By understanding how much these activities cost, decision makers will be better positioned to make informed budget and rate setting decisions.

**Rate Analysis** | In addition to costs, PCG can review providers' rates, analyzing the most commonly provided services based on total volume, the stations/units with the greatest volume of services, and the current pricing for those services. This analysis can help drive top down change to overall charges and enable a comparison to similar providers.

## Why partner with PCG?

Our firm has over 33 years of experience supporting revenue enhancement projects for state and local government agencies as well as public and private medical service providers across the U.S. We are a leading provider of GEMT cost reporting and cost recovery services: over the past decade, for example, our team has helped EMS providers nationwide capture more than \$300 million through Medicaid cost recovery programs. Partnering with PCG enables you to leverage our proven approach, deep program knowledge, and experienced team to design and implement an EMS cost recovery program that utilizes existing expenditures to maximize Medicaid revenues for EMS providers.

**To learn more about how we can help you optimize funding and operations, contact us today.**

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