MTAC Minutes Department of Medical Assistance Services Wednesday, September 22, 2004

Members Attending:

Sharon Davis, Community Medical Transport Sid Del Cardayre, Van Go, Inc. Jennifer Fidura, VA Network of Private Providers (*via conference call*) Hobart Harvey, Virginia Health Care Association Eddie Jones, Appalachian Agency for Senior Citizens (*via conference call*) Elizabeth Kaeser, Loudoun Long Term Care Center (*via conference call*) Tammy Loney, Friends Medical Transport Buddy Scherer, GRTC Transit System Carol Shrouder, Lexington Court Nursing & Rehab Freda Smith, LogistiCare, Director of VA Operations Bryan Tomlinson, Director of Health Care Services, DMAS Catherine Tyler-Northan, Peninsula Center for Independent Living Mike Wampler, Mountain Empire Older Citizens James Bryant for Robbie Werth, Diamond Transportation

Members Absent:

Mary Ann Bergeron, VACSB Marge Sidebottom, UVA Health System Jacqueline Taylor, James E. Fleming Taxi Service Ann Tennett, Winchester Dialysis LLC Jadonna Tirado, Riverside Dialysis Facility

Staff:

DMAS: Bob Knox, Peter Lubinskas, Eileen Jackson (via conference call), Donna Garrett LogistiCare: Marian Atterberry, Debbie Thompson (via conference call), Greg Birge, Mavis Cowan, Mary Eaglesfield (via conference call), Greg Forgey (via conference call), Cindy Franklin (via conference call), Chuck Wolf, Kristen Yates (via conference call).

Public Comment Guests:

Kimberlee Mack-Matthews, Virginia Medical Transportation Association Terry Massey, Deliver Us Transportation

Welcome and Introductions

Bryan Tomlinson, Division Director of Health Care Services, Department of Medical Assistance Services (DMAS), commenced the Medicaid Transportation Advisory Committee (MTAC) meeting at 1:13 p.m. Following the introduction of MTAC members, staff and public guests,

two new MTAC members, Catherine Tyler-Northan of the Peninsula Center for Independent Living and Sharon Shrouder of Lexington Court Nursing & Rehab, were welcomed and introduced. Mr. Tomlinson also acknowledged Senator Louise Lucas was present and introduced her to the MTAC members.

Approval of Minutes

Mr. Tomlinson asked for a motion to review and approve the Minutes of the May 26, 2004 MTAC meeting. Mr. Scherer and Mr. Harvey made a motion to accept the Minutes. The Minutes of the May 26, 2004 MTAC meeting were approved unanimously.

LogistiCare's Virginia Operations Update

Chuck Wolfe, LogistiCare's Assistant Director of Operations, reported to MTAC on the status of Virginia Operations (presentation attached). Following is a brief synopsis of LogistiCare's presentation:

- <u>Operational Statistics</u> LogistiCare reported that their overall trip volume has remained rather consistent in all 7 regions; however, both public transportation and stretcher van modes of transportation have steadily increased through June and August 2004.
- <u>Operational Update</u> LogistiCare announced the hiring of Bernard Christmas as the Network Development Manager. LogistiCare also reported that they have hired two new Provider Liaisons for their Billing Department and that their Healthcare Manager position has been filled.
- <u>Provider Outreach</u> LogistiCare updated the MTAC on their provider outreach initiative. Nine statewide meetings were held through June and July 2004. 176 companies attended the provider meetings, equating to 256 total attendees. Goals of the outreach initiative were to update providers on LCI policy changes, provide billing training, and to provide interactive Q and A sessions.

Draft Non-Emergency Transportation RFP Discussion by MTAC Members

Robert Knox, Transportation Manager, provided the MTAC a brief overview of the draft RFP and reinforced that the RFP is in its draft form and is subject to change. Mr. Knox also reiterated the need for comments to be submitted in writing directly to him, or to the pre-established RFP comments e-mail address. The e-mail address is <u>Transportation@dmas.virginia.gov</u>.

Mr. Tomlinson asked the MTAC members for their comments. Comments were as follows:

<u>Tammy Loney</u>: The Virginia Medical Transportation Association (VMTA) has established a committee to review the draft RFP. The committee will meet on Monday and will submit its comments in writing by Wednesday. Sharon Davis: No comment.

<u>Hobart Harvey</u>: The Virginia Health Care Association will provide a formal response next week. Thus far in his review of the draft RFP, Mr. Harvey expressed his concern that door-to-door service was not formally addressed in the draft RFP.

James Bryant for Robbie Werth: In brief, Mr. Bryant made the following comments:

- In lieu of faxed manifests, the Broker should be required to utilize computerized manifests available for download by the provider.
- Reimbursement per mile calculations are inaccurate due to hazardous road conditions that may occur.
- The RFP should contain impartial grievance procedures by DMAS for providers.
- The general liability policy of \$500,000 is not financially possible for taxicab companies.
- The Broker should be required to accept inspections and background checks already performed by local taxicab authorities.
- The RFP should not contain a requirement for the providers to have seatbelt cutters and seatbelt extension.

<u>Catherine Tyler-Northan</u>: The Center for Independent Living Director will be reviewing the draft RFP and will submit comments.

<u>Buddy Scherer:</u> Mr. Scherer asked Mr. Knox if 'Public Transportation' and 'Fixed Route Transportation' meant the same thing. Mr. Knox stated that the terms meant the same and has been changed in the draft RFP. Mr. Scherer then stated he had no comments.

Sid Del Cardayre: In brief, Mr. Del Cardayre made the following comments:

- The RFP should stipulate that broker is not responsible for transporting recipients down staircases due to liability concerns, and that DMAS may want to consider requiring recipients to have ramps, or for their family members to get them down staircases prior to an appointment.
- Attendants should be responsible for their clients once they leave the provider's vehicle.
- It is not possible to require providers not to leave recipients unattended and to provide door-to-door service unless the provider has a full-time attendant.
- DMAS should consider limiting the number of children that are allowed to travel with parents in wheelchair vans. Situations where multiple children are riding with parents leads to decreased room for other clients and poses a high-risk trip with regards to liability.
- The RFP should specify if vehicles must be 100% ADA compliant. Fully compliant vehicles are extremely expensive and may not be needed.

<u>Jennifer Fidura (via conference call)</u>: Both the VA Network of Private Providers and the VACSB will submit written comments in the near future.

<u>Eddie Jones (via conference call)</u>: The Appalachian Agency for Senior Citizens is currently formulating written comments to submit. Mr. Jones also requested clarification as to the definition of the hand-to-hand service referenced in the draft RFP. Mr. Knox stated the definition would be added once he receives the written comment.

<u>Freda Smith</u>: Mr. Tomlinson asked if Freda Smith if she had any comments. Ms. Smith stated any comments would be submitted in writing.

Public Comment on the Draft Non-Emergency Transportation RFP

Mr. Tomlinson then asked the public guests for their comments. Comments were as follows:

Joan Manley (via conference call): Ms. Manley made the following comments:

- Clarification needs to be made as to what 'adequate reimbursement' means.
- Ms. Manley would like to see more specific training requirements for the Broker.

Mr. Tomlinson asked if any members or guests would like to make further comments on the draft RFP. No further comments were offered.

Other Public Comments

<u>Kimberlee Mack-Matthews</u>: Ms. Mack-Matthews provided comments on behalf of 72 members of the Virginia Medical Transportation Association (VMTA). A synopsis of the VMTA's comments (attached) were as follows:

- Overview of the VMTA membership and its member affiliations.
- Introduction of the VMTA Officers.
- Purpose of the VMTA's comments to the MTAC.
- Vendor issues and concerns:
 - Seeking to extend the existing 60 days billing/resubmission deadline to a minimum of 120 days.
 - Proposal to modify LogistiCare's pay dates if the 1st & 15th falls on a holiday or weekend.
 - Request to have a dedicated billing representative at each regional office to assist with vendor billing issues.
 - Inefficiency of the current Standing Order assignment.
 - Vendor termination without an impartial appeal process.
 - o Poor communication with vendors, facilities and recipients.
 - Lack of the broker's customer service skills.
- Submission of the VMTA's written response to the draft RFP.
- Improving communications with DMAS.
- Announcement that Senator L. Louise Lucas has accepted an invitation to become the VMTA's Political Action Chairperson.
- VMTA's creation of a local task force to review issues surrounding the brokerage system. Their first meeting will be held at the Virginia Beach Public Library. This meeting will be closed to the public.

<u>Terry Massey</u>: Mr. Massey addressed the MTAC and gave an overview of the problems his company, Deliver Us Transportation, has recently encountered with LogistiCare. Problems included the lack of communication, billing issues and low utilization of his company's available vehicles. Mr. Massey also expressed his frustration with LogistiCare's decision to utilize other companies for a local facility, even though the facility states they would prefer to have Mr. Massey's company provide services for their residents.

No notes or handouts were provided to be included as an attachment.

RFP Draft Schedule

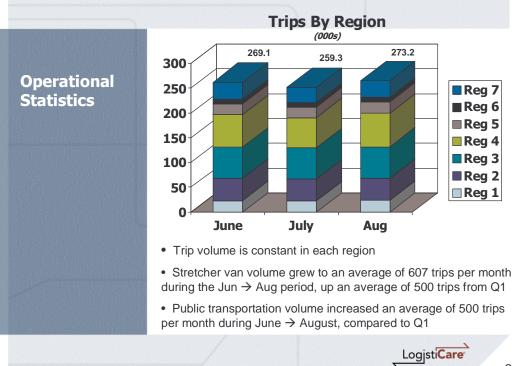
Mr. Tomlinson asked that Mr. Knox provide the MTAC and public guests with a brief explanation of the proposed Non-Emergency Transportation Brokerage Services RFP release

schedule. Mr. Knox stated that the RFP would most likely be issued in early November 2004. Approximately two weeks following the RFP's release, DMAS will host a pre-bid (pre-proposal) conference. Attendance at the pre-proposal conference will be a prerequisite for submitting a proposal. DMAS will respond to questions and offer clarifications approximately two weeks following the pre-proposal conference. All proposals will most likely be due sometime within the first week of January. The exact due date will be listed in the RFP once released. Award(s) will be announced approximately two months following the proposal due date. Mr. Knox stated these dates are subject to change.

The meeting adjourned at 2:45 p.m.

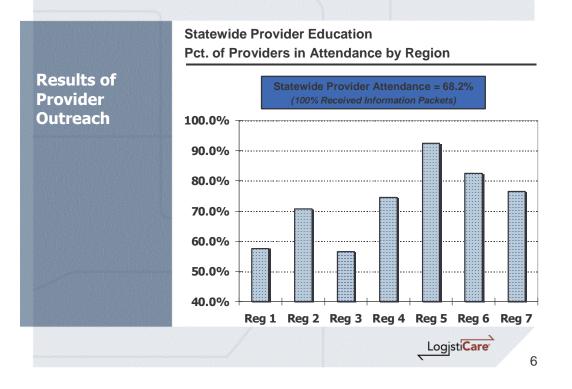
Next Meeting Date: Wednesday, November 17, 2004





	 Bernard Christmas hired as Network Development Mgr 				
Operational Update	 Provider Liaison position created in Billing Department 				
	Provider Liaison position created temporarily in Region 4				
	Healthcare Manager position filled				
	Community Service:				
	 "Operation Bold Eagle": Over \$1,900 in goods collected and sent overseas to servicemen / women 				
	 Nearly 200 hours of volunteer time donated by LogistiCare employees in VA YTD more than in any other state where LCI does business 				
	Logjsti Care 4				

	• <u>Goals:</u> Communicate, Trust, Empathize, Adjust, Enhance, Educate				
Results of Provider Outreach	 Accomplishments: 9 meetings held statewide throughout June & July 176 providers represented by 256 total attendees Informative presentation: > Operational update > Policy changes 10% pmt penalty increased from 14 to 28 days Complete pmt denial increased 28 to 60 days < No 10-mile rule for mileage inquiries Program announcements including Web Interface and Insurance Program in Q4 > Billing training > Interactive Q&A sessions				
	LogistiCare				



	Provide	LogistiCare - VA Operations Provider Education / Training Session Attendance June & July, 2004						
Results of Provider Outreach	Region	Date	Total Attendees	Providers Represented	Total Providers in Region	% Providers Represented		
	1	7/13	33	19	33	57.6%		
	2	7/29	66	41	58	70.7%		
	3 3 Total F	6/8 6/10 Region 3	33 <u>20</u> 53	23 <u>16</u> 39	69	56.5%		
	4 4 Total B	7/17 AM 7/17 PM Region 4	25 24 49	18 20 38	51	74.5%		
	10ar	6/22	49 18	12	13	92.3%		
	6	6/23	18	14	17	82.4%		
	7	6/29	<u>19</u>	<u>13</u>	17	76.5%		
	Total		256	176	258	68.2%		

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Virginia Medical Transportation Association (VMTA)

Good Afternoon:

I am Kimberlee Mack-Matthews, Public Relations Officer for The Virginia Medical Transportation Association.

VMTA is representative of 72 members and growing. Our memberships consist of Transportation providers, Dialysis Centers, Adult Day Care Centers, Day Support Programs, Residential Group Homes, Supported Work Sites and Our Medicaid Recipients.

At this time I would like to introduce you to the Officers of VMTA, I would ask them to remain standing during the introductions.

Tammy Loney	President
Sharon Davis	Vice President
Senator L. Louise Lucas	Political Action Chair
Cynthia McNeil	Secretary
Jan Atkinson	Assistant Secretary
Robert Epps	Treasurer
Arthur Cross	Chaplain
Kimberlee Mack-Matthews	Public Relations Officer

At this time I would like for all VMTA Members and transportation vendors to stand. Thank you, please be seated.

We are here again to address DMAS, The Medical Transportation Advisory Committee and any potential broker systems. VMTA is still dealing with many many unresolved issues regarding the transportation brokerage process in the State of Virginia. We are aware that we are not the only State dealing with broker issues, but we are the State that has taken an active stand to resolve our issues. We are committed to leading the pack in changing how the broker system is awarded and managed in the Commonwealth of Virginia.

We will voice our continued concerns and again extend an open hand and door for immediate problem resolution.

We also invite any broketage system representatives who may be considering submitting a bid on the RFP in Virginia to meet with VMTA. We are seeking a company to support who will work with us and respect our knowledge and history in the business of client care management.

Vendor Issues and Concerns

- 60 Days Billing Cycle.
- 10 % Penalty Pot

We will be seeking to increase the current 60 day billing deadline to a minimum of 120 days for billing as well as 120 day for resubmission This will allow the vendors' ample time for the manual assistance needed to correct and submit claims. Since there is no automated system to research denials, we again are reliant on manual assistance

Pay Dates of 1st & 15th.

We are requesting that if the 1st or 15th falls on a weekend or holiday, we are paid on the last business day prior to the pay date or holiday.

- Job Number turn around assistance
- Returned billing with no timely assistance for resolution
- Actual Mileage versus Map Point shortest routes

We are requesting that a dedicated team of billing representative be available in the Regional Office for the sole purpose of assisting with vendor billing issues. Due to the tremendous back log of billing that all vendors have, we are requesting a team of at least four dedicated representative onsite for a minimum of four months.

- Standing Order Process
- Cancellation of trips when not in good favor

The current process for assigning standing orders is not working. The current criterion for a client to become a standing order is not effective. Any client that attends less a standing appointment less than three days per week must call each week to schedule the appointment. This creates more work for the broker as well as the facilities. The entire Standing Order process needs to reviewed.

Vendors need to be notified when any standing order is moved to another company without a facility, parent or Vendor request being made. The special needs of the clients have to be considered first and foremost. Standing Orders are the root of our businesses, if these are allowed to arbitrarily be moved, we will never be are not able to effectively manage or project the finances of our businesses. This is comparable to opening a pay check and having to guess at what your salary may be.

According to the Regional Manager in Region four there will be massive changes to the Standing Orders Process. There are impending changes being made daily with no input from the Parents, Facilities, Case Managers or current Transportation providers. Again we say the needs of the clients needs to come first.

Vendor termination without an impartial appeal process

Vendors' needs to feel protected from personal vendettas. Currently several vendors are fearful of bring issues to the broker for fear of reprisal. We are requesting that an appeal board be established. This appeal board will be called to order prior to terminating a vendor from service. The Vendor should be given an option to allow an impartial board to review all facts regarding him/her termination.

- Poor Communication to Vendors
- Poor Communications to Facilities
- Poor Communications to Recipients

Communications needs to do a 360 degree turn around. Lack of effective communications leads to other problems and issues. It also creates an environment of mistrust and discontentment.

- CSR Lack of Customer Service Skills
- not fully trained as to the system or internal process

The CSR's are often rude and lack basic customer services skills. Too much information is released back to clients No sense of confidentiality. Several of our issues revolve CSR not be fully trained to the system and internal processes.

VMTA is committed to many goals this year. I will share a few of those with you

 Submitting a response to the RFP. This will allow us to work along with DMAS in ensuring that which ever the brokerage company is selected that the policies, procedures and process are fair to all vendors. We must begin to have security in our businesses and that begins with DMAS. The RFP must be written to protect vendors against unfair business practices.

 Increased communication with DMAS on issues revolving around Medical Transportation. We will be reporting to each MTAC meeting and Board meeting with updated information.

3. Increasing our political knowledge and working with the Political Community in bring our business to the fore front of Virginia State Government Operations. We are very please that the Honorable Senator L Louise Lucas has accepted our invitation as our Political Action Chairperson. For those of you who do not know her, she is a political Power house and we are excited to have her on our team.

4. VMTA is in the process of creating a local Task force to review and report on a regular basis all issues surrounding the brokerage system. This task force will do outreach to all entities that are effected by Medical Transportation. Our first meeting will be held ______ at The Virginia Beach Public Library. This will be a closed meeting.

VMTA has addressed the MTAC committee as well as the DMAS Board of Directors earlier this year. We are confident with the new RFP that DMAS is heading in the direction of protecting it Virginia Transportation Vendors.

We would like to thank Bob Knox for coming to Tidewater with a short notice and listening to the Vendors concerns. Your presence there was a sign of good things to come in the future.

We would like to thank Cheryl Roberts for conferencing with some VMTA officers and again hearing our issues and addressing our issues.

We would also like to thank Freda Smith & Chuck Wolfe of Logistic Care for meeting with some VMTA officers. We discussed a lot of issues and are now anticipating the implementation of changes and open communication and dialogue.

A working relationship with VMTA is the key to making the business of broker services in Virginia successful. Many transportation providers are in the process of critical business financial reviews. We cannot continue with the current flaws in the broker system. We again are asking for rapid pace change.

We as Transportation providers have often been referred to as Mom & Pop operations We find this offensive and not reflective of our vendors. Please refrain from ever using this term when referring the Region Four Transportation Vendors. We feel we have defined ourselves as a professional group of entrepreneurs that is deserving of the utmost respect. We are providing professional hands on care daily to the Recipients of Virginia.

It has been my pleasure to address this committee and we look forward to working with you for a fair and equitable solution to Medical Transportation Services in Virginia