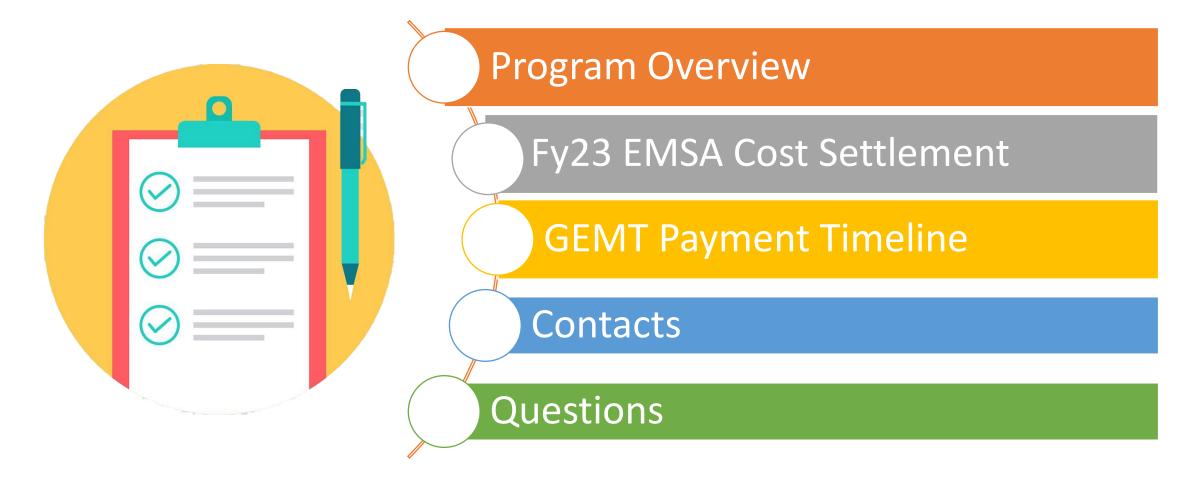
FY23 EMSA OK GEMT Cost Report

Presented by Public Consulting Group (PCG)

November 15, 2023



Agenda



Program Overview

The Current Situation of Providers





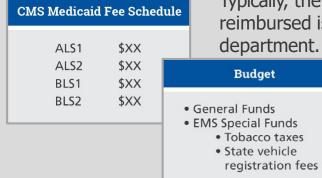
Provider bills Medicaid for transport.





Department draws FMAP (Federal Medical Assistance Percentage) for calculated Medicaid allowable costs.

Payment rates do not recognize the actual costs incurred by providers for the provision of EMS services.



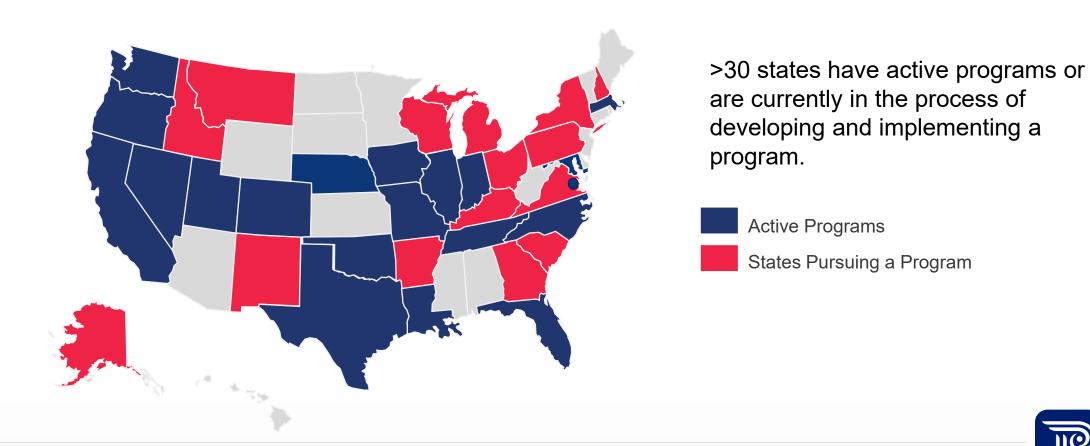
Typically, the rate at which Medicaid transports are reimbursed is **25% or less** of the actual cost to the department.

This requires municipalities and counties to use **alternative funding sources** to supplant the costs, such as the allocation of taxes and fees.



Existing GEMT Supplemental Payments

GEMT Supplemental Payment Programs are being implemented across the country



Oklahoma GEMT Program Overview



The Oklahoma Ground Emergency Medical Transportation (GEMT) program is a voluntary program that makes supplemental payments to eligible agencies who provide emergency ground ambulance services to Medicaid recipients.

- The proposed State Plan Amendment (SPA) was approved by the Centers for Medicare & Medicaid Services (CMS) on March 5, 2019 with an effective approval date of October 1, 2018.
- Annual cost reports for the period of July 1 June 30 will be submitted by September 30.



Medicaid GEMT Supplemental Payments

What are Medicaid Supplemental Payment programs?

- Medicaid is a federal match program, meaning both the state and federal government pay a portion of Medicaid costs.
- > The federal match percentage is re-calculated each year for each state.
- > Only state or local governmental entities can "put up" the state share of a supplemental payment.
- Federal Match Example: If Fed match is 70.00% and Medicaid pays \$100.00 for transporting a Medicaid patient:
 - State pays 30% or \$30.00
 - > CMS pays 70% or \$70.00
 - Provider receives \$100.00
- Medicaid Shortfall: This same principle applies to Supplemental Payment Programs, except providers are federally matched on the <u>shortfall</u> between "what it costs" to transport a Medicaid patient AND "what Medicaid pays".
 - EMSA Cost/Trip \$1,200
 - Medicaid Payment/Trip \$ 200
 - Medicaid Shortfall \$1,000 per trip
 - Federal Match (70%) \$ 700 per trip (provider recoups 70% of uncompensated care cost).



State Share Financed via Annual Cost Report



- Provider completes and certifies an **Annual Cost Report** that captures the total cost of the department for providing EMS services
- The Cost Report calculates the total **Medicaid Allowable Costs** and the federal share of these costs that have not been reimbursed through Medicaid billing
- CMS disburses the calculated federal share of the settlement to the State Medicaid agency, who then allocates supplemental payments to providers

The Medicaid Cost Report – The Mechanics

- Purpose is to determine the provider's uncompensated costs for transporting Medicaid patients.
- CMS agrees to pay the federal match portion of those uncompensated costs to the provider.
- Medicaid Shortfall x Federal Match % = Net GEMT Supplemental Payment

COST SETTLEMENT (two-part calculation):

- 1) Avg Cost/Trip:
 - > Total EMS Costs / Total Paid Transports = Avg Cost per Trip
- 2) Medicaid Shortfall:
 - > Avg Cost per Trip x Medicaid Transports = Total Medicaid Costs
 - > Total Medicaid Costs MINUS Total Medicaid Revenues = Medicaid Shortfall
 - Medicaid Shortfall
 - x Federal Match %
 - = Net GEMT Supplemental Payment



Fy23 EMSA Cost Settlement

Historical GEMT Payments - EMSA

Provider	FY19	FY20	FY21	FY22	FY23	Fy23 Variance	% Diff
EMSA - East	\$ 769,5	94 \$1,047,968	\$ 786,363	\$ 1,092,033	\$ 2,000,456	908,423	83%
EMSA - West	929,5	57 888,741	584,935	1,101,870	2,802,905	1,701,035	154%
Combined	\$ 1,699,1	51 \$1,936,709	\$1,371,298	\$ 2,193,903	\$ 4,803,361	2,609,458	119%

- Since FY19, GEMT cost settlements have nearly tripled as a result of increasing Medicaid beneficiaries in OK and flat Medicaid FFS reimbursement.
- EMSA Costs are not rising as fast as EMSA Transports, especially for the Medicaid population.



FY21-FY23 GEMT Cost Settlement

Historical Cost Settlements - EMSA East

Line Nbr	Line Description		FY21	FY22		FY23	Variance	% Diff	Mcd Pmt/Trip	Shortfall	% of Cost
7	Total MTS Costs	3	34,051,257	34,849,075	4	1,634,795	6,785,720	19%			
8	<u>Total Transports</u>	l	82,899	 85,589		91,660	6,071	<u>7</u> %			
9	Avg Cost per Transport (Line 7 divided by Line 8)		410.76	407.17		454.23			352.84	101.39	77.68%
10	Total No. of Medicaid Fee for Service MTS Transports		14,959	23,976		28,583	4,607	19%			
11	Total Cost of Medicaid MTS Transports (Line 9 x Line 10)	\$	6,144,498	\$ 9,762,252	\$ 1	2,983,279					
12	Less Total Medicaid Revenue from Transports (Fr Sch 8)	\$	5,155,487	\$ 8,372,190	\$ 1	10,085,327					
13	Net Cost of Medicaid Transports - Medicaid Shortfall	\$	989,011	\$ 1,390,063	\$	2,897,952					
14	Non Federal Share Reduction	\$	202,648	\$ 298,029	\$	897,496					
15	Net Federal Participation Amount	\$	786,363	\$ 1,092,033	\$	2,000,456	908,423	83%			

Federal Match Percentage

69.03%	78.56%	79.51%
-9.53%	-0.95%	5.32%
Regular FMAP	PHE Unwinding	COVID

Historical Cost Settlements - EMSA West

Line #	Schedule 9 - Cost Settlement	FY21	FY22	FY23	Variance	% Diff	Mcd Pmt/Trip	Shortfall	% of Cost
7	Total MTS Costs	37,565,719	39,431,678	53,006,538	13,574,860	34%			
8	Total Transports	93,632	96,004	106,358	10,354	11%			
9	Avg Cost per Transport (Line 7 divided by Line 8)	401.21	410.73	498.38			350.45	147.93	70.32%
10	Total No. of Medicaid Fee for Service MTS Transports	14,203	23,268	27,449	4,181	18%			
11	Total Cost of Medicaid MTS Transports (Line 9 x Line 10)	\$ 5,698,329	\$ 9,556,855	\$ 13,679,991					
12	Less Total Medicaid Revenue from Transports (Fr Sch 8)	\$ 4,962,654	\$ 8,154,271	\$ 9,619,575					
13	Net Cost of Medicaid Transports - Medicaid Shortfall	\$ 735,675	\$ 1,402,584	\$ 4,060,416					
14	Non Federal Share Reduction	\$ 150,740	\$ 300,714	\$ 1,257,511					
15	Net Federal Participation Amount	\$ 584,935	\$ 1,101,870	\$ 2,802,905	1,701,035	154%			



FY22 vs FY23 Billing Statistics

- Medicaid FFS transports increased 25% in FY23
- Average Payment per Trip rose 28% (almost \$\$85 per Trip) in FY23.

	FY23 EMSA East - Billing Statistics							
Fiscal YR	QTR	All Transports	FFS Transports	Other Transports				
FY23	Total	91,660	28,583	63,077				
•	Payor Mix	100%	31%	69%				
Fiscal YR	QTR	All Transports	FFS Transports	Other Transports				
FY22	Total	84,362	22,749	61,613				
	Payor Mix	100%	27%	73%				
SUM	MARY:	All Transports	FFS Transports	Other Transports				
FY23	Total	91,660	28,583	63,077				
FY22	Total	84,362	22,749	61,613				
	Variance	7,298	5,834	1,464				
	% Change	8.7%	25.6%	2.4%				
PAYME	NT/TRIP:	All Payors	FFS	Other Payors				
FY23	Pmt/Trip	\$388.53	\$352.84	\$404.71				
FY22	Pmt/Trip	\$316.42	\$351.90	\$303.32				
	Variance	72.11	0.94	101.39				
	% Change	22.8%	0.3%	33.4%				
	·							

FY23 EMSA West - Billing Statistics							
QTR	All Transports	FFS Transports	Other Transports				
Total	106,358	27,449	78,909				
Payor Mix	100%	26%	74%				
QTR	All Transports	FFS Transports	Other Transports				
Total	94,674	21,938	72,736				
Payor Mix	100%	23%	77%				
MARY:	All Transports	FFS Transports	Other Transports				
Total	106,358	27,449	78,909				
Total	94,674	21,938	72,736				
Variance	11,684	5,511	6,173				
% Change	12.3%	25.1%	8.5%				
NT/TRIP:	All Payors	FFS	Other Payors				
Pmt/Trip	\$386.84	\$350.45	\$399.50				
Pmt/Trip	\$332.43	\$353.74	\$326.00				
Variance	\$54.41	-\$3.29	\$73.50				
% Change	16.4%	-0.9%	22.5%				
	QTR Total Payor Mix QTR Total Payor Mix MARY: Total Total Variance % Change NT/TRIP: Pmt/Trip Pmt/Trip Variance	QTR All Transports Total 106,358 Payor Mix 100% QTR All Transports Total 94,674 Payor Mix 100% MARY: All Transports Total 106,358 Total 94,674 Variance 11,684 % Change 12.3% NT/TRIP: All Payors Pmt/Trip \$386.84 Pmt/Trip \$332.43 Variance \$54.41	QTR All Transports FFS Transports Total 106,358 27,449 Payor Mix 100% 26% QTR All Transports FFS Transports Total 94,674 21,938 Payor Mix 100% 23% MARY: All Transports FFS Transports Total 106,358 27,449 Total 94,674 21,938 Variance 11,684 5,511 % Change 12.3% 25.1% NT/TRIP: All Payors FFS Pmt/Trip \$386.84 \$350.45 Pmt/Trip \$332.43 \$353.74 Variance \$54.41 -\$3.29				



EMSA Net Patient Revenue

Manufacture 1				
Eastern Division	FY2020	FY2021	FY2022	FY2023
Revenue	112020	112021	112022	112025
Net Patient Revenue				
Patient Revenue	103,998,665	109,169,361	115,056,766	123,113,949
Contractuals & Deductions	(74,229,440)	(78,045,532)	(83,978,912)	(83,329,430)
Total Net Patient Revenue	29,769,224	31,123,829	31,077,854	39,784,519
	28.6%	28.5%	27.0%	32.3%
Other Operating Revenue	7,150,682	8,667,793	6,063,108	8,397,147
Total Revenue	36,919,906	39,791,622	37,140,962	48,181,666
U	U	U	L	ı
Western Division				
	<u>FY2020</u>	FY2021	FY2022	FY2023
Revenue				
Net Patient Revenue				

(80,645,913)

31,580,759

6,502,224

38,082,983

28.1%

(90,004,451)

32,768,782

8,753,903

41,522,685

26.7%

(95,400,350)

34,884,587

6,058,159

40,942,746

26.8%

(95,146,674)

45,394,035

10,153,447

55,547,482

32.3%

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- EMSA reduced the number of Days in Collection significantly in Fy23, resulting in an 8% increase in Net Patient Revenues.
- Combined EMSA Net Patient Revenue increased \$20 M from \$65 M to \$85 M in one year.



Total Revenue

Contractuals & Deductions

Total Net Patient Revenue

Other Operating Revenue

Average Cost per Trip

- The Average Cost per Trip for EMSA is \$478 compared to \$852 for Other OK GEMT providers.
- EMSA's Average
 Cost per Trip is 44%
 lower than other OK
 GEMT providers.
- The average OK Medicaid Payment per trip is \$368.

Average Cost per Trip

EMSA vs Other GEMT Providers

	198,018	94,641,333	\$477.94
EMSA	Trips	Costs	Avg Cost / Trip
EMSA - East	91,660	\$41,634,795	454.23
EMSA - West	106,358	\$53,006,538	498.38

EMSA (Combined)	Other GEMT		Avg Cost per Trip - Other GEMT				
Average Cost / Trip		Per Trip Variance	Range - Low	Range - High	Median		
\$477.94	\$851.84	\$373.89	\$102.30	\$4,683.58	\$1,118.20		

44% EMSA's Avg Cost / Trip is 44% lower than Other GEMT Providers



GEMT Payment Timeline

Timeline for OK GEMT Payment



Providers submit cost reports each year on Sep 30.



The state performs high level desk reviews in Oct-Nov.



OHCA pays out 75% of the Net Federal Match in Dec.



 OHCA reconciles all Medicaid paid transports and Medicaid revenues in Mar-Apr, and the state makes a Final Residual payment to providers.



Fy23 GEMT Payment Schedule

EMSA East	FY23 Cost Settlement	FY22 Cost Settlement	<u>Variance</u>
Fed Share	\$1,989,589	\$1,092,033	\$897,556
			Payment Incr in FY23
	Revenue Est -EMSA East		
Medicaid Shortfall	\$ 2,897,952	Federal Match %	
Dec 23 payment	\$ 1,500,342	69.03%	75% payment in Dec 2023
Mar 24 payment	\$ 489,247	67.53%	Residual pmt in March 2024
	\$ 1,989,589		Rev Estim - 9/28/23

EMSA West	FY23 Cost Settlement	FY22 Cost Settlement	Variance
Fed Share	\$2,787,679	\$1,101,870	\$1,685,809
			Payment Incr in FY23
	Revenue Est - EMSA West		
Medicaid Shortfall	\$ 4,060,416	Federal Match %	
Dec 2023 payment	\$ 2,102,179	69.03%	75% payment in Dec 2023
Mar 2024 payment	\$ 685,500	<u>67.53%</u>	Residual pmt in March 2024
Rev Estimate	\$ 2,787,679	68.66%	Blended Fed Match Rate

Fy23 Combined Rev Estimate \$4,777,268 \$2,583,365

- Revenue
 Estimates
 dependent on
 Final Medicaid
 Completed
 Claims for
 FY23.
- Note: There are two different Fed Match rates applied for the Dec-23 and Spring 24 payments.



Contacts

Contacts

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Questions?



Solutions that Matter