

**Van Buren Triple**  
**M. Monitoring Assessment Tool – Medicaid CFDA# 93.778**  
**Title XIX - Non-Emergency Transportation (NET)**

**Background:**

**Authorization:**

Social Security Act, Title XIX, as amended; Public Laws 89-97, 90-248, and 91-56; 42 U.S.C. 1396 et seq., as amended; Public Law 92-223; Public Law 92-603; Public Law 93-66; Public Law 93-233; Public Law 96-499; Public Law 97-35; Public Law 97-248; Public Law 98-369; Public Law 99-272; Public Law 99-509; Public Law 100-93; Public Law 100-202; Public Law 100-203; Public Law 100-360; Public Law 100-436; Public Law 100-485; Public Law 100-647; Public Law 101-166; Public Law 101-234; Public Law 101-239; Public Law 101-508; Public Law 101-517; Public Law 102-234; Public Law 102-170; Public Law 102-394; Public Law 103-66; Public Law 103-112; Public Law 103-333; Public Law 104-91; Public Law 104-191; Public Law 104-193; Public Law 104-208,104-134; Balanced Budget Act of 1997, Public Law 105-33; Public Law 106-113; Public Law 106-554; Public Law 108-27; Public Law 108-173; Public Law 109-91; Public Law 109-171; Public Law 109-432; Public Law 110-28; Public Law 110-161; Public Law 111-3; Public Law 111-5; Public Law 111-8; Public Law 111-31; Public Law 111-68; Public Law 111-88; Public Law 111-117; Public Law 111-118; Public Law 111-148; Public Law 111-150.

**Program Objectives:**

To provide financial assistance to States for payments of medical assistance on behalf of cash assistance recipients, children, pregnant women, and the aged who meet income and resource requirements, and other categorically-eligible groups. In certain States that elect to provide such coverage, medically-needy persons, who, except for income and resources, would be eligible for cash assistance, may be eligible for medical assistance payments under this program. Financial assistance is provided to States to pay for Medicare premiums, copayments and deductibles of qualified Medicare beneficiaries meeting certain income requirements. More limited financial assistance is available for certain Medicare beneficiaries with higher incomes.

The Non-Emergency Transportation (NET) program is designed to provide transportation for Medicaid eligible recipients to Medicaid providers. Each county must prepare a NET plan outlining how the county will meet the transportation needs of their local recipients. Counties may contract with transportation providers for these services or may provide the services using county staff. The basic guidelines are found in OAC 5101:3-24.

**Review Objectives:**

- To determine whether recipients are Medicaid eligible and authorized to receive NET services;
- To determine whether determination of eligibility for NET services were communicated to recipients in a timely manner;
- To determine whether the transport was to an appointment with a Medicaid provider;
- To determine whether services are provided by county staff, and documentation exists to substantiate any Title XIX claims which the county thereafter makes; and
- To determine whether the services are provided under a contract and payments have supporting documentation and are within the terms of the contract.

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**Procedures:**

	Program Step	Date/ Initials	Work Paper Reference
1.	Obtain the agency's most recent NET Plan. Review the plan to ensure it is reflective of the current practices.		
2.	Determine whether the county provides NET services under contract, with county staff, through gas cards or gas vouchers or by a combination of these alternatives.		
3.	<p>If services are provided through the issuance of gas cards or gas vouchers, select two recipients of these services. Ensure the following for each recipient:</p> <ul style="list-style-type: none"> <li>• Documentation to support the client's eligibility;</li> <li>• Documentation to support the amount of the voucher or gas card provided to the client. Verify the amount was correctly calculated in accordance with the agency's documented procedure; and</li> <li>• Documentation to verify the client's actual attendance at the Medicaid appointment.</li> </ul>		
4.	<p>If the services are provided in-house, select two recipients of these services. For these recipients:</p> <ul style="list-style-type: none"> <li>• Request documentation to support the clients' eligibility;</li> <li>• Request documentation to support claimed costs for one trip for each recipient; and</li> <li>• Determine whether the billed transportation involved transportation of a recipient to or from a Medicaid appointment.</li> </ul>		
5.	<p>If the services are provided under contract, select one invoice for one contractor. From the invoice, select two recipients. For these recipients:</p> <ul style="list-style-type: none"> <li>• Request documentation to support the clients' eligibility;</li> <li>• Request documentation to support claimed costs for one trip for each recipient and determine whether: <ul style="list-style-type: none"> <li>○ The services invoiced were provided and are within the context of the contract deliverables;</li> <li>○ The invoiced services were provided within the contract term;</li> <li>○ Examine corroborating evidence that charge claimed is reasonable (eg. utilize MapQuest or</li> </ul> </li> </ul>		

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	Program Step	Date/ Initials	Work Paper Reference
	<p>similar means to ensure mileage or time are reasonable, etc.);</p> <ul style="list-style-type: none"> <li>○ The invoices were mathematically correct and the charges agreed with the contract (e.g., unit rate);</li> <li>○ The goods or service meet the program needs (note: no-show fees are <u>not</u> allowable to the program as clients did not receive a service); and</li> <li>○ The payment made matched the invoice amount and was charged to the proper financial code.</li> </ul> <ul style="list-style-type: none"> <li>● Determine whether the billed transportation involved transportation of a recipient to or from a Medicaid appointment.</li> </ul>		
7.	<p><b>Conclusion:</b></p> <p>Consider whether there are any instances of non compliance or a systemic problem due to a lack of adequate internal control exists with regards to your procedures. If so, make an appropriate notation as an Issue in Auto Audit.</p> <p>Prepare a segment summary to reflect work completed and results of your testing. (Note: An example index/segment summary can be obtained from the Auto Audit Library.)</p>		