



## Responses to the House Oversight Members from Committee Meeting Held on Nov. 6, 2019

*Request from Oversight Committee Staff:* Medicaid was asked to provide a spreadsheet that reflects the rate comparison between our current non-emergency medical transportation broker, MTM, and its predecessor, LogistiCare. That spreadsheet is attached (“NEMT Rate Comparison”).

The following are responses to questions asked by the honorable members during the hearing:

1. Who is the contract manager for the MTM contract?  
**Assistant Secretary of the Executive Office of Health and Human Services Patrick Tighe also serves as the state’s Medicaid Director. He is ultimately accountable for the management of all Medicaid contracts. The Medicaid staff member charged with the day-to-day management duties of the MTM contract is Kristin Sousa, who serves as Deputy Medicaid Program Director.**
2. Provide the committee with the relevant information that MTM is complying with Rhode Island’s minority- and women-owned business requirements.  
**Please find attached the most recent Minority Business Enterprise (MBE) report that was submitted to the state’s Office of Diversity, Equity and Opportunity. The attachment includes year-to-date figures. The report lists only those companies that have completed MBE, Disadvantaged Business Enterprises and Women Business Enterprises certification with the state. Please note that 75 of the 92 MTM contracted transportation providers are either minority- or women-owned businesses, which equals 82 percent. Additionally, 24 of the 34 employees in the local Rhode Island MTM office are persons of color and/or women, which is 70 percent.**
3. Provide the committee with relevant information that MTM is complying with the state law regarding participants excluded due to Medicare or Medicaid violations. Please provide the reports fulfilling this requirement that were filed prior to contract amendment three.  
**Under conditions of the contract, MTM is obligated to comply with state laws excluding participants due to Medicare or Medicaid violations. Those requirements are outlined in Article II, “Transportation Program Standards – Compliance,” on page 67 of the contract (See Attachment Question 3 MTM Compliance). MTM is required to submit reports demonstrating their compliance to the EOHHS on a quarterly basis. Additionally, on a quarterly basis, EOHHS checks the federal listing against the reports provided by MTM. EOHHS is in possession of these reports, but we hesitate to publicly release them without thorough authorization.**

4. Are there any current transportation providers who would have been precluded by the language in amendment three and may be currently providing transportation under this program.  
**No. The language difference between the amendments has not substantively changed the contract requirements.**
5. Provide a copy of the transportation provider's memorandum of understanding (MOU).  
**Attached please find the MOU.**
6. Provide a copy of the sexual harassment policies at MTM.  
**Attached please find MTM's documents.**
7. Please provide a summary of Medicaid Director Patrick Tigue's follow-up with Representative Chippendale regarding service in his legislative district.  
**Medicaid Director Tigue followed up by scheduling a meeting with Representative Chippendale. The meeting is set for Dec. 6. Alaina Macia, CEO of MTM, has directed Paul Hynes, from the MTM local office, to attend the meeting.**
8. The contract refers to Attachment C, Rate Setting Process, but Attachment C is blank. Please provide the rate setting process.  
**Rate setting information is included on page 43 of the contract, Amendment 4, in the subsection, "Payments to Sub-brokers and Providers."**
9. When the contract was signed, what were the first-year ride volumes estimated to be at?  
**The contract does not contain ridership numbers. The bidders for this contract would accept the model contract, which is included in the RFP; there were no negotiations for ridership volume. The data provided to the bidders is included in the RFP, which is attached. The bidders were provided historical claims and enrollment data from July 2015 through December 2017. In December 2018, LogistiCare performed 170,178 trips. In January 2019, MTM performed 181,947 trips and in October 2019 MTM performed 218,211 trips. On average, MTM performs 199,055 trips per month.**
10. Representative Noret would like to follow up regarding a constituent and secure a voice recording for the calls that she made to MTM.  
**EOHHS' Director of Legislative and Constituent Affairs has reached out to Rep. Noret and will work directly with him to accommodate this constituent request and address any other consumers concerns.**
11. How will EOHHS work to expand the group that is sent notice for the community meetings and increase outreach to facilities to increase the attendance at the meetings.  
**EOHHS is committed to learning more about the consumers' needs directly, during these monthly meetings. EOHHS is currently partnering with MTM to develop an outreach strategy to engage a larger and more diverse audience, concentrating particularly on the program's consumers. Such efforts may include more public promotion of the meetings, including social media and the EOHHS web site. Currently, there are approximately 80 individuals and stakeholder organizations on the contact list, which includes medical care providers, MTM staff, and transportation providers, as well as consumers who have expressed interest in attending these sessions.**

12. Please provide a review of the ride sharing statute to investigate the legality of the use of Uber and Lyft by MTM.  
**EOHHS legal counsel has reviewed the ride sharing statute, otherwise known as the Transportation Network Company (TNC) services statute (Section 39-14-14.2 of RI General Law), and the MTM contract, considering whether there is any conflict between the statute and the MTM contract. As drafted, the TNC statute does not prohibit the utilization of Uber or Lyft as transportation providers under the NEMT contract with MTM.**
13. Please investigate the allegation by Gina Collins, who represented Centerdale Manor, that each month when EOHHS sends MTM updated member information, all of the notes of level of need and preferred provider are erased.  
**Medicaid has reviewed this concern with MTM and have found no evidence that indicates the aforementioned allegation. Medicaid and MTM are in constant communication, reviewing all system needs and processes to ensure member information accuracy.**
14. Report if MTM is complying with the requirement to provide bus passes for TANF members.  
**MTM is complying with the requirements to provide bus passes to TANF participants. MTM, in an effort to further improve efficiency, works with DHS to provide bus passes to the field offices. DHS has bus passes available to distribute to newly enrolled TANF participants to help avoid potential delays in the delivery of their bus passes.**
15. Describe how EOHHS ensures that all complaints to MTM are recorded?  
**All calls received by MTM are required to be recorded and maintained in accordance with Medicaid rules for 10 years. In addition, Medicaid conducts routine, random listening sessions of customer services calls, performs audits and reviews all required reporting to determine trends or identify concerns. The MTM contract requires full compliance with the appeals and grievance (complaint) process. Members or their authorized representatives are encouraged to register any complaints in writing. These complaints received by way of telephone or in person are tracked and included in the monthly complaint report.**