



September 16, 2009

The Honorable Max Baucus
Chairman
Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

Dear Chairman Baucus:

On behalf of the American Public Transportation Association (APTA) and its 1,500 members, I write to you regarding healthcare legislation pending before your committee and its potential impact on a vital program which provides transportation to Medicaid recipients. APTA's members are concerned that an important Medicaid program used by people with disabilities and low-income populations for medical transportation could be negatively impacted under potential proposals for healthcare reform legislation.

Under 42 C.F.R. §431.53, federal Medicaid regulations require states to provide medically necessary non-emergency medical transportation (NEMT) to and from healthcare providers for those enrolled in the program. Under current law, public transit agencies provide this assistance and are then reimbursed for costs associated with administering and operating the service through various formulas. Concerns have been raised by several of our smaller transit agency members, many of whom subsist in part based on NEMT reimbursements, that should any cuts be made to this program, already cash-strapped transit agencies will no longer be able to provide these important services to disabled people, those with serious mental, physical and developmental disabilities, low-income families and elderly persons, as well as other populations that face barriers in accessing medical care.

According to a report by the National Consortium on the Coordination of Human Services Transportation, NEMT constitutes only a small portion of Medicaid spending yet it ranks as the largest federal transportation program that is not administered by the U.S. Department of Transportation. The sheer size of this program underscores its significance to Medicare recipients and transit agencies alike. Furthermore, the demand for NEMT services is likely to multiply dramatically as our population ages and the number of mobility impaired individuals increases. We therefore urge the committee to either preserve the present Medicaid NEMT system, or replace it with a program that better provides medical access to all of these populations while adequately reimbursing transit systems for the costs of providing such service.

Thank you for your time and consideration of this matter. As you and your committee work to draft healthcare reform legislation, if you have questions or need more information, please contact Joni Zielinski of the Government Affairs Department at (202) 496-4865 or email jzielinski@apta.com.

Sincerely yours,

William Millar
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