

June 9, 2022

The Honorable Rosa DeLauro
Chair, House Appropriations Committee,
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
2358-B Rayburn House Office Building
Washington, DC 20515-6024

The Honorable Tom Cole
Ranking Member, House Appropriations
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
2358-B Rayburn House Office Building
Washington, DC 20515-6024

Dear Honorable Chair and Ranking Member:

The 61 undersigned advocacy and stakeholder organizations are writing in support of adding the following report and bill language to the FY23 L,HHS bill to delay further implementation of CMS' Center for Medicare and Medicaid Innovation (CMMI) Repetitive Scheduled Non-Emergent Ambulance Transport (RSNAT) model until the model addresses the needs of low-income Medicare beneficiaries for alternative, appropriate transportation.

Report Language:

Title II – Department of Health and Human Services; Centers for Medicare and Medicaid Services, Center for Medicare and Medicaid Innovation -- The Committee directs the Centers for Medicare and Medicaid Services (CMS) to delay further implementation of the Prior Authorization of Repetitive, Scheduled Non-Emergent Ambulance Transport (RSNAT) because the model fails to provide appropriate alternative transportation to dialysis services and diabetes-related wound care for low-income beneficiaries with no other means of transportation.

The Committee further directs CMS to provide a report within ninety days to L,HHS Appropriations Subcommittee and the Energy and Commerce Committee on revisions to the model to ensure that the RSNAT model will not disproportionately adversely affect low-income, minority and rural beneficiaries with end stage renal disease and wounds caused by uncontrolled diabetes.

Bill Language:

Title II – Department of Health and Human Services; Centers for Medicare & Medicaid Services (CMS) -- None of the funds appropriated in this bill or otherwise available shall be used to continue the implementation or geographic expansion to additional states of the Prior Authorization of Repetitive, Scheduled Non-Emergent Ambulance Transport (RSNAT) model.

The RSNAT model is a reasonable program integrity initiative that uses prior authorization to

deny ambulance services to beneficiaries that do not meet Medicare's qualifying criteria. Without modifications, however, the model has left vulnerable Medicare beneficiaries without access to alternative lower cost non-emergency medical transportation (NEMT) to kidney dialysis and diabetic wound care services (these services accounted for 85 percent of beneficiaries accessing scheduled health services in the RSNAT demonstration).

While we agree that ambulances are an expensive and inappropriate mode of transport to dialysis and wound care for almost all Medicare patients, RSNAT has highlighted the need for an appropriate transportation alternative for low-income Medicare beneficiaries, both full and partial dual eligibles.

Nearly half of the Medicare beneficiaries who lost ambulance service in the model are dual-eligibles enrolled in both Medicare and Medicaid. RSNAT has resulted in a shifting of transport service to Medicaid NEMT for full dual eligibles (who will need navigation assistance to access Medicaid NEMT). However, **the partial dual eligibles do not qualify for Medicaid NEMT and have no alternative transportation.** We ask that this be changed to allow for NEMT services to be the solution for Medicare partial dual eligible recipients in need of transportation services. This is cost effective and ensures Medicare partial dual eligible recipients are able to get the transportation they need.

We thank you in advance for giving this request your fullest consideration.

Sincerely,

AIDS Action Baltimore
AIDS Alabama
AIDS Alabama South
AIDS Foundation of Chicago
Allies for Independence
American Academy of HIV Medicine
American Association of People with Disabilities
American Association on Health and Disability
American Federation of County and Municipal Employees
American Kidney Fund
American Network of Community Options and Resources
American Public Transportation Association
American Therapeutic Recreation Association
Amida Care
Association of Programs for Rural Independent Living (APRIL)
Autistic Self Advocacy Network
California Dental Association
Center for Autism and Related Disorders
Center for Public Representation
Children's Health Fund

Community Transportation Association of America
Coordinated Transportation Solutions, Inc.
Dialysis Patient Citizens
Disability Rights Education and Defense Fund
Easterseals
Equality NC
Families USA
First Focus Campaign for Children
Global Alliance for Behavioral Health and Social Justice
Greater WI Agency on Aging Resources, Inc. (GWAAR)
HIV Dental Alliance
HIV Medicine Association
Hudson Valley Community Services
Lakeshore Foundation
Los Angeles LGBT Center
Lutheran Services in America
Medicare Rights Center
Mental Health America
National Adult Day Services Association (NADSA)
National Association for Children's Behavioral Health
National Association of Nutrition and Aging Services Programs (NANASP)
National Consumer Voice for Quality Long-Term Care
National Council on Aging
National Healthcare for the Homeless Council
National Rural Health Association
Nevada Disability Coalition
Pennsylvania Council on Independent Living
Planned Parenthood of California
Schizophrenia and Related Disorders Alliance of America
SKIL Resource Center
The Arc of the United States
The Jewish Federations of North America
The Michael J. Fox Foundation for Parkinson's Research
The Transportation Alliance
Treatment Action Group
Treatment Communities of America
United Spinal Association
USAging
WI Association of Mobility Managers (WAMM)
Wisconsin Aging Advocacy Network (WAAN)
Wyoming Patients Coalition

cc:

Stephen Steigleder, Clerk

House Appropriations Committee Labor, Health and Human Services, Education and Related Agencies Subcommittee

Kathryn Salmon, Professional Staff Member

House Appropriations Committee Labor, Health and Human Services, Education and Related Agencies Subcommittee

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Ashley Palmer, Professional Staff Member

Senate Appropriations Committee Labor, Health and Human Services, Education and Related Agencies Subcommittee