

## **CMS Guidance for Applicable Federal Cost Principles for Ground Emergency Medical Transportation (GEMT)**

- States must ensure that reported costs and associated claims for federal financial participation (FFP) are accurate and represent only costs associated with the provision of Medicaid-covered services.
- Section 1903(w)(6)(A) of the Act allows state and local units of government to fund the non-federal share of Medicaid payments through a certified public expenditure (CPE) process.
- Cost identification and allocation methodologies should not shift costs to the Medicaid program that are not related to a Medicaid-covered service, such as GEMT, or allocate costs to Medicaid without using an appropriate allocation statistic to identify the portion of GEMT costs eligible for Medicaid payment.

The following bullet points were obtained from: [CMS Uncovers Confusion Around Ground EMT Reimbursement \(natlawreview.com\)](https://www.natlawreview.com/article/cms-uncovers-confusion-around-ground-emt-reimbursement)

- For Medicaid GEMT services, the cost objective is the transportation of a Medicaid beneficiary to a facility to receive emergently needed medical care; general fire and rescue activities would not be expected to benefit this objective.
- In the case of the costs associated with fire and rescue personnel who are not Medicaid-participating providers performing covered services and their vehicles and equipment, those costs are readily assignable to the fire and rescue cost objectives rather than to the Medicaid objective of furnishing GEMT services and are not directly or indirectly attributable to a Medicaid-covered service furnished to a beneficiary.
- There are no Medicaid benefits which specifically cover the transportation of a provider to a beneficiary.
- Fire fighters who do not provide Medicaid-covered services would be assigned to the fire department's cost objective.
- Additionally, applicable federal regulations do not identify "shared direct costs". . . .
- A state or local law that requires a fire truck to accompany the ambulance on a call does not authorize the fire truck or fire fighters to be considered an allowable Medicaid service, and such costs not otherwise attributable to a Medicaid-covered service may not be allocated to Medicaid.

From these remarks, CMS seems to be drawing a distinction between costs for Medicaid-covered ambulance transports which are reimbursable, and costs for general fire services, e.g., first responder services, triage, or rescue services.