

205.5602 Definitions for this section and KRS 205.5601 and 205.5603 -- Duties of Department for Medicaid Services regarding ground ambulance service transports -- Assessment amount and administration -- Need for state plan or waiver amendment -- Reports.

- (1) For purposes of this section and KRS 205.5601 and 205.5603:
 - (a) "Ground ambulance provider" means a ground ambulance provider licensed in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services;
 - (b) "Assessment" means the Medicaid ambulance service provider assessment imposed in KRS 142.318;
 - (c) "Board" means the Kentucky Board of Emergency Medical Services;
 - (d) "Commissioner" means the commissioner of the Department for Medicaid Services; and
 - (e) "Department" means the Department for Medicaid Services.
- (2) The department shall:
 - (a) Promulgate administrative regulations to establish the standards and procedures necessary to implement the provisions of this section and KRS 205.5601 and 205.5603;
 - (b) Calculate an assessment on emergency ground transport collections pursuant to subsection (3) of this section;
 - (c) Administer assessment proceeds according to subsection (6) of this section;
 - (d) Apply uniformly to all assessed ground ambulance providers any annual changes to the assessment rate according to the process described in subsection (3) of this section; and
 - (e) Evaluate current ground ambulance provider reimbursement rates paid by managed care organizations and require increases consistent with:
 1. KRS 205.5601 and this section;
 2. Current fee-for-service reimbursement rates; and
 3. An adequate network of ambulance service providers.
- (3)
 - (a) The assessment due from a ground ambulance provider on emergency ground transport collections shall be not less than one-half of one percent (0.5%) lower than the maximum limit for a provider assessment as approved by the Centers for Medicare and Medicaid Services.
 - (b) For illustrative purposes only, if the maximum limit for a provider assessment as approved by the Centers for Medicare and Medicaid Services is six percent (6%) of the emergency revenues collected by the ground ambulance provider, the minimum taxable limit under this section would be five and one-half percent (5.5%) of the emergency revenues collected.
- (4) The assessment shall not generate more than the maximum amount as approved by the Centers for Medicare and Medicaid Services.
- (5)
 - (a)
 1. Within ninety (90) days after July 15, 2020, the commissioner shall determine whether a state plan amendment or an amendment to any

Kentucky federal Medicaid waiver is required to implement this section.

2. If the commissioner determines that a state plan amendment or an amendment to a Kentucky federal waiver is necessary, the commissioner is authorized to seek any necessary state plan or waiver amendment, and the assessment shall not take effect until the state plan or waiver amendment is approved.
 - (b) The assessment shall not be implemented until the first day of the calendar quarter after the Department for Medicaid Services receives notice of federal matching funds approval from the Centers for Medicare and Medicaid Services and has notified the Department of Revenue of that approval.
 - (c) The commissioner shall implement this section to the extent that it is not inconsistent with the state Medicaid plan or any Kentucky federal Medicaid waivers.
 - (d) Payments to ground ambulance providers shall begin within ninety (90) days of the later of the approval of federal matching funds, the state plan, or waiver amendment. The first monthly assessment payment shall be due sixty (60) days after the implementation of the enhanced fee schedule.
- (6) The assessment shall be administered as follows:
 - (a) An annual amount of two hundred thousand dollars (\$200,000) shall be returned to the department to offset the Medicaid administration expenses;
 - (b) The remaining portion of the assessment shall:
 1. Be utilized to increase the rates paid by a managed care organization for emergency ambulance services up to the amount paid by the fee-for-service Medicaid program for emergency ambulance services; or
 2. Be paid as supplemental payments to ground ambulance providers in a proportional amount according to the total Medicaid ambulance transports; and
 - (c) If any funds are remaining after the department's duties have been completed under paragraph (b) of this subsection, the remaining funds shall be utilized by the department to increase non-emergency medical transport rates.
- (7) Each ground ambulance provider shall report to the board, at the time and in the manner required by the board, ground emergency revenue collected to accomplish the purposes of this section and KRS 205.5603.
- (8)
 - (a) No more than one hundred eighty (180) days after the end of each calendar year, the board shall submit to the cabinet transport data for all ground ambulance providers licensed in Kentucky.
 - (b) The data required by paragraph (a) of this subsection shall, at a minimum, include the number of emergency ground transports completed during the previous calendar year and the emergency revenue collected.

Effective: April 5, 2024

History: Amended 2024 Ky. Acts ch. 94, sec. 4, effective April 5, 2024. -- Created 2020 Ky. Acts ch. 110, sec. 5, effective July 15, 2020.