
Ground Emergency Medical Transportation (GEMT) Private Provider Program

Medicaid Programs Unit



GEMT Private Provider Program: Background

- HB 2910 (2021) requires OHA to set up a supplemental payment program for GEMT private providers. These are GEMT providers who do not qualify for, or participate in, the public provider program. Under the program, OHA sets and collects a quality assurance fee from GEMT private providers.
- The Centers for Medicare & Medicaid Services (CMS) approved the CCO portion of the program. OHA is waiting for CMS approval of the fee-for-service (FFS) portion of the program. OHA does not have any updates of the FFS SPA approval.

GEMT Private Provider Program: Eligibility

OHA has identified you as a private ambulance provider who will be required to pay the fee and eligible for the supplemental payment. We have identified because you meet all the following:

1. You are enrolled as an Oregon Health Plan Medicaid provider;
2. You provide ground emergency medical transport services to Medicaid recipients (excluding air transports);
3. Your organization/entity is not a publicly owned or operated, does not contract with a local government agency and does not participate in the GEMT public provider supplemental program.

GEMT Private Provider Program: Eligibility

OHA has identified become aware of 100% volunteer agencies and if they are required to participate.

This is currently being reviewed by OHA's DOJ team. I will update everyone once I receive a decision from the DOJ team.

GEMT Private Provider Program: Quality Assessment Fee (QAF) CCO

- The QAF is 5% of the gross receipts for the quarter
- The first due date for the CCO QAF from providers will be determined when the system requirements for a manual work around have been completed
- Once the manual work around is completed that will determine the due date for the current quarter due and any quarters going back to the start of 1/1/2024 of the CCO start date
- Once the QAF is due, payments can be split up or a payment plan can be made with agencies for the first payment that is due.

GEMT Private Provider Program: Quality Assessment Fee (QAF) FFS

- The GEMT Private Provider Program rules on the FFS side indicate that there will be an adjustment for April – December 2023, what is the adjusted amount?
- The budget team for the program will calculate the percentage. It will be based on the percentage of FFS OHP members
- Upon SPA approval, OHA will get out that percentage information to the providers

GEMT Private Provider Program: Quality Assessment Fee (QAF) Data Template

- The finalization of the data template is being worked out now. I am hoping to have that finalized in the next couple of weeks and I will send it out to all the providers.
- There will not be an invoice from OHA, but there will be a reporting form that is included in the data template. I have attached a draft of what the reporting form.

GEMT Private Provider Program: Supplemental Payments

- Once the QAF is paid it triggers our system to pay out the supplemental payments
- It is a different process for FFS and CCO
- FFS usually pays out weekly for supplemental payments
- FFS comes directly from OHA
- CCO usually pays out monthly for supplemental payments
- CCO receives the quality directed payment, they get a report from OHA monthly, and then the CCO pays the supplemental back to the providers

GEMT Private Provider Program Resources:

OHA Medicaid Transportation program policy staff emails:

JENNI.L.CLAIBORNE@oha.oregon.gov

Shared inbox for GEMT:

GEMT.Program@odhsoha.oregon.gov

GEMT private provider program website:

<https://www.oregon.gov/oha/hsd/ohp/pages/policy-ground-emergency-transportation.aspx>

GEMT OARs:

- [OAR 410-136-3372](#): General Requirements
- [OAR 410-136-3373](#): Quality Assurance Fee Requirements and Qualifications
- [OAR 410-136-3374](#): Coordinated Care Organizations Requirements and Payment Processing

Questions?

Thank You!

**GEMT Private Provider Program, Medicaid
Programs Team**

**Oregon
Health
Authority**