

**Columbus Consolidated Government
Council Meeting Agenda Item**

TO:	Mayor and Councilors
AGENDA SUBJECT:	Georgia Medicaid Fee for Service – Ground Ambulance Upper Payment Limit – Supplemental Payment Program
AGENDA SUMMARY:	Approval is requested to participate in the Georgia Medicaid Fee for Service Upper Payment Limit Supplemental Payment Program and authorize the payment via intergovernmental transfer (IGT) to the State of Georgia, as required, based on formula calculations performed by the Department of Community Health (DCH).
INITIATED BY:	Columbus Fire and EMS

Recommendation: Approval is requested to participate in the Georgia Medicaid Fee for Service Upper Payment Limit Supplemental Payment Program and authorize payment via intergovernmental transfer (IGT) to the State of Georgia, as required, based on formula calculations performed by the Department of Community Health (DCH).

Background: Beginning with calendar year 2020, DCH instituted a Medicaid supplemental payment program for in-state, government-owned, hospital affiliated or free-standing, ground ambulance providers. Its purpose is to provide additional Medicaid reimbursement to help ensure access to ambulance services for Medicaid enrollees with FFS coverage. The supplemental payment is in addition to the claim payment a provider receives when submitting FFS claims for ambulance services.

The supplemental payment will not exceed an established upper payment limit. The UPL will be based on commercial payer information through the calculation of an average commercial rate (ACR) for each applicable ambulance service. The supplemental payment applies to the following ambulance services:

- A0425 - Mileage
- A0426 - Advanced Life Support (ALS, Non-Emergency)
- A0427 - Advanced Life Support (ALS, Level 1, Emergency)
- A0428 - Basic Life Support (BLS, Non-Emergency)
- A0429 - Basic Life Support (BLS, Emergency)
- A0433 - Advanced Life Support, Level 2 (ALS Level 2, Emergency)
- A0434 - Specialty Care Transport

Analysis: The Average Commercial Rate (ACR) will be calculated for each applicable ambulance service corresponding to the seven procedure codes listed in the ACR survey. To calculate the upper payment limit, the ACR amount for each procedure code will be multiplied by the number of Medicaid FFS units for paid claims for services provided during the ACR survey period. To calculate the supplemental payment, the upper payment limit will be reduced by total Medicaid claim payments (Medicaid payments and any third-party liability payments). Medicaid payments are financed by the federal government and the state. On an annual basis, the federal government determines the level of federal support for the Medicaid program, which is calculated through a percentage known as the Federal Medical Assistance Percentage (FMAP). The state share is equal to the total Medicaid payment, minus the federal share. The federal fiscal year 2023 FMAP for the state of Georgia is 66.02% (the base FMAP will be increased by the appropriate public health emergency percentage increase depending upon the quarter in which payment is made).

Financial Considerations: Program participation requires the city to provide funds to the State of Georgia. The program amount will be a percentage of the total payment based on the Medicaid federal match rate. The Department of Community Health (DCH) will notify the city of the required IGT amount and due date. Following the transfer of funds to the State of Georgia, DCH will draw federal matching funds and make the full Medicaid supplemental payment to the city. The purpose is to provide additional Medicaid reimbursement.

Legal Considerations: Council approval is required to participate in the program and approve payment for the program.

Recommendation/Action: Approve a resolution to participate in the Georgia Medicaid Fee for Service Upper Payment Limit Supplemental Payment Program and authorize payment via intergovernmental transfer (IGT) to the State of Georgia, as required, based on formula calculations performed by the Department of Community Health (DCH).

**A RESOLUTION
NO. _____**

**A RESOLUTION AUTHORIZING APPROVAL TO PARTICIPATE IN THE GEORGIA
MEDICAID FEE FOR SERVICE UPPER PAYMENT LIMIT SUPPLEMENTAL PAYMENT
PROGRAM AND AUTHORIZE PAYMENT VIA INTERGOVERNMENTAL TRANSFER (IGT) TO
THE STATE OF GEORGIA, AS REQUIRED, BASED ON FORMULA CALCULATIONS
PERFORMED BY THE DEPARTMENT OF COMMUNITY HEALTH (DCH).**

WHEREAS, beginning with calendar year 2020, the Department of Community Health (DCH) instituted a Medicaid supplemental payment program for in-state, government-owned, hospital-affiliated, or free-standing, ground ambulance providers; and

WHEREAS, the purpose of this program is to provide additional Medicaid reimbursement to help ensure access to ambulance services for Medicaid enrollees with Fee-for-Service (FFS) coverage; and,

WHEREAS, the City is eligible to participate in the program as a provider of ambulance services to the community and participation will result in an increase in ambulance revenue; and,

WHEREAS, program participation requires the city to first provide funds to the State of Georgia in order to receive the additional ambulance revenue.

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA HERBY RESOLVES:

That the City Manager, or his designee, is hereby authorized to facilitate the City’s participation in the Georgia Medicaid Fee for Service Upper Payment Limit (UPL) - Supplemental Payment Program to include submission of all applicable forms, documents, and payments for program participation.

Introduced at a regular meeting of the Council of Columbus, Georgia held the _____ day of _____, 2024 and adopted at said meeting by the affirmative vote of _____ members of said Council.

- Councilor Allen voting _____.
- Councilor Chambers voting _____.
- Councilor Cogle voting _____.
- Councilor Crabb voting _____.
- Councilor Davis voting _____.
- Councilor Garrett voting _____.
- Councilor Hickey voting _____.
- Councilor Huff voting _____.
- Councilor Thomas voting _____.
- Councilor Tucker voting _____.

Sandra T. Davis, Clerk of Council

B.H. “Skip” Henderson III, Mayor