October 22, 2010

Report Number: A-06-09-00090

Mr. Thomas M. Suehs
Executive Commissioner
Texas Health and Human Services Commission
P.O. Box 13247
Austin, TX 78711

Dear Mr. Suehs:

Enclosed is the U.S. Department of Health & Human Services (HHS), Office of Inspector General (OIG), final report entitled Review of Nonemergency Medical Transportation Costs in the State of Texas (Transportation Provided by the League of United Latin American Citizens – Project Amistad). We will forward a copy of this report to the HHS action official noted on the following page for review and any action deemed necessary.

The HHS action official will make final determination as to actions taken on all matters reported. We request that you respond to this official within 30 days from the date of this letter. Your response should present any comments or additional information that you believe may have a bearing on the final determination.


If you have any questions or comments about this report, please do not hesitate to call me at (214) 767-8414 or contact Sylvie Witten, Audit Manager, at (512) 339-3071 or through email at Sylvie.Witten@oig.hhs.gov. Please refer to report number A-06-09-00090 in all correspondence.

Sincerely,

/Patricia Wheeler/
Regional Inspector General
for Audit Services

Enclosure
Direct Reply to HHS Action Official:

Ms. Jackie Garner  
Consortium Administrator  
Consortium for Medicaid and Children’s Health Operations  
233 North Michigan Avenue, Suite 600  
Chicago, IL  60601

cc:
Mr Billy R. Millwee  
Associate Commissioner for Medicaid and CHIP  
Texas Health and Human Services Commission  
P.O. Box 85200  
Austin, TX  78708-5200

Mr. David M. Griffith  
Internal Audit Director  
Texas Health and Human Services Commission  
P.O. Box 13247  
Austin, TX  78711
REVIEW OF NONEMERGENCY MEDICAL TRANSPORTATION COSTS IN THE STATE OF TEXAS

(TRANSPORTATION PROVIDED BY THE LEAGUE OF UNITED LATIN AMERICAN CITIZENS – PROJECT AMISTAD)

Daniel R. Levinson
Inspector General

October 2010
A-06-09-00090
The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health & Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

**Office of Audit Services**

The Office of Audit Services (OAS) provides auditing services for HHS, either by conducting audits with its own audit resources or by overseeing audit work done by others. Audits examine the performance of HHS programs and/or its grantees and contractors in carrying out their respective responsibilities and are intended to provide independent assessments of HHS programs and operations. These assessments help reduce waste, abuse, and mismanagement and promote economy and efficiency throughout HHS.

**Office of Evaluation and Inspections**

The Office of Evaluation and Inspections (OEI) conducts national evaluations to provide HHS, Congress, and the public with timely, useful, and reliable information on significant issues. These evaluations focus on preventing fraud, waste, or abuse and promoting economy, efficiency, and effectiveness of departmental programs. To promote impact, OEI reports also present practical recommendations for improving program operations.

**Office of Investigations**

The Office of Investigations (OI) conducts criminal, civil, and administrative investigations of fraud and misconduct related to HHS programs, operations, and beneficiaries. With investigators working in all 50 States and the District of Columbia, OI utilizes its resources by actively coordinating with the Department of Justice and other Federal, State, and local law enforcement authorities. The investigative efforts of OI often lead to criminal convictions, administrative sanctions, and/or civil monetary penalties.

**Office of Counsel to the Inspector General**

The Office of Counsel to the Inspector General (OCIG) provides general legal services to OIG, rendering advice and opinions on HHS programs and operations and providing all legal support for OIG’s internal operations. OCIG represents OIG in all civil and administrative fraud and abuse cases involving HHS programs, including False Claims Act, program exclusion, and civil monetary penalty cases. In connection with these cases, OCIG also negotiates and monitors corporate integrity agreements. OCIG renders advisory opinions, issues compliance program guidance, publishes fraud alerts, and provides other guidance to the health care industry concerning the anti-kickback statute and other OIG enforcement authorities.
Notices

THIS REPORT IS AVAILABLE TO THE PUBLIC at http://oig.hhs.gov

Section 8L of the Inspector General Act, 5 U.S.C. App., requires that OIG post its publicly available reports on the OIG Web site.

OFFICE OF AUDIT SERVICES FINDINGS AND OPINIONS

The designation of financial or management practices as questionable, a recommendation for the disallowance of costs incurred or claimed, and any other conclusions and recommendations in this report represent the findings and opinions of OAS. Authorized officials of the HHS operating divisions will make final determination on these matters.
EXECUTIVE SUMMARY

BACKGROUND

Pursuant to Title XIX of the Social Security Act, the Medicaid program provides medical assistance to low-income individuals and individuals with disabilities. The Federal and State Governments jointly fund and administer the Medicaid program. At the Federal level, the Centers for Medicare & Medicaid Services (CMS) administers the program. Each State administers its Medicaid program in accordance with a CMS-approved State plan. Although the State has considerable flexibility in designing and operating its Medicaid program, it must comply with applicable Federal requirements.

Federal regulations (42 CFR § 431.53) require each State to ensure that Medicaid beneficiaries have transportation to and from medical providers and to describe in its State plan the methods that the State will use to meet this requirement. Federal regulations (42 CFR § 440.170) define transportation expenses as costs for transportation that the State deems necessary to secure medical examinations and treatment for Medicaid beneficiaries.

During our audit period, the Texas Health and Human Services Commission (the State agency) contracted with the Texas Department of Transportation (TxDOT) to administer the nonemergency medical transportation (transportation) program. This program provides transportation to and from covered health care service providers for Medicaid beneficiaries and other eligible recipients. TxDOT subcontracts with transportation providers.

One transportation provider, League of United Latin American Citizens – Project Amistad (Project Amistad), provides these transportation services to six Texas counties. During calendar year (CY) 2007, the State agency claimed $2,975,309 ($1,487,654 Federal share) for medical transportation services provided by Project Amistad.

OBJECTIVE

Our objective was to determine whether the State agency claimed Medicaid reimbursement for transportation services provided by Project Amistad in accordance with Federal and State requirements.

SUMMARY OF FINDINGS

The State agency did not always claim Medicaid reimbursement for transportation services provided by Project Amistad in accordance with Federal and State requirements. Of 100 sampled transportation claim payments to Project Amistad for CY 2007, 65 were allowable. However, the State agency underpaid 14 claims for services provided between July and September 2007 because it used outdated rates to determine the reimbursement amounts. Another 19 claims were unallowable or partially unallowable for the following reasons:

- Transportation was provided by drivers who did not have a criminal background check or who had a prohibited criminal history on file with Project Amistad (12 claims).
• The beneficiary did not receive a Medicaid-covered health care service on the transportation date (six claims).

• The vehicle used for transportation did not have a valid State vehicle registration on the date of service (one claim).

In addition, the available documentation was insufficient to determine whether all or part of two claims met Federal and State requirements. For these two claims, the medical provider was unable to verify whether a Medicaid-covered service took place on the date of transportation. We did not question the transportation service for these two claims and did not include the claims in our estimate of net overpayments.

As a result of the underpayments and unallowable and partially unallowable claims, Project Amistad received a net overpayment of $966. Based on our sample results, we estimated that Project Amistad received net overpayments of at least $262,536 ($131,268 Federal share) for CY 2007.

RECOMMENDATIONS

We recommend that the State agency:

• refund $131,268 (Federal share) for claims that did not comply with Federal and State requirements,

• work with Project Amistad to implement controls to ensure that the correct rate is paid for transportation,

• ensure that Project Amistad completes criminal background checks on drivers in a timely manner,

• ensure that Project Amistad has controls in place to prevent payment for transportation services on dates that beneficiaries do not receive a Medicaid-covered health care service, and

• work with Project Amistad to implement controls to ensure that vehicles used for transportation have a valid State vehicle registration.

STATE AGENCY COMMENTS

Regarding our first recommendation, the State agency said that it will work with Project Amistad to determine whether the transportation services identified in the audit as unallowable complied with Federal and State requirements and that it will refund the Federal share for those services that did not meet applicable requirements. Regarding the four remaining recommendations, the State agency provided details of the actions it had completed or planned to complete in response to those recommendations.

The State agency’s comments are included in their entirety as Appendix C.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>BACKGROUND</td>
<td>1</td>
</tr>
<tr>
<td>Nonemergency Medical Transportation Program in Texas</td>
<td>1</td>
</tr>
<tr>
<td>League of United Latin American Citizens – Project Amistad.</td>
<td>1</td>
</tr>
<tr>
<td>State Requirements</td>
<td>1</td>
</tr>
<tr>
<td>OBJECTIVE, SCOPE, AND METHODOLOGY</td>
<td>2</td>
</tr>
<tr>
<td>Objective</td>
<td>2</td>
</tr>
<tr>
<td>Scope</td>
<td>2</td>
</tr>
<tr>
<td>Methodology</td>
<td>3</td>
</tr>
<tr>
<td>FINDINGS AND RECOMMENDATIONS</td>
<td>4</td>
</tr>
<tr>
<td>TRANSPORTATION CLAIMED AT THE INCORRECT RATE</td>
<td>5</td>
</tr>
<tr>
<td>CRIMINAL BACKGROUND CHECK NOT PERFORMED OR DRIVER HAD A PROHIBITED CRIMINAL HISTORY</td>
<td>5</td>
</tr>
<tr>
<td>MEDICAID-COVERED SERVICE NOT PROVIDED ON TRANSPORTATION DATE</td>
<td>6</td>
</tr>
<tr>
<td>UNREGISTERED VEHICLE USED FOR TRANSPORTATION</td>
<td>6</td>
</tr>
<tr>
<td>INSUFFICIENT DOCUMENTATION</td>
<td>6</td>
</tr>
<tr>
<td>RECOMMENDATIONS</td>
<td>6</td>
</tr>
<tr>
<td>STATE AGENCY COMMENTS</td>
<td>7</td>
</tr>
<tr>
<td>APPENDIXES</td>
<td></td>
</tr>
<tr>
<td>A: SAMPLE DESIGN AND METHODOLOGY</td>
<td></td>
</tr>
<tr>
<td>B: SAMPLE RESULTS AND ESTIMATES</td>
<td></td>
</tr>
<tr>
<td>C: STATE AGENCY COMMENTS</td>
<td></td>
</tr>
</tbody>
</table>
INTRODUCTION

BACKGROUND

Pursuant to Title XIX of the Social Security Act, the Medicaid program provides medical assistance to low-income individuals and individuals with disabilities. The Federal and State Governments jointly fund and administer the Medicaid program. At the Federal level, the Centers for Medicare & Medicaid Services (CMS) administers the program. Each State administers its Medicaid program in accordance with a CMS-approved State plan. Although the State has considerable flexibility in designing and operating its Medicaid program, it must comply with applicable Federal requirements.

Federal regulations (42 CFR § 431.53) require each State to ensure that Medicaid beneficiaries have transportation to and from medical providers and to describe in its State plan the methods that the State will use to meet this requirement. Pursuant to 42 CFR § 440.170, transportation expenses include transportation costs and related travel expenses deemed necessary by the State agency to secure medical examinations and treatment for a beneficiary.

Nonemergency Medical Transportation Program in Texas

During our audit period, the Texas Health and Human Services Commission (the State agency) contracted with the Texas Department of Transportation (TxDOT) to administer the nonemergency medical transportation (transportation) program. This program provides transportation to and from covered health care services for Medicaid beneficiaries and other eligible recipients. TxDOT subcontracts with transportation providers.

League of United Latin American Citizens – Project Amistad

The League of United Latin American Citizens – Project Amistad (Project Amistad) is 1 of 15 transportation providers that contracts with TxDOT to provide transportation services to a designated service area. The State agency designates one or more groups of counties as a transportation service area. There are a total of 24 service areas statewide. Project Amistad provides transportation to one service area that includes 6 counties in West Texas.

The State agency claimed transportation payments to Project Amistad as administrative services on the Quarterly Medicaid Statement of Expenditures for the Medical Assistance Program (Form CMS-64). In calendar year (CY) 2007, the State agency paid Project Amistad $2,975,309 for 46,887 claims.

State Requirements

The Texas Administrative Code (§ 380.203) states that the transportation program includes “reasonable transportation of a prior authorized [Medical Transportation Program] recipient to and/or from a prior authorized health care facility where health care needs will be met.” In addition, § 380.209 states that the transportation program does not cover “transportation of
individuals to services which are not covered by the applicable state or federal medical assistance program under which the recipient qualifies.”

The Texas Medicaid State plan, Attachment 3.1-D, states that transportation providers that provide medical transportation services as administrative services, which includes Project Amistad, must comply with applicable Federal and State rules and regulations and fulfill all the terms of the transportation contract.

The transportation contract between TxDOT and Project Amistad requires annual criminal background checks on drivers before they begin providing transportation services. The contract requires that the background check cover a minimum of 7 years and states that individuals with any criminal history should not be allowed to participate in providing transportation services. It also gives Project Amistad the discretion to use drivers with a criminal history prior to the 7-year period. The background check should include, but not be limited to, felony or misdemeanor convictions of any violent crimes, abusive behavior, sex offenses, or fraud in any jurisdiction. In addition, drivers found guilty by law enforcement of driving while intoxicated (DWI) or driving under the influence of any substance that may impair a driver’s ability to safely operate a motor vehicle should not provide transportation services.

The contract also states that Project Amistad must “develop, implement, and maintain an annual inspection process to verify that all vehicles meet applicable federal, state and local ordinances.” The contract also requires that Project Amistad have procedures that, at a minimum, track and document annual vehicle registration.

OBJECTIVE, SCOPE, AND METHODOLOGY

Objective

Our objective was to determine whether the State agency claimed Medicaid reimbursement for transportation services provided by Project Amistad in accordance with Federal and State requirements.

Scope

Our review covered transportation service payments totaling $2,975,309 ($1,487,654 Federal share) that the State agency paid to Project Amistad in CY 2007.

We limited our review of internal controls to understanding the preauthorization and scheduling of transportation services, driver procedures and documentation, and the billing, claiming, and reimbursement procedures for Project Amistad and the State agency.

We conducted fieldwork at the State agency in Austin, Texas, and Project Amistad’s office in El Paso, Texas.
Methodology

To accomplish our objective, we:

- reviewed Federal and State laws and regulations related to Medicaid transportation services;

- reviewed Project Amistad’s contract with TxDOT;

- interviewed State agency officials regarding beneficiaries’ eligibility for transportation services, prior authorization and scheduling of services, and the claims verification and monitoring process;

- reconciled the State agency’s claim for transportation services for the quarter ending December 31, 2007, on the Form CMS-64 to supporting documentation;

- interviewed Project Amistad officials regarding policies and procedures used to record, modify, cancel, audit, and claim transportation services; and

- selected a random sample of 100 claims for transportation services submitted by Project Amistad for CY 2007.

For the 100 sampled claims, we determined whether the claims met Federal and State requirements for Medicaid reimbursement. Specifically, we:

- reviewed Project Amistad’s documentation regarding the beneficiary, origination and destination addresses, prior authorizations, and the driver and vehicle utilized;

- reviewed the payments made to Project Amistad to determine whether the rates paid were in accordance with the contract for the type of service, the number of passengers, and the number of one-way trips provided;

- reviewed Project Amistad’s documentation of the drivers’ criminal background checks to determine whether each driver was free of a criminal history, as defined under the contract between TxDOT and Project Amistad, within 7 years of the dates of hire;

- reviewed Project Amistad’s documentation of the drivers’ moving violation records to determine whether each driver was free of any finding of DWI or driving under the influence of any substance;

- reviewed Project Amistad’s documentation of State vehicle registrations and annual State inspections to determine whether each vehicle had a current registration and inspection at the time of the transportation service;
analyzed claims data from the State Medicaid Management Information System (MMIS) to determine whether each beneficiary obtained a Medicaid-covered health care service on the date of the transportation service;

requested a confirmation from Medicaid providers that they provided a Medicaid-covered service to those beneficiaries who did not have a Medicaid claim documented in the MMIS on the date of the transportation service; and

quantified the number of claims paid and estimated the total dollar amount that the State agency claimed for reimbursement for transportation services on dates when (1) transportation was provided by drivers with no criminal background check or a prohibited criminal history, (2) beneficiaries did not receive Medicaid-covered services, (3) an unregistered vehicle was used for transportation, or (4) services were claimed at the incorrect rate. (See Appendixes A and B.)

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

FINDINGS AND RECOMMENDATIONS

The State agency did not always claim Medicaid reimbursement for transportation services provided by Project Amistad in accordance with Federal and State requirements. Of 100 sampled transportation claim payments to Project Amistad for CY 2007, 65 were allowable. However, the State agency underpaid 14 claims for services provided between July and September 2007 because it used outdated rates to determine the reimbursement amounts. Another 19 claims were unallowable or partially unallowable for the following reasons:

- Transportation was provided by drivers who did not have a criminal background check or who had a prohibited criminal history on file with Project Amistad (12 claims).
- The beneficiary did not receive a Medicaid-covered health care service on the transportation date (six claims).
- The vehicle used for transportation did not have a valid State vehicle registration on the date of service (one claim).

In addition, the available documentation was insufficient to determine whether all or part of two claims met Federal and State requirements. For these two claims, the medical provider was unable to verify whether a Medicaid-covered service took place on the date of transportation. We did not question the transportation service for these two claims and did not include the claims in our estimate of net overpayments.
As a result of the underpayments and unallowable and partially unallowable claims, Project Amistad received a net overpayment of $966. Based on our sample results, we estimated that Project Amistad received net overpayments of at least $262,536 ($131,268 Federal share) for CY 2007.

**TRANSPORTATION CLAIMED AT THE INCORRECT RATE**

The State agency underpaid 14 claims for transportation provided by Project Amistad between July and September 2007. The State agency authorized a rate increase in September 2007 for certain transportation providers, including Project Amistad, and made the increase retroactive to July 2007. The State agency instructed transportation providers to hold unsubmitted claims for this period until the State agency could update the rate tables in the State’s payment system or, for claims already submitted for this period, submit a supplemental claim for the difference between the old and new rates. Project Amistad did not submit a supplemental claim for the 14 claims. We included the underpayment amount for these claims in our estimate of net overpayments.

**CRIMINAL BACKGROUND CHECK NOT PERFORMED OR DRIVER HAD A PROHIBITED CRIMINAL HISTORY**

The State agency claimed reimbursement for 12 claims for transportation provided by Project Amistad drivers who did not have an annual criminal background check or who had prohibited criminal histories on file with Project Amistad.

Of the 12 claims, 11 were for transportation provided by three Project Amistad drivers who had on file with Project Amistad criminal histories that should have prohibited them from participating as Project Amistad drivers for the transportation program. Each of the three drivers’ criminal histories included a conviction for a DWI committed before Project Amistad hired them. The contract between TxDOT and Project Amistad prohibited Project Amistad from employing a driver with any history of DWI.

One of the twelve claims was for transportation provided by one Project Amistad driver who did not have a criminal background check performed until 1 year and 8 months after she provided the transportation. The driver’s criminal background check did not reveal a criminal history that would have prohibited the driver from participating as a transportation driver.

Project Amistad officials told us that it hired drivers with a history of DWI because it had misinterpreted the provisions of its contract with TxDOT to mean that Project Amistad could hire drivers with a DWI conviction if it had occurred more than 7 years before the date of employment. Project Amistad’s human resources director told us that she agreed that Project Amistad had misinterpreted the provisions of the contract regarding DWI convictions and would no longer employ drivers with DWI convictions for the transportation program. At the time of our audit, Project Amistad was conducting background checks of new employees.
MEDICAID-COVERED SERVICE NOT PROVIDED ON TRANSPORTATION DATE

The State agency claimed reimbursement for six transportation claims with dates of service on which beneficiaries did not receive a Medicaid-covered health care service. The providers located at the destination addresses listed on all six claims confirmed that the beneficiary was a patient of theirs but that they had not provided a Medicaid-covered medical service to the beneficiary on the date of transportation. State agency officials told us that as of January 2008, the transportation program had implemented procedures to match transportation claims to MMIS data to verify that a Medicaid-covered health care service was provided on the date of transportation.

UNREGISTERED VEHICLE USED FOR TRANSPORTATION

The State agency claimed reimbursement for one claim that listed a Project Amistad vehicle without a valid State vehicle registration as the vehicle used to provide transportation in April 2007. The State registration for this vehicle expired at the end of March 2007 and was not renewed until May 2007.

INSUFFICIENT DOCUMENTATION

The State agency claimed reimbursement for two claims for which the medical provider was unable to confirm that a Medicaid-covered service took place on the date of transportation. In one case, the provider’s computer system did not maintain records back to 2007. In the other case, the provider confirmed that the beneficiary was a patient but was unable to determine when medical services were provided. We did not question the transportation service for these two claims and did not include the claims in our overpayment estimation.

RECOMMENDATIONS

We recommend that the State agency:

- refund $131,268 (Federal share) for claims that did not comply with Federal and State requirements,
- work with Project Amistad to implement controls to ensure that the correct rate is paid for transportation,
- ensure that Project Amistad completes criminal background checks on drivers in a timely manner,
- ensure that Project Amistad has controls in place to prevent payment for transportation services on dates that beneficiaries do not receive a Medicaid-covered health care service, and
- work with Project Amistad to implement controls to ensure that vehicles used for transportation have a valid State vehicle registration.
STATE AGENCY COMMENTS

Regarding our first recommendation, the State agency said that it will work with Project Amistad to determine whether the transportation services identified in the audit as unallowable complied with Federal and State requirements and that it will refund the Federal share for those services that did not meet applicable requirements. Regarding the four remaining recommendations, the State agency provided details of the actions it had completed or planned to complete in response to those recommendations.

The State agency’s comments are included in their entirety as Appendix C.
APPENDIXES
APPENDIX A: SAMPLE DESIGN AND METHODOLOGY

POPULATION

The population consisted of all Medicaid claims paid during calendar year (CY) 2007 for nonemergency medical transportation provided by the League of Latin American Citizens – Project Amistad (Project Amistad).

SAMPLING FRAME

The State agency provided us with a database of Texas Medicaid payments made during CY 2007 for transportation services. To determine the sampling frame for this sample, we extracted from the database the transportation payments made to Project Amistad. Of the $51,009,926 ($25,504,963 Federal share) in transportation payments made to the transportation providers in the 10 Texas service areas during CY 2007, Project Amistad received $2,975,309 ($1,487,654 Federal share) for 46,887 claims. The sampling frame consisted of these claims.

SAMPLE UNIT

The sample unit was an individual paid Medicaid claim for transportation provided by Project Amistad.

SAMPLE DESIGN

We used a simple random sample.

SAMPLE SIZE

We selected a sample size of 100 transportation claims.

SOURCE OF RANDOM NUMBERS

We used Office of Inspector General, Office of Audit Services, statistical software to generate the random numbers.

METHOD OF SELECTING SAMPLE ITEMS

We consecutively numbered the sample units in our sampling frame from 1 to 46,887. After generating 100 random numbers, we selected the corresponding frame items.

ESTIMATION METHODOLOGY

We used Office of Inspector General, Office of Audit Services, statistical software to estimate the total value of overpayments.
APPENDIX B: SAMPLE RESULTS AND ESTIMATES

Sample Results for Improper Transportation Services

<table>
<thead>
<tr>
<th>Sampling Frame Size</th>
<th>Value of Frame (Federal Share)</th>
<th>Sample Size</th>
<th>Value of Sample (Federal Share)</th>
<th>Number of Improper Payments</th>
<th>Value of Improper Payments (Federal Share)</th>
</tr>
</thead>
<tbody>
<tr>
<td>46,887</td>
<td>$1,487,654</td>
<td>100</td>
<td>$3,449</td>
<td>33</td>
<td>$483</td>
</tr>
</tbody>
</table>

Estimated Value of Improper Transportation Services

*(Limits Calculated for a 90-Percent Confidence Interval)*

Point estimate $226,399
Lower limit $131,268
Upper limit $321,529
APPENDIX C: STATE AGENCY COMMENTS

TEXAS HEALTH AND HUMAN SERVICES COMMISSION

THOMAS M. SUEHE
EXECUTIVE COMMISSIONER

August 13, 2010

Ms. Patricia Wheeler
Regional Inspector General for Audit Services
Office of Inspector General, Office of Audit Services
1100 Commerce, Room 632
Dallas, Texas 75242

Reference Report Number A-06-09-00090

Dear Ms. Wheeler:

The Texas Health and Human Services Commission (HHSC) received a draft audit report entitled “Review of Nonemergency Medical Transportation Costs in the State of Texas (Transportation Provided by the League of United Latin American Citizens – Project Amistad)” from the Department of Health and Human Services Office of Inspector General. The cover letter, dated July 14, 2010, requested HHSC provide written comments, including the status of actions taken or planned in response to the report recommendations.

The report identified recommendations for HHSC to consider regarding the payment for Medicaid transportation services to the League of United Latin American Citizens – Project Amistad (Project Amistad) on behalf of Medicaid beneficiaries. These recommendations address:

- Refunding the Federal share for Project Amistad transportation services that did not comply with Federal and State requirements.
- Ensuring Project Amistad has controls in place to complete criminal background checks on drivers and ensure vehicles used for transportation have a valid State registration.
- Ensuring the correct rate is paid for transportation.
- Ensuring controls are in place to prevent payment for transportation services on dates when beneficiaries do not receive a Medicaid-covered health care service.

This management response includes comments related to these recommendations and details related to actions HHSC has completed or planned.
Detailed responses to the OIG recommendations follow.

**DHHS/OIG Recommendation:** We recommend that the State agency refund $131,268 (Federal share) for claims that did not comply with Federal and State requirements.

**HHSC Management Response**

**Actions Planned:**

HHSC will work with Project Amistad to review the transportation services identified in the audit that reportedly did not comply with Federal and State requirements and refund the Federal share of any amounts paid for services that did not meet applicable requirements.

**Estimated Completion Date:** No later than one year after agreement is reached with CMS regarding any unallowable services.

**Title of Responsible Person:** Director, Medical Transportation Program

**DHHS/OIG Recommendation:** We recommend that the State agency work with Project Amistad to implement controls to ensure that the correct rate is paid for transportation.

**HHSC Management Response**

HHSC’s controls over transportation rates are in place and working as intended.

Changes in the rate implementation effective dates during 2007 delayed updated rates from being input in the transportation claims processing system. As a consequence, some payments to transportation service area providers were made prior to the rates being updated in the system resulting in provider underpayments. Providers were instructed to re-bill any underpayments to ensure proper payment.

**DHHS/OIG Recommendation:** We recommend that the State agency ensure that Project Amistad completes criminal background checks on drivers in a timely manner.

**HHSC Management Response**

**Actions Planned:**

HHSC will require Project Amistad to submit documentation outlining the processes and controls for ensuring drivers receive criminal background checks in a timely manner.
HHSC will review Project Amistad processes and controls during on-site monitoring visits and will conduct enhanced monitoring to ensure driver criminal background checks occur in a timely manner. Any transportation claims that are found to lack appropriate supporting documentation will be recouped and the Federal share returned.

**Estimated Completion Date:**

- September 2010 - Submission of Project Amistad documentation.
- Ongoing - Enhanced monitoring will continue until improvement is consistently demonstrated.

**Title of Responsible Person:** Director, Medical Transportation Program

**DIHIS/OIG Recommendation:** We recommend that the State agency ensure that Project Amistad has controls in place to prevent payment for transportation services on dates that beneficiaries do not receive a Medicaid-covered health care service.

**HHSC Management Response**

**Actions Planned:**

To address the concern of transportation services being provided on dates when beneficiaries do not receive a Medicaid-covered health care service, HHSC will assess the feasibility of incorporating Medicaid provider enrollment information in the new MTP trip authorization system in order to associate each transportation service to a particular enrolled Medicaid provider.

In addition, HHSC will consider other practical approaches that could be effectively implemented for preventing and detecting payment for transportation services on dates when beneficiaries do not receive a Medicaid-covered health care service.

**Estimated Completion Date:** August 2011

**Title of Responsible Person:** Director, Medical Transportation Program
   Director, Commission Information Technology

**DIHIS/OIG Recommendation:** We recommend that the State agency work with Project Amistad to implement controls to ensure that vehicles used for transportation have a valid State vehicle registration.
Management Response

Actions Planned:

HHSC will require Project Amistad to submit documentation outlining the processes and controls for ensuring that vehicles used for transportation have a valid State vehicle registration.

HHSC will review Project Amistad processes and controls during on-site monitoring visits and will conduct enhanced monitoring to ensure vehicles used for transportation have a valid State vehicle registration. Any transportation claims that are found to lack appropriate supporting documentation will be recouped and the Federal share returned.

Estimated Completion Date:

September 2010 - Submission of Project Amistad documentation.
Ongoing - Enhanced monitoring will continue until improvement is consistently demonstrated.

Title of Responsible Person:  Director, Medical Transportation Program

If you have any questions or require additional information, please contact David M. Griffith, HHSC Internal Audit Director. Mr. Griffith may be reached by telephone at (512) 424-6998 or by e-mail at David.Griffith@hhsc.state.tx.us.

Sincerely,

[Signature]

Thomas M. Saeils