

The team has put together answers to the committee's follow-up questions regarding Ashley's testimony on H.622 last week. See below:

**Question One:** If an individual calls 911 and is experiencing a medical emergency and requests that they be taken to Urgent Care instead of the Emergency Room – would Medicaid cover this transportation?

**Answer:** DVHA would not cover transportation via an ambulance to an Urgent Care facility except for a specific urgent care that had mental health crisis services equipped to deal with a mental health emergency.

- Vermont Medicaid covers transportation via ambulance for emergency services as [outlined in HCAR 4.102](#)
- And for non-emergency services as outlined in [HCAR 4.226](#)
- Federal regulations eCFR 424.101 defines emergency services as being *hospital services* that are necessary to prevent death or serious impairment of health. The definition of hospital is strictly defined in federal law and among others, requires the operation a 24-hour nursing service.

**Question Two:** If an ambulance responds to a mental health crisis and that person wishes to be taken to a mental health crisis center, will Vermont Medicaid cover this service?

**Answer:** If medically necessary, DVHA would cover ambulance transportation to a community mental health center, or any other location equipped and allowed to provide emergency services.

- Vermont Medicaid covers transportation via ambulance for emergency services as outlined in [HCAR 4.102](#)
  - If the mental health crisis is covered under the HCAR definition of Emergency Medical Condition as outlined in [HCAR 4.102](#), then emergency services and post-stabilization services that result as a treatment for this emergency medical condition are covered for Medicaid beneficiaries 24/7.
- If the mental health crisis is not an emergency, then VT Medicaid covers those non-emergency ambulance services as long as a physician or other qualified professional certifies the medical necessity of the ambulance transportation (and certifies that other methods of transportation would be medically contraindicated). Additionally, all non-emergency ambulance transportation must be to OR from a Medicaid covered services and must follow all PA requirements as outlined in the rule.
- If an individual needs transportation to a mental health crisis center, but it is not medically necessary that the transportation happen via ambulance and the situation is non-emergent, then the transportation may happen via other methods of transportation. If a beneficiary is eligible for Non-Emergency Medical Transportation through Medicaid as outlined in [HCAR 4.225](#), then transportation to a mental health crisis center can happen through NEMT.

**Question Three:** If someone gets into a car accident, and an ambulance is called, can the ambulance take them home if they are too “shaken up” to drive?

**Answer:** If there is no medical reason that an Ambulance should transport a person and they are not going to OR from a Medicaid covered service, then VT Medicaid does not have the authority to cover these services.

**Additional Clarification on Fiscal Impact:**

DVHA would like to clarify a statement made during testimony on ambulance rates. In 2023, DVHA’s ambulance rates were at 100% of Medicare **2023** BLS rates, except for treatment without transportation, which was at 40% of the rate. To update all DVHA ambulance rates to match 100% of the Medicare **2024** BLS rate, including for treatment no transport, it would cost DVHA \$339,000 gross/annually. To update just the treatment no transport rate to 100% of Medicare levels would cost an estimated \$74,000 gross/annually.

Thank you!

Alex

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