



## RESOLUTION NO. 40181

1 A RESOLUTION relating to emergency medical services; authorizing the execution  
2 of an interagency agreement with the Washington State Health Care  
3 Authority for the Ground Emergency Medical Transportation  
4 Intergovernmental Transfer Framework, relating to emergency medical  
5 transports to Washington State's Managed Care Medicaid clients.

6 WHEREAS there are two types of Medicaid coverage in Washington State:

7 Fee-for-Service, which allows medical providers to bill only for each service  
8 provided; and Managed Care, which is a comprehensive system of medical care  
9 delivery, including preventive and primary care, and

10 WHEREAS, until December 31, 2017, ambulance transport benefits are  
11 provided by the Managed Care program; these benefits are now covered through  
12 the Fee-For-Service program, and

13 WHEREAS the City is seeking reimbursement for ambulance transports for  
14 the 2017 calendar year, and

15 WHEREAS Ground Emergency Medical Transportation ("GEMT") is a  
16 program which allows public ambulance agencies to collect a supplemental  
17 payment for qualified Medicaid medical transports, and

18 WHEREAS these supplemental payments help cover the funding gap  
19 between the actual cost of providing medical transport services and the amount  
20 paid by Washington Apple Health (Medicaid), and

21 WHEREAS Certified Public Expenditure funding requires the HCA only to  
22 certify that providers have expended their share of the cost to provide Medicaid  
23 services; for GEMT, this certification is done by submitting an annual cost report  
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1 attesting to the department's expenses and revenues related to providing  
2 emergency medical services, and

3 WHEREAS obtaining reimbursement for the 2017 calendar year requires  
4 that a provider transfer local funds to the state prior to remittance of the federal  
5 payment for Medicaid services, and, once the HCA has received the local funds,  
6 the provider will be paid the full cost of providing the transport (the local portion  
7 and federal portion), less any payments already received from Medicaid, and

8 WHEREAS, between January 1, 2017, and December 31, 2017, the  
9 Tacoma Fire Department ("TFD") completed approximately 1,200 medical  
10 transports for Medicaid Managed Care enrollees, with the average rate per  
11 transport being \$5,450, and

12 WHEREAS the proposed interagency agreement will allow the City to  
13 receive reimbursement of approximately \$3.2 million to the medical transport  
14 program, which will offset the significant cost of having provided emergency  
15 medical transport services to our service area, as well as replenish cash reserves  
16 of the TFD EMS Special Revenue Fund; Now, Therefore,

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19 BE IT RESOLVED BY THE COUNCIL OF THE CITY OF TACOMA:

20 That the proper officers of the City are hereby authorized to enter into an  
21 interagency agreement with the Washington State Health Care Authority for the  
22 Ground Emergency Medical Transportation Intergovernmental Transfer  
23 Framework, relating to emergency medical transports to Washington State's  
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Managed Care Medicaid clients, said document to be substantially in the form of the agreement on file in the office of the City Clerk.

Adopted \_\_\_\_\_

\_\_\_\_\_  
Mayor

Attest:

\_\_\_\_\_  
City Clerk

Approved as to form:

\_\_\_\_\_  
Deputy City Attorney