Risk Management Contract Review

Contract/ Agreement Title	LLC, Boai	Letter of Agreement and Subcontractor Business Associate Agreement with LogistiCare Solutions, LLC, a non-emergency medical transportation broker, to provide reimbursement to Pinellas County Board of County Commissioners, DBA, Sunstar, for non-emergency ambulance transportation of Medicaid recipients.										
Bid/Contract#					Granicus# 18-1	Stars#	18-19704					
Purchasing Contac	:t:	:				PID #			Amount:	Amount: \$300,000.00		
Department	Department SES - EMS & Fire					Project/Contract Mgr: Jar			s G. Fogarty			
Type of Contract	ice Agr	greement				I	Method	d of Review Granicu		icus		
Limitation of Liabi	lity?	y? In:			demnification Language?			If PE to PE, §768.28?				
JPA: Cho	ose O	ne	Nam	lame of JPA:								
Required Covera	ges	A	Add'l Language / Exclusions			Lim	its		Justification			
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County Board of County Commissioners, DBA, Sunstar, for non-emergency ambulance transportation of Medicaid recipients. Reviewed agreements. The payment of Funds to Sunstar by Logisticare for services provided by Sunstar does not require application of insurance requirements. VEH – We are providing the services to Logisticare and Paramedics Logistics will perform those services for us. Insurance is dealt with in that agreement. NOTES: The agreements will provide Emergency Medical Services (EMS) with the mechanism required by the Agency for Health Care Administration (AHCA) to be paid for eligible non-emergency ambulance transportation services. The annual income from LGTC is estimated to be \$300,000. When Florida Medicaid transitioned to a Statewide Medicaid Managed Care (SMMC) program (June 2014 for Pinellas County) to administer Managed Medical Assistance (MMA) plans on behalf of the Agency for Healthcare Administration (AHCA), ambulance providers were required to enter into contracts with the transportation brokers utilized by MMA plans in order to be reimbursed for non-emergency transportation. Including LGTC, there are four (4) transportation brokers utilized by AHCA.												
Specifically, Sections 7.2 Authorization/Specific Criteria and 8.2 Reimbursement/Specific Criteria of the Florida Medicaid Non- Emergency Transportation Services Coverage Policy (October 2016) mandate that all non-emergency transports for Medicaid recipients must be coordinated, authorized and submitted for payment to the transportation broker contracted with AHCA. Execution of this LOA and BAA provides the mechanism necessary for EMS to be reimbursed for non-emergency ambulance transportation services provided to Medicaid recipients enrolled with Amerigroup Florida, Better Health, Clear Health Alliance, Humana Medical Plan, Molina Healthcare of Florida, Simply Healthcare, Sunshine Health, and United Healthcare of Florida MMA Plans; these eight (8) MMA plans utilize LGTC as their transportation broker. The total annual charges billed by the County for non-emergency transports for Medicaid recipients is approximately \$900,000; of this amount, the LOA with LGTC, will provide an estimated annual reimbursement amount of \$300,000.												
Initial Reviewer:	Rick	Rick Kahler					Date 7/30/2018					
Approved By:	essa Alf	onso					C	Date 8/	6/201	8		
Final Approval:	Virgi	nia E. H	lolsch	er, Direct	or			C	Date 8/	8/201	.8	
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