

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State NEVADA

Attachment 4.19-B

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Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of July 1, 2013 and are effective for services provided on or after that date. All rates are published on the agency's website at <https://dhcfp.nv.gov>.

14. RESERVED

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18. a. Emergency Transportation: Ground Ambulance or Air Ambulance (fixed wing or rotary aircraft): lower of: a) billed charge, or b) fixed basic rate plus fixed fee per mile. Effective July 1, 2013, the reimbursement rates will be increased by 15%.

b. Non-emergency transportation:

1. Non-emergency transportation is authorized through a contracted NET Broker, as specified in Attachment 3.1-D.
2. Reimbursement Methodology for Non-emergency Paratransit services provided by the Regional Transportation Commission (RTC) operated by local government entities:

a. The lower of: a) billed charges; or b) a cost based rate.

The cost based rate is calculated annually using each public provider's annual operating budget and service utilization forecast and an applicable 10% indirect cost rate. Each public provider will submit an annual operating budget and service utilization forecast at least 60 days before the start of the next fiscal year. The budget forecast must reflect a projection for allowable, necessary and proper direct cost in providing services. The cost based rate is calculated as follows:

1. Direct costs include the costs for fuel, tires and subcontracted costs that are directly related in providing the non-emergency transportation services. These costs must be in compliance with the Medicare reimbursement principle and OMB A-87.
2. The total direct costs (from Item 1) are reduced by any federal grant funds received for the same services to arrive at the net allowable direct costs.
3. Indirect costs are determined by applying a ten percent indirect cost rate to the net allowable direct costs (from Item 2).