

Questions Regarding Transportation under Family Care in Dane County

General

1. When is the scheduled implementation of Family Care in Dane County?
2. How is the transition from CIP to Family Care or IRIS to be handled?
3. What is the size of the waiting list and how is the transition from the waiting list to Family Care and IRIS to be handled?
4. How does someone qualify for transportation services under Family Care?
5. How does the Resource Allocation Decision (RAD) tool and outcomes effect transportation service authorization?

Funding

6. How is the Family Care capitation rate determined?
7. What sources of funds will go into the capitated rate for Dane County?
8. What is the amount of transportation funding from CIP that will go into the capitated rate?
9. How much of regular Medicaid specialized vehicle funding is included in Family Care, if any?
10. As this is managed care, what limitations are there on cost sharing for transportation?
11. Is there a maintenance of effort requirement for Family Care? For example, if providing service for a set amount of money prior to Family Care, do you still have to provide the same level of effort under Family Care?

Managed Care Organizations (MCOs)

12. How many MCOs will be available in Dane County?
13. When will we know which MCOs will serve Dane County?
14. What are the qualifications for transportation service providers under Family Care?
15. What could happen if Metro doesn't qualify as a transportation provider?
16. How is reimbursement to a transportation provider determined?
17. What are the mechanics of reimbursement to a transportation provider?
18. Would Metro be obligated to enter into an MCO agreement to become a Family Care transportation provider or could Metro present our Agency Fare Agreement to an MCO?

IRIS

19. Is transportation an IRIS eligible service through waiver or another method?
20. Under IRIS, who will be handling fiscal agent services?
21. How and by whom are providers paid for those in IRIS?
22. How are provider qualifications verified for those in IRIS?

Other

23. What kind of accompaniment is required for persons who need this level of service 24/7 when in the community?
24. What are the qualifications for accompaniment?

25. What can we do, collectively and individually, to ensure there is a seamless transition to Family Care? Seamless would mean that nobody loses transportation services or quality of services and those individuals on waiting lists come into Family Care.