

Honorable Senators and Representatives,

Thank you for your time. As Transit Director for Region 16, SEIBUS, serving Des Moines, Henry, Lee, and Louisa counties; I am here to represent public transit in Iowa.

In Iowa, there are 35 state designated public transportation systems providing services in all 99 counties. 19 are Urban and 16 are rural. The rural systems provide a large portion of HCBS Waiver transportation and NEMT services to Medicaid participants, which increases quality of life, promotes independence and is a cost effective use of taxpayer dollars.

Under the current modernization plan, public transit systems are concerned with the impact proposed through the contractual obligations placed by the MCO's and their transportation brokers. These obligations affect not only the transit systems, but Medicaid members and the general public as well.

As a whole, rural Iowa transit systems provided over 3,154,662 trips last year, of which, approximately 50% were for Medicaid passengers; split approximately 45% to HCBS Waiver and 5% to NEMT services.

The MCO's and their transportation brokers are requiring additional documentation, which is a duplication of requirements already placed on transit systems by the FTA and Iowa DOT. The MCO's and their brokers are expecting this data be collected through additional paperwork and/or technology than is currently used.

Rural Transit Drivers are predominantly over the age of 60 and do not adapt to technology changes easily. Current paperwork and technology accurately tracks all trip data, however under the proposed MCO contracts, our drivers would need to maneuver up to 4 to 5 different types of software or paper manifests, know which passenger is using which MCO/Broker, thus which software/manifest. When you add in that they are expected to drive safely, this additional time would decrease the amount of overall trips transit systems would be able to provide due to each trip taking longer to complete.

Not only are the drivers and general public going to be affected by these changes, office staff will need to be increased, which will require the hiring and training of personnel. Because MCO's and their brokers will be scheduling rides daily within a web

portal, schedules will have to be created daily; instead of ongoing permanent schedules, thus taking additional time from office staff.

Again, all of these changes affect our other customer base, which is largely comprised of low income, elderly, persons with disabilities, job seekers, employment riders, and educational (including preschoolers) services.

All of the brokers are clear that they will be providing NEMT services. But when it comes to the HCBS Waiver related Transportation, the waters are murky. Some brokers are certain that they are providing these services, and some are not. Some MCO's are certain that their Broker will be handling these services and others are not. Between one particular MCO and its broker, there is daily confusion as to which will handle HCBS Waiver transportation. At 45%, the bulk of our Medicaid passengers fall under HCBS Waiver transportation, we cannot afford to get it wrong.

Transit systems are not required to provide services to Medicaid, again, this has historically been done as effective stewardship of taxpayer dollars.

Legal counsels have advised transit systems that the MCO's Brokered contracts are concerning in nature; many transit systems are not prepared to sign agreements as they are currently proposed. Additionally, there are strong concerns about the lack of clarity regarding who will cover the costs of HCBS Waiver transportation vs. NEMT.

Iowa transit systems prefer to ensure we are signing contracts with the same MCO's as our hospitals and clinics in our service areas, some of which are still not finalized. We understand changes will be necessary however, the timeline we've been given is too short to negotiate the contracts, hire and train staff, and educate our customers.

Additionally, Public transit systems are required to be handicap accessible, and in rural Iowa, most communities do not have alternative options for these services. Knowing transportation is a top barrier to medical, dayhab and employment services and as a representative of public transportation and your constituents, we respectfully urge you to slow down this process and allow providers time to work through the changes and proposed MCO/broker contracts.

Thank you.