

# Non-Emergency Ambulance Transportation

How we can work together to meet the  
needs of our patients

Scott Tucker  
Deputy Director  
Canyon County Paramedics

---

---

---

---

---

---

---

---

Non-Emergency Ambulance Transportation

## **GENERAL INFORMATION**

---

---

---

---

---

---

---

---

## **GENERAL INFORMATION**

- Nation wide ambulance billing fraud has become a problem.
- CMS has been increasing their efforts to reduce costs and fraudulent ambulance billing
- Inappropriate use of ambulance transport has also increased.
- Historically ambulances have been used to transport patients to and from various appointments
  - Specifically when facility vans and/or family are not available

---

---

---

---

---

---

---

---

## THE PROBLEM

- Ambulance Providers and Facility Personnel do not have a clear understanding of each others needs and responsibilities for their patients
- CMS regulations continue to evolve, providing clarification on Ambulance claims processing
  - Unfortunately, this is causing more confusion and frustration with providers and facilities.
  - This is also causing frustration with patients as they are getting caught in "loop" holes.

---

---

---

---

---

---

---

---

## THE SOLUTION

- Improve communication between the facilities and ambulance providers outlining the needs of both sides to insure CMS rules and regulations are being followed
- Provide an explanation of the ambulance forms and requirements so that the ambulance field personnel and facilities personnel have a better understanding of the rules and regulations.

---

---

---

---

---

---

---

---

Non-Emergency Ambulance Transportation

## GENERAL RULES

---

---

---

---

---

---

---

---

## GENERAL GUIDELINES

- **Benefit Defined**
  - Ambulance Service where the use of other methods of transportation is contraindicated by the individual's condition, but only to the extent provided in regulations. ([www.cms.gov/AmbulanceFeeSchedule](http://www.cms.gov/AmbulanceFeeSchedule))
- **Medically Necessary (CMS Definition)**
  - Services or supplies that are needed for the diagnosis or treatment of your medical condition and meet acceptable medical practice ([www.medicare.gov/Glossary](http://www.medicare.gov/Glossary))
- **Medical Emergency**
  - When you believe you have injury or illness that requires immediate medical attention to prevent disability or death" ([www.medicare.gov/Glossary](http://www.medicare.gov/Glossary))

---

---

---

---

---

---

---

---

## GENERAL GUIDELINES

- Ambulance Claims must provide:
  - The who, where, what, when and why of the patients history of present illness.
  - How the patient was found
  - How they were transferred to the ambulance gurney and the end destination bed (gurney, table, etc)
  - Patient's physical limitations
  - Patient safety concerns (i.e. fall risk)
  - Why the patient is being transported by ambulance/gurney

---

---

---

---

---

---

---

---

## GENERAL GUIDELINES

- Ambulance field providers must make a determination, using their best judgment, on when an ambulance service is not medically necessary.
  - This only applies in non-emergency situations
    - (Non-emergency transports)
  - They must inform the patient of their options as defined by CMS

---

---

---

---

---

---

---

---

## GENERAL GUIDELINES

- "Not reasonable and necessary" as defined by CMS
  - The patient could be transported by other means
    - For example, the patient is normally transported using a facility's van or family and the patient **does not** need to be monitored due to safety risks (ie dementia, oxygen dependent, high fall risk).
  - A transport from a residence to a hospital for a service that can be performed more economically in the beneficiary's home
  - A transport from a skilled nursing facility (SNF) to a hospital or to another SNF for a service that can be performed more economically in the first SNF.

---

---

---

---

---

---

---

---

Non-Emergency Ambulance Transportation

## AMBULANCE FORMS

---

---

---

---

---

---

---

---

## AMBULANCE FORMS

- The ambulance forms are used to:
  - Support the claim for ambulance transport
  - Provide the patient with their "options"
  - Provide the patient's demographic information
  - Provide the patient with the HIPAA rights and information.
- The forms are:
  - Patient demographics information sheet
  - Health Insurance Portability and Accountability Act (HIPAA)
  - Physician Certification Statement (PCS)
  - Physician's orders
  - Advanced Beneficiary Notice (ABN)

---

---

---

---

---

---

---

---

## DEMOGRAPHICS SHEET

- Patient demographics information sheet:
  - Ambulance billing specialists use this to obtain patient contact and billing information.
  - Additionally, ambulance billing specialists can use these sheets as supporting documentation of the transport as they contain facility information, when necessary, the ambulance field providers will initial the information sheet.

---

---

---

---

---

---

---

---

Non-Emergency Ambulance Transportation

## HIPAA/SIGNATURE FORM (TAN)

---

---

---

---

---

---

---

---

## HIPAA

- Each patient contact (ambulance transport) with an Ambulance provider **REQUIRE** a HIPAA.
- HIPAA forms should be signed by the beneficiary except for:
  - When the patient is not competent or capable of signing for themselves
    - Dementia/Altered Mental Status
    - Unconscious
    - Unilateral or bilateral paralysis (ie from a previous CVA)

---

---

---

---

---

---

---

---



Non-Emergency Ambulance Transportation  
**PHYSICIAN CERTIFICATION STATEMENT- PCS  
 (YELLOW)**

---

---

---

---

---

---

---

---

**PCS**

- Required for all non-emergency medical transports
- Ambulance providers **CANNOT** complete any portion of this form for the facility (anti-fraud)
- This form is used to support medical necessity when submitting ambulance claims.

---

---

---

---

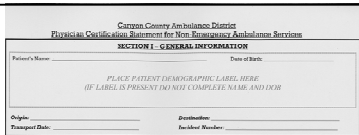
---

---

---

---

- Section I
  - Patient information
    - Patient name, date of birth and SSN/Medicare Number
      - A demographic sticker is acceptable
  - Transport information
    - Origin and destination
  - Date of transport
  - EMS Incident Number (EMS will complete)




---

---

---

---

---

---

---

---



Non-Emergency Ambulance Transportation  
**ADVANCED BENEFICIARY NOTICE – ABN  
 (GREEN)**

---

---

---

---

---

---

---

---

**ABN**

- This form is required for Ambulance providers to bill for non-emergency, not reasonable and necessary transports.
  - If the form is not completed in these situations, the ambulance provider cannot bill for the denied service.
- Examples:
  - Transfer from one facility to another due to the facilities van and/or patient’s family being unavailable and the patient does not require any medical supervision
  - Transfer to a hospital when the services could be economically performed at the original facility

---

---

---

---

---

---

---

---

**ABN**

- This is not used to deny the patient service, nor for the providers to not assist the patient.
- This form does put the facility and the ambulance providers in a “weird” situation.
  - Both parties are trying to accommodate the patient.
  - As patient advocates it is all of our responsibilities to make keep patient’s informed of the CMS regulations.
- Beneficiaries must be informed and given the estimated cost for the service

---

---

---

---

---

---

---

---

## ABN

- Beneficiaries are required to be given their options (CMS has 3 of them).
  - Option 1
    - I want Ambulance Service and attempt to bill CMS or my insurance, I understand I am financially responsible.
  - Option 2
    - I want ambulance service and do not bill CMS. I cannot appeal to CMS.
  - Option 3
    - I do not want ambulance service.

---

---

---

---

---

---

---

---

## ABN

- The patient must choose one of the options and then sign and date the form.
- Facilities do not have a responsibility for this form, this is a specific CMS form for Ambulance Providers.

---

---

---

---

---

---

---

---

## SUMMARY

- These forms are not to be used to deter or discourage the use of ambulance transportation, however, we need to work together to insure the most appropriate service is provided.
- Together we can improve the relationship and communication between the facilities and the ambulance field providers, reducing the confusion and frustration caused by CMS rules for ambulance transportation.
- We are all here to be advocates for our patients and want to do what is best for them. We need to be conscious of their financial liabilities not adding any undue burdens.

---

---

---

---

---

---

---

---

Non-Emergency Ambulance Transportation  
**DISCUSSION**

---

---

---

---

---

---

---

---

**CONTACT INFORMATION**

• *Ada County Paramedics* • *Canyon County Paramedics*

– Troy Hagen, Director	– Scott Tucker, Deputy Director
• thagen@adaweb.net	• stucker@ccparamedics.com
• 208.287.2962	• 208.442.4945
– Patient Accounts	– Patient Financial Services
• 208.287.2950	• 208.466.8800 x ext 1

---

---

---

---

---

---

---

---