

#### Payment Policies for Healthcare Services

**Provided to Injured Workers and Crime Victims** 

### Chapter 3: Ambulance, Taxi, and Other Transportation Services

Effective July 1, 2023



Link: Look for possible <u>updates and corrections</u> to these payment policies on L&I's website.

## Table of Contents

Definitions	3-2
Payment policy: All ambulance services	3-4
Payment policy: Arrival of multiple providers	3-6
Payment policy: Emergency air ambulance transport	3-7
Payment policy: Multiple patient transportation	3-8
Payment policy: Nonemergency transport	3-9
Payment policy: Proper facilities	3-10
Payment policy: Taxi, wheelchair van and other transportation services	3-11
Links to related topics	3-13

Page



#### The following terms are utilized in this chapter and are defined as follows:

**Bed confined**: The worker is:

- Unable to get up from bed without assistance, and
- Unable to ambulate, and
- Unable to sit in a chair or wheelchair.

**Destination**: Nearest place of proper treatment.

Loaded miles: Miles traveled from the pickup of the worker(s) to their arrival at the destination.



The following CPT®, HCPCS, and/or local code modifiers apply to this chapter:

-GM (Multiple patients on one ambulance trip)

# Payment policy: All ambulance services

#### When these services are paid

Ambulance services are paid when the injury to the worker is so serious that use of any other method of transportation is contraindicated.

Payment is based on the level of medically necessary services provided, not only on the vehicle used.

#### How mileage is paid

The insurer pays for mileage (ground and/or air) based only on **loaded miles**, which are the miles traveled from the pickup of the worker(s) to their arrival at the **destination**.

#### Vehicle and crew requirements

To be eligible to be paid for ambulance services for workers, the provider must meet the criteria for vehicles and crews established in <u>WAC 246-976</u> Emergency Medical Services and Trauma Care Systems and other requirements as established by the Washington State Department of Health for emergency medical services.

Key sections of this WAC include:

- General: WAC 246-976-260 Licenses required,
- Ground ambulance vehicle requirements:
  - WAC 246-976-290 Ground ambulance vehicle standards,
  - o WAC 246-976-300 Ground ambulance and aid vehicles—Equipment,
  - WAC 246-976-310 Ground ambulance and aid vehicles--Communications equipment,
  - o WAC 246-976-390 Trauma verification of prehospital EMS services,
- Air ambulance services: <u>WAC 246-976-320</u> Air ambulance services,
- Personnel:
  - o WAC 246-976-182 Authorized care,
  - Washington State Department of Health, Office of Emergency Medical Services Certification Requirements Guidelines.

#### Services that can be billed

HCPCS code	Description	Fee schedule
A0425	Ground mileage, per statute mile	<b>\$15.33</b> per mile
A0426	Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)	\$759.43
A0427	Ambulance service, advanced life support, level 1 (ALS 1-emergency)	\$788.23
A0428	Ambulance service, basic life support, nonemergency transport (BLS)	\$414.85
A0429	Ambulance service, basic life support, emergency transport (BLS – emergency)	\$663.78
A0430	Ambulance service, conventional air services, transport, one way (fixed wing)	\$6,773.05
A0431	Ambulance service, conventional air services, transport, one way (rotary wing)	\$7,874.64
A0433	Advanced Life Support, Level 2 (ALS 2)	\$1,140.87
A0434	Specialty care transport (SCT)	\$1,348.29
A0435	Fixed wing air mileage, per statute mile	<b>\$37.69</b> per mile
A0436	Rotary wing air mileage, per statute mile	<b>\$87.59</b> per mile
A0999	Unlisted ambulance service	By Report restrictions:
		1. Reviewed to determine if a more appropriate billing code is available, <i>and</i>
		2. Reviewed to determine if medically necessary.



#### **Payment limits**

When multiple providers respond to a call for services:

- Only the provider that transports the worker(s) is eligible to be paid for the services provided, *and*
- No payment is made to the other provider(s).



#### **Payment limits**

Air ambulance transportation services, either by helicopter or fixed wing aircraft, will be paid only if:

- The worker's medical condition requires immediate and rapid ambulance transportation that couldn't have been provided by ground ambulance, *or*
- The point of pickup is inaccessible by ground vehicle, or
- Great distances or other obstacles are involved in getting the worker to the nearest place of proper treatment.



#### **Payment limits**

The insurer pays the appropriate base rate for each worker transported by the same ambulance.

When multiple workers are transported in the same ambulance, the mileage will be prorated equally among all the workers transported.

#### **Requirements for billing**

The provider is responsible for prorating mileage billing codes based on the number of workers transported on the single ambulance trip.

The provider must use HCPCS code modifier **–GM** (Multiple patients on one ambulance trip) for the appropriate mileage billing codes.

## Payment policy: Nonemergency transport

#### Who may arrange for these services

Only medical providers may arrange for nonemergency ambulance transportation.



**Note**: Workers can't arrange nonemergency ambulance transportation.

#### **Medical necessity requirements**

Nonemergency transportation by ambulance is appropriate if:

- The worker is **bed confined** and it is documented that the worker's accepted medical condition is such that other methods of transportation are contraindicated, *or*
- If the worker's accepted medical condition, regardless of bed confinement, is such that transportation by ambulance is medically required.

Nonemergency transportation may be provided on a **scheduled** (repetitive or non-repetitive) or **unscheduled** basis:

- **Scheduled**, nonemergency transportation may be repetitive (for example, services regularly provided for diagnosis or treatment of the worker's accepted medical condition) or non-repetitive (for example, single time need).
- **Unscheduled** services generally pertain to nonemergency transportation for medically necessary services.

The insurer reserves the right to perform a post audit on any nonemergency ambulance transportation billing to ensure medical necessity requirements are met.



#### What makes a facility a place of proper treatment

To be a place of proper treatment, the facility must be generally equipped to provide the needed medical care for the worker.

A facility isn't considered a place of proper treatment if no bed is available when inpatient medical services are required.

#### **Payment limits**

The insurer pays the provider for ambulance services to the nearest place of proper treatment.

# Payment policy: Taxi, wheelchair van and other transportation services

#### When these services are paid

Other transportation services including taxi and wheelchair services are payable when preauthorized by the insurer.

#### Services that aren't covered

- No shows and,
- Local code **0414A** for direct claimant taxi reimbursement (not payable to taxi and other transportation service providers).

#### How mileage is paid

The insurer pays for mileage based on miles traveled from the pickup of the worker(s) to their arrival at the medical or vocational authorized **destination** only.

#### **Documentation requirements for billing**

To be eligible to be paid for non-emergent transportation services for workers, the provider must provide an itemized statement (invoice) or trip ticket documenting the following:

- Claim number
- Worker name (name of worker transported)
- Date of trip
- Pick up time
- Pick up address
- **Destination** (drop off) address
- Wait time
- Drop off time
- Driver name (First, Last)
- Driver operator or cab number
- Rates (see <u>WAC 296-20-01002</u> Definitions "By Report")
- Total cost of trip

#### Services that can be billed

HCPCS Code	Description	Fee schedule
A0100	Taxi, non-emergency	By Report
A0110	Transportation and bus, intra or interstate carrier, non- emergency	By Report
A0120	Mini-bus, mountain area transports, or other transportation systems, non-emergency	By Report
A0130	Wheel-chair van, non-emergency	By Report
A0140	Air travel (private or commercial) intra or inter state, non- emergency	By Report
A0170	Transportation ancillary: parking fees, tolls, other	By Report
0304R	Vocational Retraining Plan Transportation (Taxi)	By Report
1270M	Independent Medical Examination (IME) Transportation (Taxi) Services	By Report



Link: For the legal definition of By Report (BR), see WAC 296-20-01002.



## Links to related topics

If you're looking for more information about	Then see
Administrative rules for ambulance services	Washington Administrative Code (WAC) 246-976
Becoming an L&I provider	Become A Provider on L&I's website
Billing instructions and forms	Chapter 2: Information for All Providers
<b>Fee schedules</b> for all healthcare professional services (including ambulance services)	Fee schedules on L&I's website

#### **Need more help?**

Call L&I's Provider Hotline at 1-800-848-0811 or email PHL@Ini.wa.gov