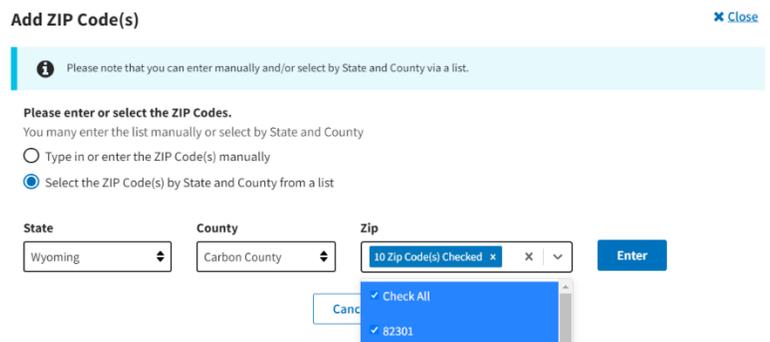


Medicare Ground Ambulance Data Collection System (GADCS): Rural and Super Rural Organizations Tip Sheet

Selected ground ambulance organizations must collect and report information to the Centers for Medicare & Medicaid Services (CMS) via the Medicare Ground Ambulance Data Collection System (GADCS). For more information, see [CMS' GADCS Frequently Asked Questions document](#).

CMS [defines](#) “urban,” “rural,” and “super rural” areas for the purpose of determining Medicare payment rates for ground ambulance services. It is critical that all types of ground ambulance organizations, including those serving rural and super rural areas, submit data. Complete and accurate information on all aspects of ground ambulance operations will help highlight geographic differences in costs, revenues, and services. This document covers six GADCS tips and common reporting scenarios for organizations serving these areas.

Tip #1: Use shortcuts to define service areas. Section 3 (Service Area) asks you to select the ZIP Code(s) that are part of your service areas. Rural and super rural organizations may have large service areas covering many ZIP Codes, and sometimes entire counties or states. If your organization’s service area covers many ZIP Codes or multiple counties, you can save time by selecting all the ZIP Codes within a county at once (as illustrated in the screenshot to the right) rather than selecting or typing each ZIP Code.



Tip #2: Let CMS know how your organization defines response time. The GADCS also asks for information on ground ambulance response times in Section 4 (Emergency Response Time), which is defined by default as “the time from when the call comes into dispatch to when the ground ambulance or another Emergency Medical Services (EMS) response vehicle arrives on the scene.” Rural and super rural organizations may have different ways of measuring response time. For example, some rural and super rural organizations receive calls from a central dispatch service. These organizations may use the time the call comes into their organization from dispatch, rather than the time the call comes into dispatch, as the response time starting point. The GADCS allows organizations to report response times measured however the organization already tracks this information. Section 4, Question 1 asks organizations to select either the GADCS default response time definition, or one of other common definitions, or write-in a definition.

Tip #3: Report the share of your responses that take twice as long your average response time. Many rural and super rural organizations must travel long distances or across difficult terrain to respond to calls for service. CMS is interested in understanding the extent of these “outlier” responses with unusually long response times. Section 4, Question 3 asks you to report the share of your responses that are greater than twice your organization’s average response time. The following example illustrates how to determine your organization’s answer to Section 4, Question 3. This is one of the few questions in the GADCS where a best guess rather than a precise calculation – is an acceptable response.

Example. Calculating share of responses that take more than twice the average response time.

# of Calls	Response Time	
12	5 minutes	 → 
5	15 minutes	 → 
3	45 minutes	 → 

This organization had 12 calls in town that each took 5 minutes, 5 calls at nearby farms that each took 15 minutes, and 3 calls in the nearby wilderness area that each took 45 minutes.

Average response time:
 $(12*5+5*15+3*45) / (12+5+3) = 13.5$ minutes
Twice the average response time:
 $13.5*2 = 27$ minutes

Tip #4: Correctly report your volunteer staff in Section 7.3 (Volunteer Staff) of the GADCS.

Rural and super rural organizations are more likely to use volunteer labor. Below are some Dos and Don'ts of reporting volunteer labor:

 Do . . .	Don't . . . 
<ul style="list-style-type: none"> Report the number of volunteer staff that support ground ambulance activities. Report the total number of volunteer hours worked supporting ground ambulance and other activities. Report costs associated with stipends, honoraria, benefits, and/or other expenses related to ground ambulance volunteer labor. 	<ul style="list-style-type: none"> Report time on call or spent fundraising in total hours worked. Attempt to calculate or report an estimated value of volunteer labor. Classify staff who transitioned from volunteer to paid staff during the data collection period as volunteer staff—they should be classified as paid staff.

Tip #5: Correctly classify your revenues in Section 13 (Revenues). The GADCS asks about several different sources of revenue. Below are some examples of revenue that rural and super rural organizations may receive and where to report them in the GADCS:

- Medicare add-on payments from transports that originate in rural or super rural areas: There is no separate question about Medicare Ambulance Fee Schedule (AFS) add-on payments in the GADCS. AFS add-on payments should be reported as part of Medicare revenue in Section 13, Question 3.
- Federal and state grants: Federal and state governments often provide grants to rural and super rural ground ambulance organizations for such purposes as training or infrastructure investment. These can be reported as "Special-Purpose Grants" in Section 13, Question 5.
- Local taxes: Please include any tax support from local governments under the "Local taxes earmarked for EMS services" source of revenue. If your organization is a fire-based or other public safety organization and general tax revenue covers its expenses, report the actual ground ambulance-related outlays from general tax revenue here, even if they were not initially earmarked for ground ambulance purposes.

Tip #6: If you are a Critical Access Hospital or Rural Emergency Hospital, review CMS' [Tips for Provider Organizations](#) to learn more about special considerations for hospital-based organizations.