



# Ground Ambulance & Patient Billing Advisory Committee

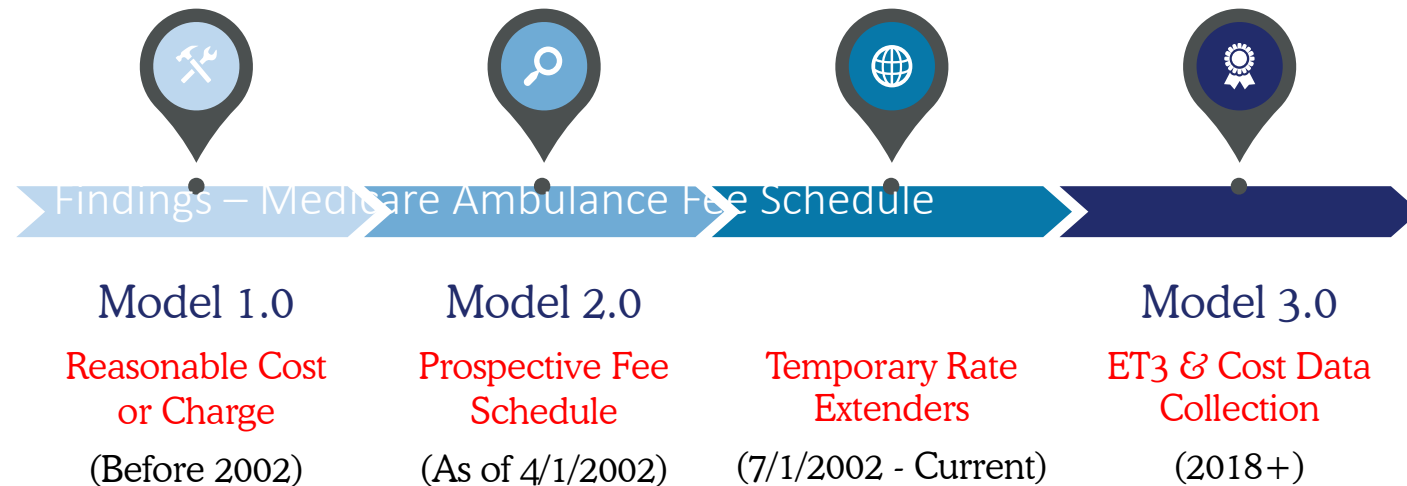
Key Findings



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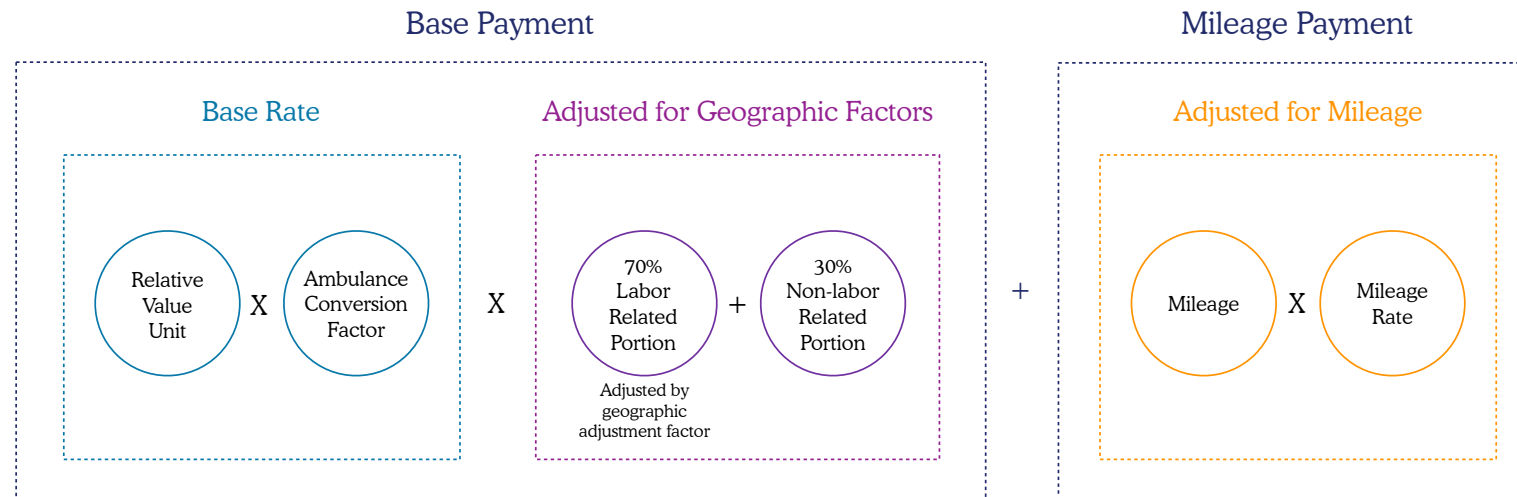
# Findings – Medicare Ambulance Fee Schedule

## Ambulance Payment Evolution



# Background – Medicare Ambulance Fee Schedule (1 of 2)

## Formulary for Total Fee Schedule Ambulance Payment



# Background – Medicare Ambulance Fee Schedule (2 of 2)



Public Law 115–123  
115th Congress

An Act

Feb. 9, 2018  
[H.R. 1892]

To amend title 4, United States Code, to provide for the flying of the flag at half-staff in the event of the death of a first responder in the line of duty.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Bipartisan Budget Act of 2018”.

Bipartisan  
Budget Act  
of 2018.  
42 USC 1305  
note.

# Background – Medicare Ambulance Fee Schedule (1 of 3)



Public Law 117–328  
117th Congress

## An Act

Making consolidated appropriations for the fiscal year ending September 30, 2023, and for providing emergency assistance for the situation in Ukraine, and for other purposes.

Dec. 29, 2022  
[H.R. 2617]

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

### SECTION 1. SHORT TITLE.

This Act may be cited as the “Consolidated Appropriations Act, 2023”.

Consolidated  
Appropriations  
Act, 2023.

# Background – Medicare Ambulance Fee Schedule (2 of 3)

## CMS Ground Ambulance Data Collection Instrument

### Organizational Characteristics

Section 2: Organizational Characteristics  
Section 3: Service Area  
Section 4: Emergency Response Time

### Services Provided

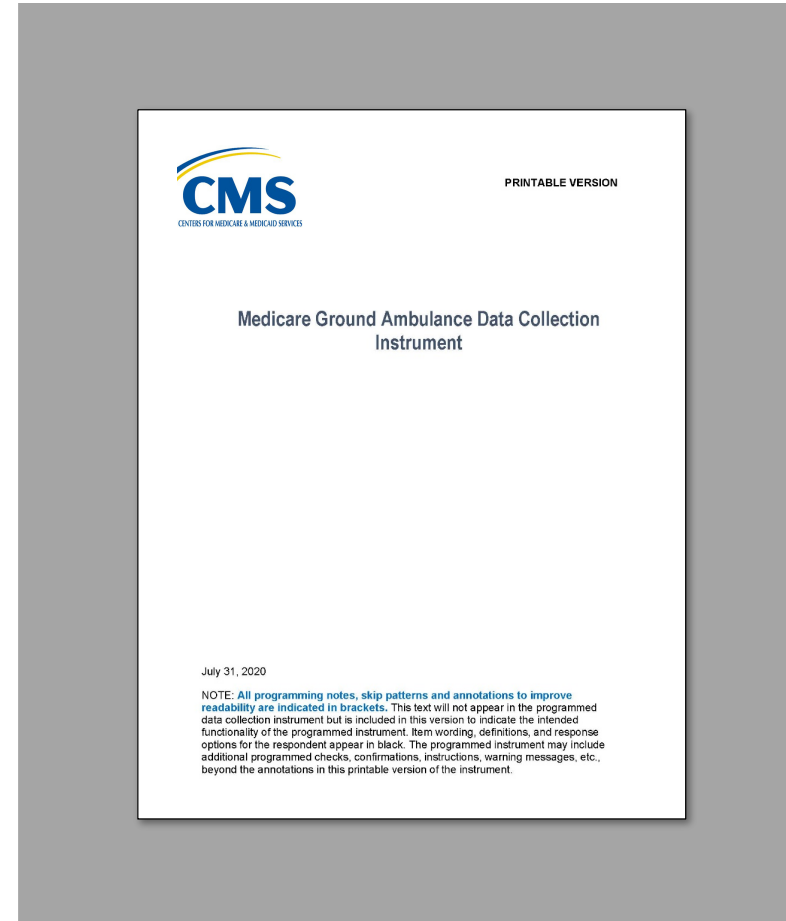
Section 5: Ground Ambulance Service Volume  
Section 6: Service Mix

### Information on Costs

Section 7: Labor Costs  
Section 8: Facilities Costs  
Section 9: Vehicle Costs  
Section 10: Equipment, Consumable, and Supply Costs  
Section 11: Other Costs  
Section 12: Total Costs

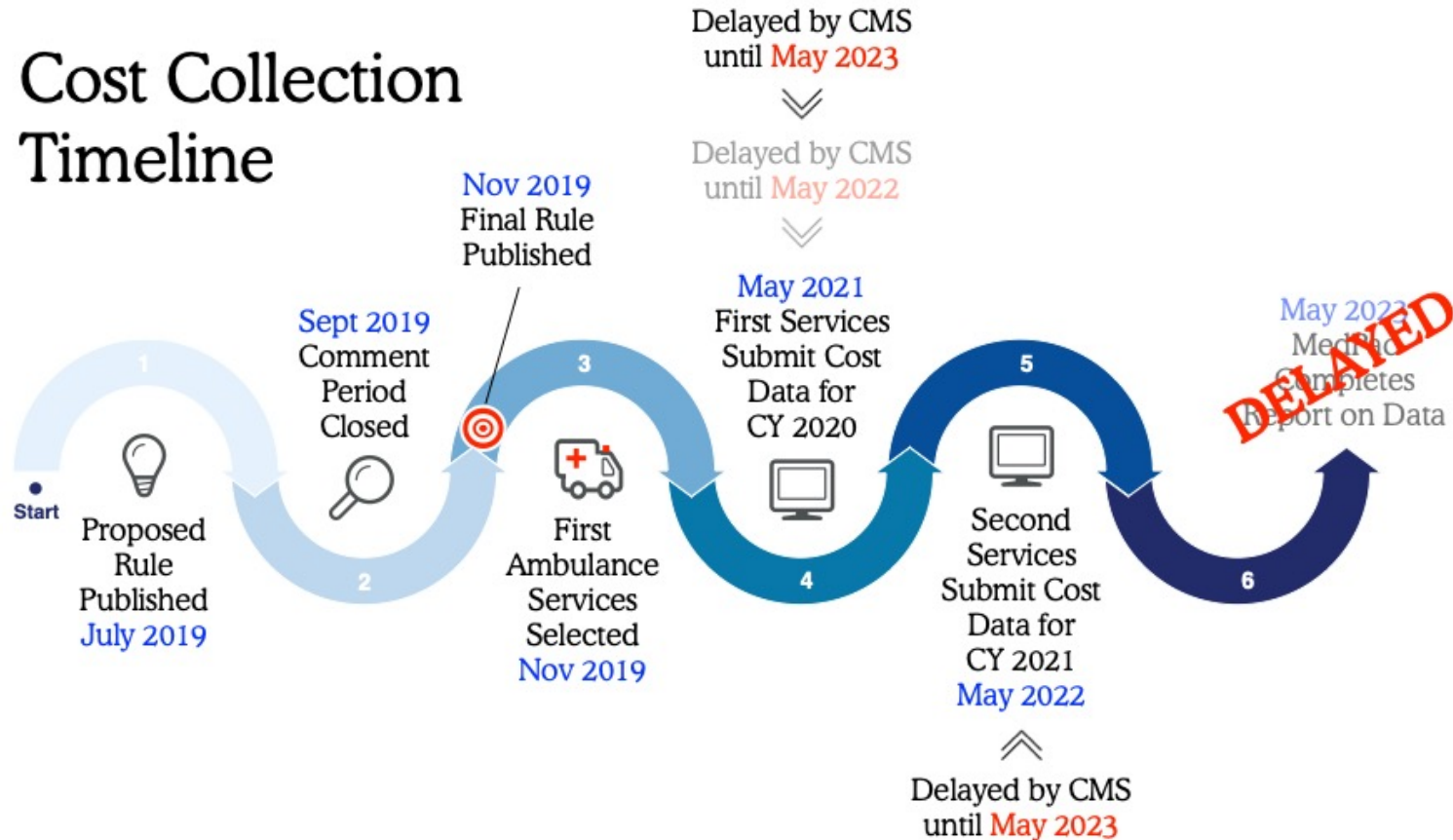
### Information on Revenue

Section 13: Revenues



The image shows the cover page of the CMS Medicare Ground Ambulance Data Collection Instrument. The page is white with a blue header bar at the top. On the left side of the header bar is the CMS logo (Centers for Medicare & Medicaid Services). On the right side of the header bar is the text "PRINTABLE VERSION". In the center of the page, the title "Medicare Ground Ambulance Data Collection Instrument" is displayed. At the bottom of the page, the date "July 31, 2020" is shown, followed by a note: "NOTE: All programming notes, skip patterns and annotations to improve readability are indicated in brackets. This text will not appear in the programmed data collection instrument but is included in this version to indicate the intended functionality of the programmed instrument. Item wording, definitions, and response options for the respondent appear in black. The programmed instrument may include additional programmed checks, confirmations, instructions, warning messages, etc., beyond the annotations in this printable version of the instrument."

# Background – Medicare Ambulance Fee Schedule (3 of 3)



# Key Finding #1

Congress should work with stakeholders once the data from the Ground Ambulance Data Collection System and Medicare Payment Advisory Commission (MedPAC) reports are available to modernize the Medicare ground ambulance benefit.

# Key Finding #2

Congress should establish a standing advisory committee to evaluate expanding coverage and reimbursement of ground ambulance services beyond transports under the Social Security Act to include:

- Community Paramedicine
- Advanced Life Support, First Response
- High-cost drugs and medical equipment
- Oxygen and other ancillary supplies

# Key Finding #3

Congress and the Secretary of Health and Human Services should evaluate and limit the Medicare beneficiary out-of-pocket obligations for ground ambulance emergency and non-emergency services under the Medicare Part C or Medicare replacement programs.

The committee received numerous public comments related to this consumer protection that a maximum out-of-pocket (e.g., \$50-\$100) should be established for ground ambulance emergency and non-emergency medical services.

# Key Finding #4

Congress and the Secretary of Health and Human Services should consider evaluating the cost and reimbursement of services under the Social Security Act for those ground ambulance service providers and suppliers in rural, super-rural, and medical-underserved areas.

Numerous presentations and public comments were received related to this topic. Congress should also consider the MedPAC June 2016 *Report to the Congress* that suggested incentivizing continued operations in rural and underserved areas by having Medicare pay prospective rates for primary care visits and ambulance services, as well as provide an annual grant or fixed payment to support the capital costs to support the standby costs of the ambulance service and uncompensated care costs.