Ground Ambulance Fee Schedule

Effective for services incurred on or after October 1, 2001, PEIA's reimbursement for medically necessary ground ambulance transportation will comprise a base rate + mileage. The base rate includes all medically necessary items and services (e.g., supplies, drugs, extra attendants) furnished during or in connection with transport. Charges for oxygen, code A0422, will be reimbursed only when billed in conjunction with non-emergency BLS, emergency BLS and non-emergency ALS services. Charges for ground ambulance services must be submitted using the following codes:

Code	Description	Maximum Allowance October 1,2001	Reimbursement for Oxygen, Code A0422
BLS Services			
A0428	BLS nonemergency*	112.50	25.00 per unit up to a maximum of 4 units
A0429	BLS emergency	112.50	25.00 per unit up to a maximum of 4 units
ALS Services			
A0426	ALS nonemergency*	112.50	25.00 per unit up to a maximum of 4 units
A0427	ALS emergency	377.50	N/A
A0433	ALS level 2	377.50	N/A
A0434	Specialty Care Transport**	477.50	N/A
Mileage			
A0425	Ground Mileage	5.00 per mile	N/A
* PEIA covers medica	llv necessary, non-emergency t	ransportation from a hospital t	o the nearest facility able to

* PEIA covers medically necessary, non-emergency transportation from a hospital to the nearest facility able to provide services not available at the transferring hospital or facility, for a patient who is bed-confined at the time the service is provided. To be considered bed-confined, the patient must meet ALL of the following criteria:

• Unable to get up from bed without assistance AND

• Unable to ambulate AND

• Unable to sit in a chair or wheelchair.

**Requires submission of supportive documentation

PEIA expects ground ambulance providers to bill using the charges on file with the WV Office of Emergency Medical Services (OEMS) at the time the service is incurred. Be sure to choose the 2001 HCPCS code that describes the level of ground ambulance service provided to the patient for the situation, either emergency or non-emergency. An emergency service is one provided after an acute medical condition resulting from injury, sickness, pregnancy, or mental illness arises suddenly and unexpectedly and requires immediate care and treatment to prevent death, severe disability, or impairment of bodily function.

The HCPCS two character modifiers should be used to identify the origin and destination for transportation services. The first character is the origin (from) and the second character is the destination (to) of the trip. Some common modifiers include:

D - Diagnostic or therapeutic site

- E Residential, domiciliary, custodial facility
- G Hospital-based dialysis facility
- H Hospital
- I Site of transfer between modes of ambulance transport
- J Non-hospital based dialysis facility
- N Skilled nursing facility (SNF)
- P Physician's office
- R Residence
- S Scene of accident or acute event

Some common modifier combinations include:

EH - From an ECF to hospital

HE - From hospital to ECF

PH - From a physician's office to a hospital

RH - From a patient's residence to a hospital

SH - From the scene of an accident to a hospital

XT - May be added to other modifiers (in the first position) for a second trip in the same day for the same patient