Specialty Billing Training

Emergency Medical Transportation (EMT)

Health First Colorado
(Colorado's Medicaid Program)

Navigating This Presentation

- Underlined words or phrases often will link viewers to more information, such as web pages. If you are viewing this presentation in normal mode (not slideshow mode), you may need to press the Ctrl key while you click on the link in order to open it.

- Use color-coded table of contents slides to navigate to specific areas of interest in the presentation.
  - Use back arrows provided in the bottom right corner of some slides to return to table of contents slides.

Agenda

Introduction

Provider Enrollment

Benefit Overview

Billing & Payment

Resources

Introduction

Introduction
Emergency Medical Transportation (EMT)

- Transportation benefit for members who have a critical or unknown illness or injury

- Illness or injury demands immediate attention to prevent permanent injury or loss of life

Provider Enrollment

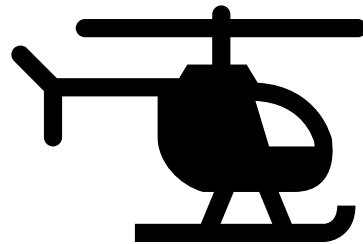# Provider Enrollment
Eligible Providers

- **Air Ambulance**
  - Provider type 13, specialty code 086
  - Licensed and/or authorized by Colorado Department of Public Health and Environment (CDPHE)

- **Ground Ambulance - County Agency, Non-Metro Area**
  - Provider type 13, specialty code 124
  - Licensed and/or authorized by CDPHE

- **Ground Ambulance - Emergency**
  - Provider type 13, specialty code 324
  - Licensed and/or authorized by CDPHE

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Provider Enrollment
Enrollment Requirements

Air Ambulance

- Enrollment Type = Facility
- Provider Type 13, Specialty Code 086

- Must enroll with organization's federal Employer Identification Number (EIN)
- National Provider Identifier (NPI), license and malpractice/liability insurance information must be entered in the application
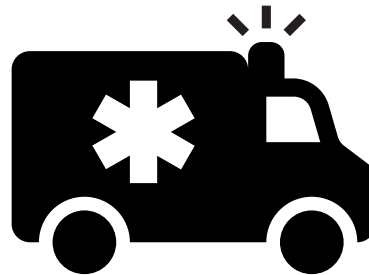
Ground Ambulance

- Enrollment Type = Facility
- Provider Type 13, Specialty Code 124 or 324

- Must enroll with organization's federal Employer Identification Number (EIN)
- National Provider Identifier (NPI), license and malpractice/liability insurance information must be entered in the application

Benefit Overview

Benefit Overview
Member Eligibility

- Emergency Medical Transportation (EMT) is a benefit for all Health First Colorado members who have a critical or unknown illness or injury

  - Eligibility for EMT services are not limited in the same way as Non-Emergent Medical Transportation (NEMT) services

- Prior authorization is not required for:

  - Ground and air ambulance in emergency situations

  - In-state hospital to hospital transport, including critical care cases

Benefit Overview
Covered Services: Air Ambulance

Covered when point of pickup is inaccessible by a land vehicle or remoteness or other obstacles prohibit transporting the member by land to the nearest appropriate medical facility

Air ambulance

- Transportation to the closest, most appropriate facility

- Basic or advanced life support that is required during transport

- Critical Care Transportation - facility to facility transport requiring medical care above that offered via Non-Emergent Medical Transportation (NEMT)

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Ground ambulance

- Transportation to the closest, most appropriate facility

- Basic or advanced life support that is required during transport

- Critical Care Transportation: facility-to-facility transport requiring medical care beyond that offered via Non-Emergent Medical Transportation (NEMT)

Benefit Overview
Exclusions

The following services are not reimbursable by Health First Colorado:

- Waiting time, cancellations or unapproved additional passengers
- Response calls to emergency locations when no transportation is needed or approved
- Charges when the member is not in the vehicle
- Non-benefit services provided at the scene when transportation is not necessary
- Transportation which is covered by another entity

Benefit Overview
Exclusions

The following services are not reimbursable by Health First Colorado (continued):

- Transportation to local treatment programs not enrolled as a Health First Colorado provider
- Transportation of a member who has been pronounced deceased at the time that the ambulance arrives
- Pick up or delivery of prescriptions and/or supplies
- Transportation arranged for a member's convenience when there is no reasonable risk of permanent injury or loss of life
- Transportation to non-emergency medical appointments

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Billing & Payment

Billing
Claims Submission

Emergency Medical Transportation (EMT) services must be billed using the CMS 1500 professional claims form or the 837 Professional (837P) transaction

Claims should be submitted to the Fiscal Agent (Gainwell Technologies)

Billing
Place of Service Codes & Modifiers

- Centers for Medicare & Medicaid Services (CMS) place of service codes for Emergency Medical Transportation (EMT):
  - 41 – land transportation
  - 42 – air transportation

- EMT modifiers for multiple trips:
  - **Modifier 76**: One member taking multiple trips in the same day with the **same** rendering provider
  - **Modifier 77**: One member taking multiple trips in the same day with **different** rendering providers

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Billing
Dates of Service

- Two dates of service are required on each detail line
  1. "From" Date of Service (FDOS)
  2. "To" Date of Service (TDOS)

- Both dates must be completed on electronic record

- For services rendered on a single date, complete the FDOS and the TDOS with the same date

Billing
EMG (Emergency) Indicator

- Emergency Indicator is used to differentiate some Emergency Medical Transportation (EMT) services from Non-Emergent Medical Transportation (NEMT)

- "Y" must be entered to indicate service was EMT
  - Blank defaults to Not Sure, indicating the service was NEMT
  - Failure to enter a Y may result in a claim denial
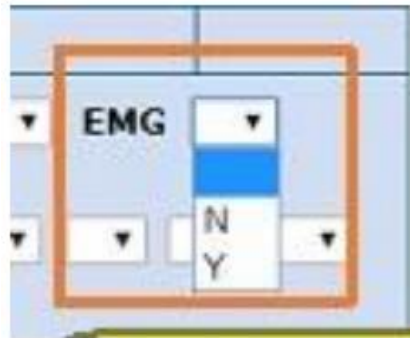
Billing
Transportation Certification

- Emergency Medical Transportation providers should click "Yes" for the field "Transport Certification" on the Provider Web Portal
  - "Yes" response expands additional required fields (shown below)

Billing
Transport Certification

"Condition Indicator" options:

- Patient was admitted to a hospital
- Patient was moved by stretcher
- Patient was unconscious or in shock
- Patient was transported in an emergency situation
- Patient had to be physically restrained
- Patient had visible hemorrhaging
- Ambulance service was medically necessary
- Patient is confined to a bed or chair

Billing
Transport Certification

"**Ambulance Transport Reason Code"** options:

- Patient was transported to nearest facility for care of symptoms, complaints or both
- Patient was transported for the benefit of a preferred physician
- Patient was transported for the nearness of family members
- Patient was transported for the care of a specialist or for availability of specialized equipment
- Patient transferred to rehabilitation facility

Resources

Resources

For Our Providers web pages: https://hcpf.colorado.gov/our-providers

The **General Provider Information Manual** is an overview of the program, including billing and policy information

The **Emergency Medical Transportation Billing Manual** provides specific guidance for the benefit

Fee Schedule web page

Provider Contacts web page

Reminders

- Remember to sign up for Department of Health Care Policy & Financing communications by visiting the website and clicking "For Our Providers" and then "What's new: Bulletins, updates & emails." Be sure to sign up for Provider Types 00 and 13.

- Interested in more training? Sign up or view training materials by visiting the website and clicking "Provider Resources" and then "Provider Training." Presentations are listed under the calendar in the "Billing Training – Resources" section.

What's new: Bulletins, updates & emails

Provider Training
Click to Access

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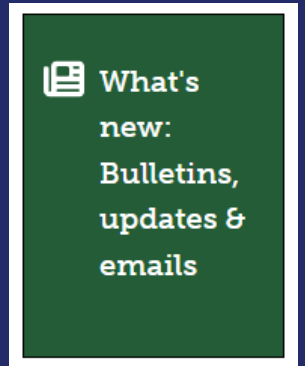
hcpf.colorado.gov/our-providers

Where can I find...?

For Our Providers

- Enrollment forms
- Revalidation dates spreadsheet
- National Provider Identifier (NPI) information
- Provider types

- Fee schedules
- General Provider Information manual
- Billing manuals & appendices
- Forms
  - Prior Authorization Requests (PARs)
  - Load letters
  - Request to use paper claim form

? Why should you become a provider?

Provider enrollment

Provider services: Forms, rates, & billing manuals

What's new: Bulletins, updates & emails

- Newsletters
- What's New?

Where can I...?

- Check member eligibility
- Submit claims
- Review Prior Authorization Requests (PARs)
- Receive Remittance Advices (RAs)
- Complete provider maintenance requests

CBMS: CO Benefits Management System

Long-Term Services and Supports

Web portal

Revalidation

? Provider contacts: Who to call for help

Provider resources: Quick guides, known issues, EDI, & training

- Quick Guides for Web Portal
- Known issues
- EDI Support
- Training registration
- Information about
  - Accountable Care Collaborative & RAEs
  - Co-Pays
  - EVV

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COVID-19 Provider Information | Resources for HCBS Providers

SAVE System | ColoradoPAR | DDDWeb | Value Based Payments

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Thank you!