



Overview of the Medicare Ground Ambulance Data Collection System (GADCS)

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Introduction



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Agenda

1. GADCS Overview and Key Concepts
2. GADCS Section-by-Section Walkthrough
3. User Accounts, Logging In, and Linking to Your Organization
4. Submitting and Certifying Your Data
5. CMS GADCS Resources
6. Question & Answer Session (Q&A), 30-Minutes
7. CMS Concluding Remarks

GADCS Overview and Key Concepts



Andrew Mulcahy

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Why collect this information?

- Few data sources provide information on the costs involved in furnishing ground ambulance services.
- Section 1834(l)(17) of the Social Security Act (SSA; “the Act”) requires CMS to collect cost, revenue, utilization, and other information from representative samples of ground ambulance providers and suppliers (“organizations”).
- CMS developed the GADCS to meet section 1834(l)(17) of the Act requirements.
- Congress required the Medicare Payment Advisory Commission (MedPAC) to study GADCS data and deliver a Report to Congress on topics including the adequacy of payments for ground ambulance services (section 1834(l)(17)(F) of the Act).

What is the GADCS?

The GADCS:

Is a new data collection system required by Congress

Collects information related to ground ambulance organization costs, revenue, and utilization

Contains a web-based portal and a set of questions and instructions (the “instrument”)

Will collect data to be used by the Medicare Payment Advisory Commission (MedPAC) to assess the adequacy of Medicare payment for ground ambulance services

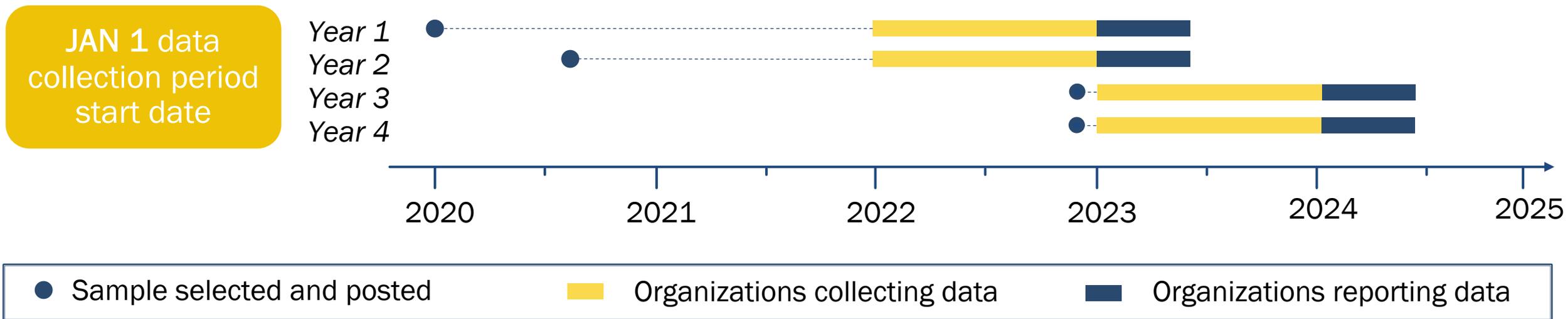
Is required for selected ground ambulance organizations

How were organizations selected?

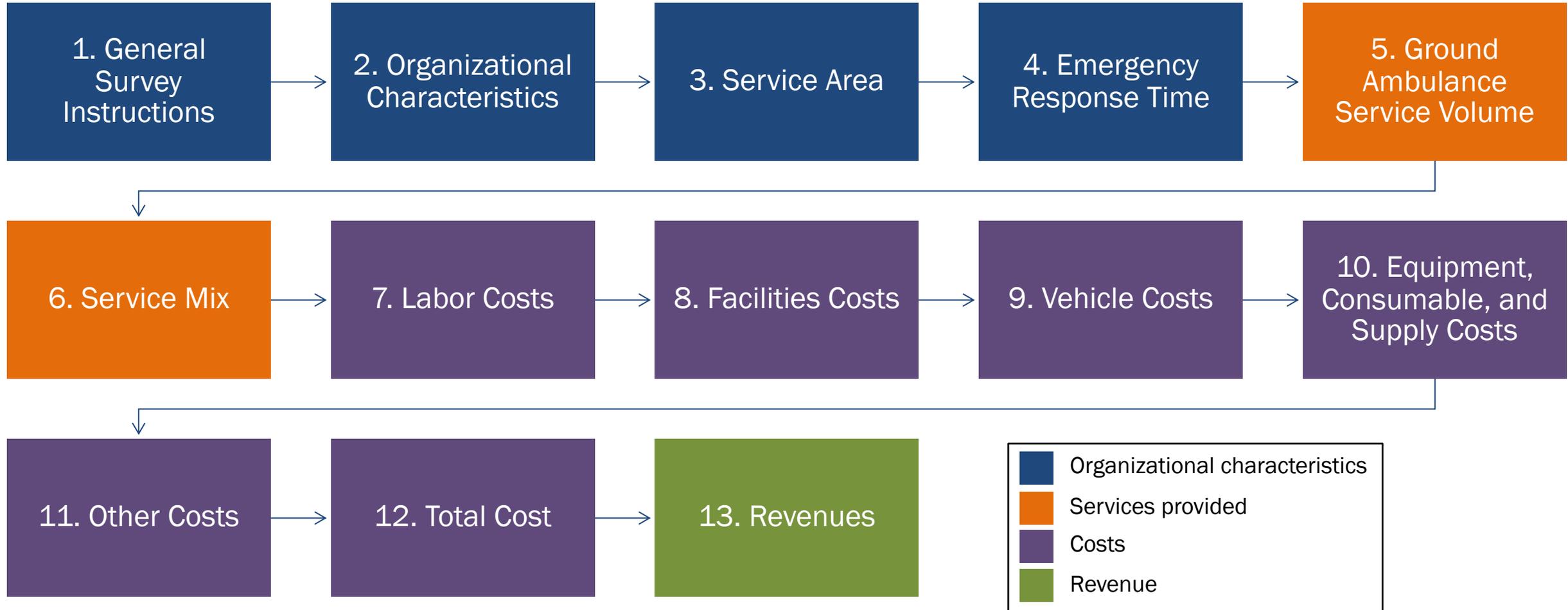
- Medicare randomly sampled ground ambulance organizations into four annual GADCS cohorts (“Year 1” through “Year 4”).
 - National Provider IDs (NPIs) drive both sampling and the GADCS reporting requirement
 - NPIs are eligible for selection if they have Medicare ground ambulance claims in prior years
 - Each of the four annual cohorts include roughly 2,500 NPIs
- Lists of ground ambulance providers and suppliers selected to submit data in Y1-Y4 can be found at: <https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html>.

When do organizations have to collect and report information?

- Data Collection Period: Sampled organizations must **collect** required information over a continuous 12-month period. Organizations may start their data collection period on January 1 (illustrated below) or at the start of their fiscal year (see GADCS FAQ for examples).
- Data Reporting Period: Sampled organizations will then **report** (that is, submit and certify) information to CMS during a continuous 5-month period beginning immediately after the end of the organization's data collection period.



What information needs to be collected and reported?



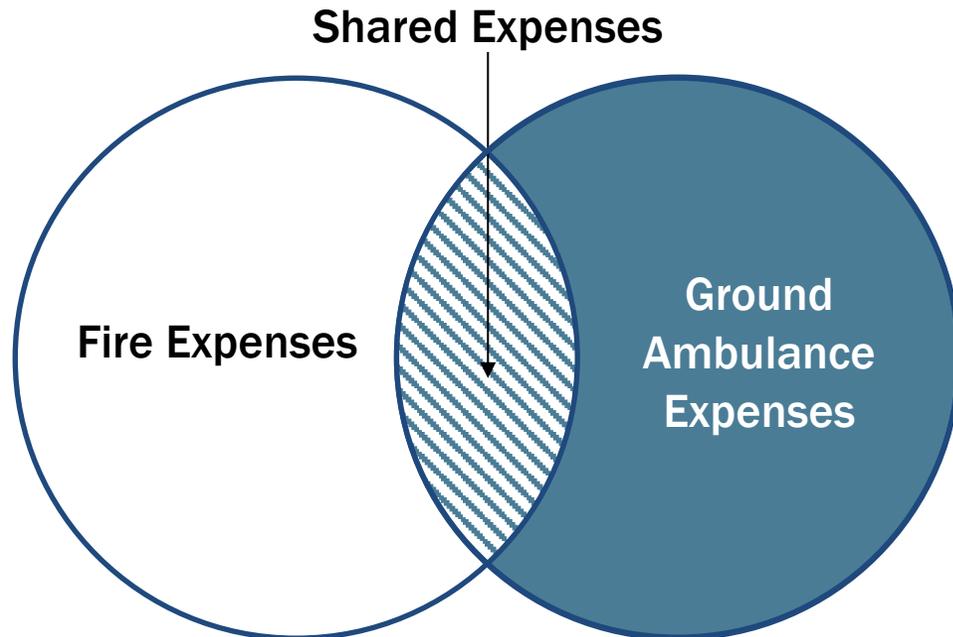
General Principles for Collecting and Reporting Information

- Unless otherwise specified, report on all ground ambulance services, costs, and revenue, not just Medicare services, costs, and revenue.
- Report each cost and revenue item only once. Do not double count as that will result in overstating of cost and/or revenue information.
- Report on services, costs, and revenue tallied over your organization's entire 12-month data collection period.
- Unless specified in the instructions, do not report estimates or “best guesses.”
- Your organization will need to collect cost information from outside your ground ambulance organization in some cases (e.g., if your municipality pays for facilities, utilities, or benefits).

Some organizations will have costs and revenue that are out-of-scope

Expenses and revenue unrelated to ground ambulance operations must not be reported

Organizations “allocate” a portion of shared expenses and revenue to be reported via GADCS:



Specific collection and reporting instructions apply to:

- Fire department-based ground ambulance organizations
- Police department-based or other public safety-based ground ambulance organizations
- Ground ambulance organizations that also offer air ambulance services
- Ground ambulance organizations that are providers of other health care services
- Fundraising

GADCS Section-by-Section Walkthrough



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Section 2: Organizational Characteristics

- Whether your ground ambulance organization bills using one or more National Provider Identifiers (NPI) for some or all of the data collection period
- Organization name and contact information
- Ownership type (for-profit, non-profit, government, public-private partnership)
- Services other than ground ambulance services (e.g., fire, police, hospital, air ambulance)
- Whether your organization uses volunteer labor
- Staffing model
- Whether your organization contracts out core ground ambulance functions

Reminder: Responses in this section will help tailor later questions to be more relevant to your organization

Section 3: Service Areas

- Average time on task in primary/secondary service areas
- ZIP codes which comprise your primary and secondary (if applicable) service areas

Primary Service Area: The area in which you are exclusively or primarily responsible for providing service at one or more levels and where it is highly likely that the majority of your pickups occur

Secondary Service Area: Other areas where you regularly provide services through mutual or auto-aid agreements

- Do not report areas where your organization provides services only under exceptional circumstances

Defining Your Service Area

- When defining your primary and secondary service areas, you have the option of typing or copying and pasting a list of ZIP codes or selecting ZIP codes by state and county from a list

Data Collection System

Add ZIP Code(s) ✕ Close

i Please note that you can enter manually and/or select by State and County via a list.

Please enter or select the ZIP Codes.
You may enter the list manually or select by State and County

Type in or enter the ZIP Code(s) manually
 Select the ZIP Code(s) by State and County from a list

Enter the 5-digit ZIP Codes
Use a comma, semicolon or space to separate multiple ZIP Codes

21201 21202 21203 21204 21205 21206 21207 21208

Enter

Cancel **Add**

Data Collection System

Add ZIP Code(s) ✕ Close

i Please note that you can enter manually and/or select by State and County via a list.

Please enter or select the ZIP Codes.
You may enter the list manually or select by State and County

Type in or enter the ZIP Code(s) manually
 Select the ZIP Code(s) by State and County from a list

State **County** **Zip**

Maryland Baltimore city 23 Zip Code(s) Checked ✕ ✕

Enter

Cancel **Add**

Add Zip Code(s)

Section 4: Emergency Response Time

For Organizations with emergency medical services (EMS) responses:

- How your organization tracks response times
- Average response times in primary/secondary service areas
- Whether your organization is required or incentivized to meet response time targets
- Share of EMS responses greater than twice the average response time

Example:

- An organization has 10 responses with the following response times (in minutes): 1, 2, 2, 2, 2, 3, 3, 3, 4, 10
- The average response time is $(1+2+2+2+2+3+3+3+4+10)/10=3.2$ minutes
- Two responses (4 and 10) take longer than the average. $2/10=20\%$

Section 5: Ground Ambulance Service Volume

- Collect and report the number of:
 - Total responses for all calls for service (including fire/police-only and interfacility transports)
 - Ground ambulance responses
 - Responses that did not result in a transport
 - Total transports
 - Transports paid in full or in part by an insurer and/or patient by the time data is reported
 - Standby events
 - Paramedic intercepts

Reminder: Report counts of services over your organization's entire data collection period. Report counts of *total services*, not just Medicare services.

Section 6: Service Mix

- Report the share of ground ambulance responses that:
 - Were emergency versus non-emergency
 - Involved response staff from another organization
 - Were in your primary service area
- Report the share of ground ambulance transports:
 - By Healthcare Common Procedure Coding System (HCPCS) code
 - That were to and from a hospital or other provider (i.e., interfacility transports)

Section 7: Labor Costs

- Whether your organization uses paid and/or volunteer staff in specific categories:
 - Emergency medical technicians (EMTs)/EMT-Paramedics
 - Other response staff categories
 - Specific administration/facility categories
 - Medical director
- Total annual hours worked and compensation for paid staff by staff category
- Whether your organization has staff performing specific roles such as billing, data analysis, training, and medical quality assurance more than half-time

Reminder: Report hours worked and compensation *only once* for each staff member. Do not double count the same person in multiple staff categories.

Reporting Volunteer Labor

- Volunteer labor is reported separately from paid labor
- You will report:
 - Your organization’s total number of volunteers by category.
 - Total hours worked annually by category.
 - Any costs associated with volunteers (e.g., stipends, etc.)

7. Labor Costs

[Section 7 Instructions](#)

This question asks whether your organization used paid and volunteer staff in different categories during your organization's data collection period. Later questions will ask you about the total compensation and hours worked by staff in categories that are relevant to your organization. Please review the following instructions before completing the table below.

[Review the instructions](#)

1. Please indicate if your organization has paid staff (full and/or part time) and/or used volunteer staff in each of the following categories during your organization's data collection period (check all that apply).

Staff Category	<u>Paid staff without role(s) supporting public safety</u>	<u>Volunteer staff without role(s) supporting public safety</u>	<u>Paid staff with role(s) supporting public safety</u>	<u>Volunteer staff with role(s) supporting public safety</u>
EMT/Response Staff				
<u>EMT - Basic</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>EMT - Intermediate</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>EMT - Paramedic</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nurse, doctor, or other medical staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Medical Responder (EMR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Ambulance Driver (non-EMT/EMR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Director	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 The next page will ask you about Administration/Facilities Staff

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Staffing and Labor Costs – Other Special Cases

Fire, police, or other public safety department-based organizations

- Total annual hours worked by category related to fire/police/public safety duties

Organizations offering services other than ground ambulance services

- Total annual hours related to responsibilities other than ground ambulance, fire/police/public safety duties, by labor category

Organizations that use more than one NPI to bill for Medicare

- Allocated compensation for administrative/facilities staff

Section 8: Facilities Costs

- Number of facilities occupied by your organization
- Square footage for each facility and the share of each facility that is dedicated to ground ambulance services
- Ownership status of each facility (e.g., owned, rented/leased)
- Annual lease, mortgage, or depreciation costs for each facility as applicable
- Facilities-related insurance costs, maintenance and improvement costs, utility costs, and taxes for all facilities combined

Section 9: Vehicle Costs

- Number of ambulance and non-ambulance vehicles owned or leased by your organization
- Total miles traveled (any reason)
- Ownership status of each vehicle (owned, rented, donated)
- License, maintenance, and insurance costs
- Lease, purchase, or depreciation costs

Reminder: Only report vehicle purchase costs if your organization does not depreciate vehicle costs AND the vehicle was purchased in full during the data collection period.

Section 10: Equipment, Consumable, and Supply Costs

- Depreciation, maintenance, certification, and service costs for capital equipment
- Medication costs or reasons for no medication costs (e.g., hospital provides, donated)
- Supplies and consumables costs
- Reporting for equipment and supplies separated by medical and non-medical costs

Section 11: Other Costs

- Whether your organization contracts for billing, accounting, vehicle maintenance and repair, dispatch and call center, facilities maintenance, or information technology services.
 - If so, the annual cost for the service and the share associated with ground ambulance services.
 - You will report a single cost for contracted services in each category.
- Whether your organization has any other costs related to ground ambulance services not reported elsewhere.
 - While the instrument lists many categories, you may also enter your own categories, if necessary, to ensure all costs are reported.

Section 12: Total Cost

- Your organization's total costs, including costs unrelated to ground ambulance services.
- We are asking for your organization's total costs in one separate question at the end of the cost section in the data collection instrument.

12. Total Cost [Section 12 Instructions](#)

1. Please provide the total expenses of your NPI during your organization's data collection period. The total expenses reported here should include all operating and capital costs (including costs for services not related to ground ambulance services). If applicable, include an allocated portion of your parent organization (or "central office") costs when reporting total costs in this question.

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- End of Section 12: Total Cost -

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Section 13: Revenues

- Revenue from different categories of health care payers:
 - Traditional (fee-for-service) Medicare
 - Medicare Advantage (i.e., Medicare managed care)
 - Traditional (fee-for-service) Medicaid
 - Medicaid managed care
 - TRICARE
 - Veteran's Health Administration
 - Commercial insurance
 - Workers' compensation
 - Patient self-pay.
- Whether patient cost sharing is included in the amount you report for each payer category or in the patient self-pay category.
- Whether you routinely bill for transports of patients with different sources of coverage. The specific categories are the same as those listed above.

Revenue from Other Sources and Total Revenue

- Whether your organization realized ground revenue from any other sources, including but not limited to:
 - Tax-based or other revenue from municipalities
 - Contracted services
 - Donations
- Your organization's total revenue, including revenue unrelated to ground ambulance services.

User Accounts, Logging In, and Linking to Your Organization

Michelle Berman

Data Computer Corporation of America (DCCA)

GADCS Portal Security Requirements

- New users are required to complete the Remote Identity Proofing (RIDP) process. The Experian Identity Verification service is part of the remote identity proofing steps and is a necessary part of requesting access to the system. The Experian questions are intended as a means to verify that the user requesting access to the application is who they say they are.
- Identity verification is a fraud prevention measure and protects both the user, the user's organization, and CMS from fraudulent attempts to access the system. No one at CMS has access to a user's personal information, and the identity-proofing process does not effect the user's credit report. The information is strictly used for identity verification.
- **Additional information on access to CMS systems and Identity Management System (or IDM):** <https://www.cms.gov/data-research/cms-information-technology/access-cms-data-application/access-cms-systems-idm-system>

Registration and Role Request GADCS Online, Web-Based Portal

Medicare Ground Ambulance Data Collection System (GADCS) Quick Tips on Registration and Requesting Access to the GADCS Portal:

[Quick tips for registration and requesting access to GADCS](#)

- How and Where to go to Register for a CMS IDM Account (For New Users)
- Register a Multi-Factor Authentication (MFA Device) for New Users
- Request Access to the online, web-based GADCS Portal
- Login Using MFA
- Link Your Account to an NPI (New User)

Available System Roles

- **GADCS Submitter** can enter collected information in response to GADCS questions.
- **GADCS Certifier** can review the information entered by the GADCS Submitter to ensure it is correct and complete. The Certifier will then certify the submission of the reported data. The Certifier should be the person in your organization with the most knowledge of your organization's costs and revenues.

Submitting and Certifying Your Data

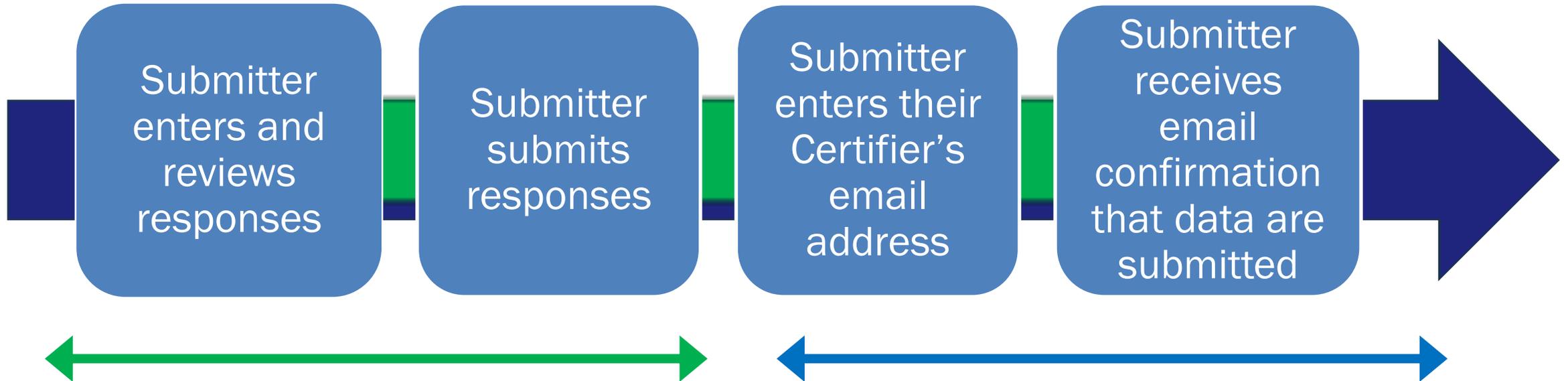


Michelle Berman

Data Computer Corporation of America (DCCA)

GADCS Submission Process

“Enter your Data into the GADCS Portal”



(1) Once the **Submitter** enters all data, the GADCS Portal will prompt for your organization's **Certifier** email address. CMS does not certify an organization's submission.

(2) Your organization's **Certifier** will receive an email confirmation that the data is ready to be reviewed.

GADCS Certification Process

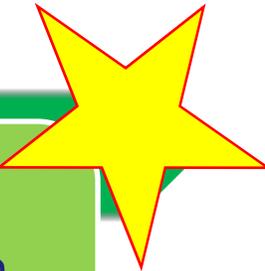
“Certify Data is Accurate in the Portal”

Certifier receives notification that responses are submitted and ready for review

Certifier reviews responses in the online GADCS Portal

Certifier approves that responses are accurate

Certifier receives email confirmation that their submission is certified



Important: Your GADCS requirement is not complete until you ‘Submit’ and ‘Certify’ your responses!

GADCS Rejection Process

“Data is Rejected to be Corrected”

Certifier receives notification that responses are submitted and ready for review

Certifier reviews responses in the online GADCS Portal

Certifier rejects submission because it needs to be corrected

Submitter receives email confirmation that responses need to be corrected

Submitter corrects responses and re-submits to Certifier

Certifier receives email notification, reviews and certifies responses are accurate

Certifier receives email notification that responses are certified

Important: Your GADCS requirement is not complete until you ‘Submit’ and ‘Certify’ your responses!

CMS GADCS Resources



Sara Heins

The RAND Corporation

GADCS Instrument and System Access Resources

- CMS posted a GADCS user guide with detailed instructions on using the GADCS portal.
- CMS posted a “Quick Tips on Registration and Requesting Access” guide.
- CMS posted printable versions of the data collection instrument in English and Spanish.
- These resources can be found on the GADCS website:
<https://www.cms.gov/medicare/payment/fee-schedules/ambulance/medicare-ground-ambulance-data-collection-system>.

CMS Education Resources

- CMS posted an FAQ that is periodically updated.
- CMS posted a “Quick Reference Guide”—a list of required information to be collected from ambulance organizations.
- CMS posted a detailed video walkthrough of the GADCS
- CMS posted “tip sheets” on:
 - Allocating costs and revenues
 - Reporting expenses for contracted services
 - Reporting for public safety organizations
 - Reporting for government-based organizations
 - Reporting for provider organizations
- These resources can be found on the GADCS website: <https://www.cms.gov/medicare/payment/fee-schedules/ambulance/medicare-ground-ambulance-data-collection-system>.

GADCS Inquiries

- CMS is planning on providing additional GADCS sessions. Please check the Ambulances Events website for updates and to view past webinars: <https://www.cms.gov/medicare/payment/fee-schedules/ambulance-fee-schedule/ambulance-events>.
- Contact AmbulanceDataCollection@cms.hhs.gov for ground ambulance data collection inquiries and please be sure to include your NPI in your email.
- For technical questions regarding the GADCS online portal, please email gadcshelpdesk@dcca.com.

Question & Answer Session (Q&A)

30-Minutes



CMS Concluding Remarks



Maria Durham

Director, Division of Data Analysis and Market Based Pricing (DDAMBP)