



Ground Ambulance & Patient Billing Advisory Committee

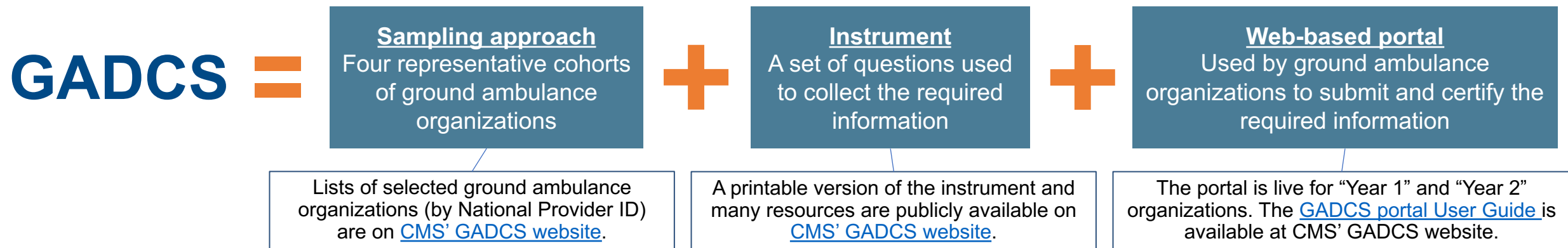
Overview of the Medicare Ground Ambulance Data Collection System (GADCS)



Maria Durham, Director
Andrew Mulcahy, PhD MPP, The RAND Corporation

What is the GADCS?

- Section 1834(l)(17) of the Social Security Act requires CMS to collect cost, revenue and other information from representative samples of ground ambulance providers and suppliers (“organizations”).
- CMS developed the Medicare Ground Ambulance Data Collection System (GADCS) to meet the Section 1834(l)(17) requirements.
- The GADCS consists of three interconnected components:



Why Collect This Information?

- Few data sources provide information on the costs involved in furnishing ground ambulance services
- Congress required the Medicare Payment Advisory Commission (MedPAC) study of GADCS data and deliver a Report to Congress on (from Sec. 1834(l)(17) of the Act):
 - An analysis of information submitted through the data collection system
 - The **adequacy of payments for ground ambulance services** under this subsection, and geographic variations in the cost of furnishing such services
 - An analysis of any burden on providers and suppliers of ground ambulance services associated with the data collection system
 - A recommendation as to whether information should continue to be submitted through such data collection system or if such system should be revised
 - Other information determined appropriate by the Commission

Selecting Organizations

- CMS used a random sampling approach to select four annual cohorts of organizations
 - CMS' approach stratified by provider vs. supplier status, ownership category, service area population density, and Medicare transport volume
 - CMS refers to the four cohorts as “Year 1” through “Year 4”
 - Due to timeline changes through the COVID-19 public health emergency, Year 1 & 2 and Year 3 & 4 organizations share the same GADCS timelines

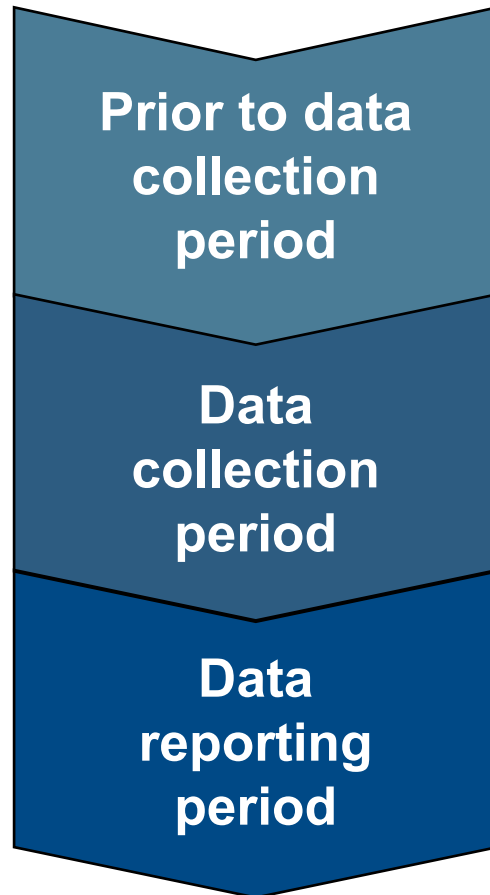
Table: Number of Ambulance Organizations in the Nationwide Population Segmented by Strata Used for Sampling

	Urban (#)	Rural (#)	Super-rural (#)
Government Owned Suppliers			
Low	859	660	745
Medium	862	396	287
High	485	318	55
Very high	241	56	
For-profit suppliers			
Low	278	141	159
Medium	265	107	57
High	351	162	59
Very high	645	116	
Not-for-profit suppliers			
Low	631	527	362
Medium	502	247	77
High	194	114	27
Very high	120	41	
Providers			
All sizes and ownerships	232	151	229

Note: The sum across cells is 10,758, the number of ambulance organizations billing Medicare for ground ambulance services in 2016.

Source: RAND analysis of merged 2016 Medicare enrollment and claims data.

GADCS Process Overview



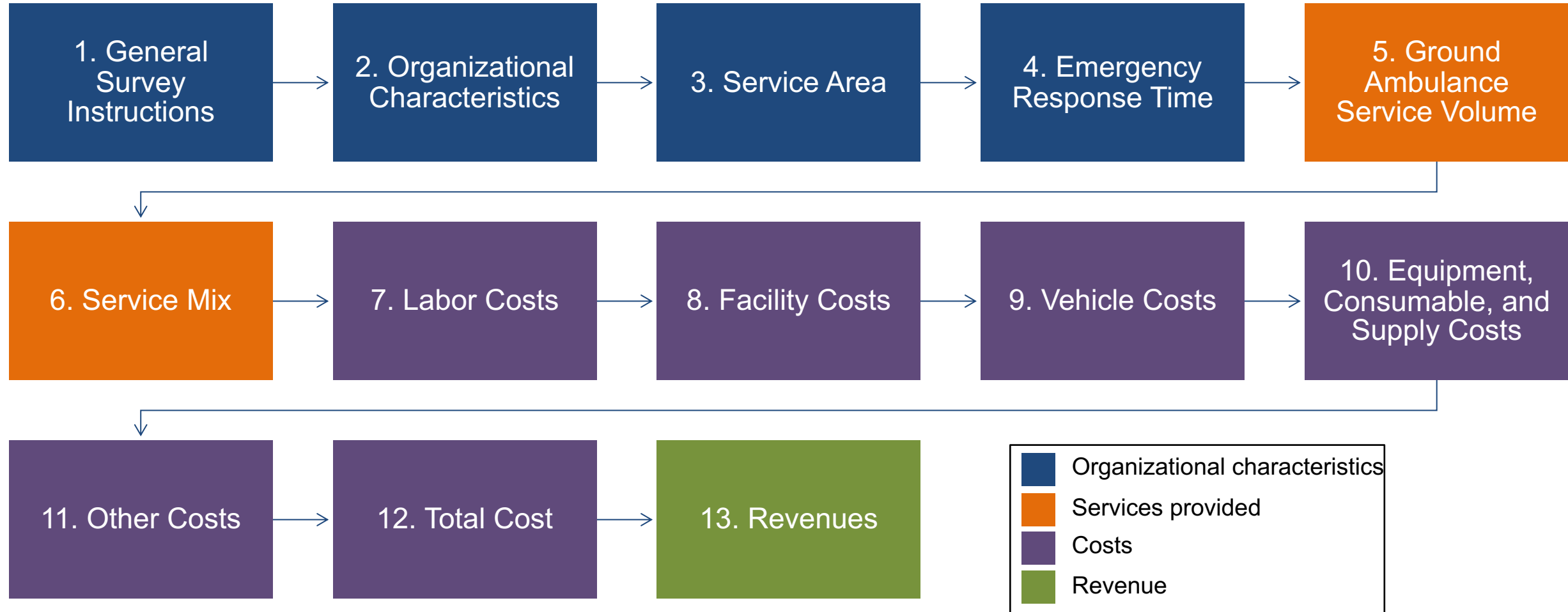
Submission complete

- Print preview of data collection instrument, ensure organization is prepared to collect all required information.
- Submit initial required information, including the start date for your organization's continuous 12-month data collection period.
- Collect required information over a continuous 12-month time period
- Enroll in the Medicare Ground Ambulance Data Collection System
- Enter information via web-based portal
- Certify submitted information within 5 months of the end of your organization's data collection period

GADCS General Instructions

- 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” unless specified. Your organization may need to change the way some information is tracked during the data collection period so that you will be able to report accurate information.
- 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).

Thirteen GADCS Sections



Section 2: Organizational Characteristics

- Whether the ground ambulance organization bills using one or more than one National Provider Identifiers (NPI)
- 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

Responses in this section help tailor later questions to be more relevant to each organization

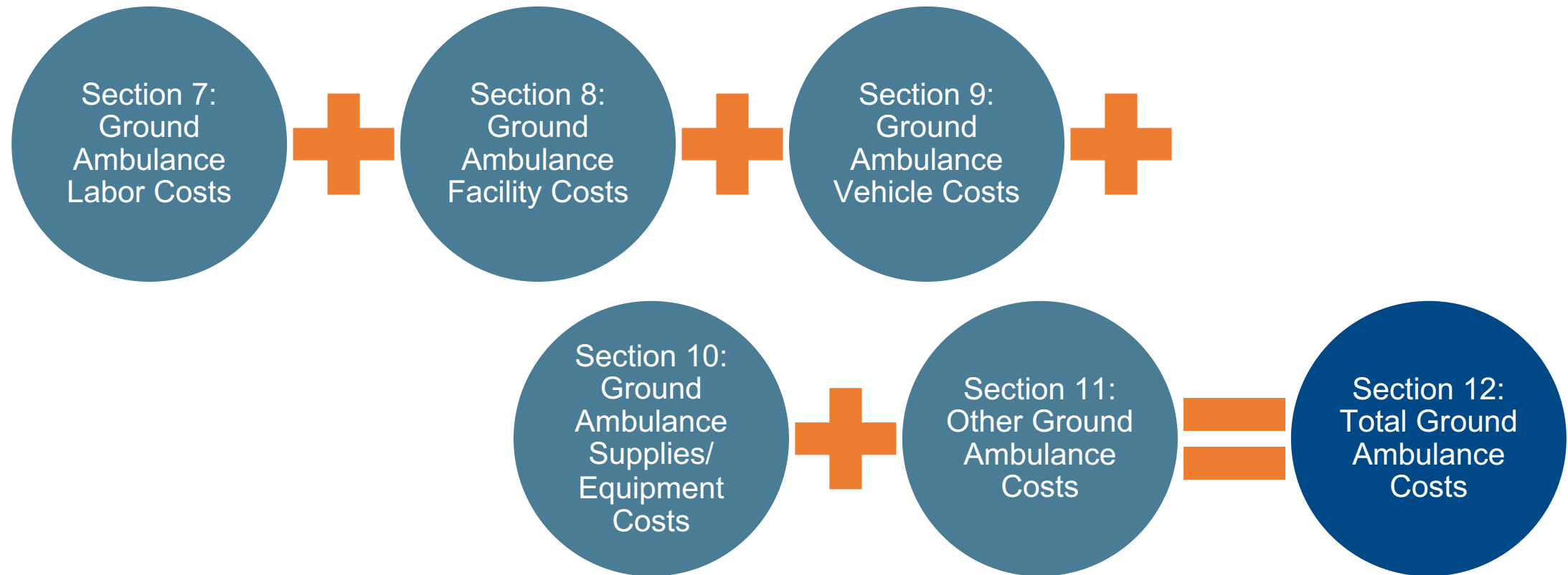
Sections 3 & 4: Service Area & Emergency Response Time

- **Section 3:** ZIP codes comprising the organization's "primary" and, if applicable, "secondary" service areas
- **Section 4** (for organizations responding to emergency calls):
 - How the organization tracks response times
 - Average response times in primary/secondary service areas
 - Whether the organization is required or incentivized to meet response time targets

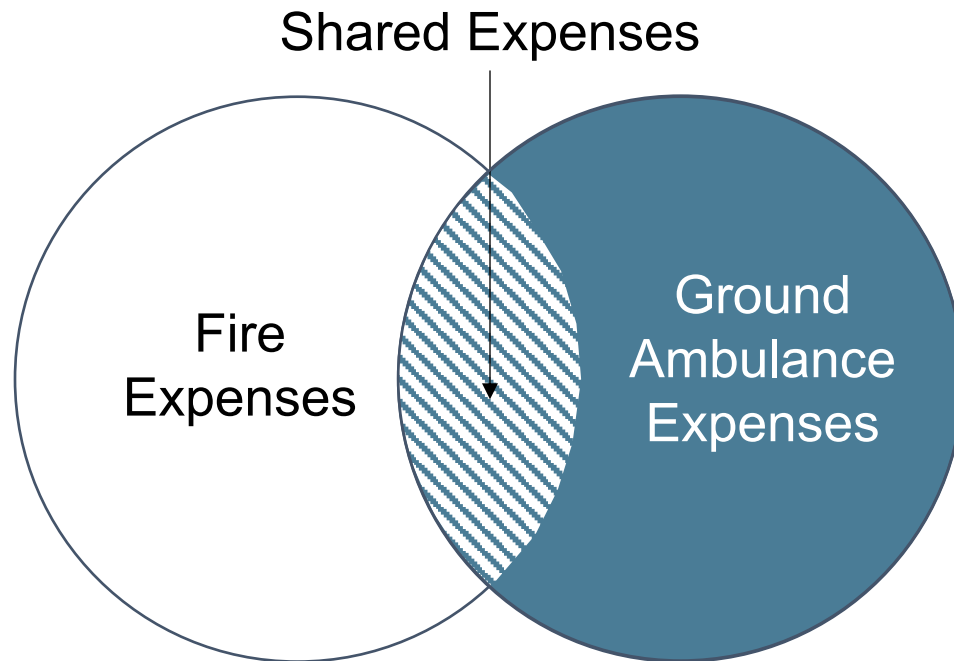
Sections 5 & 6: Service Volume & Service Mix

- **Section 5:** Organizations report the number of:
 - Total responses for all calls for service (including fire/police-only if applicable)
 - Ground ambulance responses (and info on joint responses)
 - Responses that did not result in a transport
 - Total transports
 - Transports paid in full or in part by an insurer and/or patient
 - Paramedic intercepts
- **Section 6:** Shares of responses and transports by type (e.g., emergency versus non-emergency), HCPCS code, etc.

Sections 7-12: Expenses



Allocated and Excluded Expenses



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

Section 13: Revenue

- Revenue from different categories of health care payers (e.g., fee-for-service (FFS) Medicare; Medicare Advantage; Medicaid; commercial insurance; patient self-pay; etc.)
- For each payer, organizations report whether:
 - They routinely bill patients with that source of coverage
 - Patient cost sharing is included in the payer or self-pay amount
- Revenue from all other sources, including tax allocations, payments for contracted services, donations, etc.
- Total revenue

GADCS Resources

- Access the most up-to-date instrument, the User Guide, and a frequently asked questions (FAQ) document from [CMS' GADCS website](#).
- Past slide presentations, webinar recordings, and supplemental documents are also on this site.
- If you have additional questions, please contact:
 - CMS at AmbulanceDataCollection@cms.hhs.gov