



Improved Access to Ambulance Services Payment Rates for Effective Dates of Service July 1, 2008, through December 31, 2009 – JA6206

Related CR Release Date: December 12, 2008

Date Job Aid Revised: December 24, 2008

Effective Date: July 1, 2008

Implementation Date: January 12, 2009

Key Words CR6206, MM6206, R414OTN, Ambulance, Transport

Contractors Affected

- Fiscal Intermediaries (FIs)
- Carriers
- Part A/B Medicare Administrative Contractors (A/B MACs)

Provider Types Affected Ambulance providers and suppliers submitting claims to Medicare Carriers, FIs, and/or A/B MACs for ambulance services provided to Medicare beneficiaries



Change Request (CR) 6206 announces an increase in payment for ground ambulance transports.

Provider Needs to Know...

- Effective July 1, 2008, through December 31, 2009, the ambulance fee schedule amounts for covered ground ambulance transports, **which originate in rural areas, are increased by three (3) percent.**
- Effective July 1, 2008, through December 31, 2009, the ambulance fee schedule amounts for covered ground ambulance transports, **which originate in non-rural areas, are increased by two (2) percent.**

Background

Section 146(a) of Medicare Improvements for Patients and Providers Act of 2008 amends Section 1834(1)(13) of the Social Security Act to provide an increase in payment for ground transports, effective for claims with dates of service on or after July 1, 2008, and before January 1, 2010.

**Operational
Impact**

- Until the new fee schedule files have been tested and implemented, Medicare contractors will hold all ground ambulance claims affected by these changes and release them for processing when the files are implemented.
 - Medicare contractors will also identify ambulance claims (with dates of service on or after July 1, 2008) that were not paid at the rates that CR6206 provides and (to the extent possible) automatically reprocess them within 30 days of the release date of CR6206.
 - In addition, Medicare contractors will adjust claims that cannot be automatically identified and adjusted, if such claims are brought to their attention.
 - Finally, Medicare contractors will follow their normal processes for transmitting the adjusted claims to supplemental insurers, where appropriate.
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**Reference
Materials**

The related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6206.pdf> on the CMS website.

The official instruction (CR6206) issued regarding this change may be found at <http://www.cms.hhs.gov/Transmittals/downloads/R4140TN.pdf> on the CMS website.
