

<b>CMS Manual System</b>	Department of Health & Human Services (DHHS)
<b>Pub 100-08 Medicare Program Integrity</b>	Centers for Medicare & Medicaid Services (CMS)
<b>Transmittal 308</b>	<b>Date: October 30, 2009</b>
	<b>Change Request 6682</b>

**SUBJECT: Rural Air Ambulance**

**I. SUMMARY OF CHANGES:** Rural air ambulance transport shall be considered reasonable and necessary when a physician or other qualified medical personnel orders or certifies the air transport service.

**NEW / REVISED MATERIAL**

**EFFECTIVE DATE: November 30, 2009**

**IMPLEMENTATION DATE: November 30, 2009**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)**

**R=REVISED, N=NEW, D=DELETED**

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
<b>R</b>	6/6.4.1/"Reasonable" Requests
<b>R</b>	6/6.4.2/Emergency Medical Services (EMS) Protocols
<b>R</b>	6/6.4.4/Reasonable and Necessary Services

**III. FUNDING:**

**SECTION A: For Fiscal Intermediaries and Carriers:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

**SECTION B: For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Business Requirements  
Manual Instruction**

*\*Unless otherwise specified, the effective date is the date of service.*

# Attachment - Business Requirements

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**SUBJECT: Rural Air Ambulance**

**Effective Date: November 30, 2009**

**Implementation Date: November 30, 2009**

## I. GENERAL INFORMATION

**A. Background:** Rural air ambulance transport should be considered reasonable and necessary when a physician or other qualified medical personnel orders or certifies the air transport service.

**B. Policy:** MIPPA Section 146 clarifies the satisfaction of the requirement of medically necessary by inserting “certifies or reasonably determines” that the individual’s condition requires air transport due to time or geographical factors.

## II. BUSINESS REQUIREMENTS TABLE

Number	Requirement	Responsibility (place an “X” in each applicable column)									
		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6682.1	Contractors shall consider rural air ambulance transport reasonable and necessary when a physician or other qualified medical personnel orders or certifies the air transport service.	X		X	X						
6682.2	Contractors shall make payment for rural air transport only to the closest facility capable of providing the care needed by the beneficiary irrespective of whom orders the transport.	X		X	X						

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an “X” in each applicable column)									
		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
	None										

#### IV. SUPPORTING INFORMATION

**Section A: For any recommendations and supporting information associated with listed requirements, use the box below:**

X-Ref Requirement Number	Recommendations or other supporting information:
N/A	

**Section B: For all other recommendations and supporting information, use this space: N/A**

#### V. CONTACTS

**Pre-Implementation Contact(s):** Debbie Skinner, [debbie.skinner@cms.hhs.gov](mailto:debbie.skinner@cms.hhs.gov), 410-786-7480

**Post-Implementation Contact(s):** Debbie Skinner, [debbie.skinner@cms.hhs.gov](mailto:debbie.skinner@cms.hhs.gov), 410-786-7480

#### VI. FUNDING

**Section A: For *Fiscal Intermediaries (FIs)*, *Regional Home Health Intermediaries (RHHIs)*, and/or *Carriers*, use only one of the following statements:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

**Section B: For *Medicare Administrative Contractors (MACs)*, include the following statement:**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

#### **6.4.1 – “Reasonable” Requests**

*(Rev.308, Issued: 10-30-09, Effective: 11-30-09, Implementation: 11-30-09)*

*Rural air ambulance transport shall be considered reasonable and necessary when a physician or other qualified medical personnel orders or certifies the air transport service. A physician or other qualified medical personnel must certify or determine that the individual’s condition requires air transport due to time or geographical factors. The following should be considered to be personnel qualified to order air ambulance services:*

- Physician,
- Registered nurse practitioner (from the transferring hospital),
- Physician’s assistant (from transferring hospital),
- Paramedic or EMT (at the scene), and
- Trained first responder (at the scene).

#### **6.4.2 – Emergency Medical Services (EMS) Protocols**

*(Rev.308, Issued: 10-30-09, Effective: 11-30-09, Implementation: 11-30-09)*

Per Section 415 of the Medicare Modernization act of 2003, the reasonable and necessary requirement for rural air transport may be “deemed” to be met when the service is provided pursuant to an established State or regional emergency medical services (EMS) agency protocol. CMS defines “established” to mean those protocols, which have been reviewed and approved by State EMS agencies or have been developed according to State EMS umbrella guidelines. Additionally, the protocol must be recognized or approved by the Secretary.

The information on the *FI, carrier, or MAC* Web site must inform rural air ambulance providers that if they anticipate transport based upon the contents of such a protocol (either State or regional) they must submit that protocol in advance to the fiscal intermediaries, carriers, *or MACs* for review and approval. Include instructions on the Web site for submitting the protocol. The contractor will review the protocol to ensure that the contents are consistent with statutory requirements at 1862(a)(1)(A), which direct that all services paid for by Medicare must be reasonable and necessary for the diagnosis or treatment of an illness or injury. The contractor shall make a determination regarding the protocol and/or subsequent revisions and notify the rural air ambulance provider of their determination within 30 days of receipt of the protocol.

Approval of a protocol does not exempt the provider from requirements in the Act at 1861(s)(7) and regulatory requirements at 42 CFR 424.106 which outlines the criteria for determining whether the hospital was the most accessible. Regardless of protocol instructions regarding transport locations Medicare payment can be made only to the closest facility capable of providing the care needed by the beneficiary.

#### **6.4.4 – Reasonable and Necessary Services**

*(Rev.308, Issued: 10-30-09, Effective: 11-30-09, Implementation: 11-30-09)*

When data analysis indicates, fiscal intermediaries, carriers, *or MACs* may perform medical review of rural air ambulance claims in those instances noted in the above paragraph where there is financial or employment relationship between the person requesting an air ambulance transport and the person providing the service. The fiscal intermediaries, carriers, *or MACs* may also conduct medical review of rural air ambulance claims with “deemed” medical necessity status when there are questions as to whether the transport was made pursuant to a protocol which has been approved by the Secretary; or questions as to whether the transport was inconsistent with an approved protocol. *Medicare payment can be made only to the closest facility capable of providing the care needed by the beneficiary irrespective of whom orders the transport.*