Medicare Ground Ambulance Data Collection System CY 2022 Physician Fee Schedule Final Rule

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Today’s session is an overview of clarifications and changes finalized by CMS in the Calendar Year (CY) 2022 Physician Fee Schedule (PFS) Final Rule.


- You can find information about the Medicare Ground Ambulance Data Collection System (GADCS) on the Ambulances Services Center website: https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html
  - The revised printable instrument and frequently asked questions (FAQ) document that reflects the finalized changes will be posted as soon as they are available.
  - Prior webinars have not been updated. Most CMS education sessions in 2021 (webinars and Q&A session) noted proposed changes, all of which are now finalized.
Background on the GADCS Timeline

- About half of all Medicare ground ambulance organizations are already selected as part of the Year 1 or Year 2 GADCS groups.
- CMS issued two blanket waivers in 2020 (May 5, 2020 and November 25, 2020) to delay GADCS data collection periods and data reporting periods for already-selected Year 1 and Year 2 ground ambulance organizations.
- CMS modified data collection and reporting periods to increase flexibilities for ground ambulance organizations that would otherwise be required to collect data in 2020-2021 so that they can focus on their operations and patient care during the COVID-19 public health emergency.
Data Collection Periods and Data Reporting Periods

Previously:

• Year 1, 2, and 3 organizations have data collection periods starting in 2022 and data reporting periods starting in 2023.
• Year 4 organizations have data collection periods starting in 2023 and data reporting periods starting in 2024.

CY 2022 PFS Final Rule Change:

• Year 1 and 2 organizations will still have data collection periods starting in 2022 and data reporting periods starting in 2023.
• Year 3 organizations will have the same data collection periods and data reporting periods as Year 4 organizations with data collection periods starting in 2023 and data reporting periods starting in 2024.
Example with a January 1 Data Collection Period Start Date

Previously:

Year 1
Year 2
Year 3
Year 4

2020 2021 2022 2023 2024

Sample selected (list already posted)
Sample selected (planned)

Organizations collecting data
Organizations reporting data

CY 2022 PFS Final Rule Change:

2020 2021 2022 2023 2024
Sampling Timeline

Previously:
• Year 3 organizations sampled in 2021
• Year 4 organizations sampled in 2022

CY 2022 PFS Final Rule Change:
• Year 3 and Year 4 organizations sampled in 2022.
Previously:

“Did your organization use more than one NPI to bill Medicare for ground ambulance services during the data collection period?

[If Yes]: You are being asked to complete this instrument and enter data only for the following NPI: [pre-populate number]...”

CY 2022 PFS Final Rule Change:

“Is this NPI part of a larger “parent organization” that owns or operates multiple NPIs billing for ground ambulance services?

[If Yes]: You are being asked to complete this instrument and enter data separately for each sampled NPI. The following questions refer only to the following NPI: [pre-populate number]...”
Section 2, Question 9

Previously:

“Does your ground ambulance operation share any operational costs, such as building space or personnel, with one of the following?”

CY 2022 PFS Final Rule Change:

“Does your organization provide any of the following services or operations (select all that apply)?”
Section 3, Questions 3 & 6

Previously:

“During a response, what is the approximate average trip time (in minutes) across all service levels (BLS, ALS, etc.) in your primary service area from the time the ambulance leaves the station to when that ambulance is available to take another call?”

CY 2022 PFS Final Rule Change:

“During a response, what is the approximate average trip time (in minutes) across all service levels (BLS, ALS, etc.) in your primary service area from the time an ambulance begins its response to the time when the ambulance is available to respond to another call (that is, time on task)?”
Section 3, Question 4

Previously:

“A secondary service area is outside your primary service area, but one where you regularly provide services through mutual or auto-aid arrangements. Do not include areas where you provide services only under exceptional circumstances (e.g., when participating in coordinated national or state responses to disasters or mass casualty events).”

CY 2022 PFS Final Rule Change:

“Some, but not all, ground ambulance organizations regularly provide service outside of their primary service area, for example through mutual or auto-aid agreements with nearby municipalities. If this applies to your organization, please report areas that are outside your primary service area but where you regularly provide services as part of your secondary service area. You do not need to report areas where you provide services very rarely or only under exceptional circumstances (for example, when participating in coordinated national or state responses to disasters or mass casualty events). Use your judgement as to whether your organization regularly serves a secondary service area. For example, you may choose to consider ZIP codes outside your primary service area but where you had 5 or more responses during the data collection period as part of your secondary service area if you believe these transports have a significant impact on your organization’s costs.”
Section 4, Questions 1 & 2

Previously:

Question 1: “…We define response time as the time from when the call comes in to when the ambulance or another EMS response vehicle arrives on the scene.”

Question 2 alternate definitions if your organization uses a different definition:

“a. From the time the ambulance leaves the station to the time the ambulance or other EMS vehicle is at the scene.

b. Other (please specify).”

CY 2022 PFS Final Rule Change:

Question 1: “...Here, response time is defined as the time from when the call comes into dispatch to when the ambulance or another EMS response vehicle arrives on the scene”

Question 2 alternate definitions if your organization uses a different definition:

“a. From the time the ambulance leaves the station to the time the ambulance or other EMS vehicle is at the scene.

b. From the time our organization receives a call from dispatch to the time the ambulance or other EMS vehicle is at the scene.

c. Other (please specify).”
Section 4, Question 3c

Previously:

“What is the response time below which 90 percent of your emergency responses fall (i.e., your organization’s 90th percentile emergency response time) in your primary service area? (Enter minutes)”

CY 2022 PFS Final Rule Change:

“What is your best estimate of the share of responses that take more than twice as long as the average response time as reported in the prior question? (Enter percentage)”
Section 5, Question 3a: Total Responses

Previously:

“What percentage of total ground ambulance responses include a non-transporting agency? (Enter percentage)”

CY 2022 PFS Final Rule Change:

“What is your best estimate of the percentage of total ground ambulance responses that involved a non-transporting agency? (Enter percentage)”
Section 5: Paid Transport Definition

Previously:

“A paid ground ambulance transport refers to a ground ambulance transport for which your organization has been paid in full or in part by a payer and/or patient only. Depending on how your organization collects data, you may report (a) the number of transports furnished during the data collection period that were also paid during the data collection period, or (b) the number of transports paid during the data collection period even if some transports occurred prior to the data collection period.”

CY 2022 PFS Final Rule Change:

“A paid ground ambulance transport refers to a ground ambulance transport furnished in calendar year 202X [or fill fiscal year as appropriate] for which your organization has been paid in full or in part by a payer and/or patient only by the time you are reporting data to CMS.”
Section 5, Question 7

Previously:

“What was the total number of paid ground ambulance transports in calendar year 202X [or fill fiscal year as appropriate], across all payer types and regardless of the level of service or geography? (Enter number)”

CY 2022 PFS Final Rule Change:

“Of the ground ambulance transports your organization provided in calendar year 202X [or fill fiscal year as appropriate], how many were paid (either in part or in full) across all payer types and regardless of the level of service or geography by the time you are reporting data to CMS? (Enter number)”
Section 7: Reporting Labor Hours Worked

Previously:
Tables included separate hours worked by staff category for:
• Total hours worked annually, including hours for activities other than ground ambulance services.
• Total hours worked annually that were not related to ground ambulance responsibilities or fire/police/other public safety responsibilities, by category.

CY 2022 PFS Final Rule Change:
Tables include separate hours worked by staff category for:
• Total hours worked annually.
• Total hours worked annually related to ground ambulance responsibilities.
• Total hours worked annually related to fire, police, and/or other public safety responsibilities (if applicable).
• Total hours worked annually related to all other responsibilities.
Organizations with Multiple NPIs: Allocated Expenses

Previously:

Section 7.1, 7.3, 9.1, 10.1, and 12 lacked questions asking for allocated portions of parent organization expenses.

CY 2022 PFS Final Rule Change:

These sections now include questions asking for allocated portions of parent organization expenses. For example, in Section 7.1, Question 2:

“Please report the allocated portion of EMT/response labor costs incurred at the level of the parent organization/central office of this NPI based on your organization’s approach for allocating costs to specific NPIs. (Enter dollar amount.)”
Section 8, 9, and 10 Capital Expenditure Instructions

Previously:

- No screening questions on whether organizations calculate annual depreciation expenses for facilities, vehicles, and/or equipment.
- No specific instructions on how organizations operating on a cash basis should report expenses for facilities, vehicles, and/or equipment.

CY 2022 PFS Final Rule Change:

- Screening questions added to Sections 8, 9, and 10 asking whether organizations calculate depreciation expenses for facilities, vehicles, and equipment.
- Answers to screeners will determine how questions about expenses and depreciation are worded in these sections.
- Organizations do not need to calculate annual depreciation expenses if they do not currently do so.
Other Clarifications and Editorial Changes

• Removed first person framing (e.g., “we”) throughout the instrument to clarify that this data collection effort is required by CMS.
• Corrected a typo in Section 2, Question 17 that incorrectly referenced “item 17” instead of “item 16.”
• Replaced “provider” with “organization” in Section 3, Question 2.
• Clarified in Section 7 instructions that volunteer EMT/response staff will be reported on in a “later” section instead of a “different” section.
• In the Section 7 instructions, added “employer payroll taxes” as an allowable cost that may be reported in “Total Annual Compensation.”
• Clarified in Section 7.2, Question 3 that responses should exclude expenses associated with staff that were already reported in prior responses.
• Clarified that responses to Section 7.3, Question 4 should exclude medical director hours.
• Fixed typo in Section 10 instructions changing “operation” to “operating.”
• Specified in Section 13, Question 3 that patient self-pay should include cash payment and the amount patients paid for deductibles, coinsurance, and other cost-sharing only if not reported elsewhere.
Resources

• Access the most up-to-date instrument and frequently asked questions document from the Ambulances Services Center website:
  • https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center
• Past slide presentations, webinar recordings, and supplemental documents are also on this site.
• If you have additional questions, please contact:
  • AmbulanceDataCollection@cms.hhs.gov
Please submit questions using the “Q&A” button at the bottom of your Zoom screen. If selected, presenters will read your question and respond during the session. CMS will respond to unanswered questions by email. This slide lists common questions and answers for reference.

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<thead>
<tr>
<th>Frequently Asked Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>1. Has my organization been selected to participate?</td>
<td>1. Lists of selected organizations are at the website above. CMS will send notification letters to all selected organizations beginning in November 2021.</td>
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<td>2. What if my organization isn’t on the year 1 or year 2 lists?</td>
<td>2. It is very likely that your organization will be selected in a future year. CMS will announce when it selects year 3 and year 4 organizations.</td>
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<td>3. Is participation required?</td>
<td>3. Yes. Organizations that do not sufficiently submit data will receive a 10% payment reduction.</td>
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<td>4. When will we need to collect and report data?</td>
<td>4. The FAQ at the website above includes examples. In brief, organizations <em>collect</em> data over a continuous 12-month period and <em>report</em> data within 5 months after the data collection period ends.</td>
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<tr>
<td>5. How do I inform CMS of our data collection period start date?</td>
<td>5. Notification letters will have instructions on reporting your data collection period start date to your MAC. The period can align with the calendar year or your fiscal year.</td>
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<td>6. How do we report data?</td>
<td>6. CMS is developing a web-based portal that will launch in late 2022. CMS will share more information, including training sessions, when available.</td>
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**Note:** Answers to many other questions are at the Ambulances Services Center webpage: [https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center](https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center)