

Update of Internet Only Manual (IOM), Pub. 100-04, Chapter 15 - Ambulance

MLN Matters Number: MM12707 Related Change Request (CR) Number: 12707

Related CR Release Date: April 28, 2022 Effective Date: May 31, 2022

Related CR Transmittal Number: R11365CP Implementation Date: May 31, 2022

Provider Types Affected

This MLN Matters Article is for ambulance providers and suppliers billing Medicare Administrative Contractors (MACs) for Medicare Part B ambulance services they provide to Medicare patients.

Provider Action Needed

Make sure your billing staff knows about these changes:

- Billing when the patient dies before the ambulance arrives
- Billing when the patient dies after being loaded on the ambulance

Background

Note that this Article reports an update to the Medicare Claims Processing Manual and doesn't make any policy changes.

If the patient is pronounced dead after the ambulance is called or dispatched, but before the ambulance arrives at the scene:

- Payment may be made for a Basic Life Support (BLS) service if a ground vehicle is dispatched or at the fixed wing or rotary wing base rate, as applicable, if an air ambulance is dispatched
- Neither mileage nor a rural adjustment would be paid; the blended rate amount will otherwise apply
- Providers or suppliers report the A0428 (BLS) non-emergency or A0429 (BLS)
 emergency transport HCPCS code if an emergency response and modifier QL (Patient
 pronounced dead after ambulance called) in "HCPCS/Rates" instead of the origin and
 destination modifier for ground vehicles. In addition to the QL modifier, institutionalbased providers report modifier QM or QN





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• If the time of death pronouncement is after takeoff to point of pickup but before the patient is loaded on-board the air ambulance, air ambulance providers or suppliers bill the A0430 or A0431 depending on the type of aircraft and modifier QL

If the ambulance is called or dispatched but the patient dies on the scene prior to the arrival of the ambulance:

- Payment may be made for BLS service if a ground vehicle is dispatched or at the fixed wing or rotary wing base rate, as applicable, if an air ambulance is dispatched
- Neither mileage nor a rural adjustment would be paid
- Ground ambulance providers or suppliers report the A0428 (BLS non-emergency) or A0429 (BLS emergency transport) HCPCS code if an emergency response and modifier QL
- Air ambulance providers or suppliers bill HCPCS A0430 or A0431 depending on the type of aircraft and modifier QL, if the time of death pronouncement is after takeoff to point of pickup but before the patient is loaded on-board the air ambulance.

If the patient dies after the ambulance is dispatched but before the patient is loaded onboard the ambulance (before or after arrival at the point-of-pickup):

- Medicare payment determination is your BLS base rate
- No mileage or rural adjustment
- Providers or suppliers report the A0428 (BLS) non-emergency or A0429 (BLS) emergency transport HCPCS code if an emergency response and the QL modifier

However, if the patient dies after pickup, prior to or upon arrival at the receiving facility, the medically necessary level of service provided will determine the payment.

More Information

We issued <u>CR 12707</u> to your MAC as the official instruction for this change. The updated Chapter 15 of the Medicare Claims Processing Manual is part of the CR.

For more information, find your MAC's website.

Document History

Date of Change	Description
April 28, 2022	Initial article released.

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