



Non-Emergent Ambulance Transport

LOB(s): <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid	State(s): <input checked="" type="checkbox"/> Idaho <input checked="" type="checkbox"/> Montana <input checked="" type="checkbox"/> Oregon <input checked="" type="checkbox"/> Washington <input type="checkbox"/> Other: <input type="checkbox"/> Oregon <input type="checkbox"/> Washington
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Commercial Policy

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determinations are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage.

Background

Ambulance services may be required during emergent/urgent or non-emergent/non-urgent situations.

Ambulance services are frequently the initial step in the chain of delivery of quality medical care. They involve the assessment and administration of medical care by trained personnel and transportation of patients within an appropriate, safe, and monitored environment. The patient's condition at the time of the transport is the determining factor in whether a trip is necessary.

An ambulance is a specially equipped vehicle designed and supplied with materials and devices to provide life-saving and supportive treatments or interventions. An ambulance may be either ground transportation vehicle, such as a specially equipped truck or van, but may also be a properly equipped aircraft or boat.

PacificSource covers state certified ground or air ambulance during an emergent or urgent situation when a member requires transportation to the nearest facility capable of treating the medical condition, when other forms of transportation will endanger the member's health. Emergent/Urgent ambulance (see definitions below) services and/or transportation do not require prior authorization.

Non-emergent/non-urgent ground or air ambulance transportation may be necessary when a member's medical condition prevents use of lower acuity transportation modalities (e.g., taxicab, private care, or wheelchair/stretchers van) due to member safety concerns or medical contraindications.

PacificSource does not cover non-emergent/non-urgent ground or air ambulance transport; however, exceptions can be made for member specific situations. This policy reflects PacificSource's non-emergent/non-urgent ambulance transportation criteria requirements.

Criteria

PacificSource does not cover non-emergent/non-urgent ground or air ambulance transportation; however, exceptions may be allowed for member specific situations. First, the member's benefit book (contract) or Facet Benefit Summary (BSBS) must allow for the exception. Secondly, the exception situation requires a prior authorization. Lastly, the following criteria must be met to allow for coverage.

Non-Emergent /Non-Urgent Ground Ambulance

PacificSource considers non-emergent/non-urgent ground ambulance transport between facilities medically necessary when the member's condition is stable but could be jeopardized by any lesser level of transport **AND** one of following conditions is met:

- Members requiring cardiac monitoring, intravenous medications, or oxygen.
- Members transferring from an emergency service setting to an intensive care unit, transferring between intensive care units, or if the member requires services which are not available and must transfer to another facility (example includes but is not limited to neonatal ICU).
- The member is unable to sit up due to pain, debility, immobility (e.g., suspected fracture), or disease process.
- The member needs to be restrained or closely observed in order to prevent injury to themselves or others.

Non-Emergent/Non-Urgent Air Ambulance

PacificSource considers non-emergent/non-urgent air ambulance transport medically necessary when **ALL** of the following criteria is met:

- The transferring facility is unable to provide the necessary medical services.
- The member's condition would be adversely impacted by transportation by ground ambulance.

Utilization managers need to facilitate contracted air transport providers whenever possible. If a contracted air ambulance provider is not available, review for an out-of-network exception or refer to the PacificSource One-Time-Agreement (OTA) policy to see if transport qualifies for an agreement to decrease potential member financial responsibility.

Claims

Non-transport ambulance claims (e.g., ambulance called but member refuses transport A0998) are payable under the member's ambulance benefit.

Coding Information

The following list of codes are for informational purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

- A0140 Non-emergency transportation and air travel (private or commercial) intra- or interstate-
- A0426 Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)

- A0428 Ambulance service, basic life support, nonemergency transport, (BLS)
- A0430 Ambulance service, conventional air services, transport, one way (fixed wing)—
- A0431 Ambulance service, conventional air services, transport, one way (rotary wing)
- A0435 Fixed wing air mileage, per statute mile
- A0436 Rotary wing air mileage, per statute mile
- A0998 Ambulance response and treatment, no transport

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Definitions

Air Ambulance Service - transportation provided by a fixed wing aircraft, conventional air ambulance or critical care helicopter which is staffed at the BLS or ALS level.

Emergency Medical Condition - A medical, mental health, or substance use disorder condition manifesting itself by acute symptoms of sufficient severity, including severe pain or emotional distress, such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the without receiving immediate medical, mental health, or substance use disorder treatment the following could result in placing the health of the individual or the health of a pregnant individual or their unborn child in serious jeopardy; serious impairment to bodily functions; serious dysfunction of any bodily organ or part.

Ground Ambulance Service - a vehicle staffed and equipped to respond to a medical emergency. For purposes of this procedure, the care level provided can be either Basic Life Support (BLS) such as that provided by an Emergency Medical Technician (EMT), or Advanced Life support (ALS) provided by paramedics.

Facility - a hospital, skilled nursing facility, inpatient rehabilitation or behavioral health inpatient or residential setting.

Urgent Care Services - health services that are medically appropriate and immediately required to prevent serious deterioration of a member's health that are a result of unforeseen illness or injury. This includes physical, mental, and/or dental health.

Wheelchair or stretcher van Service - non-emergency transportation in a vehicle which accommodates wheelchairs and stretchers but does not provide skilled medical services enroute. Wheelchair/stretchers vans may be the least costly alternative to ambulance. For purposes of this procedure, use the ground ambulance criteria to determine medical necessity.

Related Policies

Nonparticipating PacificSource Fee Schedule

One Time Agreements

Transplant Travel Benefit

Appendix

Policy Number:

Effective: 5/1/2020

Next review: 3/1/2025

Policy type: Commercial

Author(s):

Depts.: Health Services, AUA, Claims

Applicable regulation(s):

Commercial OPs: 3/2024