IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

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IHCP clarifies guidance for hospital-to-hospital transfers using EMS

The Indiana Health Coverage Programs (IHCP) is clarifying that direct hospital-to-hospital transfers using Emergency Medical Services (EMS) are eligible for reimbursement if they meet the requirements in this bulletin.

Emergency hospital-to-hospital transports in response to 9-1-1 dispatches

The IHCP considers all transports to an emergency room in response to 9-1-1 dispatches to be emergency transports. The IHCP is clarifying that direct dispatches issued by hospital-based systems to other hospital-based systems regarding emergency transfers are also to be considered emergency transports. An example of such a situation includes when a hospital may directly call their affiliated EMS agency for an urgent/emergent transfer due to a critical change in the patient's condition.



Additionally, the IHCP clarifies that for trips such as these that are dispatched at a 9-1-1 level, ambulance providers should bill the appropriate procedure codes for emergency advanced life support (ALS) or basic life support (BLS) services, based on the type of services provided during transport. Furthermore, providers must bill all transportation services according to the level of service rendered, and not according to the provider's level of response or vehicle type. Additional explanations of ALS/BLS services can be found in the <u>Transportation Services</u> provider reference module at in.gov/medicaid/providers.

Dispatch requirements for EMS hospital-to-hospital transfers

The Centers for Medicare & Medicaid Services (CMS) provides guidance in <u>Pub 100-02 (2017)</u> that for reimbursement to be made for emergency responses, the provider's or supplier's dispatch protocol and the dispatcher's actions must meet, at a minimum, the standards of the dispatch protocol of the local 9-1-1 or equivalent service (see page 10). Based on this guidance, the IHCP is clarifying that it will reimburse EMS hospital-to-hospital transfers if the hospital-based system provides the following:

- Makes the hospital-to-hospital transfer request call directly to the ambulance/EMS provider.
- Has a formal dispatch protocol that meets or exceeds local 9-1-1 standards.
- Appropriately documents the dispatch decision, showing that an emergency response was warranted.

For more information

For more information on billing hospital-to-hospital transfers, see the <u>Transportation Services</u> provider reference module. Questions about fee-for-service (FFS) billing and reimbursement should be directed to Gainwell Technologies Customer Assistance at 800-457-4584 or your Provider Relations consultant.

Within the managed care delivery system, individual managed care entities (MCEs) establish and publish their own billing and reimbursement requirements. Questions about managed care billing and reimbursement should be directed to the MCE with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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