Ambulance HCPCS Codes and Modifiers
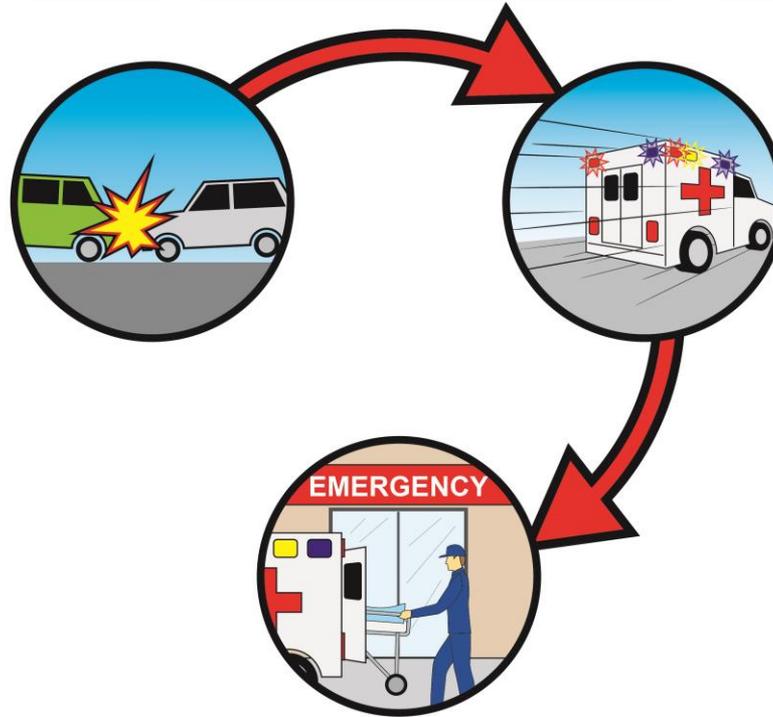
**Chief Business Office Purchased Care
Department of Program Integrity (DPI)**

October 2013

Objectives

- **Recognize Typical Ambulance Flow of Events**

- **Identify Appropriate Billing Practices**

- **Define Ambulance HCPCS Codes**

- **Describe Ambulance Modifiers**

Typical Flow of Events

The patient has been involved in an auto accident, the ambulance transports the patient to the hospital, and the patient arrives at the hospital for treatment.

Ambulance & Hospital Claim

Ambulance Claim

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)		22. MEDICAID RESUBMISSION
1. 959 . 01	3. ___ . ___	CODE ORIGINAL REF. NO.
2. 959 . 8	4. ___ . ___	23. PRIOR AUTHORIZATION NUMBER

24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY	B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER	E. DIAGNOSIS POINTER	F. $ CHARGES	G. DAYS OR UNITS	H. EPSDT Family Plan	I. ID. QUAL.	J. RENDERING PROVIDER ID. #
									123456789
09 10 13 09 10 13	41		A0429 RH	1,2	550 00	1		NPI	9876543210
									123456789
09 10 13 09 10 13	41		A0425 RH	1,2	253 20	21		NPI	9876543210

Hospital Claim

Institutional

38. VETERAN ADM - SKYLINE OFFICE 1234 WE CARE BLVD VA MEDICAL CENTER SKYLINE, PA 123454321	39 CODE	VALUE CODES AMOUNT	40 CODE	VALUE CODES AMOUNT	41 CODE	VALUE CODES AMOUNT
	a					
	b					
	c					
	d					

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
0450	EMERGENCY ROOM	99284	091013	1	449.50		

Professional

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)		22. MEDICAID RESUBMISSION
1. 812 . 03	3. ___ . ___	CODE ORIGINAL REF. NO.
2. ___ . ___	4. ___ . ___	23. PRIOR AUTHORIZATION NUMBER

24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY	B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER	E. DIAGNOSIS POINTER	F. $ CHARGES	G. DAYS OR UNITS	H. EPSDT Family Plan	I. ID. QUAL.	J. RENDERING PROVIDER ID. #
									987654321
09 10 13 09 10 13	23		99284	1	232 00	1		NPI	0123456789

Ambulance claim using a CMS 1500 and a hospital claim that includes both an institutional claim using a UB 04 and a professional claim using a CMS 1500.

Ambulance HCPCS Codes

HCPCS Code	Description
A0422	Ambulance (ALS or BLS) oxygen and oxygen supplies, life sustaining situation
A0424	Extra ambulance attendant, ground (ALS or BLS) or air (fixed or rotary winged); (requires medical review)
A0425	Ground mileage, per statute mile
A0426	Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)
A0427	Ambulance service, advanced life support, emergency transport, level 1 (ALS 1 - emergency)
A0428	Ambulance service, basic life support, nonemergency transport, (BLS)
A0429	Ambulance service, basic life support, emergency transport (BLS, emergency)
A0430	Ambulance service, conventional air services, transport, one way (fixed wing)
A0431	Ambulance service, conventional air services, transport, one way (rotary wing)
A0432	Paramedic intercept (PI), rural area, transport furnished by a volunteer ambulance company which is prohibited by state law from billing third-party payers
A0433	Advanced life support, level 2 (ALS 2)
A0434	Specialty care transport (SCT)

Table of ambulance HCPCS codes and their descriptions.

Ambulance Modifiers

Alpha Code	Description
D	Diagnostic or therapeutic site other than P or H
E	Residential, domiciliary, custodial facility (nursing home, not SNF)
G	Hospital-based ESRD facility
H	Hospital
I	Site of transfer (e.g., airport or helicopter pad) between modes of ambulance transport
J	Freestanding ESRD facility
N	Skilled Nursing Facility
P	Physician's office
R	Residence
S	Scene of accident or acute event
X	Intermediate stop at physician's office in route to hospital

Table of ambulance modifiers and their descriptions.

Ambulance & Hospital Claim

Ambulance Claim

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Ambulance claim using a CMS 1500 and a hospital claim that includes both an institutional claim using a UB 04 and a professional claim using a CMS 1500.

Conclusion

- **Typical Ambulance Flow of Events**

- **Appropriate Ambulance Billing Practices**

- **Ambulance HCPCS Codes**

- **Ambulance Modifiers**

References

Veterans Affairs manages several health care programs that reimburse private health care providers for caring for our Veterans and their eligible family members. Unfortunately these health care programs have a different statutory and regulatory authority, which creates diverse payment methodologies. The majority of VA health care programs utilize Medicare's payment methodologies or something very similar.

Therefore, providers and facilities that utilize Medicare's billing and coding guidelines will greatly minimize claim delays or rejections as a result of the Program Integrity Tools fraud and abuse review.

The following Medicare link is an excellent source of billing and coding guidance for all providers and facilities:

Medicare Claim Processing Guide
http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c01.pdf