

Ambulance Clinical Criteria

Transportation by ambulance may be covered for medically necessary transportation of a recipient to the nearest appropriate facility that can treat the recipient's condition when all other modes of transportation are contraindicated. *An ambulance is a publicly or privately owned means of conveyance for the transportation of sick, injured, or wounded patients.*¹

Determining Appropriateness of Transport

Ambulance transportation is reimbursable only if all other modes of transportation are contraindicated. All other modes of transportation may be considered contraindicated when a recipient's medical condition requires the accompaniment of an appropriately credentialed medical professional(s) and either:

- A medical emergency occurred in which the recipient needed emergency medical care. *Emergency medical care means the services utilized in responding to the perceived individual needs for immediate medical care in order to prevent loss of life or aggravation of physiological or psychological illness or injury*²; or
- The recipient was bed-confined before and after the ambulance transport. A recipient is bed-confined if he/she is unable to get up from bed without assistance, unable to ambulate, and is unable to sit in a chair or wheelchair; or
- The use of any other mode of transportation would have endangered the health of the recipient.

The following recipient conditions are considered when determining if the use of any mode of transportation other than an ambulance would have endangered the health of the recipient:

- Restraints needed to prevent injury to the recipient or others
- Unconscious or in shock
- Requires oxygen or other emergency treatment during transport
- Exhibits signs and symptoms of acute respiratory distress or cardiac distress such as shortness of breath or chest pain
- Exhibits signs and symptoms that indicate the possibility of acute stroke
- A fracture that has not been set or the possibility of a fracture requiring the recipient to remain immobile
- Recipient could be moved only by stretcher

Non-Emergency vs. Emergency Ambulance Services

Ambulance services may be reimbursed as either a non-emergency or emergency transport.

- Non-emergency ambulance services are reimbursable only if the transport is to an enrolled Medicaid provider for a covered Medicaid Service
- Emergency ambulance services are reimbursable only when a sudden unexpected occurrence necessitates immediate and rapid ambulance transport of a recipient to receive emergency medical care.³

Ambulance services may be reimbursed when a recipient is treated and stabilized at the scene without being transported to a hospital. However, in the event that a recipient refuses transport, the ambulance services will not be covered.

¹ AS 18.08.200(2) ² AS 18.08.200(6) ³ 7 AAC 120.490(2) ⁴ 7 AAC 26.050(1)(A) ⁵ 7 AAC 26.999(11) ⁶ AS 18.08.200(1)

Clinical Criteria for Ground Ambulance Service Levels

Alaska Medicaid reimburses for ground ambulance services based on the level of care furnished to the recipient. The service delivered may either be Basic Life Support (BLS) or Advanced Life Support level (ALS).

BLS: Emergency care skills outlined in the goals and objectives of the department's approved curriculum set out in the United States Department of Transportation, National Highway Traffic Safety Administration's National Emergency Medical Services Education Standards, January 2009.⁴ Includes administration of oxygen; the patient's prescribed nitroglycerin, bronchodilator inhaler, or epinephrine autoinjector; and over-the-counter medicines, such as activated charcoal. Does not include manual defibrillation.⁵

ALS: The medical condition of the patient must necessitate one of the following emergency care techniques for transport to be considered ALS: manual electric cardiac defibrillation, administration of antiarrhythmic agents, intramuscular therapy, the use of endotracheal intubation devices, or intravenous therapy.⁶

BLS Levels of Service	Non-Emergency BLS: BLS level transport of a recipient to a Medicaid-enrolled location for a covered Medicaid service in a non-emergency situation.	Emergency BLS: BLS level transport when an immediate (emergency) medical response is required.
ALS Levels of Service	ALS 1: Includes BLS plus the provision of one medically necessary ALS intervention. ALS 1 may be reimbursed at either an emergency or non-emergency level.	ALS 2: Is always an emergency situation and includes the provision of medically necessary supplies and services involving: <ul style="list-style-type: none"> • At least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion (excluding crystalloid fluids); or • At least one of these ALS 2 procedures: Manual defibrillation/cardioversion Endotracheal intubation Central venous line Cardiac pacing Chest decompression Surgical airway Intraosseous line

¹ AS 18.08.200(2)

² AS 18.08.200(6)

³ 7 AAC 120.490(2)

⁴ 7 AAC 26.050(1)(A)

⁵ 7 AAC 26.999(11)

⁶ AS 18.08.200(1)