

Questions and Answers from Open Door Forum: Ambulance, November 7, 2019

1. If an agency is selected in the first round and their fiscal year begins September 1, will the reporting be September 1, 2020 through August 31, 2022 for that first round of data?
 - a. Yes, it would be - well it would be September 1, 2020 through August 31, 2021.
2. So you all extended this demo. And I was wondering why we stuck with the same number of states and didn't expand it nationwide.
 - a. We are still continuing to test the model in order to determine if it meets the criteria for nationwide expansion. So we're continuing in the current states while we continue that to test it.
 - i. What information is still required out of that testing before you would expand it nationwide?
 1. Yes, we just have certain steps that we have to follow. And we're still working through that process.
3. The cost sheet that they provide us, will the vast amount of information be able to be directly transferred from that cost sheet to this program?
 - a. The current plan is to have a Web-based data collection instrument that - where you go item by item responding to questions. Part of the important structure of the data collection instrument is that your responses to some early questions influence what information you're asked about later on. And that is complicated to translate into a spreadsheet type format.
4. We receive our advanced life support from a hospital-based intercept truck so it does not really fit the criteria or the definition that you guys use for ALS intercept because we're not in New York state and basic life support and advanced life support both bill. However, under Medicare rules we need to jointly bill for services to Medicare. So we bill at the ALS rate and then split that money out between us and the hospital-based intercept. And that's done by contract and it's pre-established. How are we going to report the ALS expenses because that hospital intercept truck intercepts with about nine different basic life support ambulances throughout the county so that their expenses, A, are included, but not counted ten different times?
 - a. That's a good question and that's one that might be useful to other organizations on the FAQ document at some point. There is in the other cost section a place to enter a cost that you're paying to other ambulance organizations as part of maybe the kind of contractual arrangement that you have with that other organization. So there is a place I think to report those costs. And in terms of providing some more specific guidance on how to report that, I think that would be useful to add to the FAQs.
5. We have been selected for the first round. And you indicated that our MACs will be reaching out to us. Can you give me - tell me what it is that we can expect and when will they be reaching out?
 - a. So we have been working with the MACs. They will be sending you a letter. And that letter will detail information about the data collection system and

resources. The main question in that letter of information that you'll have to get back to your MAC with is whether you will - is your start date, basically whether you're a calendar year or a fiscal year and when that is.

6. In looking at the information related to counts and types of services, I see that you are going to look at responses that did not result in a transport. But also on the list you have transports paid in full or in part by an insurer and/or patient. But in Pennsylvania we have a new law that we are actually getting paid for treat/no transports. So how do we - do we report those as transports paid or do you want those reported separately? And how do we report those types of services?
 - a. We are working on developing some recommendations to the instrument we heard from many different organizations about state-specific issues that might come up/crop up in the course of collecting and reporting information. I think this sounds like a great example.
7. Most of your rural communities or ambulances have only got one person doing all of this work. How do you expect all this information to get to you in five months after the fiscal year ends?
8. I think that we're going to have resources to help you with the data collection. And the instrument we're expecting is going to be a Web-based instrument where you'll be keying in information to the survey.
 - a. It's going to have a lot of skip patterns and things like that. And I think that it will be easy to use and we'll be testing that system on entering the data. We'll be talking about how to look at resources you might currently have to sort of collect your data on an ongoing basis throughout the year.
9. We are a county-based fire and EMS 911-only system. And we are an all hazard system, so we respond to whatever the first call is that comes in. So it could be a fire call, could be HAZMAT, could be EMS, could be all three together. Will we need to come up with a way of separating out anything that does not involve ground ambulance to look at non-EMS related?
 - a. So for the most part specific questions are designed that you'll report information in such a way that those analyzing the data will actually do that allocation. But there are specific instructions around say reporting labor costs and staffing that you'll need to pay attention to in that case where you provide both ground ambulance and other services. But the calculations themselves, like taking some share, that would happen - that would be done by those analyzing the data, not on your end.
10. It's regarding the CMS patient signature form. Our facility is hospital based again in a rural area. And we are wondering if we need one signature per trip or one signature on file for future trips as we have several patients that will commence daily.
 - a. We would suggest that you contact your Medicare Administrative Contractor (MAC) for further instructions on billing requirements.
11. Part of a rural, super rural tribal ambulance. Is there anybody that's going to be exempt from this program?

- a. So there are no automatic exemptions. We are required to sample ambulance organizations for their cost and revenue data. I think looking back at the prior caller as well - I believe - I think we really want to try and balance the need for data but we also want to ensure that we capture the rural and super rural organizations. I think that their data is really important in the scheme of this collection and to have those costs reflected and to say that, you know, we will be doing a lot of outreach and assistance to help you get the data to us.