



GOVERNMENT OF THE DISTRICT OF COLUMBIA

Fire and Emergency Medical Services Department

PUBLIC NOTICE

Date of Notice: 10/01/2023

Effective Date: 10/01/2023 (and prior)

Reason for Notice: Clarification of Medicaid Program billing practices.

When a patient is treated and/or transported by the District of Columbia Fire and Emergency Medical Services (DCFEMS) Department, or by Global Medical Response (GMR, formerly AMR), DCFEMS uses a third party billing service to process insurance claims and bill for ambulance fees and charges. This notice describes ambulance fees and charges used for submission of Medicaid Program insurance claims, including conditional adjusted rates as described by Interim Reimbursement Rates for Emergency Medical Ground Transportation Services issued by the Department of Health Care Finance (DHCF) effective 3/1/2021 (or later). The DCFEMS third party billing party is authorized to use this notice in determining ambulance fees and charges for patient beneficiaries enrolled in Medicaid Program plans at a primary, secondary, or tertiary level of coverage.

As of **October 1, 2023** (and prior):

AUTHORIZED MEDICAID PROGRAM AMBULANCE FEES AND CHARGES

OF THE DISTRICT OF COLUMBIA FIRE AND EMERGENCY MEDICAL SERVICES DEPARTMENT

I. AUTHORIZATION

This notice of ambulance fees and charges is authorized for use by the DCFEMS ambulance billing administrator on and prior to the effective date. The DCFEMS third party billing service (by contractual terms and conditions) shall follow the requirements of this notice for Medicaid Program billing practices. Identified errors, omissions, or other inquiries should be directed to the DCFEMS third party billing service office representative **by calling 1-202-673-3368** during normal business hours.

II. MEDICAID PROGRAM FEES AND CHARGES BY LEVEL OF SERVICE

- A. The DCFEMS third party billing service is authorized to submit insurance claims (on behalf of patients) for ambulance fees and charges by level of service using "Table 1B – Authorized Fees (Medicaid)" of the most current "Authorized Ambulance Fees and Charges" Notice published by DCFEMS.

III. MEDICAID PROGRAM FEES AND CHARGES BY INSURANCE PROGRAM

- A. The DCFEMS third party billing service is authorized to submit insurance claims (on behalf of patients) for ambulance fees and charges using “Table 1B – Authorized Fees (Medicaid)” of the most current “Authorized Ambulance Fees and Charges” Notice published by DCFEMS to all insurance program plans including (but not limited to) the following:
- (1) District of Columbia Medicaid Program plans (when the patient beneficiary has primary coverage).
 - (2) Out-of-State Medicaid Program plans (when the patient beneficiary has primary coverage).
 - (3) Medicare Program plans (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
 - (4) Other insurance program plans using Medicare Program requirements (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
 - (5) Veterans Healthcare plans (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
 - (6) Private plans (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
 - (7) Automobile and personal liability plans (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
 - (8) Other insurance program plans (when the patient beneficiary has secondary or tertiary coverage by a Medicaid Program plan).
- B. When submitting claims (on behalf of patients) to the insurance program plans described immediately above, the DCFEMS third party billing service shall abide by the rules of such plans when preparing and submitting claims, and when accounting for claim payments. Unpaid balance billing (if applicable) shall be directed to a secondary or tertiary Medicaid Program plan using follow-up claim submission (if authorized by law, regulation, and/or plan rules).
- C. Patient beneficiaries enrolled in Medicaid Program plans at a primary, secondary, or tertiary level of coverage are exempt from unpaid account balance billing as described by Section III of the “Authorized Ambulance Fees and Charges” Notice published by DCFEMS.

This notice was approved for publication by the District of Columbia Fire and EMS Department on 09/20/2023.