



# Medicare Ground Ambulance Data Collection System: Overview and Brief Instrument Walkthrough

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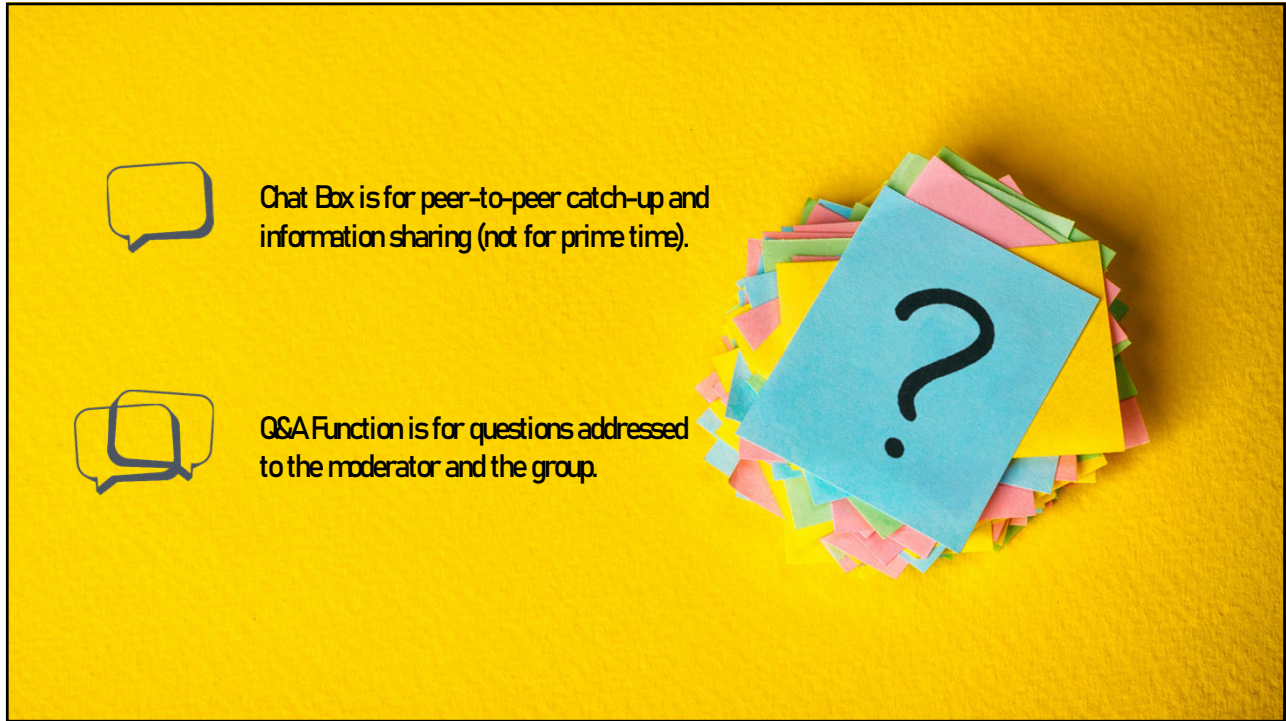
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**This session is being recorded.  
The slides and video will be emailed to  
AAA members in tomorrow's  
Digest newsletter.**

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Chat Box is for peer-to-peer catch-up and information sharing (not for prime time).

Q&A Function is for questions addressed to the moderator and the group.

A stack of colorful sticky notes with a large black question mark on the top blue note is positioned on the right side of the slide.

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## Agenda

1. Overview of the Medicare Ground Ambulance Data Collection System
2. Describe the information that sampled ground ambulance organizations will need to collect and report
3. Provide an overview of CMS resources and education activities

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## Overview of the Medicare Ground Ambulance Data Collection System (GADCS)



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## Background

- Section 50203 (b) of the Bipartisan Budget Act (BBA) of 2018 requires CMS to collect cost, revenue, utilization, and other information from a representative sample of providers and suppliers of ground ambulance services (“ground ambulance organizations”).
- Participation is required; selected ground ambulance organizations that do not sufficiently report will be subject to a 10% payment reduction.
- The statute requires the Medicare Payment Advisory Commission (MedPAC) to submit a Report to Congress analyzing the data to assess the adequacy of payments for ground ambulance services and geographic variations in the cost of furnishing services.

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## Key GADCS Concepts (1)

- Instrument: The set of questions selected ground ambulance organizations will have to answer.
  - A “printable” version of the instrument is on the Medicare Ambulances Services Center website (<https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html>)
  - CMS is developing a web-based version of the instrument
- System: The broader web-based system to register, link to NPIs, and access the instrument. You will report data via the system.

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## Key GADCS Concepts (2)

- **Data Collection Period:** Sampled organizations will collect required data over a continuous 12-month period.
  - The 12-month period can start on January 1 of a calendar year or during your organization's annual accounting period (such as a fiscal year).
  - Sampled organizations must report their data collection period start date to CMS within 30 days of receiving notification that they were selected.
- **Data Reporting Period:** Sampled organizations will report data to CMS using the web-based instrument during a continuous 5-month period.
  - Each organization's reporting period starts immediately after the end of its data collection period.

### Example:

- An organization chooses a data collection period start date of 1/1/2022.
- The organization's data collection period runs 1/1/2022 through 12/31/2022.
- The organization's data reporting period runs 1/1/2023 through 5/31/2023.

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## Who's Required to Report?

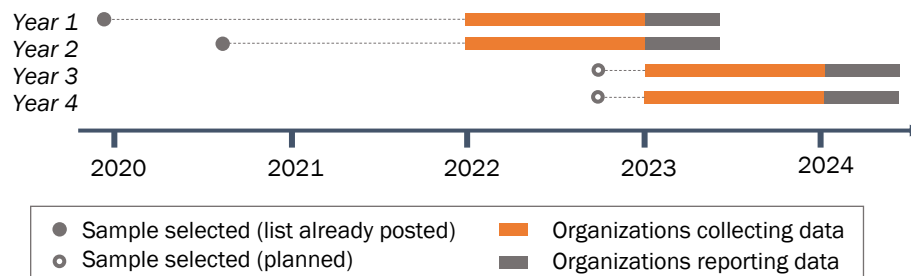
- CMS already randomly selected:
  - 25% of ground ambulance organizations for "Year 1"
  - 25% of ground ambulance organizations for "Year 2"
- Roughly 50% of ground ambulance organizations have not yet been selected (but likely will be soon).
- Lists of Year 1 and year 2 organizations are listed on the Medicare Ambulances Services Center website (<https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html>).

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## CMS Adjusted the GADCS Timeline via Rulemaking

- Already-selected Year 1 and 2 organizations will:
  - Collect information during data collection periods starting in 2022.
  - Report information during data reporting periods starting in 2023.
- Year 3 and 4 organizations will:
  - Collect information during data collection periods starting in 2023.
  - Report information during data reporting periods starting in 2024.



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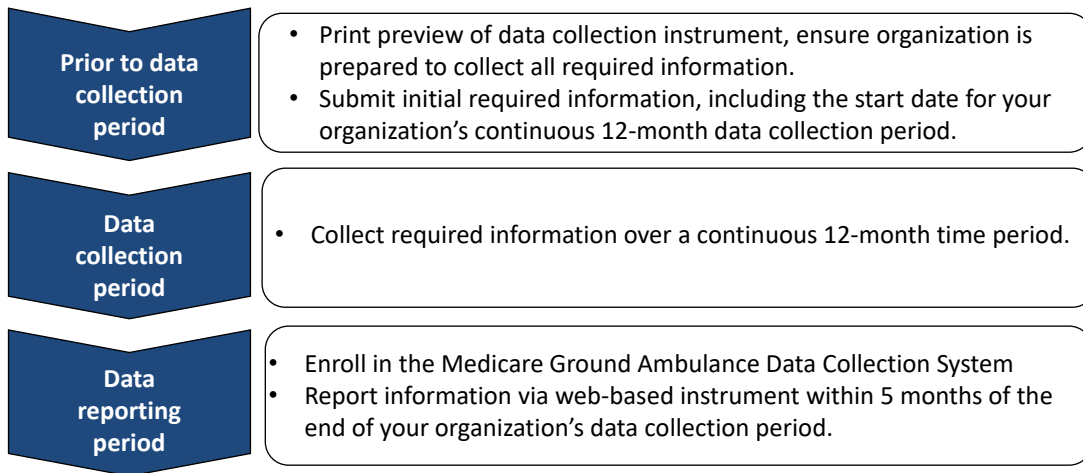
## Notification Process

- CMS will send notification letters to all selected organizations beginning in November 2021.
- Sampled organizations are **required** to report certain information within 30 days of receiving notification:
  - Acknowledgement of receipt
  - The name and contact information for one or more staff who CMS can contact for issues related to the data collection system
  - The start date for your organization's continuous 12-month data collection period

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## Summary of Timeline for Sampled Organizations



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## Instrument Overview

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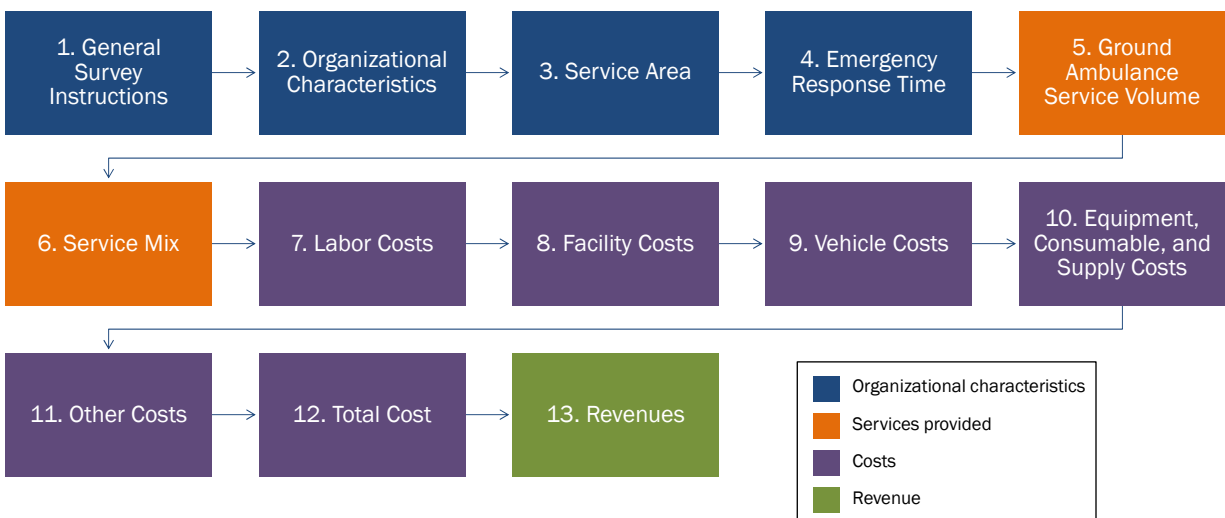
## General Principles for Collecting and Reporting Information

- Unless otherwise specified, report on **all** ground ambulance services, costs, and revenue, not just Medicare services, costs, and revenue.
- Report each cost and revenue item **only once**. Do not double count as that will result in overstating of cost and/or revenue information.
- Report on services, costs, and revenue tallied over your organization's **entire 12-month data collection period**.
- Unless specified in the instructions, **do not report estimates** or "best guesses" unless specified. Your organization may need to change the way some information is tracked during the data collection period so that you will be able to report accurate information.
- Your organization will need to **collect cost information from outside your ground ambulance organization** in some cases (e.g., if your municipality pays for facilities, utilities, or benefits).

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## The Instrument Covers 4 Broad Categories of Information Across 13 Sections



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## Section 2: Organizational Characteristics

- Whether your ground ambulance organization bills using one or more National Provider Identifiers (NPI)
- Organization name and contact information
- Ownership type (for-profit, non-profit, government, public-private partnership)
- Services other than ground ambulance services (e.g., fire, police, hospital, air ambulance)
- Whether your organization uses volunteer labor
- Staffing model

Responses in this section will help tailor later questions to be more relevant to your organization

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## Section 3: Service Area

- Report ZIP codes which comprise your primary and secondary (if applicable) service areas

Primary Service Area: The area in which you are exclusively or primarily responsible for providing service at one or more levels and where it is highly likely that the majority of your pickups occur

Secondary Service Area: Other areas where you regularly provide services through mutual or auto-aid agreements

- Do not report areas where your organization provides services only under exceptional circumstances

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## Section 4: Response Times

### For Organizations Responding to Emergency Calls for Service:

- How your organization tracks response times
- Average response times in primary/secondary service areas
- Whether your organization is required or incentivized to meet response time targets

**CY 2022 PFS Final Rule Change:** CMS now asks for the share of responses that were greater than twice your average response time. This replaces an earlier question asking for your 90<sup>th</sup> percentile response time.

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## Section 5: Service Volume

- Collect and report the number of:
  - Total responses for all calls for service (including fire/police-only)
  - Ground ambulance responses
  - Responses that did not result in a transport
  - Total transports
  - Transports paid in full or in part by an insurer and/or patient

**CY 2022 PFS Final Rule Change:** CMS clarified that paid transports are transports furnished during the data collection that are paid in full or in part by the time data is reported. CMS understands that some transports during the data collection period will be paid later.

- Standby events
- Paramedic intercepts

Reminder: Report counts of services over your organization's entire 12-month data collection period. Report counts of *total services*, not just Medicare services.

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## Section 6: Types of Services Provided

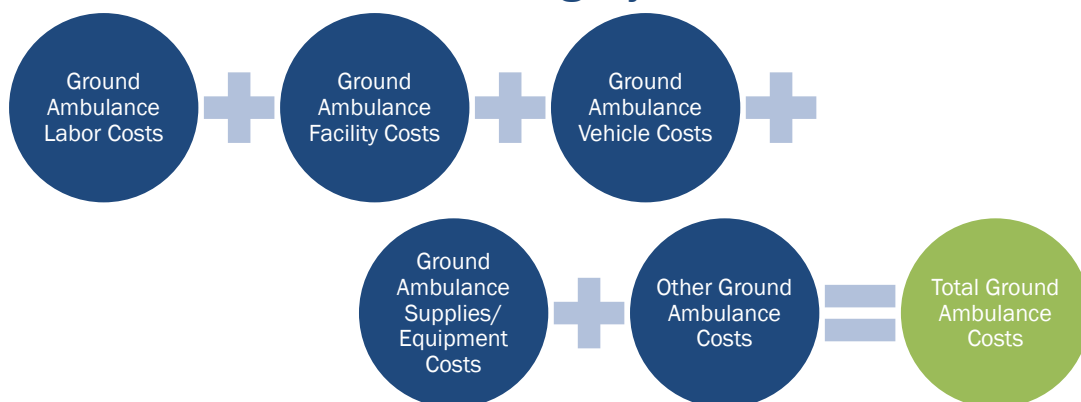
- Report the share of ground ambulance responses that:
  - Were emergency versus non-emergency
  - Involved response staff from another organization
  - Were in your primary service area
- Report the share of ground ambulance transports:
  - By Healthcare Common Procedure Coding System (HCPCS) code
  - That were to and from a hospital or other provider (i.e., interfacility transports)

Some organizations will need to work with their billing dept. or company to produce these reports

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## Sections 7-11: Costs are Collected and Reported by Category



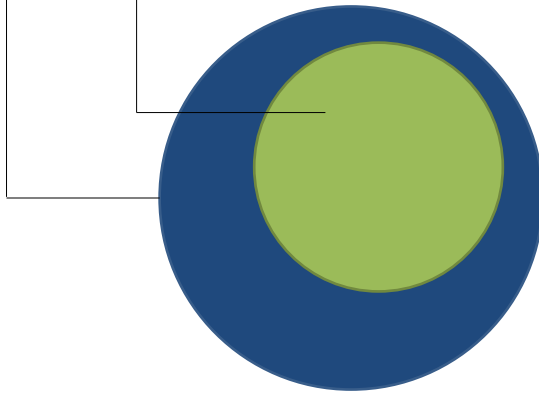
If your organization provides only ground ambulance services, then your total ground ambulance costs will be about the same as your organization's total costs.

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## Some Organizations Will Have Costs That Are Out-of-Scope

Your organization's total costs

Your organization's ground ambulance costs



Specific collection and reporting instructions apply to:

- Fire department-based ground ambulance organizations
- Police department-based or other public safety-based ground ambulance organizations
- Ground ambulance organizations that also offer air ambulance services
- Ground ambulance organizations that are providers of other health care services
- Fundraising

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## Section 7: Staffing and Labor Costs

- Whether your organization uses paid and/or volunteer staff in specific categories:
  - Emergency medical technicians (EMTs)/EMT-Paramedics
  - Other response staff categories
  - Specific administration/facility categories
  - Medical director
- Total annual hours worked and compensation for paid staff by staff category:
  - Overall
  - Related to ground ambulance responsibilities
  - Related to fire, police, or other public safety responsibilities (if applicable)
  - Related to all other responsibilities
- Total hours worked and expenses for volunteer staff.

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## Section 8: Facility Costs

- Number of facilities occupied by your organization
- Square footage for each facility and the share of each facility that is dedicated to ground ambulance services
- Ownership status of each facility (e.g., owned, rented/leased)
- Annual lease, mortgage, or depreciation costs for each facility as applicable
- Facilities-related insurance costs, maintenance and improvement costs, utility costs, and taxes for all facilities combined

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## Section 9: Vehicle Costs

- Number of ambulance and non-ambulance vehicles owned or leased by your organization
- Total miles traveled (any reason)
- Ownership status of each vehicle (owned, rented, donated)
- Purchase or lease, license, maintenance, and insurance costs
- Depreciation costs

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## Section 10: Equipment, Consumable, and Supply Costs

- Depreciation, maintenance, certification, and service costs for capital equipment
- Medication costs or reasons for no medication costs (e.g., hospital provides, donated)
- Supplies and consumables costs
- Reporting for equipment and supplies separated by medical and non-medical costs

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## Section 11: Other Costs

- Whether your organization contracts for billing, accounting, vehicle maintenance and repair, dispatch and call center, facilities maintenance, or information technology services.
  - If so, the annual cost for the service and the share associated with ground ambulance services.
  - You will report a single cost for contracted services in each category.
- Whether your organization has any other costs related to ground ambulance services not reported elsewhere.
  - While the instrument lists many categories, you may also enter your own categories, if necessary, to ensure all costs are reported.

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## Section 12: Total Costs

- Your organization's **total costs**, including costs unrelated to ground ambulance services.
- We are asking for your organization's total costs in one separate question at the end of the cost section in the data collection instrument.

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## Section 13: Revenue from Health Insurers and Patients

- Revenue from different categories of health care payers:
  - fee-for-service (FFS) Medicare
  - Medicare Advantage (i.e., Medicare managed care)
  - FFS Medicaid
  - Medicaid managed care
  - TRICARE
  - Veteran's Health Administration
  - commercial insurance
  - workers' compensation
  - patient self-pay.
- You will be asked whether patient cost sharing is included in the amount you report for each payer category or in the patient self-pay category.
- Whether you routinely bill for transports of patients with different sources of coverage. The specific categories are the same as those listed above.

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## Revenue from Other Sources and Total Revenue

- Whether your organization realized ground revenue from any other sources, including but not limited to:
  - Tax-based or other revenue from municipalities
  - Contracted services
  - Donations
- Your organization's **total revenue**, including revenue unrelated to ground ambulance services.

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## Overview of CMS Education Activities

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## CMS Education Activities

- CMS posted an FAQ that is periodically updated based on questions asked.
- CMS posted an updated “Quick Reference Guide”—a list of required information to be collected from ambulance organizations.
- More information about these activities will be posted on the Ambulances Services website: <https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html>.
- Contact [AmbulanceDataCollection@cms.hhs.gov](mailto:AmbulanceDataCollection@cms.hhs.gov) for ground ambulance data collection inquiries.
- Contact [AmbulanceODF@cms.hhs.gov](mailto:AmbulanceODF@cms.hhs.gov) for other ambulance inquiries.

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## CMS Educational Webinars

- CMS hosts a series of GADCS webinars with sessions on:
  - An overview of the GADCS instrument
  - Instructions and considerations on reporting labor hours and costs
  - Special requirements for volunteer organizations
  - Special requirements for fire/police/public safety organizations
  - Detailed instructions on reporting revenue
  - Special requirements for provider organizations
  - Special requirements for organizations billing Medicare under multiple NPIs
- Slides, recordings, and transcripts from past webinars are or will be posted soon to the Ambulances Services Center website: <https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center>

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Q&A

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