



Rep. Jay Hoffman

Filed: 3/12/2019

10100HB2977ham002

LRB101 07354 KTG 56471 a

1 AMENDMENT TO HOUSE BILL 2977

2 AMENDMENT NO. _____. Amend House Bill 2977 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Public Aid Code is amended by
5 changing Section 5-4.2 as follows:

6 (305 ILCS 5/5-4.2) (from Ch. 23, par. 5-4.2)

7 Sec. 5-4.2. Ambulance services payments.

8 (a) For ambulance services provided to a recipient of aid
9 under this Article on or after January 1, 1993, the Illinois
10 Department shall reimburse ambulance service providers at
11 rates calculated in accordance with this Section. It is the
12 intent of the General Assembly to provide adequate
13 reimbursement for ambulance services so as to ensure adequate
14 access to services for recipients of aid under this Article and
15 to provide appropriate incentives to ambulance service
16 providers to provide services in an efficient and

1 cost-effective manner. Thus, it is the intent of the General
2 Assembly that the Illinois Department implement a
3 reimbursement system for ambulance services that, to the extent
4 practicable and subject to the availability of funds
5 appropriated by the General Assembly for this purpose, is
6 consistent with the payment principles of Medicare. To ensure
7 uniformity between the payment principles of Medicare and
8 Medicaid, the Illinois Department shall follow, to the extent
9 necessary and practicable and subject to the availability of
10 funds appropriated by the General Assembly for this purpose,
11 the statutes, laws, regulations, policies, procedures,
12 principles, definitions, guidelines, and manuals used to
13 determine the amounts paid to ambulance service providers under
14 Title XVIII of the Social Security Act (Medicare).

15 (b) For ambulance services provided to a recipient of aid
16 under this Article on or after January 1, 1996, the Illinois
17 Department shall reimburse ambulance service providers based
18 upon the actual distance traveled if a natural disaster,
19 weather conditions, road repairs, or traffic congestion
20 necessitates the use of a route other than the most direct
21 route.

22 (c) For purposes of this Section, "ambulance services"
23 includes medical transportation services provided by means of
24 an ambulance, medi-car, service car, or taxi.

25 (c-1) For purposes of this Section, "ground ambulance
26 service" means medical transportation services that are

1 described as ground ambulance services by the Centers for
2 Medicare and Medicaid Services and provided in a vehicle that
3 is licensed as an ambulance by the Illinois Department of
4 Public Health pursuant to the Emergency Medical Services (EMS)
5 Systems Act.

6 (c-2) For purposes of this Section, "ground ambulance
7 service provider" means a vehicle service provider as described
8 in the Emergency Medical Services (EMS) Systems Act that
9 operates licensed ambulances for the purpose of providing
10 emergency ambulance services, or non-emergency ambulance
11 services, or both. For purposes of this Section, this includes
12 both ambulance providers and ambulance suppliers as described
13 by the Centers for Medicare and Medicaid Services.

14 (c-3) For purposes of this Section, "medi-car" means
15 transportation services provided to a patient who is confined
16 to a wheelchair and requires the use of a hydraulic or electric
17 lift or ramp and wheelchair lockdown when the patient's
18 condition does not require medical observation, medical
19 supervision, medical equipment, the administration of
20 medications, or the administration of oxygen.

21 (c-4) For purposes of this Section, "service car" means
22 transportation services provided to a patient by a passenger
23 vehicle where that patient does not require the specialized
24 modes described in subsection (c-1) or (c-3).

25 (d) This Section does not prohibit separate billing by
26 ambulance service providers for oxygen furnished while

1 providing advanced life support services.

2 (e) Beginning with services rendered on or after July 1,
3 2008, all providers of non-emergency medi-car and service car
4 transportation must certify that the driver and employee
5 attendant, as applicable, have completed a safety program
6 approved by the Department to protect both the patient and the
7 driver, prior to transporting a patient. The provider must
8 maintain this certification in its records. The provider shall
9 produce such documentation upon demand by the Department or its
10 representative. Failure to produce documentation of such
11 training shall result in recovery of any payments made by the
12 Department for services rendered by a non-certified driver or
13 employee attendant. Medi-car and service car providers must
14 maintain legible documentation in their records of the driver
15 and, as applicable, employee attendant that actually
16 transported the patient. Providers must recertify all drivers
17 and employee attendants every 3 years.

18 Notwithstanding the requirements above, any public
19 transportation provider of medi-car and service car
20 transportation that receives federal funding under 49 U.S.C.
21 5307 and 5311 need not certify its drivers and employee
22 attendants under this Section, since safety training is already
23 federally mandated.

24 (f) With respect to any policy or program administered by
25 the Department or its agent regarding approval of non-emergency
26 medical transportation by ground ambulance service providers,

1 including, but not limited to, the Non-Emergency
2 Transportation Services Prior Approval Program (NETSPAP), the
3 Department shall establish by rule a process by which ground
4 ambulance service providers of non-emergency medical
5 transportation may appeal any decision by the Department or its
6 agent for which no denial was received prior to the time of
7 transport that either (i) denies a request for approval for
8 payment of non-emergency transportation by means of ground
9 ambulance service or (ii) grants a request for approval of
10 non-emergency transportation by means of ground ambulance
11 service at a level of service that entitles the ground
12 ambulance service provider to a lower level of compensation
13 from the Department than the ground ambulance service provider
14 would have received as compensation for the level of service
15 requested. The rule shall be filed by December 15, 2012 and
16 shall provide that, for any decision rendered by the Department
17 or its agent on or after the date the rule takes effect, the
18 ground ambulance service provider shall have 60 days from the
19 date the decision is received to file an appeal. The rule
20 established by the Department shall be, insofar as is
21 practical, consistent with the Illinois Administrative
22 Procedure Act. The Director's decision on an appeal under this
23 Section shall be a final administrative decision subject to
24 review under the Administrative Review Law.

25 (f-5) Beginning 90 days after July 20, 2012 (the effective
26 date of Public Act 97-842), (i) no denial of a request for

1 approval for payment of non-emergency transportation by means
2 of ground ambulance service, and (ii) no approval of
3 non-emergency transportation by means of ground ambulance
4 service at a level of service that entitles the ground
5 ambulance service provider to a lower level of compensation
6 from the Department than would have been received at the level
7 of service submitted by the ground ambulance service provider,
8 may be issued by the Department or its agent unless the
9 Department has submitted the criteria for determining the
10 appropriateness of the transport for first notice publication
11 in the Illinois Register pursuant to Section 5-40 of the
12 Illinois Administrative Procedure Act.

13 (g) Whenever a patient covered by a medical assistance
14 program under this Code or by another medical program
15 administered by the Department, including a patient covered
16 under the State's Medicaid managed care program, is being
17 transported from a facility and requires non-emergency
18 transportation including ground ambulance, medi-car, or
19 service car transportation, a Physician Certification
20 Statement as described in this Section shall be required for
21 each patient. Facilities shall develop procedures for a
22 licensed medical professional to provide a written and signed
23 Physician Certification Statement. The Physician Certification
24 Statement shall specify the level of transportation services
25 needed and complete a medical certification establishing the
26 criteria for approval of non-emergency ambulance

1 transportation, as published by the Department of Healthcare
2 and Family Services, that is met by the patient. This
3 certification shall be completed prior to ordering the
4 transportation service and prior to patient discharge. The
5 Physician Certification Statement is not required prior to
6 transport if a delay in transport can be expected to negatively
7 affect the patient outcome.

8 The medical certification specifying the level and type of
9 non-emergency transportation needed shall be in the form of the
10 Physician Certification Statement on a standardized form
11 prescribed by the Department of Healthcare and Family Services.
12 Within 75 days after July 27, 2018 (the effective date of
13 Public Act 100-646) ~~this amendatory Act of the 100th General~~
14 ~~Assembly~~, the Department of Healthcare and Family Services
15 shall develop a standardized form of the Physician
16 Certification Statement specifying the level and type of
17 transportation services needed in consultation with the
18 Department of Public Health, Medicaid managed care
19 organizations, a statewide association representing ambulance
20 providers, a statewide association representing hospitals, 3
21 statewide associations representing nursing homes, and other
22 stakeholders. The Physician Certification Statement shall
23 include, but is not limited to, the criteria necessary to
24 demonstrate medical necessity for the level of transport needed
25 as required by (i) the Department of Healthcare and Family
26 Services and (ii) the federal Centers for Medicare and Medicaid

1 Services as outlined in the Centers for Medicare and Medicaid
2 Services' Medicare Benefit Policy Manual, Pub. 100-02, Chap.
3 10, Sec. 10.2.1, et seq. The use of the Physician Certification
4 Statement shall satisfy the obligations of hospitals under
5 Section 6.22 of the Hospital Licensing Act and nursing homes
6 under Section 2-217 of the Nursing Home Care Act.
7 Implementation and acceptance of the Physician Certification
8 Statement shall take place no later than 90 days after the
9 issuance of the Physician Certification Statement by the
10 Department of Healthcare and Family Services.

11 Pursuant to subsection (E) of Section 12-4.25 of this Code,
12 the Department is entitled to recover overpayments paid to a
13 provider or vendor, including, but not limited to, from the
14 discharging physician, the discharging facility, and the
15 ground ambulance service provider, in instances where a
16 non-emergency ground ambulance service is rendered as the
17 result of improper or false certification.

18 Beginning October 1, 2018, the Department of Healthcare and
19 Family Services shall collect data from Medicaid managed care
20 organizations and transportation brokers, including the
21 Department's NETSPAP broker, regarding denials and appeals
22 related to the missing or incomplete Physician Certification
23 Statement forms and overall compliance with this subsection.
24 The Department of Healthcare and Family Services shall publish
25 quarterly results on its website within 15 days following the
26 end of each quarter.

1 (h) On and after July 1, 2012, the Department shall reduce
2 any rate of reimbursement for services or other payments or
3 alter any methodologies authorized by this Code to reduce any
4 rate of reimbursement for services or other payments in
5 accordance with Section 5-5e.

6 (i) On and after July 1, 2018, the Department shall
7 increase the base rate of reimbursement for both base charges
8 and mileage charges for ground ambulance service providers for
9 medical transportation services provided by means of a ground
10 ambulance to a level not lower than 112% of the base rate in
11 effect as of June 30, 2018.

12 (j) On or before January 1, 2020, the Department of
13 Healthcare and Family Services shall create a sustainable rate
14 or rates of reimbursement for medi-car and service car services
15 taking into account the labor, insurance, and fuel costs of
16 providing such services. The rate or rates shall also take into
17 account the difference in cost between bedside-to-bedside
18 transport for long-term care facility residents and
19 curbside-to-curbside transport for other beneficiaries. In
20 order to ensure regional costs are considered in the new rate
21 or rates of reimbursement, the Department shall consult at
22 least one medi-car service provider from St. Clair, Sangamon,
23 and Cook counties for the purpose of providing input in the
24 construction of the new rate or rates of reimbursement. The new
25 rate or rates of reimbursement must be greater than 2 times the
26 rate or rates of reimbursement in effect on January 1, 2019.

1 (Source: P.A. 100-587, eff. 6-4-18; 100-646, eff. 7-27-18;
2 revised 8-27-18.)".