

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

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
17 cost-effective manner. It is also the intent of the General
18 Assembly to ensure that ambulance service providers are
19 appropriately reimbursed for medically necessary ambulance
20 services by requiring the Illinois Department to adopt, by
21 rule, criteria establishing medical necessity and appropriate
22 procedures for the processing of claims for reimbursement.

23 Thus, it is the intent of the General Assembly that the

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

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

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

24 (c-1) For purposes of this Section, "ground ambulance
25 service" means medical transportation services that are
26 described as ground ambulance services by the Centers for

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

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

13 (d) This Section does not prohibit separate billing by
14 ambulance service providers for oxygen furnished while
15 providing advanced life support services.

16 (e) Beginning with services rendered on or after July 1,
17 2008, all providers of non-emergency medi-car and service car
18 transportation must certify that the driver and employee
19 attendant, as applicable, have completed a safety program
20 approved by the Department to protect both the patient and the
21 driver, prior to transporting a patient. The provider must
22 maintain this certification in its records. The provider shall
23 produce such documentation upon demand by the Department or its
24 representative. Failure to produce documentation of such
25 training shall result in recovery of any payments made by the
26 Department for services rendered by a non-certified driver or

1 employee attendant. Medi-car and service car providers must
2 maintain legible documentation in their records of the driver
3 and, as applicable, employee attendant that actually
4 transported the patient. Providers must recertify all drivers
5 and employee attendants every 3 years.

6 Notwithstanding the requirements above, any public
7 transportation provider of medi-car and service car
8 transportation that receives federal funding under 49 U.S.C.
9 5307 and 5311 need not certify its drivers and employee
10 attendants under this Section, since safety training is already
11 federally mandated.

12 (f) With respect to any policy or program administered by
13 the Department or its agent regarding approval of non-emergency
14 medical transportation by ground ambulance service providers,
15 including, but not limited to, the Non-Emergency
16 Transportation Services Prior Approval Program (NETSPAP), the
17 Department shall establish by rule a process by which ground
18 ambulance service providers of non-emergency medical
19 transportation may appeal any decision by the Department or its
20 agent in ~~for~~ which a claim is not approved for payment, but the
21 patient meets the criteria for medical necessity and the
22 appropriate level of ambulance service was provided. The
23 Department shall consider appeals filed for reimbursement
24 denials based upon the lack of availability of a physician
25 discharge order occurring on or after July 1, 2013 if such
26 appeal is filed within 90 days of the effective date of this

1 amendatory Act of the 98th General Assembly. The Department
2 shall apply the medical criteria established by rule in
3 determining all appeals and shall take into account all
4 relevant documentation substantiating the patient's condition
5 as it relates to the criteria for medical necessity and may
6 accept a provider's run report or equivalent. ~~no denial was~~
7 ~~received prior to the time of transport that either (i) denies~~
8 ~~a request for approval for payment of non emergency~~
9 ~~transportation by means of ground ambulance service or (ii)~~
10 ~~grants a request for approval of non emergency transportation~~
11 ~~by means of ground ambulance service at a level of service that~~
12 ~~entitles the ground ambulance service provider to a lower level~~
13 ~~of compensation from the Department than the ground ambulance~~
14 ~~service provider would have received as compensation for the~~
15 ~~level of service requested.~~ The rule shall be filed by December
16 15, 2012 and shall provide that, for any decision rendered by
17 the Department or its agent on or after the date the rule takes
18 effect, the ground ambulance service provider shall have 60
19 days from the date the decision is received to file an appeal.
20 The rule 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 is being discharged from a
16 facility, a physician discharge order as described in this
17 Section shall be required for each patient whose discharge
18 requires medically supervised ground ambulance services.
19 Facilities shall develop procedures for a physician with
20 medical staff privileges to provide a written and signed
21 physician discharge order. The physician discharge order shall
22 specify the level of ground ambulance services needed and
23 complete a medical certification establishing the criteria for
24 approval of non-emergency ambulance transportation, as
25 published by the Department of Healthcare and Family Services,
26 that is met by the patient. This order and the medical

1 certification shall be completed prior to ordering an ambulance
2 service and prior to patient discharge.

3 Pursuant to subsection (E) of Section 12-4.25 of this Code,
4 the Department is entitled to recover overpayments paid to a
5 provider or vendor, including, but not limited to, from the
6 discharging physician, the discharging facility, and the
7 ground ambulance service provider, in instances where a
8 non-emergency ground ambulance service is rendered as the
9 result of improper or false certification.

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

15 (Source: P.A. 97-584, eff. 8-26-11; 97-689, eff. 6-14-12;
16 97-842, eff. 7-20-12; 98-463, eff. 8-16-13.)

17 Section 99. Effective date. This Act takes effect upon
18 becoming law.