

Appendix to rule 5160-15-28

RESCINDED

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Note: This information is not intended to be a comprehensive representation of all policies, claim-submission procedures, or other requirements. Please refer to Chapter 5160-15 of the Ohio Administrative Code.

EFFECTIVE AS OF 01/01/2016

HCPCS CODE	DESCRIPTION	MEDICAID MAXIMUM PAYMENT	LATEST CHANGE IN PAYMENT	POINT-OF-TRANSPORT MODIFIERS REPRESENTING COMBINATIONS OF TRIP ORIGIN AND DESTINATION THAT DO NOT REQUIRE MANUAL REVIEW	INFORMATION MODIFIERS	
Ground Ambulance Services						
A0424	Attendant, ambulance	\$9.01	01/01/2010	DD DE DG DH DJ DN DP DR DI U4 DI U7 ED EG EH EJ EP ER	U6 UA, UB	
A0426	Advanced life support, level 1, non-emergency	\$85.87	01/01/2010	GD GE GH GN GP GR GI U4 GI U7 HD HE HG HH HJ HN HP HR HI U4 HI U7		
A0428	Basic life support, non-emergency	\$82.14	01/01/2010	JD JE JH JN JP JR JI U4 JI U7 ND NG NH NJ NP NR PD PE PG PH PJ PN PP PR PI U4 PI U7 RD RE RG RH RJ RN RP		
				U4 ID U4 IG U4 IH U4 IJ U4 IP U7 ID U7 IG U7 IH U7 IJ U7 IP		
A0427	Advanced life support, level 1, emergency	\$165.55	01/01/2010	DH EI EH GH HH HI		
A0429	Basic life support, emergency	\$85.87	01/01/2010	IH JH NH NI		
A0433	Advanced life support, level 2	\$165.55	01/01/2010	PH RH SH SI U4 IH U7 IH		
A0434	Specialty care transport	\$165.55	01/01/2010	[All combinations require manual review. By definition, the only possible combinations are HH, HI, HN, IH, IN, NH, NI, and NN.]		U6
A0425	Mileage, ground ambulance	\$1.47 per mile	01/01/2010	DD DE DG DH DJ DN DP DR DI U4 DI U7 ED EG EH EI EJ EP ER GD GE GH GN GP GR GI U4 GI U7 HD HE HG HH HI HJ HN HP HR HI U4 HI U7 IH JD JE JH JN JP JR JI U4 JI U7 ND NG NH NI NJ NP NR PD PE PG PH PJ PN PP PR PI U4 PI U7 RD RE RG RH RJ RN RP SH SI U4 ID U4 IG U4 IH U4 IJ U4 IP U7 ID U7 IG U7 IH U7 IJ U7 IP		U6 UA, UB

HCPSC CODE	DESCRIPTION	MEDICAID MAXIMUM PAYMENT	LATEST CHANGE IN PAYMENT	POINT-OF-TRANSPORT MODIFIERS REPRESENTING COMBINATIONS OF TRIP ORIGIN AND DESTINATION THAT DO NOT REQUIRE MANUAL REVIEW										INFORMATION MODIFIERS
Air Ambulance Services														
A0430	Transport by fixed-wing ambulance	\$1,502.05	01/01/2010	II										U6
A0435	Mileage, fixed-wing ambulance	\$1.66 per statute mile	01/01/2010											
A0431	Transport by rotary-wing ambulance	\$1,746.40	01/01/2010	DH DI EH EI GH GI HH HI IH II JH JI NH NI PH PI RH RI SH SI										U6 UA, UB
A0436	Mileage, rotary-wing ambulance	\$1.48 per statute mile	01/01/2010	U8 IH										
Wheelchair Van Services														
A0130	Transport by wheelchair-accessible vehicle	\$24.77	01/01/2016	DD	DE	DG	DH	DJ	DN	DP	DR	DI U4	DI U7	U3 U6 UA, UB
				ED		EG	EH	EJ		EP	ER			
				GD	GE		GH		GN	GP	GR	GI U4	GI U7	
				HD	HE	HG	HH	HJ	HN	HP	HR	HI U4	HI U7	
S0209	Mileage, wheelchair-accessible vehicle	\$0.70 per mile	01/01/2010	JD	JE		JH		JN	JP	JR	JI U4	JI U7	U3 U6 UA, UB
				ND		NG	NH	NJ		NP	NR			
				PD	PE	PG	PH	PJ	PN	PP	PR	PI U4	PI U7	
				RD	RE	RG	RH	RJ	RN	RP				
T2001	Attendant, wheelchair-accessible vehicle	\$9.01	01/01/2010	U4 ID		U4 IG	U4 IH	U4 IJ		U4 IP				U3 U6 UA, UB
				U7 ID		U7 IG	U7 IH	U7 IJ		U7 IP				

Point-of-Transport Modifiers

D is a diagnostic or therapeutic site other than a practitioner's office or a hospital, such as an alcohol and drug rehabilitation center, an ambulatory surgery center, an independent diagnostic testing facility, or a medical equipment supplier.

E is a residential, domiciliary, or custodial facility that is not a skilled nursing facility (e.g., an intermediate care facility for individuals with intellectual disabilities).

G is a dialysis facility located in a hospital.

H is a hospital.

I is a site of transfer between modes of transport, such as an airstrip or a helipad.

J is a dialysis facility not located in a hospital.

N is a skilled nursing facility (SNF).

P is a practitioner's office, which includes but is not limited to the office of an individual health professional or a group of health professionals (e.g., advanced practice registered nurses, chiropractors, dentists, occupational therapists, ophthalmologists, optometrists, opticians, podiatrists, physical therapists, physicians, physician assistants, psychiatrists, or psychologists) or a clinic.

R is a residence, either permanent or temporary, other than a residential, domiciliary, or custodial facility.

S is the scene of an accident or acute event.

U4 is a workplace.

U7 is a school.

Note: With the two-character descriptors U4 and U7, a second two-character descriptor is necessary to specify the corresponding destination or origin.

For example, a transport from an individual's place of work to a physician's office would be recorded as U4 | IP (not as U4 | P):

U4, workplace + IP, from a transfer point to a practitioner's office = from a workplace to a practitioner's office

The return trip from the physician's office to the individual's place of work would be recorded as PI | U4 (not as P | U4):

PI, from a practitioner's office to a transfer point + U4, workplace = from a practitioner's office to a workplace

U5 is an origin/destination point not otherwise specified. It does not need a second descriptor, but it does require manual review.

Information Modifiers

U3 indicates a wheelchair van service provided in an ambulance vehicle. It is used only with HCPCS codes A0130, S0209, and T2001.

U6 indicates a service that is unavailable when the vehicle arrives at the destination.

UA indicates an additional trip taken by the same individual on the same day in the same type of vehicle to or from the same type of location.

UB indicates a second additional trip taken by the same individual on the same day in the same type of vehicle to or from the same type of location.