

May 4, 2022

Aetna Better Health® of Kansas

Clinical Payment, Coding and Policy Changes

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. To keep our providers informed, please see the below communication of upcoming new policies.

Effective for dates of service beginning July 3, 2022:

Ambulance Policies

Ambulance Bill Type Codes - Ambulance services reported by outpatient facilities, supplies, and transport codes should only be reported with an appropriate bill type.

Noncovered Ambulance Transportation and Transportation-Related Services - Certain ambulance transportation and transportation-related services are excluded or not otherwise covered regardless of revenue code reported. Examples would be HCPCS A0021 (OUTSIDE STATE AMBULANCE SERV) or HCPCS A0424 (EXTRA AMBULANCE ATTENDANT).

Advanced Life Support (ALS) and Basic Life Support (BLS) Approved Diagnoses - Non-emergency Advanced Life Support or Basic Life Support services should be reported with an appropriate diagnosis. Additionally, emergency Advanced Life Support (ALS) ambulance services should be reported with an appropriate diagnosis.

Air Ambulance Origin and Destination - Air ambulance transport is allowed only when the destination is an acute care hospital.

Ambulance Services and Required Modifiers - Ambulance origin and destination modifiers or an appropriate exception modifier are required for ambulance services.

Modifier QL - When a patient is pronounced dead after the ambulance is called, but prior to transport, CMS pays the ambulance provider at the ground BLS (Basic Life Support) rate only. This also applies to additional ambulance services and supplies.

Ambulance Supplies and Additional Ambulance Services - Items and services which include, but are not limited to, oxygen, drugs, extra attendants, supplies, EKG, and night differential are not separately payable when an ambulance transport service has not been billed and paid for the same date of service.

Ambulance Place of Service Codes - Ambulance providers must bill land ambulance or air/water ambulance with an appropriate place of services code when billing ambulance transport (POS 41 or 42).

Ambulance Mileage - Based on CMS guidelines, when billing for ambulance transport and mileage codes both must be billed together for the same date of service.

If you have general questions about this communication, please contact our Provider Experience Department:

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