



Sen. Sara Feigenholtz

Filed: 4/16/2021

10200SB2325sam001

LRB102 16957 KTG 25434 a

1 AMENDMENT TO SENATE BILL 2325

2 AMENDMENT NO. _____. Amend Senate Bill 2325 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
15 and 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
4 extent 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
14 under 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
8 described in the Emergency Medical Services (EMS) Systems Act
9 that 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
10 its 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
23 already federally mandated.

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

1 service providers, including, but not limited to, the
2 Non-Emergency Transportation Services Prior Approval Program
3 (NETSPAP), the Department shall establish by rule a process by
4 which ~~ground ambulance service~~ providers of ambulance
5 services, as defined in subsection (c), non emergency medical
6 ~~transportation~~ may appeal any decision by the Department or
7 its agent for which no denial was received prior to the time of
8 transport that either (i) denies a request for approval for
9 payment of ambulance services non emergency transportation by
10 ~~means of ground ambulance service~~ or (ii) grants a request for
11 approval of ambulance services non emergency transportation by
12 means of ~~ground ambulance~~ service at a level of service that
13 entitles the ~~ground ambulance service~~ provider to a lower
14 level of compensation from the Department than the ~~ground~~
15 ~~ambulance service~~ provider would have received as compensation
16 for the level of service requested. For all claims under this
17 subsection concerning ambulance services provided to
18 fee-for-service Medicaid beneficiaries denied for failure of
19 submittal of a valid Physician Certification Statement,
20 Certificate of Transportation Services, or Medical
21 Certification for Non-Emergency Ambulance on and after
22 December 15, 2012, the provider shall be able to appeal such
23 denial and establish the medical necessity of the transport
24 utilizing the patient care report and any other materials
25 available in accordance with the criteria established in
26 subsection (f-5). A Physician Certification Statement,

1 Certificate of Transportation Services, or Medical
2 Certification for Non-Emergency Ambulance form is not
3 necessary to establish subject matter jurisdiction for appeal
4 or medical necessity on appeal but may be considered if
5 available. All Department rules, or parts thereof, in conflict
6 with the provisions of this subsection shall not apply.
7 However, nothing in this amendatory Act of the 102nd General
8 Assembly shall be construed to affect any rights, actions, or
9 causes of action that existed or accrued prior to the
10 effective date of this amendatory Act of the 102nd General
11 Assembly, except that the non-necessity of a Physician
12 Certification Statement, Certificate of Transportation
13 Services, or Medical Certification for Non-Emergency Ambulance
14 form as provided in this subsection shall be retroactively
15 applied to the full extent permissible, including allowing any
16 claims denied for failure to procure such form which were not
17 appealed at the time of denial to have an opportunity for
18 proper appeal. The rule shall be filed by December 15, 2012 and
19 shall provide that, for any decision rendered by the
20 Department or its agent on or after the date the rule takes
21 effect, the ground ambulance service provider shall have 60
22 days from the date the decision is received to file an appeal
23 with the exception of claims for ambulance transports provided
24 to fee-for-service Medicaid beneficiaries which were denied
25 prior to January 1, 2020 for failure of submittal of a valid
26 Physician Certification Statement, Certificate of

1 Transportation Services, or Medical Certification for
2 Non-Emergency Ambulance which can be appealed at any time. The
3 rule established by the Department shall be, insofar as is
4 practical, consistent with the Illinois Administrative
5 Procedure Act. The Director's decision on an appeal under this
6 Section shall be a final administrative decision subject to
7 review under the Administrative Review Law.

8 (f-5) Beginning 90 days after July 20, 2012 (the effective
9 date of Public Act 97-842), (i) no denial of a request for
10 approval for payment of non-emergency transportation by means
11 of ground ambulance service, and (ii) no approval of
12 non-emergency transportation by means of ground ambulance
13 service at a level of service that entitles the ground
14 ambulance service provider to a lower level of compensation
15 from the Department than would have been received at the level
16 of service submitted by the ground ambulance service provider,
17 may be issued by the Department or its agent unless the
18 Department has submitted the criteria for determining the
19 appropriateness of the transport for first notice publication
20 in the Illinois Register pursuant to Section 5-40 of the
21 Illinois Administrative Procedure Act.

22 (g) Whenever a patient covered by a medical assistance
23 program under this Code or by another medical program
24 administered by the Department, including a patient covered
25 under the State's Medicaid managed care program, is being
26 transported from a facility and requires non-emergency

1 transportation including ground ambulance, medi-car, or
2 service car transportation, a Physician Certification
3 Statement as described in this Section shall be required for
4 each patient. Facilities shall develop procedures for a
5 licensed medical professional to provide a written and signed
6 Physician Certification Statement. The Physician Certification
7 Statement shall specify the level of transportation services
8 needed and complete a medical certification establishing the
9 criteria for approval of non-emergency ambulance
10 transportation, as published by the Department of Healthcare
11 and Family Services, that is met by the patient. This
12 certification shall be completed prior to ordering the
13 transportation service and prior to patient discharge. The
14 Physician Certification Statement is not required prior to
15 transport if a delay in transport can be expected to
16 negatively affect the patient outcome. If the ground ambulance
17 provider, medi-car provider, or service car provider is unable
18 to obtain the required Physician Certification Statement
19 within 10 calendar days following the date of the service, the
20 ground ambulance provider, medi-car provider, or service car
21 provider must document its attempt to obtain the requested
22 certification and may then submit the claim for payment.
23 Acceptable documentation includes a signed return receipt from
24 the U.S. Postal Service, facsimile receipt, email receipt, or
25 other similar service that evidences that the ground ambulance
26 provider, medi-car provider, or service car provider attempted

1 to obtain the required Physician Certification Statement.

2 The medical certification specifying the level and type of
3 non-emergency transportation needed shall be in the form of
4 the Physician Certification Statement on a standardized form
5 prescribed by the Department of Healthcare and Family
6 Services. Within 75 days after July 27, 2018 (the effective
7 date of Public Act 100-646), the Department of Healthcare and
8 Family Services shall develop a standardized form of the
9 Physician Certification Statement specifying the level and
10 type of transportation services needed in consultation with
11 the Department of Public Health, Medicaid managed care
12 organizations, a statewide association representing ambulance
13 providers, a statewide association representing hospitals, 3
14 statewide associations representing nursing homes, and other
15 stakeholders. The Physician Certification Statement shall
16 include, but is not limited to, the criteria necessary to
17 demonstrate medical necessity for the level of transport
18 needed as required by (i) the Department of Healthcare and
19 Family Services and (ii) the federal Centers for Medicare and
20 Medicaid Services as outlined in the Centers for Medicare and
21 Medicaid Services' Medicare Benefit Policy Manual, Pub.
22 100-02, Chap. 10, Sec. 10.2.1, et seq. The use of the Physician
23 Certification Statement shall satisfy the obligations of
24 hospitals under Section 6.22 of the Hospital Licensing Act and
25 nursing homes under Section 2-217 of the Nursing Home Care
26 Act. Implementation and acceptance of the Physician

1 Certification Statement shall take place no later than 90 days
2 after the issuance of the Physician Certification Statement by
3 the Department of Healthcare and Family Services.

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

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

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

25 (i) On and after July 1, 2018, the Department shall
26 increase the base rate of reimbursement for both base charges

1 and mileage charges for ground ambulance service providers for
2 medical transportation services provided by means of a ground
3 ambulance to a level not lower than 112% of the base rate in
4 effect as of June 30, 2018.

5 (Source: P.A. 100-587, eff. 6-4-18; 100-646, eff. 7-27-18;
6 101-81, eff. 7-12-19; 101-649, eff. 7-7-20.)".