

1 AN ACT concerning public aid.

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
15 and to provide appropriate incentives to ambulance service
16 providers to provide services in an efficient and
17 cost-effective manner. Thus, it is the intent of the General
18 Assembly that the Illinois Department implement a
19 reimbursement system for ambulance services that, to the
20 extent practicable and subject to the availability of funds
21 appropriated by the General Assembly for this purpose, is
22 consistent with the payment principles of Medicare. To ensure
23 uniformity between the payment principles of Medicare and

1 Medicaid, the Illinois Department shall follow, to the extent
2 necessary and practicable and subject to the availability of
3 funds appropriated by the General Assembly for this purpose,
4 the statutes, laws, regulations, policies, procedures,
5 principles, definitions, guidelines, and manuals used to
6 determine the amounts paid to ambulance service providers
7 under Title XVIII of the Social Security Act (Medicare).

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

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

18 (c-1) For purposes of this Section, "ground ambulance
19 service" means medical transportation services that are
20 described as ground ambulance services by the Centers for
21 Medicare and Medicaid Services and provided in a vehicle that
22 is licensed as an ambulance by the Illinois Department of
23 Public Health pursuant to the Emergency Medical Services (EMS)
24 Systems Act.

25 (c-2) For purposes of this Section, "ground ambulance
26 service provider" means a vehicle service provider as

1 described in the Emergency Medical Services (EMS) Systems Act
2 that operates licensed ambulances for the purpose of providing
3 emergency ambulance services, or non-emergency ambulance
4 services, or both. For purposes of this Section, this includes
5 both ambulance providers and ambulance suppliers as described
6 by the Centers for Medicare and Medicaid Services.

7 (c-3) For purposes of this Section, "medi-car" means
8 transportation services provided to a patient who is confined
9 to a wheelchair and requires the use of a hydraulic or electric
10 lift or ramp and wheelchair lockdown when the patient's
11 condition does not require medical observation, medical
12 supervision, medical equipment, the administration of
13 medications, or the administration of oxygen.

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

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

21 (e) Beginning with services rendered on or after July 1,
22 2008, all providers of non-emergency medi-car and service car
23 transportation must certify that the driver and employee
24 attendant, as applicable, have completed a safety program
25 approved by the Department to protect both the patient and the
26 driver, prior to transporting a patient. The provider must

1 maintain this certification in its records. The provider shall
2 produce such documentation upon demand by the Department or
3 its representative. Failure to produce documentation of such
4 training shall result in recovery of any payments made by the
5 Department for services rendered by a non-certified driver or
6 employee attendant. Medi-car and service car providers must
7 maintain legible documentation in their records of the driver
8 and, as applicable, employee attendant that actually
9 transported the patient. Providers must recertify all drivers
10 and employee attendants every 3 years. If they meet the
11 established training components set forth by the Department,
12 providers of non-emergency medi-car and service car
13 transportation that are either directly or through an
14 affiliated company licensed by the Department of Public Health
15 shall be approved by the Department to have in-house safety
16 programs for training their own staff.

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

23 (f) With respect to any policy or program administered by
24 the Department or its agent regarding approval of
25 non-emergency medical transportation by ground ambulance
26 service providers, including, but not limited to, the

1 Non-Emergency Transportation Services Prior Approval Program
2 (NETSPAP), the Department shall establish by rule a process by
3 which ground ambulance service providers of non-emergency
4 medical transportation may appeal any decision by the
5 Department or its agent for which no denial was received prior
6 to the time of transport that either (i) denies a request for
7 approval for payment of non-emergency transportation by means
8 of ground ambulance service or (ii) grants a request for
9 approval of non-emergency transportation by means of ground
10 ambulance service at a level of service that entitles the
11 ground ambulance service provider to a lower level of
12 compensation from the Department than the ground ambulance
13 service provider would have received as compensation for the
14 level of service requested. The rule shall be filed by
15 December 15, 2012 and shall provide that, for any decision
16 rendered by the Department or its agent on or after the date
17 the rule takes effect, the ground ambulance service provider
18 shall have 60 days from the date the decision is received to
19 file an appeal. The rule established by the Department shall
20 be, insofar as is practical, consistent with the Illinois
21 Administrative Procedure Act. The Director's decision on an
22 appeal under this Section shall be a final administrative
23 decision subject to review under the Administrative Review
24 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
7 negatively affect the patient outcome. If the ground ambulance
8 provider, medi-car provider, or service car provider is unable
9 to obtain the required Physician Certification Statement
10 within 10 calendar days following the date of the service, the
11 ground ambulance provider, medi-car provider, or service car
12 provider must document its attempt to obtain the requested
13 certification and may then submit the claim for payment.
14 Acceptable documentation includes a signed return receipt from
15 the U.S. Postal Service, facsimile receipt, email receipt, or
16 other similar service that evidences that the ground ambulance
17 provider, medi-car provider, or service car provider attempted
18 to obtain the required Physician Certification Statement.

19 The medical certification specifying the level and type of
20 non-emergency transportation needed shall be in the form of
21 the Physician Certification Statement on a standardized form
22 prescribed by the Department of Healthcare and Family
23 Services. Within 75 days after July 27, 2018 (the effective
24 date of Public Act 100-646), the Department of Healthcare and
25 Family Services shall develop a standardized form of the
26 Physician Certification Statement specifying the level and

1 type of transportation services needed in consultation with
2 the Department of Public Health, Medicaid managed care
3 organizations, a statewide association representing ambulance
4 providers, a statewide association representing hospitals, 3
5 statewide associations representing nursing homes, and other
6 stakeholders. The Physician Certification Statement shall
7 include, but is not limited to, the criteria necessary to
8 demonstrate medical necessity for the level of transport
9 needed as required by (i) the Department of Healthcare and
10 Family Services and (ii) the federal Centers for Medicare and
11 Medicaid Services as outlined in the Centers for Medicare and
12 Medicaid Services' Medicare Benefit Policy Manual, Pub.
13 100-02, Chap. 10, Sec. 10.2.1, et seq. The use of the Physician
14 Certification Statement shall satisfy the obligations of
15 hospitals under Section 6.22 of the Hospital Licensing Act and
16 nursing homes under Section 2-217 of the Nursing Home Care
17 Act. Implementation and acceptance of the Physician
18 Certification Statement shall take place no later than 90 days
19 after the issuance of the Physician Certification Statement by
20 the Department of Healthcare and Family Services.

21 Pursuant to subsection (E) of Section 12-4.25 of this
22 Code, the Department is entitled to recover overpayments paid
23 to a provider or vendor, including, but not limited to, from
24 the discharging physician, the discharging facility, and the
25 ground ambulance service provider, in instances where a
26 non-emergency ground ambulance service is rendered as the

1 result of improper or false certification.

2 Beginning October 1, 2018, the Department of Healthcare
3 and Family Services shall collect data from Medicaid managed
4 care organizations and transportation brokers, including the
5 Department's NETSPAP broker, regarding denials and appeals
6 related to the missing or incomplete Physician Certification
7 Statement forms and overall compliance with this subsection.
8 The Department of Healthcare and Family Services shall publish
9 quarterly results on its website within 15 days following the
10 end of each quarter.

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

16 (i) On and after July 1, 2018, the Department shall
17 increase the base rate of reimbursement for both base charges
18 and mileage charges for ground ambulance service providers for
19 medical transportation services provided by means of a ground
20 ambulance to a level not lower than 112% of the base rate in
21 effect as of June 30, 2018.

22 (Source: P.A. 100-587, eff. 6-4-18; 100-646, eff. 7-27-18;
23 101-81, eff. 7-12-19; 101-649, eff. 7-7-20.)