

## **Background and Executive Summary**

### **Summary**

Based on the rate research, Utah Medicaid reimbursement for ambulance services¹ is, on average, greater than Medicare reimbursement and the average reimbursement levels of the other states surveyed. It should be noted that a comparison of fee schedule reimbursement rates does not provide a complete representation of reimbursement levels between Utah Medicaid, the Medicare program, and the other states in the research sample. For example, a comparatively high or low Utah Medicaid rate when compared to other states may signify a rate that is updated more frequently by Utah Medicaid than the other states. In addition, payment polices are often designed to address specific policy initiatives, so a Utah rate that appears higher than the comparison rate may result from a particular policy initiative designed to encourage access to or use of a particular service. Alternatively, a Utah rate that appears lower than the comparison rate may result because other states may have made targeted increases for specific services. The impact of a high or low rate for a code is less meaningful if the code has low utilization. To understand the impact on reimbursement, the rates or the rate differential would need to be applied to utilization. Utah Medicaid utilization was not considered in this comparative analysis.

The Utah Medicaid reimbursement levels in this report do not reflect the ground ambulance assessment and associated enhanced Medicaid reimbursement authorized under Senate Bill 172 (2015 General Session).

### **Background**

The Utah Department of Health and Human Services, Division of Integrated Healthcare engaged Myers and Stauffer LC (Myers and Stauffer) to review and compare Utah Medicaid reimbursement rates to Medicare reimbursement rates and reimbursement rates from a sample of other state Medicaid programs for certain provider types and service categories. As part of this project, we have prepared a series of separate reports by service category. This report provides the results for ambulance services, and is supported by a Microsoft Excel exhibit containing rate comparisons for the services analyzed.

The ambulance services rate comparison applies to ambulance procedure codes provided to us by Utah Medicaid. Utah Medicaid rates are compared to Medicare rates and are geographically adjusted for Utah, where available. The comparison to other state rates is based on a sample of six other states—Colorado, Idaho, Kentucky, Montana, Nevada, and New Mexico. These states were selected due to their

<sup>&</sup>lt;sup>1</sup> This report includes ambulance services only. Non-emergency transportation (NEMT) services are not included because they are bid through an RFP process and are not comparable across states.

proximity to Utah, with the exception of Kentucky, which was included in the study due to the availability of its rates to our research team.

For ambulance services, we compared rates by Healthcare Common Procedure Coding System code. Utah Medicaid provided a list of the top 10 ambulance procedure codes based on Medicaid expenditures. Myers and Stauffer relied on the most recent publicly-available information regarding fee schedules from Medicare and the sample of other states. Medicare rates are from the January 2023 Medicare ambulance fee schedule. Other state Medicaid rates are from published fee schedules obtained in March 2023, and the Utah Medicaid rates are the rates effective July 1, 2023.

It is important to consider the following limitations when comparing reimbursement rates:

- Government payers maintain more detailed information about fee schedules and underlying payment policies that may not be reflected in the information obtained from published fee schedules. Methodologies that Medicare and other state Medicaid programs use, and the resulting rates, are specific to their overall policies and economic environment, and it is important to understand there are policy decisions and unpublished context underlying the rate values. For example, a state may intentionally have a low rate for a certain procedure code to encourage utilization of another code or another service. The rate comparisons presented in this report did not include a comparison of underlying rate assumptions for rates from other payers or an analysis of broader state economic factors, as doing so would have been outside the scope of this project. The rate comparison serves to identify where Utah Medicaid rates fall in comparison to rates from a selection of other government payers.
- Information regarding the costs of transportation services are not included in this analysis and report. There is limited information available on provider costs for services reimbursed on a fee schedule basis. Cost information is more readily available for institutional services, such as hospital services.
- Differences in rate levels may not always be meaningful; they could be due to limited sample sizes, and/or differences in payment methodologies, and/or services covered. Additional research may be necessary to understand these variations.
- We could not provide a comparison for every service because of differences in covered benefits or how services are organized. A rate value was not included in the rate comparison if the service did not have a Medicare rate or a rate from the sample of other states.
- The rate comparison was limited in scope to comparing reimbursement rates. The comparison study and this report make no conclusions regarding the sufficiency of Utah Medicaid reimbursement rates, or recommendations that Utah Medicaid take any specific action. Information is presented for comparison purposes only.

# **Reimbursement Rate Comparisons**

The ambulance services rate comparisons are summarized in this section. The rate comparisons serve as points of reference only, providing the opportunity to identify those services where Utah Medicaid rates appear high or low when compared to rates for similar services paid by Medicare and the comparison Medicaid states, where rates appear high or low as compared to rates for services in other service categories, or where rates within a service category vary significantly from one another. As noted above, if Medicare or a state did not have a rate, or had a rate of zero, the code is not included in the average in order to avoid distorting the results.

The comparison of Utah rates to Medicare and a sample of other states is not intended to suggest a desired fee schedule amount or level of reimbursement. Health care payers, including Medicare and state Medicaid agencies, differ in how they determine benefits and define services, the limitations they place on services, who is eligible for the services, who the providers are that deliver the services, and numerous other factors that affect reimbursement methodologies and fees.

State legislation determines Medicaid agency budgets based on state revenues, and appropriations are authorized by the legislature and provide agencies with authority to expend funds. Therefore, state agencies are limited in amounts for reimbursement rates based on state budgets. In addition, the federal government's share of a state's expenditures through the Federal Medical Assistance Percentage (FMAP) varies by state and provides differing levels of federal support across states. Of the states included in the research sample, the highest FMAP rate for federal fiscal year 2023 is 72.59 percent for New Mexico, and the lowest is 50.00 percent for Colorado (the FMAP for Utah is 65.90 percent). Factors relating to state budgetary levels and federal financial assistance are not considered in this analysis.

#### **Ambulance Services**

We compared reimbursement rates for the 10 ambulance procedure codes provided by Utah Medicaid. Medicare covers nine of the 10 codes. The Medicare non-covered code is procedure code A0422. The Medicare fee schedule contains separate rates by geographic areas of urban, rural, or super rural. Rates are determined based on the pick-up point of the patient.

Utah Medicaid has rates for seven of the 10 codes. For the three codes without published rates, one code is paid a percentage of charges (A0426), and the other two are non-covered (A0427 and A0428). Colorado and Montana are the only states that have rates for all 10 codes.

We calculated two comparison rates to compare to Utah Medicaid rates. The first comparison rate is the Medicare rate, and the second comparison rate is the average of the six comparison state Medicaid program rates. This information made it possible to quantify how Utah Medicaid rates across services

compare to other rates in the research sample by calculating the Utah Medicaid rate as a percent of the comparison rates.

*Table 1* summarizes the comparison results by procedure code. Column E contains the Medicare comparison percentage, and column G contains the Medicaid comparison percentage. The Medicare urban rates are used in this comparison.

Table 1. Ambulance Transportation Services Rate Comparison

Ambulance Transportation Services											
А	В	С	D	Е	F	G	Н	1			
			Medicare C	omparison		Medicaid	Compariso	rison			
Procedure		Utah Medicaid	Medicare	Utah as % of Medicare Urban	of Other State Medicaid		Highest	Lowest State			
Code	Description	Rate	Urban Rate	Rate	Rates	d Rates	State Rate	Rate			
A0422	AMBULANCE OXYGEN, SUPPLIES, LIFE SUSTAIN SITUATION	\$22.16	(b)	(b)	\$12.77	174%	\$14.73	\$10.00			
A0425	GROUND MILEAGE, PER STATUTE MILE	\$4.77	\$8.71	55%	\$4.83	99%	\$7.29	\$2.00			
A0423	AMBULANCE SERV, ADVANCE LIFE SUPPORT,NON-	\$4.77	Ş6.71	33%	\$4.63	33/6	\$1.23	\$2.00			
A0426	EMER,LEV1	(c)	\$308.18	(c)	\$196.27	(c)	\$248.36	\$139.33			
A0427	AMBULANCE SERV, ADVAN LIFE SUPPORT, EMER TRANS,LEV 1	(d)	\$487.96	(d)	\$283.49	(d)	\$393.22	\$110.00			
A0428	AMBULANCE SERV, BASIC LIFE SUPPORT, NON- EMER TRANSP	(d)	\$256.82	(d)	\$166.72	(d)	\$206.96	\$139.33			
A0429	AMBULANCE SERV,BASIC LIFE SUPPORT, EMER TRANS (BLS)	\$1,090.00	\$410.91	265%	\$239.98	454%	\$331.14	\$82.50			
A0430	AMBULANCE SERV, CONVENTIONAL AIR SERV,TRANSP,1 WAY	\$5,232.65			\$2,841.36		\$4,200.11				
A0431	AMBULANCE SERV, CONVENTIONAL AIR SERV,TRANSP,1 WAY	\$5,630.05	\$4,034.58		\$2,967.26		\$4,883.27				
A0435	FIXED WING AIR MILEAGE, PER STATUTE MILE	\$17.47	\$10.23	171%	\$8.05	217%	\$12.71	\$5.67			

Ambulance Transportation Services												
Α	В	С	D	Е	F	G	Н	1				
			Medicare Comparison		Medicaid Comparison							
						Utah as						
				Utah as %	Average	% of						
				of	of Other	Other						
		Utah		Medicare		State		Lowest				
Procedure		Medicaid	Medicare	Urban	Medicaid		Highest	State				
Code	Description	Rate	<b>Urban Rate</b>	Rate	Rates	d Rates	<b>State Rate</b>	Rate				
	ROTARY WING AIR											
	MILEAGE, PER STATUTE											
A0436	MILE	\$39.74	\$27.28	146%	\$18.09	220%	\$20.78	\$14.66				
Overall Average		\$1,719.55	\$1,001.65	172%	\$673.88	255%	\$1,031.86	\$406.46				

- (a) Procedure code not covered by Medicare.
- (b) No published rate. Paid a percentage of charges.
- (c) UT Medicaid non-covered codes.

#### Observations from the ambulance transportation services rate comparisons include:

- Utah Medicaid rates are an average of 172 percent of the Medicare urban rates for Utah. The highest rate is 265 percent of the Medicare rate, and the lowest rate is 55 percent of the Medicare rate.
- Utah Medicaid rates are an average of 255 percent of the other state rates, with the highest rate at 454 percent, and the lowest rate at 99 percent.

The accompanying exhibit (Microsoft Excel workbook titled "Transportation Services Exhibit A Utah Rate Study") contains the complete list of the procedure codes in this comparison along with the Utah Medicaid rates, the Medicare rates (if applicable), and the other state Medicaid rates for each code.

**MYERS AND STAUFFER**