



INLAND COUNTIES EMERGENCY MEDICAL AGENCY POLICY AND PROTOCOL MANUAL

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GROUND BASED AMBULANCE RATE SETTING

I. PURPOSE

To establish the maximum charges that ground transport providers may charge for the care and transport of patients and outline the mechanism for calculating annual ground ambulance rates.

II. POLICY

No ambulance service shall charge more than the following rates:

1. **RATES FOR ONE (1) PATIENT:** The schedule of maximum rates that may be charged for ambulance service for one (1) patient shall be reviewed by ICEMA on an annual basis.
2. **RATES FOR MULTIPLE PATIENTS:**
 - a. Each additional stretcher or gurney patient carried at the same time may be charged no more than the full base rate for the response to the call and half the mileage rate.
 - b. Each additional sit-up patient may be charged no more than half the base rate for response to the call and half the mileage rate.
 - c. The provider may prorate all mileage charges between all patients transported so that all patients are charged the same fee for mileage.
 - d. This section does not apply to contractual agreements.
3. **NO CHARGE TRANSPORTS:** No charge shall be made for transporting uninjured or well persons who accompany a patient.
4. **COMPUTATION OF RATES:** All rates are to be computed from the time the ambulance arrives for hire until the ambulance delivers the patient to the appropriate destination, and is discharged by the patient or his representative, attending physician, or emergency receiving facility.
5. **FEES FOR SERVICE, SUPPLIES AND EQUIPMENT:**
 - a. When a ground ambulance has been dispatched and ambulance personnel and/or equipment are directly involved with patient care in situations where an EMS aircraft transports, then the ambulance service shall be entitled to charge an appropriate fee for its service, supplies and equipment.
 - b. Under no circumstances shall EMS transport personnel dispatched on an emergency 9-1-1 call attempt to collect for the service prior to the delivery of the patient at an appropriate medical facility.

III. PROCEDURE

1. **ANNUAL RATE ADJUSTMENT:** At the direction of ICEMA, the ambulance rates established under this section shall apply to all providers of ground based ambulance services.
 - a. ICEMA shall be responsible for calculating rate adjustments.
 - b. The Consumer Price Index (CPI) adjustment shall be calculated by March 15 of each year. The CPI used shall be compiled and reported by the Bureau of Labor Statistics for the preceding 12-month period (January through December) utilizing the "Annual" column of the adjustment year. The following CPI selections shall be utilized:
 - All Urban Consumers
 - Not Seasonally Adjusted
 - S49C Riverside-San Bernardino-Ontario, CA
 - All Items (SA0) Index
 - Medical Care (SAM) Index

The CPI adjustment shall be effective as of the first day of July of each year.
 - c. If selected CPIs are discontinued or revised, another government index or computation which replaces it shall be used in order to obtain substantially the same result.
 - d. The current rates shall be adjusted for changes in the CPI as set forth herein. The adjustments shall be made on July 1 of each year based upon the change in the CPI from January 1 of the preceding year to December 31 of the same calendar year.

The CPI adjustment shall be determined by taking the difference between the annual CPI's (*previous and adjustment years*) then by multiplying the result by zero point five (0.5) for the All Items Index. The same process is applied to the Medical Care Index. The two (2) products are then added to arrive at the total amount of the change in CPI for the annual base rate comparison. Yearly CPI adjustments shall not exceed five percent (5%) or less than zero for any single year.
2. **ANNUAL RATE COMPARISON STUDY:** The maximum base rates shall be reviewed in accordance with the following procedures, and adjusted annually, if appropriate, on July 1 every year. In conjunction with the rate adjustment and pursuant to Section 31.0820, the local EMS agency (ICEMA) shall review the ALS and BLS ground ambulance base rates of counties with similar demographics to determine the ALS and BLS average base rates in effect for these counties as of the review date.

If the county rates are at the average or greater, no adjustment to the ambulance rates will be made under this provision. If the county rates are less than the average, an appropriate adjustment to the ambulance rates shall be made to bring them towards the average. No ambulance rate comparison adjustment shall be greater than five percent (5%).

3. **MILEAGE CHARGE RATE ADJUSTMENT:** In addition to, and not in lieu of, annual CPI adjustments may be made, in an amount not to exceed the ambulance providers' extraordinary increase or decrease in fuel costs using the following CPI selections as guiding reference to substantiate fuel cost adjustments:
- Average Price Data
 - S49C Riverside-San Bernardino-Ontario, CA
 - Table, 7471A
 - Gasoline, all types, per gallon/3.785 liters
4. **EXTRAORDINARY OR NECESSARY RATE ADJUSTMENTS:**
- a. Extraordinary or necessary rate adjustments due to cost increases or decreases shall be subject to ICEMA Governing Board approval. The EMS Administrator may recommend necessary rate adjustments to the ICEMA Governing Board based on needs of emergency medical services, transportation, or other contractual factors affecting ground ambulance services within ICEMA's jurisdiction. All extraordinary and necessary rate adjustments will be consistent with County Code Section 31.0820.
 - b. Requests for extraordinary rate adjustments must be made in writing and use the most recent specific CPI and include the previous calendar year plus the sum of the most recent CPI for the current year, divided by the number of total months, for an average.
 - c. Extraordinary rate adjustments due to cost rate increases may be requested quarterly and will be reviewed within thirty (30) days of receipt. Any approved extraordinary rate increase implementation will become effective upon the beginning of the next calendar quarter unless approved as retroactive. Necessary rate adjustments may be recommended by the EMS Administrator at any time and shall take effect upon ICEMA Governing Board approval.
 - d. For extraordinary rate adjustments, the ambulance provider must demonstrate actual and substantial financial hardship as a result of factors beyond its reasonable control and provide records deemed necessary to verify such hardship. This procedure may also be used to obtain rate adjustments due to changes in the CPI that are greater than the five percent (5%) cap under the yearly CPI adjustment, above.
 - e. ICEMA, at the time of any extraordinary rate adjustment request under subsection (4)(c), above, shall request an audit of books and records of an ambulance service provider for the purpose of verifying revenue and cost data specifically associated with the extraordinary rate increase request. Audits shall be carried out by a person selected and approved by ICEMA. If ICEMA and ambulance service provider cannot agree on a person to perform the audit, then the audit shall be carried out by a Certified Public Accountant selected by the ICEMA Executive Director.
- Any charge, cost or fee, shall be paid by the ambulance service provider. ICEMA may deny any adjustment if an audit is requested and not produced. Every audit shall be done promptly and within thirty (30) days of submission.