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October 15, 2012

Patricia Wheeler
Regional Inspector General
for Audit Services
DHHS Office of Inspector General
1100 Commerce Street
Room 632
Dallas, TX 75242

RE: Emergency Medical Services Authority
A-06-11-00050

Dear Ms. Wheeler:

Thank you for sharing with us the draft report concerning EMSA and allowing an opportunity for comment.

The 10 claims in issue have been denied as not medically necessary. We strongly disagree. Each transport was the result of an emergency.

Section 1861(s)(7) of the Social Security; 42 C.F.R. 410.40(d)(1) of the regulations and the CMS Manuals (in multiple places, including 100-02, Chapter 10, Sections 10.2.1, 20 and 30.1.1) all indicate that an ambulance is covered when the patient's condition is such that any other method of transportation is contraindicated.

Section 20, in giving coverage guidelines, lists the following as one example: "Was transported in an emergency situation, e.g. as a result of an accident, injury or illness".

The definitions for ALS and emergency are listed in the regulations (42 C.F.R. § 414.605), as follows:

Advanced life support, level 1 (ALS1) means transportation by ground ambulance vehicle, medically necessary supplies and services and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention.

Emergency response means responding immediately at the BLS or ALS1 level of service to a 911 call or the equivalent in areas without a 911 call system. An immediate response is one in which the ambulance entity begins as quickly as possible to take the steps necessary to respond to the call.

CMS Internet-Only Benefit Policy Manual 100-02, Chapter 10, Section 30.1.1 also defines ALS and emergency, using a similar definition that includes responding immediately based on the supplier's dispatch protocols.

An ambulance was needed for all 10 claims, as each was an emergency. These are summarized below:

● [REDACTED]

This was dispatched Priority 1 (emergency, life threatening) for a patient with an altered level of consciousness. On scene, the crew also noted the patient had dizziness, decreased vital signs, with a history of multiple sclerosis. The crew provided EKG monitoring and IV.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for a fall of an [REDACTED] year old.

While the fall occurred on the prior day, she was having acute rib pain and a possible fractured rib. As it turns out, the hospital ER record confirmed a compression fracture at the endplate of L-2. Oxygen was provided by the crew.

The acute medical condition was the acute pain and possible fractured rib, not the fall.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for joint pain/foot pain.

On scene, the crew noted his left foot was swollen, he had yellow liquid leaking from the bandage, there were signs of instability, significant pain, infection and possible sepsis.

As a result, the crew provided EKG monitoring, IV and oxygen.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for a sick person with defecation/diarrhea.

On scene, the crew also documented acute general weakness. The patient was bed confined.

This was an emergency due to the acute weakness and uncontrolled diarrhea.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for a fall, possibly dangerous body area. The patient was 83 years old and the fall resulted in a possible lumbar fracture.

As it turns out, the hospital ER record confirmed a compression fracture of the thoracic spine.

The crew provided spinal immobilization, EKG monitoring, IV and oxygen.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for a psych emergency. The patient was agitated, thought he was having a nervous breakdown and had a history of bipolar schizo-affective disorder.

EKG monitoring was provided.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for an [REDACTED] year old with back pain, not relieved by pain medications.

IV was monitored en route.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED, where she was admitted for what an MRI determined was a fracture.

● [REDACTED]

As a result of 911 being activated, the ambulance was dispatched Priority 2 (emergency, not life threatening) for a patient who "felt like his back popped" and had back pain.

IV saline lock was started and the crew monitored the EKG.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 2 (emergency, not life threatening) for abdominal pain with a sharp burning sensation that radiates to his neck.

IV saline lock was started and the crew monitored the EKG.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

● [REDACTED]

As a result of 911 being activated, this was dispatched Priority 1 (emergency, life threatening) for a patient with breathing problems who was not alert. On scene, the home health nurse advised the crew of the possible blood clot in the leg and history of DVTs. The patient had sharp stabbing leg pain and swelling to her right leg.

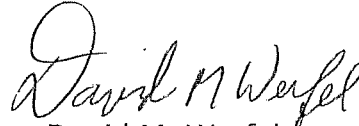
Oxygen and EKG monitoring were provided.

An ambulance was medically necessary due to the emergency, i.e. the ambulance was dispatched immediately to an acute medical condition. The patient was transported to the hospital ED.

Conclusion

For the reasons noted above, we disagree with all of the ten denials. All should have been covered as emergencies. However, we agree that two [REDACTED] should have been downgraded to BLS emergency.

Sincerely,


David M. Werfel

DMW/te

cc: EMSA