

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2023121 SEPTEMBER 26, 2023

IHCP announces changes to ALS and BLS mileage billing requirements

As announced in *Indiana Health Coverage Programs (IHCP) Bulletin [BT202322](#)*, changes to Emergency Medical Services (EMS) transportation reimbursement rates were effective July 1, 2023. These changes include a rate change for advanced life support (ALS) and basic life support (BLS) ground transportation so that the services have the same rate.

The following Healthcare Common Procedure Coding System (HCPCS) codes and modifier combinations are affected:

- A0425 U1 – *Ground mileage, per statute mile; ALS*
- A0425 U2 – *Ground mileage, per statute; BLS*



As a result of the rate changes, many providers requested the removal of U1 and U2 modifiers for ALS and BLS mileage. In consideration of this request, effective immediately, the IHCP no longer requires modifiers U1 and U2 when billing for ALS or BLS mileage. This change is retroactive to dates of service (DOS) on or after July 1, 2023.

The modifiers will be considered optional, or informational only. The rate for ALS and BLS transportation will remain \$8.71 per mile whether A0425 is billed with or without modifiers U1 or U2. Providers that previously received a denial due to a missing modifier for mileage for dates of service on or after July 1, 2023, may resubmit the claim for reimbursement.

Modifiers for commercial or common ambulatory service (CAS) and nonambulatory service (NAS) will remain U3 and U5, respectively. Providers must continue to use modifiers U3 and U5 to designate mileage for CAS and NAS transportation. Modifier SE is still required for Medical Review Team (MRT) mileage.

As a reminder, effective for DOS on or after July 1, 2023, all ALS and BLS services for fee-for-service (FFS) members will be billed to Gainwell Technologies (see *IHCP Bulletin [BT202353](#)*). Questions about FFS reimbursement and billing should be directed to Gainwell Customer Assistance at 800-457-4584.

Individual managed care entities (MCEs) establish and publish reimbursement, prior authorization (PA) and billing information within the managed care delivery system. Questions about managed care reimbursement, PA and billing should be directed to the MCE with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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