

August 16, 2018

### Updated Hospital Responsibilities for Non-Emergency Ambulance Transfers

Synopsis: As part of the Medicaid Omnibus Bill, Public Act 100-0646 (the Act), which was effective July 27, hospital responsibilities have been updated concerning the Physician Certification Statement (PCS), a form that a hospital must complete and provide to an ambulance provider prior to transport of a non-emergency patient. To assure compliance, hospitals should review and update their policies and procedures for completing the PCS.

The updated PCS requirements are in response to challenges that ambulance providers have had in receiving a correct or completed PCS from some hospitals. The PCS is an important document for ambulance providers, particularly when transporting Medicaid patients as many Medicaid Managed Care Organizations and the Department of Healthcare and Family Services (HFS) will deny the ambulance provider's claim without a complete PCS.

Updated Hospital Requirements: Previously, the Hospital Licensing Act required a hospital that had arranged for patient transport by ambulance to fill out a PCS and provide that documentation to the ambulance service provider prior to transport, unless such delay in transport can be expected to negatively affect the patient outcome. Under the Hospital Licensing Act, as amended by Public Act 100-646 (pgs. 40-42), hospitals are required to:

- Develop a policy requiring a physician or their designee to complete the PCS;
- Maintain a copy of the PCS in the patient's medical record;
- At the request of the ambulance provider, assist in completing the PCS if it is incomplete; and
- In cases where a PCS is not completed prior to or at the time of transport, the PCS must be provided within 10 days after the request of the ambulance provider.

Standardized PCS: The Act (pgs. 48-50) also calls for HFS, with the input of several statewide stakeholders, including IHA, to develop a standardized PCS that will be used for all ambulance transfers going forward. This form is to be issued by HFS no later than Oct. 9. Hospitals will have 90 days from HFS issuing the standardized PCS to implement it. Having one standardized PCS is intended to simplify the administrative process for hospitals.

Compliance Reporting: Beginning Oct. 1, HFS is to begin collecting data regarding denials and appeals that ambulance providers experience as a result of a missing or incomplete PCS. This data will be reported quarterly on the Department's website. The rationale for this reporting is to identify problem areas and to track performance over time.

Risk of Future Legislation: To avoid more onerous legislation in the future, it is imperative that hospitals comply with the requirements to complete and maintain the PCS. The ambulance industry and some legislators were seeking legislation that would have made a hospital liable to pay for any ambulance fees that were denied because of a missing or incomplete PCS. Through a strong advocacy effort, IHA was able to prevent this language from being included in the final bill. However, failure to comply with these new requirements leaves the hospital community vulnerable to this type of legislation in the future.

IHA will provide further communication to hospitals as the standardized PCS form is developed as well as possible educational offerings for hospitals on how to appropriately complete the new PCS.

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