

AMBULANCE FEE SCHEDULE

<u>HCPCS CODE</u>	<u>DESCRIPTION OF SERVICE</u>	<u>2006 FEE</u>
A0380	BLS mileage (per mile)	\$4.87
A0382	Basic Life Support routine disposable supplies	\$36.52
A0390	ALS mileage (per mile)	\$4.87
A0422	Ambulance (ALS or BLS) oxygen and oxygen supplies, life sustaining situation	\$48.69
A0425	Ground mileage, per statute mile	\$4.87
A0426	Ambulance service, advanced life support (ALS), non-emergency transport, level 1 (ALS 1)	\$497.83
A0427	Ambulance service, advanced life support, emergency transport, level 1 (ALS 1-emergency)	\$497.83
A0428	Ambulance service, basic life support, non-emergency transport (BLS)	\$304.29
A0429	Ambulance service, basic life support, emergency transport (BLS-emergency)	\$304.29
A0430	Ambulance service, conventional air services, transport, one way (fixed wing)	\$2,782.00
A0431	Ambulance service, conventional air services, transport, one way (rotary wing)	\$2,782.00
A0433	Advanced life support, level 2 (ALS 2)	\$497.83
A0434	Specialty care transport (SCT)	\$497.83
A0435	Fixed wing air mileage, per statute mile	\$27.82
A0436	Rotary wing air mileage, per statute mile	\$27.82

<u>HCPCS CODE</u>	<u>DESCRIPTION OF SERVICE</u>	<u>2006 FEE</u>
Q3019	ALS vehicle used, emergency transport, no ALS level services furnished	\$304.29
Q3020	LS vehicle used, non-emergency transport, no ALS level services furnished	\$304.29

NOTE: Codes for other ambulance provided services may be billed. The payment for services not identified in this schedule will be at the discretion of the payer (employer/carrier/agent representing the employer).

Effective August 18, 2006