

Illinois

2008 Ambulance Fee Schedule Amounts Effective January 1, 2008 – June 30, 2008

The amounts listed below are the Ambulance Fee Schedule amounts for services performed January 1, 2008 through June 30, 2008 in each of the four Illinois Medicare Part B payment localities.

Separate payment is not allowed for supplies and ancillary services (e.g., waiting time, extra attendants, injections, and EKGs). The payment for those are included in the base rate.

Code	Locality 12	Locality 15	Locality 16	Locality 99
**A0425 – Urban	\$ 6.42	\$ 6.42	\$ 6.42	\$ 6.42
**A0425 – Rural	\$ 6.42	\$ 6.42	\$ 6.42	\$ 6.42
# A0426 – Urban	\$ 227.70	\$ 255.20	\$ 257.05	\$ 218.97
# A0426 – Rural	\$ 227.70	\$ 255.20	\$ 257.05	\$ 218.97
# A0427 – Urban	\$ 360.52	\$ 404.07	\$ 406.99	\$ 346.71
# A0427 – Rural	\$ 360.52	\$ 404.07	\$ 406.99	\$ 346.71
# A0428 – Urban	\$ 189.75	\$ 212.67	\$ 214.21	\$ 182.48
# A0428 – Rural	\$ 189.75	\$ 212.67	\$ 214.21	\$ 182.48
# A0429 – Urban	\$ 303.59	\$ 340.27	\$ 342.73	\$ 291.97
# A0429 – Rural	\$ 303.59	\$ 340.27	\$ 342.73	\$ 291.97
A0430 – Urban	\$ 2,613.47	\$ 2,835.66	\$ 2,850.56	\$ 2,543.02
A0430 – Rural	\$ 3,920.20	\$ 4,253.49	\$ 4,275.84	\$ 3,814.52
A0431 – Urban	\$ 3,038.53	\$ 3,296.86	\$ 3,314.19	\$ 2,956.62
A0431 – Rural	\$ 4,557.80	\$ 4,945.29	\$ 4,971.28	\$ 4,434.93
A0432 – Urban	\$ 332.06	\$ 372.17	\$ 374.86	\$ 319.34
A0432 – Rural	\$ 332.06	\$ 372.17	\$ 374.86	\$ 319.34
# A0433 – Urban	\$ 521.80	\$ 584.84	\$ 589.07	\$ 501.82
# A0433 – Rural	\$ 521.80	\$ 584.84	\$ 589.07	\$ 501.82
# A0434 – Urban	\$ 616.68	\$ 691.17	\$ 696.17	\$ 593.05
# A0434 – Rural	\$ 616.68	\$ 691.17	\$ 696.17	\$ 593.05
A0435 – Urban	\$ 7.69	\$ 7.69	\$ 7.69	\$ 7.69
A0435 – Rural	\$ 11.54	\$ 11.54	\$ 11.54	\$ 11.54
A0436 – Urban	\$ 20.50	\$ 20.50	\$ 20.50	\$ 20.50
A0436 – Rural	\$ 30.75	\$ 30.75	\$ 30.75	\$ 30.75

***The rural Ambulance Fee Schedule rate for ground mileage (A0425) is 50% higher for the first 17 loaded miles (rural rate X 1.5 = rural rate). Rural ground miles 18-50 are equal to the rural mileage rate. For all ground miles (both rural and urban) over 50, the ambulance fee schedule rate for A0425 is 25% higher than the appropriate rate (urban rate x 1.25 or rural rate x 1.25).*

Effective for dates of service 7/1/04 - 12/31/09, the base rate of the payment under the Ambulance Fee Schedule for ground ambulance transports furnished in certain rural areas is increased by 22.6% as determined by the Centers for Medicare & Medicaid Services (CMS). This increase applies where the point of pick-up (POP) is in a rural county (or Goldsmith Area) that is comprised by the lowest quartile by population of all such rural areas arrayed by population density. The low density (qualified) areas appear with a 'B' Rural indicator on the CMS Zip Code file. (The codes that are eligible for this bonus are indicated in the above chart with a '#' indicator.)