

# Emergency Ambulance Services Billing Reminder

In an effort to ensure Peach State Health Plan providers are submitting the appropriate ambulance modifiers for reimbursement please refer to the information below to avoid billing errors and claim denials.

Emergency Ambulance Services providers are required to submit the appropriate/valid ambulance modifiers for reimbursement. Services covered under the PSHP Medicaid Ambulance Services Program include Basic Life Support (BLS) and Advanced Life Support (ALS) ambulance services which are certified as medically necessary by a physician, provided to appropriate local health facilities and provided to eligible members whose conditions require life sustaining equipment and personnel en route.

## **AMBULANCE MODIFIERS:**

PSHP requires two-digit HCPCS ambulance service modifiers to be submitted in the first modifier field for all ambulance services.

Combine two one-digit modifiers to form a two-digit modifier. The first digit identifies the ambulance's place of origin; the second digit identifies the destination.

When performing a site-to-site transport, the following two-digit ambulance modifiers must be used:

- RH (residence to hospital)
- SH (scene to hospital)
- HH (hospital to hospital)
- HN (hospital to skilled nursing facility)
- NH (skilled nursing facility to hospital)
- HR (hospital to residence)
- QL (patient pronounced dead after ambulance called)
- GM (multiple patients on one ambulance trip)
- NN (skilled nursing facility to skilled nursing facility)
- SI (scene to site of transfer)
- IH (site of transfer to hospital)

Please refer to the DCH's Emergency Ambulance Services Manual for additional information.  
<https://www.mmis.georgia.gov/>