

DHS Responses to Public Comments Regarding – Coordinated Triage, Treatment, and Transport to Alternative Destination

Amanda Newton

ARAA President

Comment: Please accept this as the public comments from the Arkansas Ambulance Association concerning the new Treat, Triage and Transportation legislation (Act 480 or 2023). First and foremost, thank you, as it appears to us that you all have done a great job in mirroring the intent of the legislation and by defining the 911 call location as a destinations we agree this should make reimbursement for treatment in place possible, assuming the required telemedicine consultation takes place. As we are not totally familiar with the Medical Board’s requirements for “establishing the patient relationship”, we have reached out to Dr. Johnson, asking him to work with the Medical Board to ensure that they do not have any concerns. While it is not contemplated in the document out for public comment, we would like to confirm that in the case of a treatment in place, we will be able to bill for mileage to the destination. As the behavioral health piece of this begins to be used, we would also like for you to consider an additional “incremental time-on-task” billing code. It was brought to our attention by Rep. Wooldridge, that some behavioral health calls may be considerably longer than a standard medical call in the field, and he suggested to the department may need to look at this type of code that could be billed in 15 minute increments on longer behavioral health calls. Again, we are so appreciative of all of the work you and your department have put into this initiative that we all believe will provide more appropriate care in many circumstances and ultimately result in savings to the department. Please know the Arkansas Ambulance Association stands ready to have continued dialogue and discussions on this and any other issue that we may be able to provide information or feedback that will be helpful to you and the individuals we all serve.

Response:

Thank you for your comments in support of this rule. Yes, mileage to the destination will be covered for treatment in place, as this is contemplated by the original statute and intent of the rule to pay standard Basic and Advanced Life Support rates. The language of the rule is being amended to clarify. We will continue to work with ambulance providers as we move forward with mobile crisis and behavioral health response system.