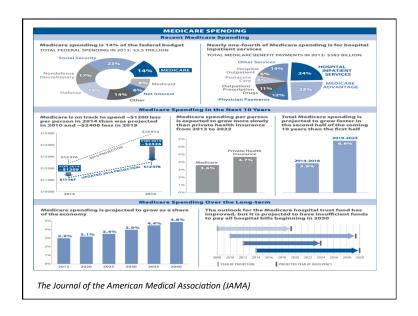
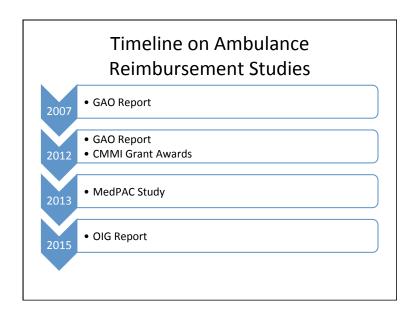


# **Payment Reform**

Ready, Set, .....









#### What Does This Mean?

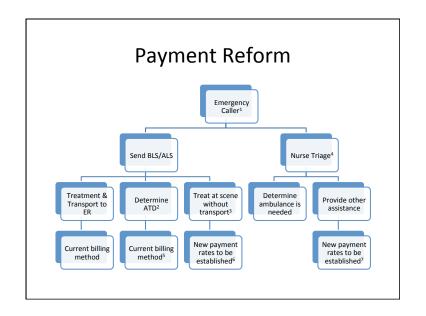


# Ambulance Payment Reform:

- 1. Cost Survey
- 2. Supplier to Provider
- 3. Tie payment to cost then quality
- 4. \$ follows appropriate mode of treatment



#### **Payment Reform Timeline Recap** Long-term Short-term MIH Services • ADT Cost Survey • Supplier to • Treat & Refer Alignment of Provider clinical & Expansion of reimbursement emergency services Non-emergency





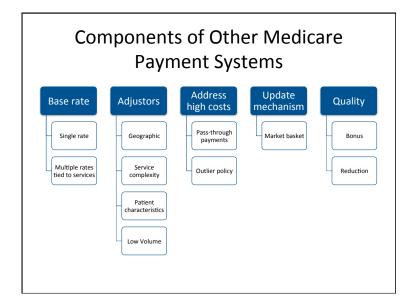
### **Defining Non Emergency Services**

# Focusing on Patients' Medical Needs

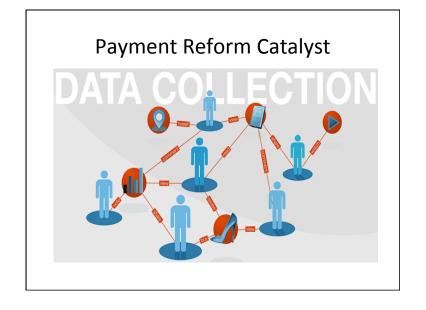
- Morbidly Obese
- Mental/Behavioral Health
- Oxygen Administration
- Special Handling/ Positioning

#### Health Care Services Provided

- Ventilation/Advanced Airway Management
- Suctioning
- Isolation Precautions
- Intravenous Fluid Administration



#### **Community Paramedicine** Services remain within the current scope of practice Transitional Care Individual Care **Public Health** Management Services Services Services Services Assessment Episodic Health clinical • Treatment screening intervention Stockpiling Disposition Assessment • Education/ Patients serviced • Care awareness • Health care coordination Quarantined provider Payment patients • Frequent fliers • FFS Payment Bundles Contract with state agency





# **Contact Information**

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