

Attachment A(1) - Ambulance (Proposed to be effective September 1, 2023)

TOS*	Procedure Code	Long Description	Modifier 1	Age Range	Non-Facility (N)/ Facility	CURRENT		9/1/2023		Percent Change from Current Medicaid
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Proposed Medicaid Fee	Proposed Adjusted Medicaid Fee	
9	A0020	Ambulance service, Basic Life Support (BLS) per mile, transport, one way		0-999	N/F	\$4.71	\$4.71	\$5.89	\$5.89	25.05%
9	A0425	Ground mileage, per statute mile		0-999	N/F	\$4.71	\$4.71	\$5.89	\$5.89	25.05%
9	A0425	Ground mileage, per statute mile	ET	0-999	N/F	\$4.71	\$4.71	\$5.89	\$5.89	25.05%

*Type of Service (TOS)	
9	Other Medical Items or Services
Modifier	
ET	Emergency Transport

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