

Mandated report: Medicare payment for ambulance services

ISSUE: Section 3007(e) of the Middle Class Tax Relief and Job Creation Act of 2012 directs the Commission to conduct a study of the Medicare ambulance fee schedule and submit a report to the Congress by June 15, 2013. The Commission is specifically directed to examine the impacts of certain temporary add-on payments that will expire under current law at the end of 2012.

KEY POINTS: At the April and September Commission meetings, staff reported on the structure of Medicare's payment system for ambulance services; presented empirical analyses of the level and growth of Medicare payments and beneficiary use of ambulance services and the specific effects of the temporary add-on payments on Medicare spending; summarized secondary research on ambulance providers' and suppliers' costs relative to Medicare payments; and discussed areas of the Medicare ambulance benefit that are vulnerable to fraud and abuse.

ACTION: At the October meeting, staff will report additional information requested by Commissioners at the September meeting and may present draft recommendations for the mandated report to the Congress. Commissioners should be prepared to provide guidance to the staff as warranted.

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