

Provider Type 32 Ambulance, Air or Ground Reimbursement Schedule

This schedule reflects rate data as of : **6/1/2019**

This provider type was last subject to a rate review* on : 11/2016

**Rate review refers to a comprehensive review of all the rates associated with this provider type. In 2017 the NV Legislature passed Assembly Bill 108 which, starting in 2018, requires NV Medicaid to perform a comprehensive rate review for each provider type at least once every four years. These reviews may or may not result in changes to reimbursement amounts.*

Notes:

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy. CPT codes, descriptions and other data only are copyright © 2008 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. CPT is a registered trademark ® of the American Medical Association.

Proc Code	Description	Mod	Rate	Rate Begin Date
90460	Im admin 1st/only component		18.82	7/1/2016
90471	Immunization admin		18.82	7/1/2016
90472	Immunization admin each add		9.32	7/1/2016
90473	Immune admin oral/nasal		18.82	7/1/2016
90474	Immune admin oral/nasal addl		9.32	7/1/2016
99341	HOME VISIT NEW PATIENT		35.75	7/1/2016
99342	HOME VISIT NEW PATIENT		51.61	7/1/2016
99343	HOME VISIT NEW PATIENT		84.25	7/1/2016
99344	HOME VISIT NEW PATIENT		117.79	7/1/2016
99345	HOME VISIT NEW PATIENT		141.97	7/1/2016
99347	HOME VISIT EST PATIENT		36.00	7/1/2016
99348	HOME VISIT EST PATIENT		54.40	7/1/2016
99349	HOME VISIT EST PATIENT		82.31	7/1/2016
99350	HOME VISIT EST PATIENT		114.82	7/1/2016
A0225	Neonatal emergency transport		247.00	7/1/2013
A0380	Basic life support mileage		4.74	7/1/2013
A0390	Advanced life support mileag		4.74	7/1/2013
A0425	Ground mileage		4.74	7/1/2013
A0426	ALS 1		219.73	7/1/2013
A0427	ALS1-EMERGENCY		247.00	7/1/2013
A0428	BLS		175.71	7/1/2013
A0429	BLS-EMERGENCY		187.58	7/1/2013
A0430	FIXED WING AIR TRANSPORT		1911.37	7/1/2013
A0431	ROTARY WING AIR TRANSPORT		1918.57	7/1/2013
A0432	Pi volunteer ambulance co		271.85	7/1/2013
A0433	ALS 2		481.79	7/1/2013
A0434	SPECIALTY CARE TRANSPORT		569.39	7/1/2013
A0435	Fixed wing air mileage		7.13	7/1/2013
A0436	Rotary wing air mileage		18.07	7/1/2013
Q3014	TELEHEALTH FACILITY FEE		24.24	7/1/2016