

GALVESTON AREA AMBULANCE AUTHORITY

FY2010 PROPOSED GAAA FEE SCHEDULE

To be used for billing third parties insurers and patients for services rendered

	<u>CPT Code</u>	<u>Billing Code</u>	<u>Description</u>	<u>Proposed Fees</u>
BLS NON-EMERGENCY	A0428	1a	Basic level (EMT) Non-emergency transport	\$ 550.00
BLS EMERGENCY	A0429	2	Basic level (EMT) Emergency response	\$ 1,000.00
ALS NON-EMERGENCY	A0426	1	Advanced level Non-emergency transport (EMT Intermediate or Paramedic)	\$ 750.00
ALS EMERGENCY	A0427	M2	Advanced level Emergency response (EMT Intermediate or Paramedic)	\$ 1,200.00
ALS 2 EMERGENCY	A0433	M4	Enhanced Advanced level Emergency (EMT Intermediate or Paramedic) includes 3 IV Medications &, ET Intubation, EKG, defibrillation or pacing	\$ 1,500.00
HELICOPTER TRANSPORT	A0431	64	Liftoff fee for offshore crew	\$ 1,200.00
HELICOPTER TRANSPORT / ALS FLIGHT FEE/HR.	A0436	66	Hourly flight fee for offshore crew	\$ 945.00
EXTRA ATTENDANT	A0424	14	Difficult lifting and moving situations	\$ 90.00
MILEAGE	A0425	M5	Per loaded mile	\$ 15.00
WAITING TIME	A0420	17	Per one-half hour	\$ 75.00
NO TRANSPORT	A0999	126 / 127	Person calls for service and then declines	\$ 100.00
PUBLIC ASSIST	A0999	128	Assist mobility impaired residents	\$ 50.00

The United Board of Health By-Laws grant the Chief Executive Officer or his designee the right to negotiate contractual rates with third party institutions for patient transportation based on legitimate need and the best interest of GAAA, GCHD and the United Board of Health.

Approved 8/27/09