ACCT Position on H.R. 822

The Association of Critical Care Transport services (ACCT) supports the concepts introduced in HR 822 relating to cost reporting and establishing a quality program. In order to accurately collect cost data for the purpose of assuring adequate reimbursement, cost reporting needs to be mandatory to ensure accuracy and completeness across the industry. Cost reporting should also be sufficiently robust to capture the variation in the industry relative to clinical capability and corresponding costs of personnel, aviation, and other capital expenses. In addition, robust cost reporting will distinguish other key cost determinants, including the reporting of transport volumes by type of vehicle.

ACCT agrees that air ambulance agencies should be fully accountable for the care they provide to the critically ill and injured patients they serve. Accordingly, regarding a quality program, ACCT believes that any increase in reimbursement should be tied to participation, such that only agencies that report on the identified quality measures would qualify. Increases in reimbursement should also be tied to adherence to established standards of accreditation or conditions of participation.

ACCT recommends a MedPAC study around transforming payment for air ambulance services away from being a transportation benefit to the provision of a medical service dictated by patient need. The cost of readiness, clinical expertise at advanced levels, and caring for the highest acuity patients should be considered in the study. Finally, the study should address whether critical care transport should be separately recognized for payment, whether by air or ground.