



Medical Services  
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Jack Dalrymple, Governor  
Maggie Anderson, Executive Director

MEMORANDUM

Date: April 7, 2016

To: All Ambulance Providers

From: North Dakota Department of Human Services, Medical Service Division, Kari Charvat, Compliance Technician 

Regarding: Billing requirements for mileage charges

The North Dakota Health Enterprise Medicaid Management Information System (MMIS) has recently been updated to comply with the billing requirements set forth by the Centers for Medicare and Medicaid Services (CMS). According to the Medicare Claims Processing Manual; Chapter 15 § 20.2 & 30.1.2 the following requirements apply:

***20.2 - Payment for Mileage Charges***

***(Rev. 1696; Issued: 03-06-09; Effective/Implementation Date: 04-06-09)***

***B3-5116.3, PM AB-00-131***

*Charges for mileage must be based on loaded mileage only, e.g., from the pickup of a patient to his/her arrival at destination. It is presumed that all unloaded mileage costs are taken into account when a supplier establishes his basic charge for ambulance services and his rate for loaded mileage. Suppliers should be notified that separate charges for unloaded mileage will be denied.*

***30.1.2 - Coding Instructions for Paper and Electronic Claim Forms***

***(Rev. 3076, Issued: 09-24-14, Effective: Upon Implementation of ICD-10 ASC X12: 01-01-12, Implementation: ICD-10: Upon Implementation of ICD-10 ASC X12: 09-16-14)***

***Mileage***

*Generally, each ambulance trip will require two lines of coding, e.g., one line for the service and one line for the mileage. Suppliers who do not bill mileage would have one line of code for the service.*

***Beginning with dates of service on or after January 1, 2011, mileage billed must be reported as fractional units in the following situations:***

- Where billing is by ASC X12 claims transaction (professional or institutional), and***



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• *Where billing is by CMS-1500 paper form.*

*For trips totaling up to 100 covered miles suppliers must round the total miles up to the nearest tenth of a mile and report the resulting number with the appropriate HCPCS code for ambulance mileage. The decimal must be used in the appropriate place (e.g., 99.9).*

*For trips totaling 100 covered miles and greater, suppliers must report mileage rounded up to the next whole number mile without the use of a decimal (e.g., 998.5 miles should be reported as 999).*

*For trips totaling less than 1 mile, enter a "0" before the decimal (e.g., 0.9).*

**All Ambulance providers must comply with the above billing requirements. The Department will continue to monitor and audit documentation to ensure compliance for accurate reporting of the number of loaded miles being billed.**