

**Bureau of Managed Care
Managed Care Organizations
Policy / Procedures**

General Contract Monitoring

Physician Certification Statement (PCS Form HFS 2270) for All Non-Emergency Transportation Originating from Hospitals and Long-Term Care Facilities

Public Act 100-0646 amended the Hospital Licensing Act (Section 18), the Nursing Home Care Act (Section 16) and the Illinois Public Aid Code (Section 20) to require completion of a standardized medical necessity form at the time non-emergency transportation is ordered from a hospital or Long-Term Care (LTC) facility.

The HFS 2270 Physician Certification Statement (PCS) is required for all Non-Emergency Transports originating from hospitals and LTC facilities, via ground ambulance, medicar and service car. This is needed any time a facility arranges non-emergency transportation, regardless if inpatient or outpatient.

The PCS form was effective February 1, 2019. Hospitals and nursing facilities must use the PCS form. The form is posted at:

<https://www2.illinois.gov/hfs/SiteCollectionDocuments/hfs2270.pdf#search=2270>

One side of the form is for Ambulance transports, and the other side is for Medicar/Wheelchair and Service Car transports.

The patient must be eligible for transportation services (Fee for Service (FFS)) or HealthChoice Illinois/MCO) at the time of transport.

For single trip ambulance transports, a PCS is only valid for the Date of Service (DOS) of the trip. Repetitive 051 transports with a PCS signed by a patient's physician are valid for up to sixty (60) days. If medical necessity changes and a different level of transportation is needed, a new PCS form will be required.

For single trip Medicar/Service Car transports, a PCS is only valid for the DOS of the trip. Repetitive 051 transports with a PCS signed by a patient's physician are valid for up to one hundred eighty (180) days. If medical necessity changes and a different level of transportation is needed, a new PCS form will be required.

The PCS must be completed prior to ordering the transport and prior to discharge.

Completed PCS forms must include:

1. Patient Information, including name, date of birth and RIN.
2. Type of Transport.

3. Verification of closest appropriate provider/facility.
4. Origin and Destination of trip(s).
5. Medical Necessity for level of transport needed.
6. Category of Service (appropriate level and type of transportation needed).
7. Patient's medical condition that supports criteria at the time of transport.
8. Certification of information provided.
9. Number of trip(s) (e.g., single trip, round trip, repetitive trips).
10. Date of transport, including expiration date if necessary (no more than sixty (60) days for ground ambulance and one hundred eighty (180) days for service car/medicar).
11. Licensed Medical Professional's printed name, signature, credentials (boxes at bottom of form) and telephone number.

If a PCS is incomplete, the hospital or LTC facility must furnish assistance completing the form upon request of the transportation provider.

A copy of the PCS must be provided to the transportation provider at or prior to transport unless a delay will negatively impact the patient. When delays occur, hospitals and nursing facilities must provide the PCS at no cost within ten (10) calendar days of the request of the ambulance service provider.

- The PCS form should be submitted per statute requirements; however, in an effort not to penalize the transportation provider's ability to be reimbursed for the transport, a legislative change allows the provider to submit a documented attempt to obtain the requested certification if the hospital or facility fails to provide the PCS. The PCS or proof of an attempt to obtain the form, must be submitted to receive prior or post approval of transportation. Acceptable documentation includes a signed return receipt from the U.S. Postal Service, facsimile receipt, email receipt, or other similar service that evidences that the provider attempted to obtain the required PCS from the patient's attending physician or other approved medical professional.

The PCS and supporting documentation must be retained for at least three (3) years in the hospital medical record and at the LTC facility.

Required Quarterly MCO Reporting for all HealthChoice Illinois (HCI) MCOs

HCI MCOs must complete and submit a PCS Summary Report to HFS on a quarterly basis. The MCO shall apply the PCS Summary Spreadsheet provided by HFS and shall include in each quarterly summary report the number of PCS forms received by category of service and the number of PCS forms Approved, Denied or Appealed.

Effective January 1, 2023, the MCO shall submit the completed quarterly summary report to **HFS no later than ten (10) calendar days** after the end of the reporting quarter.

- The MCO shall submit the report to the HFS.Transportation@illinois.gov email, and also CC the HFS.AMrequests email.
- In addition, each MCO shall upload the report to the MCO Administrative and Deliverables SharePoint library as follows:

Calendar Year (CY) Reporting Quarter	Quarterly Report Due Date – 10 business days after the end of the reporting quarter	SharePoint Library Naming Convention
CY 2022		
4th Quarter – October 1 through December 31	No later than January 10, 2023	[MCO Name] PCS Q4 CY22
CY2023		
1 st Quarter – January 1 through March 31	No later than April 10, 2023	[MCO Name] PCS Q1 CY23
2 nd Quarter – April 1 through June 30	No later than July 10, 2023	[MCO Name] PCS Q2 CY23
3 rd Quarter – July 1 through September 30	No later than October 10, 2023	[MCO Name] PCS Q3 CY23
4 th Quarter – October 1 through December 31	No later than January 10, 2024	[MCO Name] PCS Q4 CY23
CY2024		
1st Quarter – January 1 through March 31	No later than April 10, 2024	[MCO Name] PCS Q1 CY24
2nd Quarter – April 1 through June 30	No later than July 10, 2024	[MCO Name] PCS Q2 CY24
3rd Quarter – July 1 through September 30	No later than October 10, 2024	[MCO Name] PCS Q3 CY24
4th Quarter – October 1 through December 31	No later than January 10, 2025	[MCO Name] PCS Q4 CY24
CY2025		
1st Quarter – January 1 through March 31	No later than April 10, 2025	[MCO Name] PCS Q1 CY25
2nd Quarter – April 1 through June 30	No later than July 10, 2025	[MCO Name] PCS Q2 CY25
3rd Quarter – July 1 through September 30	No later than October 10, 2025	[MCO Name] PCS Q3 CY25
4th Quarter – October 1 through December 31	No later than January 10, 2026	[MCO Name] PCS Q4 CY25

Policy History
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Originating from Hospitals and LTC Facilities

Date	Action	Policy Originator
June 2019	Clarification from BPAS	Laura Ray
December 2022	Clarifications from BPAS and BMC	Amy Roberts/Christina McCutchan/Melissa Schackel

Policy Revisions	Revision Approved
December 2022	Laura Ray