

Billing Guidelines:

Ambulance/Transportation Origin/Destination Modifiers

Ambulance/transportation origin/destination modifiers are used to indicate location of pick-up and drop-off of the patient.

Modifier	Modifier Description
D	Diagnostic or therapeutic site other than 'P' or 'H' when these codes are used as origin codes. This modifier is to be used for transports to or from an ambulatory surgical center (ASC) or a free-standing psychiatric facility.
E	Residential, domiciliary, custodial facility (other than an 1819 facility)
G	Hospital-based or hospital-related dialysis facility
GM	Multiple patients on one ambulance trip. Note: Providers need to submit the appropriate origin and destination modifiers in the first modifier position and the HCPCS modifier GM in the second modifier position.
Н	Hospital. This modifier must be submitted for a psychiatric facility located at a hospital.
I	Site of transfer (e.g., airport or helicopter pad) between types of ambulance vehicles
J	Non-hospital-based dialysis facility
N	Skilled nursing facility (SNF) (1819 Facility)

Modifier	Modifier Description
Р	Physician's office (includes HMO non-hospital facility, clinic, etc.) For Medicare purposes, urgent care centers, clinics and freestanding emergency rooms are considered physician offices.
QL	Patient pronounced dead after ambulance called
R	Residence
S	Scene of accident or acute event
X	(Destination code only) Intermediate stop at physician's office on the way to the hospital; includes HMO non-hospital facility, clinic, etc.

Automatically Denied Modifiers

Trips with one of these origin/destination modifiers are not covered unless otherwise allowed by State Medicaid.

Modifier	Special State Rules
DD, DE, DP, DR, ED, EE, ER, GD, GI, GP, IJ, IP, JD, JI, JP, NN, NP, PD, PE, PG, PJ, PN, PP, PR & RP	Not allowed except for Ohio
DS, ES, GG, GJ, GS, GX, HG, HP, HS, HX, ID, IE, IN, IR, IS, IX, JG, JJ, JS, JX, NI, NS, PS, PX, RR, RS, SG, SJ, SN, SP, SR, SS, XD, XE, XG, XJ, XN, XP, XR, XS & XX	Not allowed

Modifier	Special State Rules
EP & HD	Not allowed except for Missouri & Ohio

Modifier	Special State Rules
RD & RE	Not allowed except Massachusetts & Ohio
SD	Not allowed except Massachusetts
SE	Not allowed except for Indiana

References:

https://med.noridianmedicare.com/web/jeb/topics/modifiers#ambulance

CPT Code Range

https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=56468&ver=11

Revisions:

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