

Ambulance services payment guidelines

July 2016 (updated)



Department
of Health

OFFICIAL

Ambulance services payment guidelines

Payment responsibility for emergency and non-emergency ambulance services provided by Ambulance Victoria

July 2016 (updated)

To receive this document in another format, phone 1300 650 172, using the National Relay Service 13 36 77 if required, or email <ambulance@health.vic.gov.au>.

Authorised and published by the Victorian Government, 1 Treasury Place,
Melbourne. © State of Victoria, Australia, Department of Health, August 2023.

Available at [Ambulance services payment guidelines](https://www.health.vic.gov.au/patient-care/ambulance-services-payment-guidelines) < <https://www.health.vic.gov.au/patient-care/ambulance-services-payment-guidelines> >

Contents

Introduction	5
When to use ambulance transport.....	5
Who can authorise the use of ambulance transport?	5
Booking process	5
Account payments	6
Payment responsibility matrix.....	6
Table 1 Community ambulance services.....	6
Table 2 Inter-hospital ambulance services	7
Glossary	8
Additional information.....	10
Overseas visitors	10
Prisoners and people in police custody	10
Public health service home birth patients	10

Introduction

These guidelines are for use by Victorian public and private health services and explain who has responsibility for transport and attendance fees for ambulance services *provided by Ambulance Victoria*.

Hospitals and health services are still able to negotiate payment arrangements between themselves in individual cases.

When to use ambulance transport

Ambulance transport can only be used for patients who have an authorised clinical need to be transported in this way. In other words, it must be *clinically necessary* for the patient to travel by ambulance.

*For transport to be clinically necessary, the patient must require active clinical monitoring/care or clinical supervision **during** transport that is provided by a paramedic, health professional or qualified patient transport officer or attendant.*

Who can authorise the use of ambulance transport?

Authorisation is limited to health professionals who can make an informed decision about whether there is a genuine clinical need for a patient to be transported by ambulance instead of any other way.

The health professionals who can authorise ambulance transport are:

- a registered medical practitioner
- an Ambulance Victoria paramedic/ authorised employee of Triple Zero Victoria
- a registered division 1 nurse (under the Non-Emergency Patient Transport Regulations 2016).

Before authorising a patient for any ambulance transport interstate, the referring health professional must contact Ambulance Victoria and provide detailed evidence as to why the patient must attend interstate health services. Ambulance Victoria may seek a second opinion.

Booking process

Inter-hospital transports

The booking of inter-hospital and patient discharge transports are initiated by the sending hospital or health service. The choice of road or air service is a decision made by Ambulance Victoria based on the most appropriate transport for the patient at the time.

Community transports

For people in the community who need to attend public specialist clinics or public health independence programs, the booking (and authorisation) of the ambulance transport must be completed by the relevant health service. This includes ambulance transports back to the community.

For people being transported from a private healthcare facility, the booking (and authorisation) of the ambulance transport must be completed by the private healthcare facility.

Account payments

Hospitals and healthcare facilities using patient transport provided by Ambulance Victoria are required to make payments within normal commercial arrangements.

Payment responsibility matrix

Table 1 Community ambulance services

Transports	Patient type		Responsible for payment					
			Public facility	Private facility	TAC / VWA	DVA	Patient	AV
FROM community	General						✓	
	Concession patient attending:	HIP/specialist clinic at public facility	✓					
		public health service						✓
		private healthcare						✓
	DVA					✓		
	TAC or VWA				✓			
TO community	General patient						✓	
	Concession patient attending:	HIP/specialist clinic at public facility	✓					
		public health service						✓
		private healthcare		✓				
	DVA					✓		
	TAC or VWA				✓			
Patient Key								

General

A person who is not a concession, DVA, TAC, VWA or compulsory mental health patient. This patient may have an Ambulance Victoria membership subscription, or private health insurance that includes ambulance cover.

Concession

The Concession classification includes Pensioner, Health Care Card holders and compulsory mental health patients. It also includes asylum seekers, with or without eligible concession cards. See glossary for further details.

DVA

Department of Veterans' Affairs Gold Card or White Card holder – subject to card conditions.

TAC

Transport Accident Commission patient – subject to the conditions under the scheme.

VWA

Victorian WorkCover Authority patient – subject to the conditions under the scheme.

Specialist clinic or HIP

Concession patients visiting specialist clinics or public health independence programs (HIP) may be authorised for clinically necessary transport by the relevant health service provider. General patients visiting these clinics are responsible for the cost of any ambulance transport. DVA, TAC and VWA patients may be covered by their schemes.

When a concession patient is transported from the community to a specialist clinic or public health independence program, payment responsibilities of the relevant service provider/facility include the patient's *return* trip.

In the event of an evacuation or closure of a residential aged care service, payment is the responsibility of the residential aged care service.

Table 2 Inter-hospital ambulance services

Patient care	Patient type	Responsible for payment				
		Sending facility	TAC / VWA	DVA	Patient	AV
Public admitted	General	✓				
	Concession	✓				
	DVA	✓				
	TAC or VWA		✓			
Public emergency department	General	✓				
	Concession	✓				
	DVA	✓				
	TAC or VWA		✓			
Public non-admitted healthcare facilities*	General				✓	
	Concession					✓
	DVA			✓		
	TAC or VWA		✓			
Private healthcare facility	General				✓	
	Concession	✓				
	DVA	✓		✓		
	TAC or VWA		✓			

Patient key**General**

A person who is not a concession, DVA, TAC, VWA or compulsory mental health patient. This patient may have an Ambulance Victoria membership subscription, or private health insurance that includes ambulance cover. For the purposes of inter-hospital transport only, includes prisoners.

Concession

The Concession classification includes Pensioner Health Care Card holders and compulsory mental health patients. It also includes asylum seekers, with or without eligible concession cards. See glossary for further details.

DVA

Department of Veterans' Affairs Gold Card or White Card holder – subject to card conditions.

TAC

Transport Accident Commission patient – subject to the conditions under the scheme.

VWA

Victorian WorkCover Authority patient – subject to the conditions under the scheme

When a patient (public or private) is sent to a healthcare facility or to a diagnostic or day procedure service, a specialist clinic or HIP and expected to return the same day, payment responsibility also extends to the *return* transport.

*Urgent Care Centres (UCCs) provide non-admitted care. UCCs may be located within a hospital or may be standalone facilities.

✓ For DVA transports, when an admitted DVA patient is transported from a private hospital to and from a diagnostic or public day procedure service, the sending hospital is responsible for payment, otherwise transport payment responsibility rests with DVA.

Glossary

A	Ambulance Victoria	Ambulance Victoria provides emergency and non-emergency services and transports patients by road and air. Further detail on Ambulance Victoria's services is available at Ambulance Victoria's website <www.ambulance.vic.gov.au>.
C	Community	Community includes Priority Primary Care Centres (PPCCs), GP clinics, private consulting rooms, the patient's home, residential aged care services, bush-nursing hospitals, transition, and rehabilitation care programs. A patient may also be transported from a public space.
	Compulsory mental health patient	<p>This section applies to people that are subject to an order under the <i>Mental Health and Wellbeing Act 2022</i>, <i>Sentencing Act 1991</i>, or <i>Crimes (Mental Impairment and Unfitness to be Tried) Act 1997</i>, that requires them to be compulsorily assessed or treated in a designated mental health service. This includes compulsory, security, and forensic patients, and persons being transported by ambulance under sections 232 and 241 of the <i>Mental Health and Wellbeing Act 2022</i></p> <p>*NOTE: Ambulance Victoria is financially responsible for the ambulance transport of patients being transported under sections 232 or 241 of the <i>Mental Health and Wellbeing Act 2022</i> from the community to a designated mental health service. Accordingly, when a patient is transported by Ambulance Victoria to an emergency department without an inpatient mental health facility under section 232 for assessment, and then requires ambulance transport to an inpatient mental health facility, Ambulance Victoria is also financially responsible for the subsequent transport.</p>
	Concession	<p>The Concession classification includes:</p> <ul style="list-style-type: none"> • a person holding a current Victorian Pensioner Concession Card (includes dependent children listed on the card but not spouses) • a current Health Care Card holder and their dependents including spouses listed on the card (doesn't include Health Care Card for carer allowance and foster care issued in the name of the child) • a child holding a current Child Disability Health Care Card or Foster Child Health Care Card, but not their guardians/families listed on the card • a child under a Family reunification, Care by Secretary or Long-term care order including children on interim accommodation orders <p>Compulsory mental health patients (see definition above).</p> <ul style="list-style-type: none"> – Asylum seekers with or without eligible concession cards Asylum seeker status can be verified as per the following guidance note for Victorian Government services: Identifying a person seeking asylum – Guidance Note <https://www.health.vic.gov.au/publications/hospital-access-for-people-seeking-asylum> – A list of specialist asylum seeker agencies that can verify asylum seeker status is available at Ambulance payment responsibilities, authorisations and concessions <https://www.health.vic.gov.au/patient-care/ambulance-payment-responsibilities-authorisations-and-concessions> <p>A person holding a commonwealth seniors healthcare card is not entitled to free ambulance transport.</p>

D	Day procedure service	Day procedure services provide treatments where the patient could reasonably expect to be admitted and discharged on the same date. Day procedures can occur in both public and private health facilities/centres.
	Diagnostic services	Diagnostic services provide medical imaging, such as CT scans, MRI, x-rays, and may be provided publicly or privately.
	DVA	Commonwealth Department of Veterans' Affairs.
E	Emergency department	See 'Public emergency department'
H	Health Independence Program (HIP)	The Health Independence Program (HIP) provides hospital substitution and diversion services supporting people in the community, in ambulatory settings and in people's homes. HIP includes the following programs: post-acute care (PAC), subacute ambulatory care services (SACS), the Hospital Admission Risk Program (HARP) and residential in-reach.
H	Hospital in the Home (HITH)	Hospital in the Home (HITH) provides hospital care in a person's own home, which can be a private residence or a residential aged care facility. HITH provides acute care that would otherwise need to be delivered within a hospital. Patients who receive HITH are classified as admitted patients.
I	Inter-hospital transfer	Transport within Victoria of a patient from an admitted/non-admitted healthcare facility as per Table 2 to a healthcare service or hospital. For example, between a designated mental health service and Extended Care. Refer to the Victorian Policy and Funding Guidelines published by the Department of Health.
P	Private healthcare facility	Private healthcare facilities include registered private hospitals and day procedure centres. A list of registered private facilities can be found at Department of Health's Private hospitals page < https://www.health.vic.gov.au/private-health-service-establishments/private-hospitals >. Private healthcare facilities <i>do not</i> include private diagnostic and imaging centres, even where these are co-located on private hospital premises. Only staff of a registered private healthcare facility can make a patient transport booking for ambulance transports <i>from</i> a private healthcare facility.
	Public admitted patient	A patient who has undergone a hospital's admission process to receive treatment and/or care as defined by the Department's Victorian Hospital Admission Policy and the Victorian Admitted Episodes Dataset (VAED) manual which are available at the Department of Health's Publications page < http://www.health.vic.gov.au/about/publications >.
	Public emergency department	A public emergency department is a designated emergency department as listed on the Victorian Health Services Performance website < https://vahi.vic.gov.au/reports/victorian-health-services-performance >
	Public non-admitted healthcare facility	Includes Urgent Care Centres (UCCs), and specialist clinics.
S	Specialist clinic	Specialist clinics provide planned non-admitted services with access to: <ul style="list-style-type: none"> • medical, nursing, midwifery and allied health professionals for assessment, diagnosis, and treatment • ongoing specialist management of chronic and complex conditions in collaboration with community providers • pre-and post-hospital care • maternity care

Additional information

Overseas visitors

For all clinically necessary inter-hospital transfers of overseas visitors, the transferring hospital is responsible for payment, and will be billed by the patient transport provider. The overseas patient is responsible for payment for all other ambulance transports, and will be billed by the patient transport provider. See glossary above for asylum seekers.

Ambulance treatment and transport under the *Mental Health and Wellbeing Act 2022*

The following people are not required to pay for emergency ambulance or non-emergency ambulance transport, including treatment-without-transport:

- a patient who is subject to an order under the *Mental Health and Wellbeing Act 2022*, *Sentencing Act 1991*, or *Crimes (Mental Impairment and Unfitness to be Tried) Act 1997* that requires them to be compulsorily assessed or treated in a designated mental health service. This includes compulsory, security, and forensic patients.
- a person who has been taken into the care and control of an authorised person in response to a mental health crisis under s232 of the *Mental Health and Wellbeing Act 2022*.
- a patient who is taken into care and control of an authorised person for the purpose of transport, having been absent without leave from a designated mental health service and is transported under section 241 of the *Mental Health and Wellbeing Act 2022* (including where the setting for a treatment order has changed from community to inpatient)

If patient is a compulsory mental health patient and a NSW resident, NSW mental health is responsible for payment.

Prisoners and people in police custody

Refer to Ambulance transport information at [Ambulance payment responsibilities, authorisations and concessions](https://www.health.vic.gov.au/patient-care/ambulance-payment-responsibilities-authorisations-and-concessions) <<https://www.health.vic.gov.au/patient-care/ambulance-payment-responsibilities-authorisations-and-concessions>>

Public health service home birth patients

Under a public hospital home birth program, a woman who is having a home birth is an admitted 'patient' during labour. If an ambulance transfer is requested by the midwife (from home to hospital) during the admitted episode, health services are responsible for covering the cost of the transfer.

Health services should inform women about their own liability for any costs associated with ambulance transport outside the admitted episode. For further information, refer to [Implementing a public home birth program: guidance for Victorian public health services](https://www.health.vic.gov.au/publications/implementing-a-public-home-birth-program-guidance-for-victorian-public-health-services) <<https://www.health.vic.gov.au/publications/implementing-a-public-home-birth-program-guidance-for-victorian-public-health-services>>