

QUARTERLY REPORT
HFS 2270 Physician Certification Statement for Non-Emergency Transports

1st Quarter: January 1, 2023 through March 31, 2023

PLAN	CATEGORY OF SERVICE	APPROVED	DENIED	APPEALED
Fee-for-Service	51 - Non Emergency Ambulance	11,133	1,495	1080
	52 - Medicare	2,711	1,130	0
	54 - Service Car	155	82	0
	TOTALS	13,999	2,707	1,080
Molina	51 - Non Emergency Ambulance	0	0	0
	52 - Medicare	191	0	0
	54 - Service Car	453	0	0
	TOTALS	644	0	0
IL-Aetna	51 - Non Emergency Ambulance	12	0	0
	52 - Medicare	1	0	0
	54 - Service Car	0	0	0
	TOTALS	13	0	0
Meridian	51 - Non Emergency Ambulance	1,108	0	0
	52 - Medicare	2,462	0	0
	54 - Service Car	63	0	0
	TOTALS	3,633	0	0
Blue Cross Blue Shield	51 - Non Emergency Ambulance	1	0	0
	52 - Medicare	102	0	0
	54 - Service Car	16	0	0
	TOTALS	119	0	0
CountyCare	51 - Non Emergency Ambulance	0	0	0
	52 - Medicare	2,260	0	0
	54 - Service Car	1,869	0	0
	Unassigned	1,278	0	0
	TOTALS	5,407	0	0
TOTAL FOR 1st QUARTER		23,815	2,707	1,080