



Emergency Triage, Treat, and Transport

What is ET3?

- ET3 (Emergency Triage, Treat, and Transport) is a payment model that will allow more flexibility to how ambulance care teams address emergency care needs of Medicare beneficiaries after a 911 call.
- The ET3 model will have the Centers for Medicare & Medicaid Services (CMS) pay ambulance suppliers and providers to care for and transport, if needed.
 - A patient may be transported to primary care, urgent care, or behavioral health facility, or provided definitive treatment by a qualified health care practitioner on the scene or using telehealth.
- The model will allow beneficiaries to use the appropriate resources depending on the time and place.
 - The model's goals are to 1) provide person-centered care that is appropriate and allows the beneficiary to have more control, 2) encourage the appropriate utilization of services that avoids unnecessary hospitalization and lowers cost, and 3) increase efficiency in the EMS system to focus on high-acuity cases.

Background

- Medicare regulations only allow pay for emergency ground ambulance services when patients are taken to hospitals, critical access hospitals, skilled nursing facilities, and dialysis centers, even if a lower-acuity destination is more appropriate for the individual.

Participation

- The main participants will be Medicare-enrolled ambulance service suppliers and hospital-owned ambulance providers. This is the payment model component.
- Forty cooperative agreements with CMS will be awarded to governments who operate or have authority over 911 dispatches to promote a successful model implementation by establishing a medical triage line for low-acuity 911 calls.

Implementation Period

- This model will run for five years, beginning January 1st, 2020 and ending on December 31st, 2024. Regardless of whether or not participants start the program on January 1st, 2020, the program will end at the same time.

Source: <https://innovation.cms.gov/initiatives/et3/>