The Emergency Triage, Treat, and Transport (ET3) Model





October 2021

The Emergency Triage, Treat, and Transport (ET3) Model is a **voluntary** 5-year CMS payment model that provides **greater flexibility** and new **payments** to ambulance care teams for Medicare beneficiaries.

911 call received



Ambulance service initiated



ET3 Model Goals

- Encourage appropriate utilization of Emergency Medical Services (EMS)
- Increase efficiency in the EMS system
- Provide person-centered care at the most appropriate care level



Standard Intervention

Ambulance transports to a covered destination [e.g., emergency department (ED)]



ET3 Model Intervention

Ambulance transports to Alternative Destination Partner (e.g., urgent care)



ET3 Model Intervention

A Qualified Health Care Partner (QHCP) or Downstream Practitioner provides Treatment in Place (TIP) either on site or via telehealth



Ambulance suppliers and providers paid based on the ambulance fee schedule



Ambulance suppliers and providers paid based on level of service provided [emergency Basic Life Support (BLS-E) or emergency Advanced Life Support, Level 1 (ALS1-E) rate], plus mileage and applicable adjustments



Ambulance suppliers and providers paid based on level of service provided (BLS-E or ALS1-E rate); QHCPs paid current Medicare Fee-For-Service rate, including adjustment for care delivered after hours

Blue = Model Services **Red** = Standard Medicare Services

Who can participate?

Eligible to Apply

Apply via request for application (RFA)



Ambulance Suppliers and Providers

Medicare-enrolled ambulance suppliers and providers

Essential Partners

Partner with participating ambulance suppliers and providers



Alternative Destination Partners

Partners such as urgent care centers, primary care offices, community or behavioral health centers



Qualified Health Care Practitioners

Medicare-enrolled QHCPs who meet all requirements to deliver health care services either on site or via telehealth