

OMB Approval No. 0938-0685

SECTION 2: DESCRIPTION OF VEHICLE

A. 1st Vehicle Information - Check the appropriate box to indicate whether the ambulance company is using this section to add or delete a vehicle currently on file. Provide the effective date of that change, complete the appropriate information, and sign and date the certification statement. Otherwise:

1. The supplier must identify the type (e.g., automobile, aircraft, boat), year, make, model, and vehicle identification number of each vehicle.
2. Indicate what medical equipment each vehicle possesses. The vehicle(s) must be specifically designed to respond to medical emergencies or to provide acute medical care to transport the sick and injured. It must have customary patient care equipment including, but not limited to, a stretcher, clean linens, emergency medical supplies and oxygen equipment, and it must have all other safety and lifesaving equipment as required by State and local authorities.
3. If the ambulance will supply Advance Life Support (ALS) services, please provide documentation of certification from the authorized licensing and regulation agency for the area of operation.

Vehicles must be regularly inspected and re-certified according to applicable State and local licensing laws. Evidence of re-certification must be submitted to the Medicare contractor upon request.

IMPORTANT INSTRUCTIONS FOR AIR AMBULANCE

To qualify as an air ambulance supplier, the following is required:

1. A written statement, signed by the President, Chief Executive Officer or Chief Operating Officer of the airport from where the aircraft is hangered that gives the name and address of the facility, and
2. Proof that the enrolling ambulance company, or the company leasing the air ambulance vehicle to the enrolling ambulance company, possesses a valid charter flight license (FAA 135 Certificate) for the aircraft being used as an air ambulance. If the enrolling ambulance company owns the aircraft, the owner's name on the FAA 135 Certificate must be the same as the enrolling ambulance company's name (or the ambulance company owner as reported in Sections 5 or 6) in this application. If the enrolling ambulance company leases the aircraft from another company, a copy of the lease agreement must accompany this enrollment application.

B. 2nd Vehicle Information – This section is provided to report a second vehicle. See instructions above for Section 2A.