



UTILIZATION AND PRICING OF AIR AMBULANCE BY HELICOPTER IN ARKANSAS



Air Transports and Claims by Payer, 2016

PAYERS WITH MORE THAN 50 AIR TRANSPORTS	NUMBER OF AIR TRANSPORTS	TOTAL PAID AMOUNT	AVERAGE CHARGED AMOUNT	AVERAGE ALLOWED AMOUNT	AVERAGE PAID AMOUNT	BALANCE BILL POTENTIAL
Payer A	1,244	\$2,312,990.34	\$36,883.22	\$1,924.29	\$1,859.32	\$34,958.93
Payer B	611	\$2,987,922.22	\$14,923.62	\$5,471.07	\$4,890.22	\$9,452.55
Payer C	206	\$1,196,686.29	\$34,746.29	\$6,505.03	\$5,809.16	\$28,241.25
Payer D	142	\$2,538,069.66	\$37,494.55	\$22,577.18	\$17,873.73	\$14,917.37
Payer E	87	\$775,473.27	\$37,072.51	\$9,156.12	\$8,913.49	\$27,916.39
Payer F	66	\$120,967.16	\$36,499.32	\$1,894.32	\$1,832.84	\$34,605.00
Payer G	60	\$260,135.80	\$35,973.10	\$4,346.98	\$4,335.60	\$31,626.12
Totals	2,416	\$10,192,244.74				

This table uses Arkansas All-Payer Claims Database data from 2016. Claim codes queried for this analysis include A0431, A0436, and S9961.

Definitions:

- o "Total paid amount" is the total amount the payer paid for all air transports.
- o "Average charged amount" is the average of the amounts billed by the air ambulance companies.
- o "Average allowed amount" is the average of the maximum amounts the payer will allow for the air transports, including the patients' share.
- o "Average paid amount" is the average of the amounts the payer paid for the air transports.
- o "Balance bill potential" is the difference between the amount charged by the provider and the payer's allowed amount.



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