



**Marin County
Ground Ambulance Rates - As of January 1, 2025**

| Description | HCPCS Code | Rate |
|-------------------------------|-------------------|--------------|
| BLS-NE Base Rate | A0428 | \$ 2,745.00 |
| BLS-E Base Rate | A0429 | \$ 4,140.00 |
| ALS NE Base Rate | A0426 | \$ 3,082.50 |
| ALS E Base Rate | A0427 | \$ 4,918.50 |
| ALS 2 Base Rate | A0433 | \$ 7,200.00 |
| CCT/PICU Base Rate | A0434 | \$ 13,050.00 |
| ALS/BLS/CCT Mileage Rate | A0425 | \$ 67.50 |
| Disposable BLS | A0382 | \$ 200.00 |
| Disposable ALS | A0398 | \$ 315.00 |
| NICU Base Rate | A0225 | \$ 13,050.00 |
| Bariatric Charge | A0424 | \$ 750.00 |
| Oxygen Charge | A0422 | \$ 200.00 |
| Wait Times - BLS - 30 minutes | A0420 | \$ 915.00 |
| Wait Times - ALS - 30 minutes | A0420 | \$ 1,027.50 |
| Wait Times - CCT - 30 minutes | T2007 | \$ 2,055.00 |