

RESOLUTION R-08-144

RESOLUTION APPROVING USER FEES FOR MANATEE COUNTY AMBULANCE SERVICES; ADOPTING BILLING AND COLLECTION PROCEDURES; AND PROVIDING FOR ADJUSTMENTS, PAYMENT PLANS AND FEE WAIVERS.

WHEREAS, Manatee County Emergency Medical Services (EMS) provides ambulance services to the residents and visitors of Manatee County; and

WHEREAS, the Manatee County EMS operating budget is funded exclusively through ad valorem taxes, general revenues and user fees; and

WHEREAS, increasing costs for staffing and medical supplies have increased the cost of EMS services; and

WHEREAS, fees, billing and collection procedures, and provisions for adjustments and waivers were established by the Board of County Commissioners in Resolution R-05-68; and

WHEREAS, it is necessary, expedient, and in the best interest of the citizens to adjust user fees to properly assess a portion of the cost to the users of these services; and

WHEREAS, it is necessary to maintain procedures for billing and collection of EMS fees, for providing adjustments and waivers, and for approving hardship cases and payment plans.

NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Manatee County, Florida that

SECTION ONE: EMS USER FEES

The schedule of rates attached hereto as Schedule A is adopted as the fees for emergency medical services and ambulance transportation furnished to emergency patients by the Manatee County EMS.

SECTION TWO: BILLING AND COLLECTION PROCEDURES

The following shall be guidelines for billing and collection procedures for emergency medical service fees and charges:

- A. Initial fees and charges for ambulance service(s) shall be assessed either prior to or following the service provision, as service dynamics reasonably permit. Unpaid fees and charges, subsequent to time of service, shall be reflected in an accounts receivable subsidiary ledger system to be maintained by the Financial Management Department, EMS Billing Section, through a subcontracted vendor, as approved by and coordinated with County Finance Office of the Clerk of Circuit Court. References to the County, or the Financial Management Department, EMS Billing Section throughout this resolution will include and apply to any subcontracted agency providing billing services on behalf of the County.
- B. An initial bill for ambulance services shall be processed in the following manner after service is provided.
 - 1. The County will send an initial bill to the service recipient or responsible party and/or to the service recipient's or responsible party's insurance carrier provided that appropriate insurance information is made available to the EMS Billing Section. Third party billing assignment of payments will be accepted with the unpaid difference, if any, remaining the responsibility of the service recipient or responsible party. Credit card payments will be accepted in accordance with procedures established by the Clerk of the Circuit Court, County Finance Division.
 - 2. The EMS Billing Section will accept Medicare assignment, as a participating provider, and will wait no less than forty-five (45) days for payment if Medicare or other insurance carriers are billed. Upon payment by Medicare, billing for the service recipients co-pay will be forwarded to the service recipient or responsible party or to secondary or other insurance, provided appropriate information has been received by EMS Billing Section. If the claim is denied by Medicare, a bill will be sent to the service recipient or responsible party.
 - 3. If information is provided to the EMS Billing section indicating that Medicaid is the appropriate payment source, then County will send a bill to Medicaid and accept assignment. The EMS Billing Section will

RESOLUTION R-08-144

wait no less than sixty (60) days for payment if Medicaid is billed. If the claim is denied because of no coverage at the time of service, a bill will be sent to the service recipient or responsible party. If Medicaid denies the claim because they have deemed the service as not medically necessary, then the account will be adjusted per the rules and regulations of Medicaid.

4. In the event the service recipient or responsible party does not have or does not provide proof of insurance coverage, the bill for ambulance service(s) shall be sent directly to the service recipient or responsible party for payment. The EMS Billing Section will wait no less than thirty (30) days for payment.
5. If payment or additional billing information is not received within time frames established by the Financial Management Department Director, past due notices and collection efforts will be conducted in accordance with procedures coordinated with the Clerk of the Circuit Court and/or a contracted collection agency.

At any time during the billing process, accounts may be referred to collections staff at the Clerk of the Circuit Court for assistance in locating patients or billing information so that the billing process may continue.

- C. A reasonable and customary payment plan will be made available for service recipients and responsible parties in accordance with procedures established by the Financial Management Department Director. Should the service recipient or responsible party fail to meet the terms and conditions of the payment plan, the unpaid balance shall become due and payable, and subject to established collection procedures.
- D. When ambulance service bill(s), at any stage in this billing and collection process, are returned because the Postal Service cannot effectuate delivery, the EMS Billing Section shall make a reasonable effort to ascertain the correct mailing address. If such efforts fail, the account(s) may be considered for other collection alternatives.
- E. Nothing contained in this section shall preclude reasonable telephone or other appropriate contact for billing and collection purposes, as allowed by applicable laws.

SECTION THREE: ADJUSTMENT OF EMS USER FEES

The following shall be minimum guidelines for adjustments to ambulance service fees:

1. Medicare and Medicaid Adjustments - Contractual adjustments under Medicare and/or Medicaid assignment will be made upon notification by receipt of the Explanation of Medicare/Medicaid Benefits (EOMB) in accordance with applicable rules and regulations.
2. Victim's Compensation Contractual Adjustments - Contractual adjustments will be made in accordance with applicable rules and regulations.
3. Worker's Compensation Contractual Adjustments - Contractual adjustments will be made in accordance with applicable rules and regulations.
4. Champus/Tricare/Veterans' Administration Adjustments - Contractual adjustments will be made in accordance with applicable rules and regulations.
5. Railroad Retirement Adjustments - Contractual adjustments will be made in accordance with applicable rules and regulations.
6. HMO Adjustments - Contractual adjustments under Medicare assignment and other Health Maintenance Organizations (HMOs) will be made upon notification by receipt of the Explanation of Benefits (EOB) in accordance with applicable rules and regulations.
7. Small balances – Balances under \$25 may be removed from the accounts receivable ledger once it has been determined by the County or the County's billing agent that reasonable efforts to collect the balances have been made. Similarly, balances between negative \$10 and negative one cent will be adjusted to zero unless refunds are requested in accordance with Section Four, D.
8. Adjustment of Accounts Receivable - Annually the EMS Billing Section shall report to the Board past due accounts that are believed to be uncollectible. After approval by the Board, these accounts shall be removed from the active accounts receivable in accordance with generally accepted accounting principles.
9. Other Adjustments - (other than correction of inadvertent errors) will be reflected on a patient's account, when based on extenuating circumstances,

RESOLUTION R-08-144

it is in the best interest of Manatee County to make such adjustments. All adjustments not specified in this resolution must be approved by the Public Safety or Financial Management Director or their respective designees. Adjustments made in this manner will be ratified by the Board annually.

10. Court Actions - including bankruptcy, probate, or any other action requiring adjustment to the account of an ambulance patient will be made as specified by the court document.
11. INS Detainees - have their medical expenses paid by the U.S. Immigration and Naturalization Service (INS) in accordance with agreements with Manatee County Government. Amounts not paid by INS will not be billed to the patient, and the account will be adjusted to zero.

SECTION FOUR: WAIVER OF EMS USER FEES

- A. User fees for EMS ambulance and non-transport advanced life support stand-by services for the following community special events shall be waived as the Board finds that a valid public purpose is hereby established in recognition of their contributions to the community: (1) Manatee County Fair; (2) Manatee County Public High School varsity and junior varsity football games; (3) Heritage Festival events; and (4) Southeastern Guide Dog events. Fees for other community special events may be waived in accordance with procedures approved by the County Administrator.
- B. It is recognized that certain service recipients or responsible parties may need to be identified and processed as hardship cases. Hardship cases would be determined by the Community Services Department using the criteria established for the Individual Fee Assistance Program in accordance with Resolution R-94-35 or as determined eligible in accordance with the Indigent Care Agreement with Manatee Memorial Hospital. If determined eligible, the patient will be exempt from charges for ambulance services. Account balances for these accounts will be adjusted to zero upon determination of eligibility as verified by the Community Services Department Director or designee.
- C. Payments will be pursued from inmates and other payers that may be responsible for their medical care in accordance with FS 901.35 and/or 951.032. Compliance with FS 901.35(2) will be accomplished by adjusting these accounts to zero without further billing to other County funding sources.
- D. It is recognized that it is not cost effective to process billings and/or pursue collection of accounts with small balances of \$25 or less, or to issue checks

RESOLUTION R-08-144

for refunds of \$10 or less. Once the balance on an account falls below \$25, invoices may be sent, but other collection efforts will be discontinued. Refund checks will be issued for accounts that have credit balances greater than \$10. Refund checks of \$10 or less will be issued when requested within one year of the payment date that created the refundable amount by the payer that is owed the refund.

- E. Because ambulance fees charged for treatment and transportation of public safety workers would be covered by worker's compensation insurance, the policy of waiving emergency medical services charges for firemen, police and EMS personnel, whether responding to an emergency on-duty or off-duty, was rescinded by R-04-125. Should insurance not be available, fees will be waived so that no public safety employee is adversely affected for being injured while fulfilling their responsibilities to the public.

SECTION FIVE: EFFECTIVE DATE

This Resolution rescinds and replaces R-07-152 and shall become effective for ambulance services performed on or after July 1, 2008.

ADOPTED in open session with a quorum present and voting this ²⁴10th Day of June, 2008.

BOARD OF COUNTY COMMISSIONERS
OF MANATEE COUNTY, FLORIDA

BY: [Signature]
Chairman

ATTEST: R. B. Shore
Clerk of the Circuit Court

BY: [Signature]
Deputy Clerk



RESOLUTION R-08-144

SCHEDULE A

AMBULANCE FEES
Effective June 10, 2008

<u>ITEM</u>	<u>CHARGE</u>
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TRANSPORT SERVICES

Basic Life Support Non-Emergency Transport.....	\$323
Basic Life Support Emergency Transport.....	\$407
Advanced Life Support Non-Emergency Transport.....	\$388
Advanced Life Support Emergency Transport, Level 1.....	\$550
Advanced Life Support Emergency Transport, Level 2.....	\$699
Patient Deceased - treated but not transported..... (If transported, level of service rendered is charged)	\$407

MILEAGE RATES

Mileage, charge per loaded mile.....	\$9.63
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SERVICES WITHOUT TRANSPORT

Advanced Life Support Level 1 services rendered without transport are billed at the Advanced Life Support non-emergency rate.....	\$388
Advanced Life Support Level 2 services rendered without transport are billed at the Advanced Life Support Level 1 amount.....	\$550
Emergency Helicopter Response Preparation..... in addition to charges for Advanced Life Support services	\$253

MULTIPLE TRANSPORTS

For two patients transported simultaneously, the charge will be equal to 75 percent of the charge for the level of care given, plus 50 percent of the mileage charge.

For three or more patients transported simultaneously, the charge will be equal to 60

RESOLUTION R-08-144

Schedule A Cont'd
Page Two

percent of the charge for the level of care given, plus the applicable mileage charge divided by the number of patients on board.

<u>ITEM</u>	<u>CHARGE</u>
<u>SPECIAL EVENTS AND MISCELLANEOUS RATES</u>	
Stand-by Time for ambulance and crew, per hour..... Minimum charge will be for three hours and charges will be rounded up to the next hour.	\$ 160
Stand-by Time for staff without ambulance, per person per hour..... Minimum charge will be for three hours and charges will be rounded up to the next hour.	\$ 60