



Burleson Fire/EMS Transport Update

CITY COUNCIL PRESENTATION
JULY 22, 2024

Discussion Objectives

Burleson EMS Call Volume

Inter-facility Transport Update

Ambulance Billing Update

Subscription Plan Discussion

Burleson EMS Calls for Service October 2023 – June 2024

Response Type	Number of Runs	Percent of Total Runs
Burleson 911 Response	3,921	78%
CareFlite 911 Response	291	6%
Burleson Inter-Facility Transport	141	3%
CareFlite Inter-Facility Transport	650	13%
<u>Totals</u>	<u>5,003</u>	<u>100%</u>

Note: <u>Burleson Inter-Facility Transport</u> of the 141 total, 10 were incurred in calendar year 2024

Average EMS Run Time Summary Report

(In Minutes)

Average total call time: 1 hour 7 minutes

Avg. Unit Notified to Enroute	Avg. Unit Enroute to Arrived at Scene	Avg. Unit Arrived on Scene to Left Scene	Avg. Unit Left Scene to Arrived at Destination	Avg. Patient Arrived at Destination to Unit Back in Service
00:33	04:34	21:43	16:07	24:04

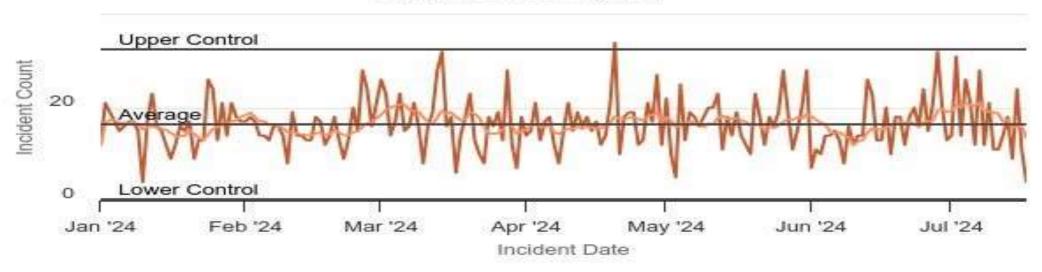
Unit Hour Utilization 2024

Unit	Number of Runs	Total Time on Task (DD:HH:MM)	UHU Fitch Recommends <u><</u> 25% MAX = 30%
Medic 1	1,282	41:23:10	22.05%
CareFlite M42	749	39:19:30	20.91%
Medic 16	918	32:09:56	17.03%
Medic 3	853	30:00:55	15.78%

EMS Call Volume by Day in 2024

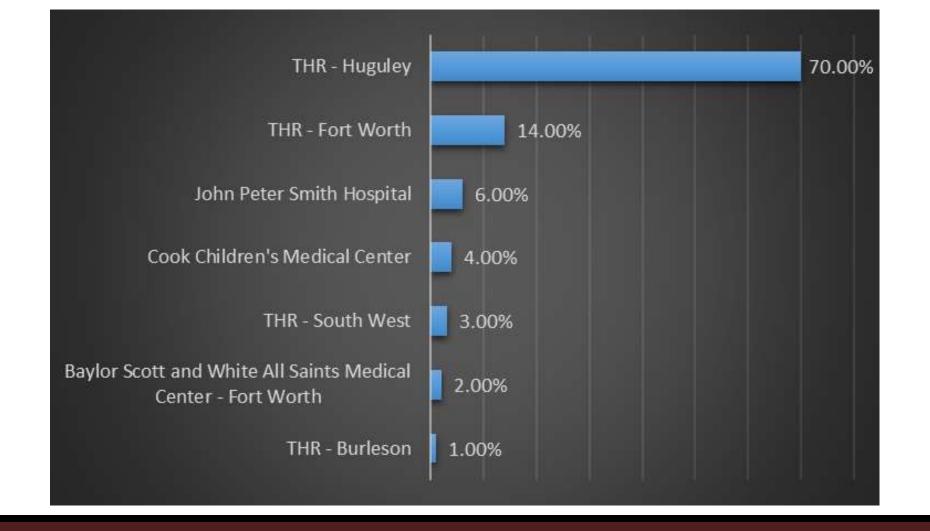
EMS Call Volume by Day

Jan 01, 2024 to Dec 31, 2024



Daily Incident Count

— 10 Day Moving Average Count



Hospital Destinations

Treatment no Transport 37%



Patient Transport Policy

Under the guidance of Dr. Cordova, our Medical Director, our policy is to transport patients to the closest and most appropriate emergency room while also taking the patient's choice into consideration. We prioritize the patient's condition and strive to accommodate their preferences if the requested emergency room is within a reasonable distance, such as the hospital district in Fort Worth.

In emergency situations, our primary goal is to transport the patient promptly to the nearest emergency room to stabilize their condition. Once the patient's condition is stable, further transport options with the emergency room staff may be considered to specialized facilities when necessary.

Our ambulance crews are trained to handle nuanced situations, and they have the option to consult with the Medical Director to make the best transport decision for each patient. We respect the patient's right to make informed decisions about their care and are dedicated to working closely with them to ensure they receive the best possible care. The patients well-being is our priority.

Previous Ambulance Billing Update



Billing Timeline:

- Started private pay in Nov 2023 after new ambulance service registration.
- Obtained Medicare billing capability, the first step for other government and private payors.

Delay Factors:

- Ambulance delivery delay impacted state licensing and billing registration.
- Traditional onboarding was disrupted causing a delay in billing start.

Progress:

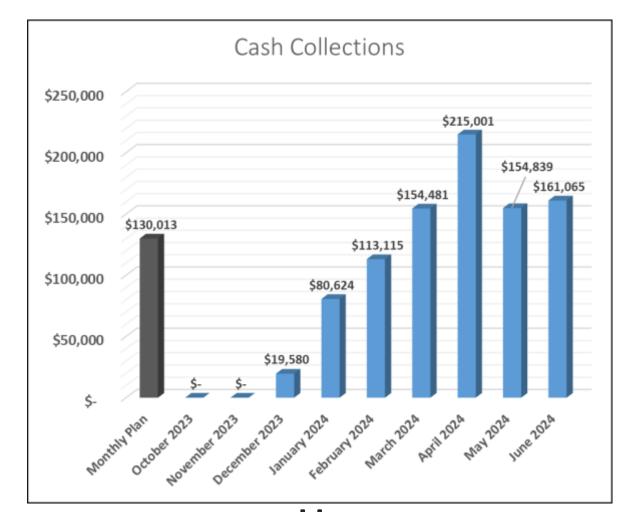
- Billing gained momentum by late December 2023.
- Registered with most government and private payors.
- Billing can be backdated to the service start date, 10-01-2023.

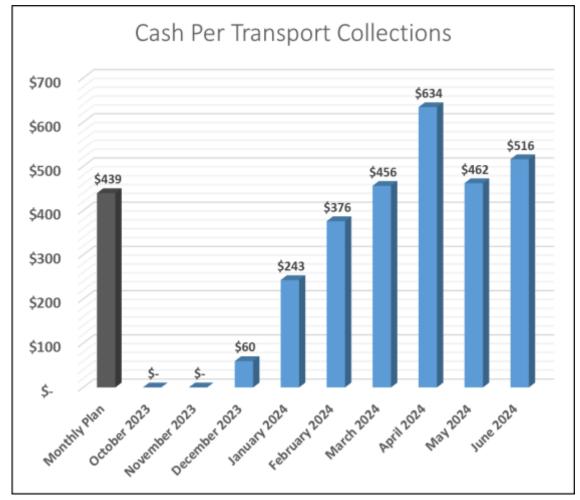
Outlook:

• Emergicon expected a positive trend in ambulance call billing by the end of Q2 2023/2024, based on six months of data.

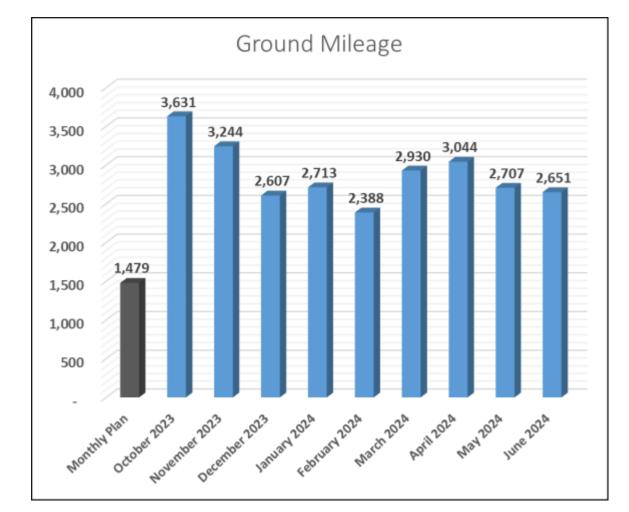
Emergency Management Services			
Cash Collections - Actuals	\$	898,706	
Cash per Transport (CPT) Y-T-D Average	\$	305	
Cash per Transport (CPT) last 3 months (APR-JUN)	\$	453	
Y-T-D Transports		2,987	
Projected Total Annual Transports		3,971	

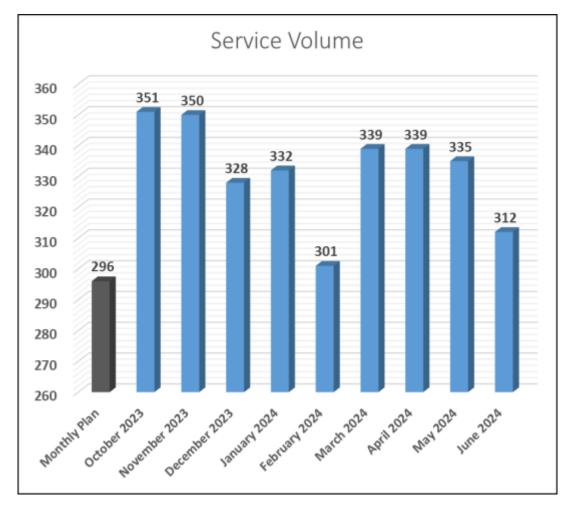
Current Trends



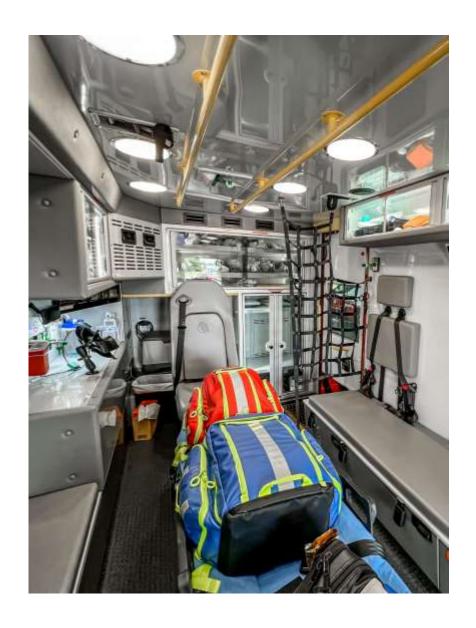


EMS Billing Summary





EMS Activity Summary



What is an EMS Subscription Plan

What is an EMS Subscription Program:

EMS subscription programs enable households and businesses who have either private insurance or Medicare to make an upfront payment of an established fee. This payment helps offset potential emergency medical transport expenses in the future that may not be covered under their insurance benefits. EMS subscription programs are typically not available to individuals who do not have insurance or Medicare.

Pros of Maintaining an EMS Subscription Program:

Cost Coverage for Citizens:

- Subscribers gain confidence that they won't face unexpected medical bills when transported by the subscribed agency.
- Requesting insurance information upfront from subscribers can help offset lost revenue on transports.

Additional Revenue Source:

- Subscription programs may provide an additional revenue stream for EMS departments.
- Funds are generated from individuals, even if they don't use the ambulance transport services during the subscription period.

What is an EMS Subscription Plan Continued

Considerations for Implementing an EMS Subscription Program

Financial Viability:

- The EMS subscription plan is intended to enhance services for participants.
- However, there is a possibility that the revenue generated may not fully offset the program's write-offs.

Cost Implications for Participants:

- Participants in the subscription plan will not incur any out-of-pocket costs.
- There is <u>no</u> option to bill for unmet deductibles.

Insurance and Medicare Limitations:

- If insurance or Medicare deem the service unnecessary, it will result in non-payment.
- Some patients use ambulance services for primary care needs not covered by insurance or Medicare, leading to multiple unpaid calls for service and ER transports.

Balance Billing Issues:

- EMS subscription programs traditionally aim to protect patients from balance billing.
- Balance billing happens when insurance companies pay out-of-network rates that do not fully cover the operational costs of ambulance services. <u>As a result, patients are billed for the</u> <u>remaining amount not covered by their insurance.</u>

Legislative Developments:

- Senate Bill 2476 seeks to address balance billing concerns by establishing a reimbursement framework based on the EMS services fee schedule.
- Commercial health plans regulated by TDI will be required to reimburse out-of-network ground EMS agencies at rates determined by local governmental entities.
- In communities without locally set rates, health plans will reimburse at the lesser of the billed charge or 325 percent of Medicare.
- Emergicon currently lacks sufficient data to assess whether the new Senate Bill 2476 will effectively improve billing reimbursements.

DSHS EMS Subscription Plan Requirements

Requirements for Approval:

Authorization:

 Obtain written authorization from the highest elected official (County Judge or Mayor) where subscriptions will be sold.

Contract Submission:

Submit a copy of the enrollment contract to the Department of State Health Services.

Advertising:

- Maintain a current file of all advertising.
- Submit advertising copies to the department 30 days before enrollment.

Billing Compliance:

 \circ $\,$ $\,$ Adhere to all state and federal billing and reimbursement regulations.

Financial Responsibility:

• Provide a surety bond or evidence of self-insurance equal to the subscription funds.

Service Provision:

 \circ Do not deny emergency services to non-subscribers or those with non-current subscriptions.

Review and Reporting:

- Annual review by the department.
- Provide a list of subscribers with names, addresses, enrollment dates, and fees after each enrollment period.
- Report the total amount of funds collected each year.
- Provide the beginning and ending dates of the enrollment period(s).

Medicaid Compliance:

Do not offer memberships to Medicaid clients.



Health Services

EMS Subscription Plan Comparable Cities

City	Subscription Plan Cost	Notes
Arlington	\$60 annual	AMR Private Ambulance
Cedar Hill	\$5 month = \$60 Annually	Not accepting new enrollments as they are reviewing the viability of future use of the program
The Colony	\$8 monthly = \$96 Annually	The plan covers 3 transports per year. Citizens can opt in or out through their water bill.
Fort Worth	\$69 or \$350 Annual	Medstar offers a two-tier system. The first tier, priced at \$69, includes a traditional program. The second tier, priced at \$350, encompasses both the traditional program and additional Community Paramedic services.
Grand Prairie	\$100 Annual	They are not accepting new enrollments while they review the program's future viability. Currently, the program is incurring more costs from writing off ambulance bills than it is generating in revenue.
Hurst	\$60 Annual	Hurst is evaluating its current rates and recommending an increase to \$75 per household. This adjustment is necessary because the current plan is incurring higher ambulance bill costs than the revenue it generates. They will continue to monitor this change for another year to determine if it will be necessary to recommend abandoning the program due to costs.
Cleburne	No Plan	
Coppell	No Plan	
Euless	No Plan	
Keller	No Plan	
Mansfield	No Plan	
Midlothian	No Plan	
North Richland Hills	No Plan	
Waxahachie	No Plan	Allegiance Private Service

Subscription Plan Projections

- •Estimated number of subscribers: 1,200
- •Estimated Revenue: \$120,000
- •Based on my discussions with representatives from various cities utilizing a subscription plan, it appears that the revenue generated may not sufficiently offset the program's write-offs.

Burleson approved Ambulance Billing Practices

- Balance Billing Emergicon is authorized to utilize balance billing, meaning the patient shall receive a bill for the difference between the amount charged and the amount the patients' insurance covers and approves. (where applicable by Law)
- <u>Authorized Write Offs</u> Emergicon is authorized to write off fees for disposables and oxygen. The specific amounts written off, if any, and other terms of the write off shall be determined by emergicon.
- <u>Hard Collections Prohibition</u> Emergicon shall not utilize collection methods that report unpaid balances to credit reporting agencies.
- <u>Interest-Free Payment Plans</u> Emergicon is authorized to offer patients with balances intrest-free payment plans. The specific terms of such payment plan, if any, shall be determined by Emergicon.
- <u>Prompt Payment Discounts</u> Emergicon is authorized to allow a prompt pay discount of twenty-five percent (25%) to forty-five percent (45%) of the amount owed. The specific discount percentage, if any, and other terms of the discount shall be determined by Emergicon.

Proposed Subscription Plan – Options

Option 1: No Subscription Plan

Continue to operate without a subscription plan

Option 2: Open Enrollment Plan

Annual Fee: Recommended at \$100 per household.

Coverage: The subscription plan may cover the cost of ambulance services, potentially reducing the financial burden on our residents during emergencies.

Enrollment Period: November - December, with a secured list of beneficiaries communicated to Emergicon and updated annually.

Go live January 1st of each year.

Eligibility:

- Must be a resident or work within the City limits of Burleson.
- Enrolled in a medical insurance plan for the head of household, spouse, and any unmarried dependent children under 26 years of age who are full-time students.
- Other dependents must have court-documented guardianship papers.
- Medicare recipients.
- Texas Medicaid recipients are prohibited from participating in an EMS subscription plan.



Questions/ Comments?