TOWN OF CASCO

EMERGENCY MEDICAL SERVICES, BILLING, & COLLECTIONS POLICY

PURPOSE

To establish a policy for the provision and reimbursement of emergency medical services provided by the Town of Casco.

DEFINITIONS

A. ADVANCED LIFE SUPPORT, LEVEL 1 (ALS-1): providing transportation by ground ambulance vehicle, medically necessary supplies and services and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention.

B. ADVANCED LIFE SUPPORT, LEVEL 2 (ALS-2): providing either transportation by ground ambulance vehicle, medically necessary supplies and services, and the administration of at least three medications by intravenous push/bolus or by continuous infusion excluding crystalloid, hypotonic, isotonic, and hypertonic solutions (Dextrose, Normal Saline, Ringer's Lactate); or providing transportation, medically necessary supplies, and services, and the provision of at least one of the following ALS procedures:
    1) Manual defibrillation/cardioversion; or –
    2) Endotracheal intubation; or –
    3) Central venous line; or –
    4) Cardiac pacing; or –
    5) Chest decompression; or –
    6) Surgical airway; or –
    7) Intraosseous line.

C. BALANCE BILLING: the practice of charging a beneficiary the difference between the provider's actual charge and the amount provided by the insurance carrier according to any contractual agreements.

D. BASIC LIFE SUPPORT (BLS): providing transportation by ground ambulance vehicle and the provision of medically necessary supplies and services, including BLS ambulance services as defined by the State.

E. EMERGENCY MEDICAL TECHNICIAN ("EMT")-PARAMEDIC: an individual having special, well-defined skills and knowledge in emergency medicine, who has training to provide pre-hospital emergency medical treatment at an advanced level and is Licensed by Maine Emergency Medical Services.

F. EMERGENCY MEDICAL SERVICES ("EMS"): services utilized in responding to needs of those persons in need of immediate medical care within the jurisdiction and adjacent to the Town, including but not limited to the rendering of advanced life support care, provided by Casco Fire Department.

G. PATIENT: a person who receives an EMS response or a person who receives emergency medical services from the Casco Fire Department.

H. REASONABLE COLLECTION EFFORTS: the issuance of a bill to the patient or the party responsible for the patient's personal financial obligations, and subsequent billings, collection letters and telephone calls or personal contacts which constitute a genuine, rather than token, collection effort. The Town expressly incorporates herein by reference any subsequent definition of this term set forth by the Health Care Financing Administration in Section 5220 of the Medicare Carriers Manual or its successor.

I. THIRD PARTY PAYER: insurance carrier or another coverage provider, having the responsibility to pay for medical services rendered to a patient as a result of that patient's accident, injury or illness.

POLICY

Designation as Primary Provider

The Town recognizes the Casco Fire Department as the primary provider of pre-hospital emergency medical services within the corporate limits of the Town and outside of the Town limits as determined by various contracts or mutual aid agreements.

Advanced Life Support Services Required

A. The Town mandates Casco Fire Department shall adhere to all rules and regulations set forth by Maine EMS and/or regulatory board(s) as the minimum standard of care for 9-1-1 ambulance calls and emergency ambulance transports and shall bill accordingly at an ALS or BLS level. The provisions of this paragraph shall apply to all services provided by the Town and to mutual-aid response of other ambulance providers answering emergency 9-1-1 calls within the Town limits.

B. Exceptions to the above provision may be made when ~~all~~ paramedic units are unavailable.

EMS Billing

A. The Town recognizes the need to bill for these services to aid in the provision of EMS. Therefore, the Town shall bill for all EMS services provided unless the Town is reimbursed for services by another agency due to a disaster declaration.

B. No person requiring emergency medical services and/or transportation shall be denied services due to a lack of insurance or ability to pay levied charges.

C. Any applicable charges for EMS rendered shall be billed directly to the patient or the patient's third-party payer.

D. The Town may, either directly or through any third-party billing agency with which it has contracted for billing and/or collections for emergency medical services, make arrangements with patients and/or their financially responsible party for installment payments of bills so long as the Town determines that:
    1) The financial condition of the patient requires such an arrangement; and
    2) The patient and/or financially responsible party has demonstrated a willingness to make good faith efforts towards payment of the bill.

E. The Town may, at its option, and shall, where required by law, bill insurers or carriers on a patient's behalf and may accept payment on an assignment basis.

F. All patients and/or their financially responsible parties, insurers or carriers, will be billed for emergency medical services provided by the Town based upon usual and customary fees for these services:
    1) All patients shall be liable for any co-payment, deductibles and patient responsibility amounts not satisfied by public or private insurance, and the Town shall Balance Bill and make reasonable collection efforts for all such balances. The Town may bill any applicable coinsurance carriers for such amounts.
    2) Exceptions include only those instances where the Town or its agent has determined that the cost of billing and collecting such co-payments, deductibles and patient responsibility amounts exceeds or is disproportionate to the amounts to be collected as determined by the Town's write off policy.

Account Adjustments and Write-Offs

A. The Town's billing agency is authorized to consider all cases of financial hardship based on the Town's financial assistance hardship guidelines.
    1) Patients or financially responsible parties who qualify for State, Federal or other assistance programs are excluded from account adjustment to the extent that needed services are covered under those programs.
    2) Adjustments/waivers will be granted based on US Department of Health & Human Services Poverty Guidelines, based on documented income that does not exceed 300% of the poverty guideline for the number of persons in the household.
        - Annual Income <100% of Poverty Guideline: Reduction of Fee up to 100%
        - Annual Income 100-200% of Poverty Guideline: Reduction of Fee up to 75%
        - Annual Income 200-300% of Poverty Guideline: Payment Plan or Reduction of Fee up to 50%

Reductions will be at the discretion of the Fire Chief who will consider additional factors when they are presented.

B. Uncollected balances on patients accounts that are three years or older with no activity shall be deemed uncollectible and may be written off from the Town's accounts receivable balances. Writing off uncollected balances will be at the discretion of the Town Manager *or their designee*.

C. The Town reserves the right to write off all balances related to EMS services upon appeal made to the Fire Chief with confirmation of the Town Manager.

Right of First Refusal

As a condition of any lease, license or permit for the use of Town property for a large gathering that may require emergency medical standby services, Casco Fire Department shall have the right of first refusal to provide such services.

PROCEDURES

EMS Billing & Collection

A. Third party billing agencies must:
   1) Have in place a compliance program conforming to standards outlined in the Office of Inspector General's Compliance Program Guidance for Third Party Medical Billing Companies, 63 Federal Register 70138, as amended.
   2) Deposit funds payable to the Town directly into a designated Town account, through a lock box or similar arrangement.
   3) Not be subject to exclusion from any state or federal health care program.
   4) Be bonded and/or insured in amounts satisfactory to the Town.

B. The Casco Fire Department will compile a detailed listing of patients who utilize EMS. This information will be provided to the agency responsible for billing in the form of a patient care report *(ePCR).* The information will, however, be subject to the confidentiality requirements of applicable law. This information will include, at a minimum, the following:
   1) Name, address, and telephone number of the patient.
   2) Name, address and claim number of the insurance carrier, if applicable.
   3) Date, time and EMS chart number.
   4) Point of origin and destination.
   5) A Center for Medicare & Medicaid Services approved method for mileage billing.
   6) Reason for transport/ patient's complaint/ current condition.
   7) Itemization and description of services provided and charges.
   8) Signature of the patient (when possible) or authorized decision maker.
   9) Name of receiving physician.
   10) Names, titles, and signatures of ambulance personnel, when possible.

C. ~~Chapter 14 Section 31 of the~~ Town of Casco Code of Ordinances requires all charges levied by the Casco Fire Department to be established and codified in the fee schedule that is reviewed and adopted annually by the Casco Town Council. This policy expressly exempts emergency medical services this requirement and directs that all fees charged for these services to be usual and customary as determined by state and regional billing standards.

D. The Casco Fire Department may promulgate rules and regulations pursuant to and consistent with this Policy, state and federal law.

E. Payments on EMS invoices may be made by mail to the Town's third-party billing agency, or in person at Casco Town Office located at ~~59 Main Street~~. *635 Meadow Road,* Casco, Maine.

Account Adjustments

A. All patients will receive a bill for transport upon receipt of billing information from the fire department.
   1) Requests for Financial Assistance must be made with a completed Town of Casco EMS Financial ~~Assistance~~ *hardship* Request Form, along with any supporting documents.
   2) Financial Assistance will not be granted if complete and accurate information and supporting documentation is not provided. Any assistance granted will be rescinded if the information given

on the application is inaccurate or untrue. The application and supporting documentation is to be retained by the billing vendor in the patient's file for three years after eligibility determination.

3) The billing agency shall provide a monthly report to the Town of accounts adjusted under this policy.

B. The Town may, either directly or through any third-party billing agency with which it has contracted for billing and/or collections for emergency medical services, make arrangements with patients and/or their financially responsible party for installment payments of bills so long as the Town determines that:

1) The financial condition of the patient requires such an arrangement; and
2) The patient and/or financially responsible party has demonstrated a willingness to make good faith efforts towards payment of the bill.

C. The Town shall not Balance Bill when prohibited by law.

1) Providers must accept the Medicare allowed charge as payment in full and may not bill or collect from the beneficiary any amount other than the unmet Part B deductible and Part B coinsurance amounts for patients covered by Medicaid, the Town will accept the payment from Medicaid as payment for services and will not pursue the patient for the remaining balance of the invoice.

Write Off of Uncollectible Accounts

A. The Town may contract with a private – third-party billing service – to provide medical billing services. From time to time, the contractor may need direction for writing off uncollected debt. This policy is intended to provide that direction.

B. The Town authorizes the billing contractor/agent to bulk write off amounts not contractually allowed by Medicare and Medicaid and provide reports to the Town of such write-offs.

C. For all commercial insurance and private pay clients; all appropriate charges shall be applied uniformly without regard to ability to pay or probability of payment.

D. Any account that has aged more than 180 days without activity or payment history shall be referred to the Town for review. The billing contractor/agent must include all account documentation that demonstrates timely and efficient billing practices including but not limited to:

1) Account notes
2) Proof of billing statements and date of mailing(s) or electronic contact
3) Summary of the amount billed and any current amount received
4) Summary of outstanding balances
5) Evidence of payment plan if applicable

E. After 180 days without payment, and following the third collection attempt, the billing agency will transfer uncollected balances to a collection agency designated by the Town for continued collection efforts.