Mercer Island Fire Department

Standard Operating Guidelines

TRANSPORT FEE COLLECTION

Article 700; Section 18

Revised:	4/15/20	Approved:	

1.0 Purpose

- 1.1 The City of Mercer Island has adopted a fee for transport program. There are regulations that the City and its employees must follow as part of such a program.
- 1.2 The purpose of this policy is to provide Fire Department employees with direction with regards to billing for transport services when those services are provided by a fire department aid unit.

2.0 Organizations Affected

- 2.1 Mercer Island Fire Department
- 2.2 Mercer Island Finance Department

3.0 References

3.1 Provisions of Emergency Medical Service, SOG XX

4.0 Definitions

4.1 None

5.0 Policy

- 5.1 It is the policy of the Department to comply with the following procedures to determine if a patient will be charged for transport and the procedures to be used for billing and collection of transport fees.
 - 5.1.1. All patients transported by the Department including City employees, elected officials or any other professional affiliates will be charged a fee established in City ordinance except:
 - 5.1.1.1. Transports that are provided through a mutual aid agreement with an adjacent jurisdiction.
 - 5.1.2. The decision to provide transport services will be made using the Department's policy: *Provisions of Emergency Medical Service*.
 - 5.1.3. No patient will be refused service due to inability to pay for said services.
 - 5.1.4. All billing services will be provided by SYSTEMS DESIGN, for the Department.
 - 5.1.5. The Fire Department will provide a financial assistance process to assist with those patients who are unable to pay for transportation services.

6.0 Procedures

- 6.1 If the patient has insurance and has provided the necessary information and signatures to release claims for billing, a bill will be sent to all known insurances.
- 6.2 If the insurance company of a resident of the City, or an employee at, and transported from a business within the City, does not pay the full amount billed for the patient transported, the insurance payment will be accepted as payment in full and the remaining portion will be written off.
- 6.3 If the insurance company denies payment, the patient transported will be responsible for the full amount of the transport fee.
- 6.4 If the patient has no insurance, a bill will be sent directly to the patient. The patient will be responsible for the payment of the fee.

- 6.5 Any patient, who does not have insurance and/or does not have the ability to pay the transportation fee, may request financial assistance as detailed in this policy.
- 6.6 A total of three bills will be sent to all patients receiving transport services from the Department. If upon 30 days after the third bill has been sent no payment has been received, SYSTEMS DESIGN will turn the account over to the City, indicating non-payment.
- 6.7 Upon receiving notification that SYSTEMS DESIGN has billed a patient three times with no payments received, the City of Mercer Island will write off the unpaid amount and no further attempts to collect for the service will be made.
- 6.8 Financial Assistance Communications
 - 6.8.1. The Mercer Island Fire Department Financial Assistance Program shall be made publicly available through the following elements:
 - 6.8.2. Written information about the Financial Assistance Program and the sliding payment schedule shall be made available to *any person through our billing agency Systems Design.* Requests for information and applications can be made, either by mail, telephone, e-mail or in person. The billing agency will provide the applications, information about the policy and forward all information from the Patient to the Fire Department.
- 6.9 Financial Assistance Eligibility Criteria
 - 6.9.1. Individuals and families with incomes that meet our guidelines are eligible if they: do not have financial resources to pay for care; are not generally insured, i.e., covered by a group or individual medical plan, Worker's Compensation, Medicare, Medicaid, or any other state, federal, or military program; and are not involved in a situation where someone else has a legal responsibility to pay for the costs of medical services (e.g. an auto accident).
 - 6.9.2. In situations where appropriate primary payment sources are not available or have been exhausted, individuals and families shall be provided financial assistance under this policy based on one of the following standards:

- The full amount of BLS Transport charges will be adjusted for a patient whose gross family income is at or below 100% of the current federal poverty level; or
- A sliding payment schedule will be used to determine the amount of BLS Transport charges that will be adjusted for patients with incomes between 101 and 300 percent of the current federal poverty level; or
- The BLS Transport Service may adjust the full amount of charges for patients with family income in excess of 100% of the current federal poverty level when circumstances indicate severe financial hardship or personal loss.
- 6.9.3. The responsible party's remaining financial obligation after the application of the sliding payment schedule will be payable at minimum monthly payment of 10% of remaining balance. The responsible party's account will not be referred to a collection agency unless the responsible party defaults on the minimum payment or the BLS Transport Service or billing agency is unable to make mail or telephone contact with the responsible party.
- 6.9.4. Financial Assistance Determining Eligibility
- 6.9.5. Initial Determination: The BLS Transport Service will use an application process for determining eligibility for financial assistance. Requests to provide financial assistance will be accepted from either the patient, responsible party, physicians, community or religious groups, social services and/or patient accounting personnel, provided that any further disclosure of the information contained in the request shall be subject to the Health Insurance Portability and Accountability Act, Privacy Regulations and the hospital's Privacy Policies.
- 6.9.6. Pending final eligibility determination, the BLS Transport Service will not initiate collection efforts or request deposits, provided that the responsible party is cooperative with the BLS Transport Service's efforts to reach a final determination.
- 6.9.7. Final Determination: Financial Assistance applications shall be furnished to the responsible party when financial assistance is requested, when need is indicated, or when financial screening indicates potential need. All completed applications, whether

initiated by the responsible party or the BLS Transport Service should be accompanied by documentation to verify information indicated on the application form. Any one of the following documents will be considered sufficient evidence on which to base the final determination:

- Pay stubs from employment; or
- A "W-2" withholding statement; or
- Last year's income tax return; or
- Letters approving or denying Medicaid, medical assistance; or
- Letters approving or denying unemployment compensation; or
- Written statements from employers or welfare agents.
- 6.9.8. During the initial request period, the patient and the BLS Transport Service may pursue other sources of funding, including Medicaid and legal liability situations. The responsible party will be required to provide written verification of eligibility for all other sources of funding.
- 6.9.9. Usually, the relevant time period for which documentation will be requested will be three months prior to the date of application. However, if such documentation does not accurately reflect the applicant's current financial situation, documentation will only be requested for the period of time after the patient's financial situation changed.
- 6.9.10. In the event that the responsible party is not able to provide any of the documentation described above, the BLS Transport Service will rely upon written and signed statements from the responsible party for making a final determination of eligibility.
- 6.9.11. The BLS Transport Service will allow a patient to apply for financial assistance at any point from transportation to final payment of the bill, recognizing that a patient's ability to pay over an extended period may be substantially altered due to illness or financial hardship, resulting in the need for financial assistance.

- 6.9.12. In the event that the responsible party's identification as an indigent person is obvious to BLS personnel, and the BLS Transport Service can establish that the applicant's income is clearly within the range of eligibility, the BLS Transport Service will grant financial assistance based solely on the initial determination. In these cases, the BLS Transport Service is not required to complete full verification or documentation.
- 6.10 Time frame for final determination and appeals:
 - 6.10.1. Each financial assistance applicant who has been initially determined eligible for financial assistance, will be given at least fourteen calendar days, or such time as may reasonably be necessary, to secure and present documentation in support of his or her financial assistance application prior to receiving a final determination.
 - 6.10.2. The BLS Transport Service will notify the applicant of its final determination within twenty-one days of receipt of the application and supporting documentation.
- 6.11 Adequate notice of denial:
- 6.12 When an application for financial assistance is denied, the responsible party will receive a written notice of denial, which includes:
 - The reason or reasons for the denial;
 - The date of the decision; and
 - Instructions for appeal or reconsideration.
- 6.13 The responsible party may appeal the determination of eligibility for financial assistance by providing verification of income or family size to the BLS Transport Service within thirty days of receipt of notification.
- 6.14 The BLS Transport Service will review all appeals. If this review affirms the previous denial for financial assistance, written notification will be sent to the responsible party.

7.0 Financial Assistance Documentation & Records

7.1 Confidentiality: All information relating to the application will be kept confidential. Copies of documents that support the application will be kept with the application form.

7.2 Documents pertaining to the financial assistance shall be retained for five years.