William Mergendahl, President & CEO



31 Smith Place, Cambridge, MA 02138

tel: 617.682.1830 fax: 617.812.4770

Ambulance Billing and Financial Hardship Policy

Purpose

To establish a policy of compliant and compassionate billing that allows waiving of ambulance transport fees based on established Federal and State guidelines. The charges for EMS transport billing may be reduced or waived, based on the patient's residency and/or upon financial hardship, as determined by the guidelines established by the municipality.

Procedures

I. Billing of Patients

Patients will fall into one of the following categories for billing purposes:

Insured through commercial health insurance, Medicare and Medicaid
The appropriate health insurance carrier will be billed by Pro EMS Solutions. If the patient can demonstrate financial hardship, they may request to be considered for a payment plan or financial hardship waiver.

- ALL TOWN RESIDENTS who have any applicable insurance copayments will have this charge waived due to the assumed payment of City/County real estate and/or personal property taxes. A narrative will be submitted with all commercial insurance claims stating: "Municipal resident patient cost-sharing obligations may be waived." Deductibles will be billed to the patient.
- NON-RESIDENTS will be billed for deductibles and co-payments.

No Insurance

A bill will be sent to ALL PATIENTS transported. If the patient has the ability to pay, then payment is expected in full. If the patient can demonstrate financial hardship, they may request to be considered for a payment plan or financial hardship waiver.

Bill generated/No collection

There are instances when a bill is generated in which the municipality would be merely transferring funds from one department's budget to another to satisfy the bill, for example when an on-duty employee is transported to the hospital for a compensable worker's compensation injury. In these instances, there would be no requirement to pursue payment of the bill. Pro EMS Solutions would update its records to reflect this adjustment.

William Mergendahl, President & CEO 31 Smith Place, Cambridge, MA 02138

PRO- NEMS

SOLUTIONS

tel: 617.682.1830 fax: 617.812.4770

Contractual Write-Offs/Balance Billing

The bills that Medicaid, Medicare and commercial insurance companies pay on behalf of an insured individual are sometimes adjusted to pay only a portion of the billed amount. This adjustment referred to here as a "contractual write off" is usually due to laws governing the payment amount or through payment reductions agreements between commercial insurance companies and Pro EMS Solutions in return for prompt reimbursement and/or full payment. The contractual write offs are not considered unpaid balances that would require pursuit of the amount from the insured individual. Patients will not be billed for payment of contractual write offs.

If a commercial insurance unilaterally reduces an out of network bill below the usual and customary charge, Pro EMS Solutions will attempt to negotiate with the payer. In many cases, the payer may require the patient to appeal/negotiate. If the payer refuses to negotiate and/or pay the usual and customary charge, or the patient refuses to appeal to their commercial insurance, the total bill will be reduced to 325% of the Medicare rate of reimbursement at the time of the transport and the patient will be billed for the balance after insurance.

If the patient has a financial hardship the Financial Hardship Determination process will be followed.

II. Financial Hardship Determination

ALL PATIENTS who are unable to pay their co-pays, deductibles or who are uninsured and unable to make payments may request a financial hardship review of their transport charge.

Patients, or their designee, should complete the Hardship Waiver Form whenever possible. Pro EMS Solutions may also identify and document financial hardships.

Patients who attest that their household income is not in excess of 500% of the Federal Poverty Level (FPL) will be eligible for elimination of any balance due.

Patients who attest to any of the following circumstances will be presumptively eligible for elimination of any balance due:

- 1. State-funded prescription programs
- 2. Homeless or received care from a homeless clinic
- 3. Participation in Women, Infants and Children programs ("WIC")
- 4. Food stamp eligibility
- 5. Subsidized school lunch program eligibility
- 6. Eligibility for other state or local assistance programs that are unfunded
- 7. Low income/subsidized housing is provided as a valid address
- 8. Patient is deceased with no known estate
- 9. Patients enrolled in limited-service Medicaid programs or Free Care

William Mergendahl, President & CEO 31 Smith Place, Cambridge, MA 02138



tel: 617.682.1830

fax: 617.812.4770

10. Patients with non-participating out-of-state Medicaid insurance plans

Patients who do not fall within any of the above parameters may submit a written narrative of their financial hardship. Reduction or elimination of the transport charge will be at the discretion of Pro EMS Solutions.

The Hardship Waiver Form can be requested by contacting Pro EMS Solutions 617.492.8484. The completed form should be forwarded to Pro EMS Solutions, 31 Smith Place, Cambridge, MA 02138 or faxed to 617.812.4770. Pro EMS Solutions will review the form. If approved, the account will be noted and the completed form will be attached when available.

III. Collection Agency Referrals

PATIENTS (residents and non-residents) who receive direct payment from their insurance and fail to timely submit that payment to satisfy applicable ambulance transport fees will be referred to a collection agency and WILL be subject to being reported to credited bureau.

PATIENTS (residents and non-residents) who do not respond to multiple attempts to contact them through invoices and telephone calls will be referred to a collection agency and WILL NOT be subject to being reported to Credit Bureau. The balance due will be written off at that time and will be reinstated if there is a payment.

PATIENTS with a balance after insurance of \$200 or greater who do not respond to multiple attempts to contact them through invoices and telephone calls will be referred to a collection agency and WILL NOT be subject to being reported to Credit Bureau.

PATIENTS with a balance after insurance less than \$200 who do not respond to multiple attempts to contact them through invoices and telephone calls will have the balance written off as a Bad Debt.