

Medical Services Billing Rate Schedule

#200.27.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a service rate schedule that provides for reimbursement of emergency medical services rendered by La Pine Rural Fire Protection District as indicated by the voters of the La Pine Rural Fire Protection District in that the emergency medical service users shall bear the majority burden of the service cost in order to minimize general property tax burden as possible while maintaining an Advanced Life Support level of service within the community.

#200.27.2 POLICY

It is the policy of the La Pine Rural Fire Protection District to establish an "All Inclusive" base rate of charges for all patients that are treated, transported, or both by District providers. In part, the District's operating budget is supported by constituents with the District. A flat rate for EMS alarms will be established and reviewed as needed by the District Board. The base rate of charges become effective upon response of the ambulance.

#200.27.3 RATE SCHEDULE

The La Pine Rural fire Protection District rate schedule for reimbursement of services is as follows:

- **200.27.3.1- Advanced Life Support Base Rate- \$1764.00**
 - The District changes an "All Inclusive" ALS Base Rate. There are no additional charges for supplies, medications or equipment. When a medic unit, and its assigned ALS personnel provide advance life support assessment and/or advanced life support care along with transportation, the advanced life support base rate will be charged.
 - This meets the Medicare ALS emergency service codes- A0426, A0427, and A0433.
- **200.27.3.2- Basic Life Support Base Rate- \$1764.00**
 - The District changes an "All Inclusive" BLS Base Rate. There are no additional charges for supplies, medications or equipment. When a medic unit, and its assigned BLS personnel provide basic life support assessment and/or basic life support care along with transportation, the basic life support base rate will be charged.
 - This meets the Medicare BLS emergency service codes- A0428 and A0429.

#200.27.4 MILEAGE FEES- \$20.00 PER MILE

Fees for mileage reflect the distance traveled (to the nearest one-tenth of the mile) from the point of patient pick-up to the point of patient destination will be charged on all transports. A one (1) mile minimum fee exists for all transports with no maximum within the normal

distances of OHA (Oregon Health Authority) recognized receiving facilities. Meets Medicare billing code A0425.

#200.27.5 NON-TRANSPORT EMERGENCY MEDICAL SERVICES- \$50.00-\$1764.00

La Pine Rural Fire Protection District may use Non-Transport Emergency Medical Services rates whenever care and diagnostic assessment is provided and the patient is not transported by a licensed ambulance as defined by the Standing Orders of the Physician Supervisor of the Fire District. This charge is to help cover the cost of the response, supplies, and services rendered to the patient. There is no charge to unattended deaths when no resuscitation is attempted, non-injury motor vehicle accidents, or simple public assist. Lift assists are not included in this section. The following rates are assigned:

- Resuscitation attempted without transport and ROSC (return of spontaneous circulation)- **\$1764.00**
- Medical interventions in which Advanced Life Support assessment is performed and an advanced life support medical treatment or procedure is delivered- **\$250.00**
- Medical interventions in which Advanced Life Support assessment is performed along with a non-diagnostic 12-lead EKG- **\$75.00**
- Medical interventions in which a Basic Life Support assessment is performed and a basic medical treatment is delivered (with the exception of epinephrine for anaphylaxis)- **\$50.00**
- Medical assessment with-out diagnostics or treatments dispatched response or walk-in - **No Charge**
- Patients refusing district provider contact, evaluation, treatment and transportation- **No Charge**
- Lift Assists Private Residence- Private residents may request up to 5 lift assists within a calendar year. Any and all lift assists in excess of 5 requests may be charged at a rate of \$125.00.
- Lift Assist Facilities- Request for lift assist at facilities will be charged at a rate of \$125.00.

#200.27.6 NON-RESIDENT AND/OR OUT OF DISTRICT- \$2013.00

Patients who are not residents of the La Pine Rural Fire Protection District (97739 and 97707 zip codes) who are evaluated, treated, and transported shall be charged an "All Inclusive" out of district base rate for basic and advanced life support services. Mileage rates will remain as designated in 200.27.4.

#200.27.7 PRE-ARRANGED STANDBYS- VARIABLE

All ambulance standby times excluding public events approved by the Fire Chief or his/her designee will be billed an hourly rate to the event or organization scheduling the standby. If a patient is transported or treated at the event they will be billed accordingly. Standby time is charged from the time personnel arrive at the station to prepare for the event, until crews are back in quarters with all duties completed. A standby crew consists of two crew members with minimum certification of OR EMT. An Oregon certified paramedic will make up at least one of the members if an advanced life support unit is requested. **In the event of an emergency**, the standby can be cancelled or recalled without notice. If a paid standby event is cancelled due to excessive demand on the 911 system, the event or organization will only be charged for the hours of standby.

- Hourly rate for ambulance- Current hourly reimbursement rate off the Oregon State Fire Marshalls rate schedule (\$55.00/hour ALS \$45.00/hour BLS)

- Hourly rate for provider- Current hourly rate with benefits

#200.27.8 EXTRA ATTENDANT- VARIABLE

When a patient's condition warrants that an extra EMS crew member is needed to assist the normal two (2) person crew during transport, a fee for the extra attendant can be charged. In each case, diagnosis or documentation must indicate medical necessity.

- Extra Attendant Fee- Current hourly rate with benefits

#200.27.9 AIR AMBULANCE/SPECIALIZED AMBULANCE PREP FEE- \$1764.00 plus mileage

The patient will be charged the "All Inclusive" base rate for an Advanced Life Support ambulance of \$1764.00 plus the mileage fee of \$20.00/mile for transportation from the incident location to the site of patient transfer to an Air Ambulance or Specialized transport vehicle. The base charge will occur to cover the cost of specialized treatment and preparation whether or not transportation occurs in a District ambulance. Patient is also directly responsible for any air medivac or specialized ambulance service fees to the agency that provided those services.

#200.27.10 RESCUE AND/OR CONFLAGRATION RESPONSES: VARIABLE

Response to rescue and/or conflagrations will/may be billed in the following manner:

- Rescue Services- Rescue services are defined as the recovery of those costs incurred at Transportation Emergencies, Rail emergencies, and specialized rescue as addressed in the separate billing policy #02-02.
- Conflagration Act- Conflagration act and some mutual aid responses are subject to other local, state, or federal cost recovery. These types of incidents may be excluded from this document; they may be billed to the state or federal jurisdiction and may have a different rate schedule.

#200.27.11 MULTIPLE PATIENT SITUATIONS

- Non-Medicare Multiple Patient situation- When a medic unit transports more than one patient from the same incident or from unrelated incidents, each patient will be charged a full base rate. This is in recognition that each patient receives the same care and transport services as when only one patient is transported. This also applies for Medicare eligible patients where Medicare will not be the source of payment. However, an adjustment will be made for mileage charges. In instances where more than one patient is transported in the same medic unit, the normal mileage charge will be a split amount for the number of patients transported i.e. if two (2) patients were transported, they will each be charged full base rate but only be charged 50 percent of the normal mileage fee.
- Medicare Multiple Patient Situations- When an ambulance transports more than one patient and one is Medicare eligible and one is not, from the same incident or from unrelated incidents, the base rate fee (according to the appropriate level of medical care provided to the Medicare patient) for the Medicare patient(s) will be prorated by the number of patients in the ambulance. In this situation, the full base rate of charge for appropriate level of care will be assessed to the non-Medicare patient(s). Similarly, if both patients are Medicare beneficiaries, the base rate fee will be pro-rated for each Medicare patient according to the appropriate level

of care rendered to that patient. Normal mileage fee will be split among the patients transported as described above.

#200.27.12 BILLING CASE REVIEWS

Incidents that are unclear as to whether to bill or not shall be reviewed by a Chief Officer of the fire district on a case-by-case basis for determination. Designated Chief Officers for the review process will be provided to billing department.

Approved this 14th day of March, 2024 by a vote of _____ Yes and _____ No.

Mike Vitzke, Board President

Troy Waddel, Secretary

