



Contra
Costa
County

To: Contra Costa County Fire Protection District Board of Directors
From: Jeff Carman, Chief, Contra Costa County Fire Protection District
Date: October 25, 2016

Subject: Revisions to Ambulance Billing Policies

RECOMMENDATION(S):

ADOPT revisions to policies AMB-4 and AMB-6 for the billing and collection of Contra Costa County Fire Protection District emergency ambulance services fees and charges.

FISCAL IMPACT:

The cost of implementing the policy revisions is neutral.

BACKGROUND:

The Contra Costa County Fire Protection District (District) established policies and procedures for its emergency ambulance services billing and collections processes in February 2016. The policies and procedures were aligned with, and heavily reliant upon, the structure and framework established by American Medical Response (AMR) as the County's previous emergency ambulance provider. The policies were also modeled after some of the Contra Costa County Health Services Department hospital billing and collections policies.

Two of the adopted policies are in need of minor revisions. Policy AMB-4 requires minor revisions for clarity and consistency with the original intent of that policy. Policy

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY
ADMINISTRATOR

☐ RECOMMENDATION OF BOARD
COMMITTEE

Action of Board On: **10/25/2016** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

VOTE OF SUPERVISORS

AYE: John Gioia, Director
Candace Andersen, Director
Karen Mitchoff, Director
Federal D. Glover, Director

ABSENT: Mary N. Piepho,
Director

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: October 25, 2016

David Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lewis Broschard, Deputy Fire
Chief (925) 941-3501

By: June McHuen, Deputy

cc:

BACKGROUND: (CONT'D)

AMB-6 requires a minor revision to the language regarding Medicare reimbursements in order to be consistent with Medicare language and to provide clarity on the amount billed to the patient in cases where Medicare has denied a claim.

CONSEQUENCE OF NEGATIVE ACTION:

The District will not have policies in place with consistent language necessary to alleviate confusion with medical billing practices.

ATTACHMENTS

AMB-4 Redline

AMB-4 Final

AMB-6 Redline

AMB-6 Final