



**TOWN OF  
BROOKLINE, NEW HAMPSHIRE**

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*Minutes  
Ambulance Billing Evaluation Committee  
Tuesday, October 30, 2018*

Attendees: Brendan Denehy, Todd Christensen, Shawn Jackson, Tim McGettigan, and Tad Putney. Absent: Linda Chomiak and Jim Deffely.

**Minutes**

*Shawn moved, seconded by Tim, to approve the October 10<sup>th</sup> minutes as written; Voted Yes 5-0.*

**Tax Impact**

**Tad** reviewed a tax impact exhibit he prepared following the last meeting. He said for the 2018 ambulance budget the tax impact was \$88 for a \$300,000 home and the preliminary 2019 budget would have a \$120 impact on a \$300,000 home.

**Follow-Up from Prior Meeting**

**Shawn** circulated a handout with background information on the timing of ambulance calls, which **Todd** had inquired about at the last meeting. It was noted that Mondays are typically the busiest day.

**Updates on Billing Model**

**Shawn** reviewed updates he had made to the billing model. He said he input 40% as the assumption for uncollectibles and removed the pay costs for attendants as we are not expecting to pay for full-time coverage. With these changes, the model projected about \$156,000 in annual income after netting out the costs for the billing company and uncollectibles. When factoring in the lower Medicare and Medicaid pay rates, and they represent 50% of the calls, the projected annual income was about \$108,000. **Shawn** said that he had vetted the model's assumptions with three ambulance billing companies – Comstar, Emax, and QuickMed Claims. He said he had also reached out to New England Medical Billing, but had not received a call back, and was not successful in making contact with Golden Cross Ambulance regarding their billing services. **Tad** asked if we should add into the model some additional pay costs if additional attendant time is going to be required to complete documentation. **Shawn** said that he would take a look at it. **Brendan** said that there may be start-up costs for training and other items that we need to think about and consider. **Tad** said it is important to think a couple of years out. He said if we start billing and the attendants don't want to, then in three years the annual income of \$100,000 could be gone and replaced with costs of full-time staff coverage.

### **Input from Billing Services**

**Shawn** provided a summary of input he received from Emax following a two-hour meeting with their representative. The input included:

- The collections policy should have teeth; should report to the credit bureaus
- Cautioned against a generous exception policy. If the town only expects to collect 50%, then insurance companies may pay based on the 50% the town plans to collect, not the full amount
- Must “balance bill”. Must bill every person for what is not paid for by the insurance company or Medicare/Medicaid; cannot write-off for some.
- A Financial Hardship Policy requires a form as well as financial disclosures from the patient as well as a pre-set formula to be used for all. A town committee is needed to review requests.
- If we want to reduce fees to patients, it is wisest to make the fees closer to Medicare rates, but that will reduce our income.

**Shawn** circulated an email he had received from Comstar. He noted that Comstar has higher transport rates than other providers or that are currently in our model. **Todd** asked about the basis of ambulance billing rates. **Shawn** said our model uses average billing rates of several area towns, including Wilton and Windham. **Todd** asked what percentage of our 400 ambulance calls are repeat patients. **Shawn** estimated about 25%.

### **Emax Manual**

**Shawn** had reviewed a manual that had been provided by Emax and shared the following highlights from it relative to ambulance billing:

- The written narrative by ambulance personnel must detail why it was a medically necessity that the patient be transported by ambulance. It was suggested that all ambulance personnel take an ambulance call documentation class, which will have a cost to the town. If not deemed medically necessary, we still must bill the patient, but insurance will not pay.
- Patient signatures are required on three different documents, which will require more time spent by ambulance personnel at the hospital to obtain signatures (and if the patient is unable to sign, the ambulance personnel must complete an exception form). The three forms are:
  - Consent to treat
  - Authority to bill for services
  - HIPPA privacy notice
- ALS versus BLS billing; requires specific wording and demonstration that it was “medically necessary”
- An intervention (i.e., putting in an IV) must have documentation that shows the intervention was medically necessary

### **Further Analysis Needed**

Costs for training the 20 attendants on billing.

**Next Steps**

**Brendan** asked about meeting with ambulance personnel for their input. **Shawn** said he would like to have a meeting. **Shawn** shared some results of a recent survey of the attendants on the question of billing.

**Follow Up – Gap Coverage**

**Todd** said he had done follow-up research on gap coverage and it did exist, but went away with the passage of the Affordable Care Act and is therefore off the table.

**Timetable**

Members agreed on the following timetable for meetings:

- Meet with BAS members – Wednesday, November 14<sup>th</sup> (7pm)
- Public Hearing re ambulance billing – Monday, November 26<sup>th</sup> (6:30pm)
- Next committee meeting – Tuesday, November 27<sup>th</sup> (6:30pm)
- Recommendations to the Selectboard – Monday, December 17<sup>th</sup>

**Alternative to Billing**

**Brendan** asked about an alternative to billing in which the individuals who were served by the ambulance service received a letter soliciting donations. **Shawn** said he liked the idea, but suggested we pass it by town counsel to check on the legalities.

**Finance Committee Representation**

**Shawn** asked about representation at the committee meetings from the finance committee given there has not been any for the first two meetings. He said he felt it was important to have the finance committee's input. **Tad** said he would email the three members of the finance committee to advise them of the upcoming meetings and ask for at least one member to attend.

Meeting adjourned at 8:10pm.

Minutes submitted by Tad Putney.