



City of West Allis Matter Summary

7525 W. Greenfield Ave. West Allis, WI 53214

File Number	Title		Status			
2006-0165	Communication		In Commi	ttee		
	Fire Chief communicati	on relative to cor	nsideration of a B	asic Life Supp	ort Billing Rate C	hange.
	Introduced: 4/4/2006		Controlling Committee	g Body: Admini	stration & Finance	
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STEVEN J. HOOK CHIEF

RECEIVED

MAR 2 3 2006

CITY OF WEST ALLIS

To: Honorable Mayor Bell and Members of the Common Council

From: Steven J. Hook, Fire Chief

Date: March 20, 2006

Re: Consideration of a Basic Life Support Billing Rate Change

Attached, please find a copy of the Police and Fire Commission's approval to provide Basic Life Support rate change information for consideration. Allis Care Center has asked that we consider discounting the ambulance billing rates to their long-term health care facility. The request was made in January 2006 and affects only Medicare - Part A patients.

Asst. Chief Steven Bane explained the situation on the attached PFC communication and I have copied it below:

Certain patients are admitted to nursing homes (NH) under "Medicare Part A". The NH gets a flat fee for the first 100 days of care. All expenses incurred for treatment and care related to the admission diagnosis, come out of this flat fee, including ambulance transports. When we transport a patient for Allis Care Center in this situation, the NH gets a bill for the full rate of about \$440.00.

If the patient is transported for treatment that is not related to their admission diagnosis, the patient's "Medicare Part B" pays. When the care is placed under "Part B" there is no problem and Medicare pays roughly \$225.00 and the balance of the \$440 (\$215) is written off. Most patients transported from Allis Care Center fall in this category and there is no cost to the NH.

Our billing agent, Life Quest, has offered three solutions:

Option 1: Offer the Long Term Care Facilities the same rate that "Medicare – Part B" patients receive, roughly 50% reduction. Would be the most accepted by the Facilities, largest impact on revenue.

Option 2: Offer a 30% reduction. Might be a good compromise, still a possibility of losing their transports

Option 3: Offer no reduction in the billing rate. Risk losing all of the transports.

Based on projections from Life Quest on past transports, a 50% discount would have resulted in the following reduction in revenue:

<u>Year</u>	Reduction	Revenue Collected	% Change
2003	-\$4,416	\$ 51,793	-8.5%
2004	-\$8,899	\$139,258	-6.4%
2005	-\$6,944	\$203,667	-3.4%

Allis Care Center is our largest basic life support inter-facility transport client. Our two other BLS transport clients typically call us for fewer transports. From their business, we would experience a similar, but smaller financial impact.

The City Attorney's Office and Finance Director Gary Schmid, as well as the Police and Fire Commission have evaluated this rate change request.

Suggested action

While each option has some potential reduction in revenue, each has a different level of risk. It is our opinion, shared by members of the PFC, to:

- 1. Adopt Option 2, which offers a 30% rate reduction, helping the health care facility, but also maximizing our collection, but also
- 2. Consider Option 1, which provides the lowest risk, while experiencing an acceptable revenue loss.
- 3. Abandon Option 3, which implies complacency toward the needs of our clients, and poses the highest risk for loss of business and is unacceptable.





CITY CENTENNIAL 1906-2006

EMERGENCY MEDICAL SERVICES
STEVEN D. BANE
ASSISTANT CHIEF

March 16, 2006

To: Honorable Board of Police and Fire Commission

From: Steven D. Bane, Assistant Chief

Re: Permission to Forward a Billing Rate Change to Common Council

Commissioners:

We are requesting permission to forward a request by Allis Care Center to; Offer a discount for ambulance billing rates to Long Term Health Care Facility – "Medicare Part A" Patients, to the Common Council.

In early January we received a request from Allis Care Center (ACC) to reduce the rate that we charge for the transport of "Medicare – Part A" patients.

The situation as I understand it is as follows:

Certain patients are admitted to nursing homes (NH) under "Medicare Part A". The NH gets a flat fee for the first 100 days of care. All expenses incurred for treatment and care related to the admission diagnosis, come out of this flat fee, including ambulance transports. When we transport a patient for ACC in this situation, they get a bill for the full rate of about \$440.00.

If the patient is sent out for treatment that is not related to their admission diagnosis, the patients "Medicare Part B" pays. When the care is placed under "Part B" there is no problem and Medicare pays roughly \$225.00 and the balance of the \$440 (\$215) is written off. Most patients out of Allis Care Center fall in this category and there is no cost to the NH.

We consulted with our billing agent, Life Quest, and they offered three recommendations:

1) Offer the Long Term Care Facilities the same rate that "Medicare – Part B" patients receive, roughly 50% reduction. Would be the most accepted by the Facilities, largest impact on revenue.

- 2) Offer a 30% reduction. Might be a good compromise, still a possibility of loosing their transports
- 3) Offer no reduction in the billing rate. Risk loosing all of the transports.

Based on projections from Life Quest on past transports, a 50% discount would have resulted in the following reduction in revenue:

<u>Year</u>	Reduction	Revenue Collected	% Change
2003	-\$4,416	\$ 51,793	-8.5%
2004	-\$8,899	\$139,258	-6.4%
2005	-\$6944	\$203,667	-3.4

The two other facilities request fewer transports and would have a similar but smaller impact.

Due the potentially significant budgetary impact, we are requesting that this decision be referred to the Common Council.

APPROVED BY:

Board of Police and Fire Commissioners

DATE