



ANN ARBOR FIRE DEPARTMENT

Standard Operating Procedures – 5.07 Ambulance Billing



AMBULANCE BILLING

Effective: March 6, 2024
 Scheduled Review: March 6, 2027
 Approved: Fire Chief Mike Kennedy

I. PURPOSE

Ann Arbor Fire Department provides emergency medical services and ambulance transport to patients regardless of their ability to pay. The fire department is sensitive to those who face financial hardship and understands that a patient’s illness or injury can create large medical bills which may impact the ability to pay.

The fire department intends to collect fees in alignment with the third-party entity that also provides ambulance transport within the City of Ann Arbor.

II. DEFINITIONS

Billing Vendor - Third-party entity with a contractual agreement to perform billing services for the City's EMS billing program.

Compassionate Billing - Philosophy of billing that minimizes the direct financial impact on a patient by billing the insurance company and not charging the patient the remaining co-payment of deductible after the insurance company is billed, and insured costs are paid.

Health Insurance - "Health care plan" which means "any arrangement in which any person undertakes to provide, arrange for, pay for, or reimburse any part of the cost of any health care services. A significant part of the arrangement shall consist of arranging for, or providing, health care services, including emergency services and services rendered by nonparticipating referral providers, as distinguished from mere indemnification against the cost of the services, on a prepaid basis." Medicaid and Medicare may be referred to as health insurance.

Medicaid - Jointly-funded state and federal government program that pays the medical expense of low-income pregnant women, children under the age of 19, people aged 65 and over, blind, disabled, and people who need nursing home care.

Medicare - Federal government-funded program that pays the medical expense of people aged 65 and over, people of any age who have kidney failure or long-term kidney disease, and people who are permanently disabled and cannot work.

III. PATIENT CONTACT

In an effort to determine payer status, the City of Ann Arbor billing vendor may send Requests for Information (RFI), invoices and additional mailings to ensure the correct insurance information is collected. In addition to mail, the billing vendor may contact the patient by phone. All communication must be in alignment with the language and intent of this policy.



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IV. TRANSPORT FEES

Adopted fees will be assessed in accordance with the following provisions.

Basic life support transport \$470.00

There will be no fee for treatment without transport.

Patient has Medicare	Waive co-pay requirement. Fee balance remaining after Medicare payment is waived.
Patient also has Medigap insurance	Waive co-pay requirement. Fee balance remaining after Medicare / Medigap payment is waived.
Patient has Medicaid	Waive co-pay requirement. Fee balance remaining after Medicare payment is waived.
Patient has commercial / private insurance	Waive co-pay requirement. Fee balance remaining after Medicare payment is waived.
Patient is uninsured	Waive fee