

6/3/2002

* TO: JRO

FROM: TWM

Please draft an ordinance for introduction at tomorrow's CC meeting changing the ambulance rates for BLS



Health Department

John O. Norquist
Mayor
Seth L. Foldy, MD
Commissioner of Health
Administration

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Alderman Thomas Nardelli
Chair, Public Safety Committee
City Hall Room 205

as described in this letter from the Health Commissioner
LRB 02282
Thank you.

Dear Alderman Nardelli:

As you know, it is the responsibility of the Commissioner of Health to review and report to the Common Council each year with respect to the ambulance conveyance rates for city-dispatched Emergency Medical Services calls and to recommend appropriate adjustments.

Attached please find information provided by the Legislative Reference Bureau (LRB) on the indices specified in the City Code. Last year Council increased allowable fees for BLS and BLS-Emergency conveyance to \$325 for city residents and \$375 for non-residents, along with an increase in mileage reimbursement to 8.76 per mile. This increase in fees between 2000 and 2001 was in excess of the rate of inflation. Since the Milwaukee Consumer Price Index for medical care rose 3.5% between 2000 and 2001, I propose the same percent increase in fees: to \$336 for city residents and \$388 for non-residents. Similarly, since there has been no meaningful increase in the Milwaukee Consumer Price Indices for transportation or fuel I propose retaining the current mileage reimbursement at \$8.76.

I further investigated whether it is advisable to allow private companies to bill 911-initiated runs for Advanced Life Support services under two circumstances. First, billing certain pretransport ALS-related activities performed by private companies before MFD paramedic transport, and second, for ALS transport undertaken by private companies in compliance with city and county policy ("Load and Go").

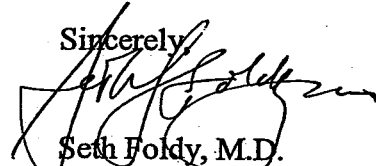
In the first case, I was informed by the Legislative Reference Bureau, and confirmed with a major local EMS billing agency, that independent submission of bills by both a private and municipal provider related to a single episode of pre-hospital ALS care may result in retroactive audits and possible recoupment of revenues.

With regard to billing for "load and go" ALS transports, I proposed certain conditions at the February 6, 2002 Ambulance Service Board. The board did not act upon these proposals (they were neither accepted nor rejected). I have restated the conditions more simply below:

- 1.) Prior documentation of appropriate paramedic certifications and licenses
- 2.) Review of private ALS runs by the Milwaukee County paramedic system quality improvement system
- 3.) Billing records are subject to review to assure all 911-related ALS transports are identified and are consistent with the city Emergency Services Handbook and Ambulance Service Board policy

Further compounding the issue, it has come to my attention that private billing for ALS services could impact revenues for the Milwaukee Fire Department and the County paramedic system (see attached newsletter article). Since only one bill for pre-hospital care will be recognized by Medicare and Medicaid, there needs to be an agreement about sharing revenues between agencies that participate in pre-transport ALS evaluation, or in post-evaluation BLS transport. This reinforces my belief that it is not wise to establish 911-related ALS fees for private ambulance companies in the city until an agreement is reached between private companies and the County Paramedic System and Milwaukee Fire Department. It is my hope that such an arrangement can be established this summer that can resolve these issues to the mutual benefit of municipal services, private companies and patients. Upon receipt such an agreement I will happily propose an amendment to the fee schedule permitting ALS billing at any time during the year.

Sincerely



Seth Foldy, M.D.
Commissioner of Health

CC: Ambulance Service Board
Deputy Chief Murawsky
Private Ambulance Companies
Paula Lucey, Milwaukee County Health-Related Programs

Attachments