## **CITY OF MILWAUKEE FISCAL NOTE**

A)	DATE	Oct. 5, 2004		FILE	NUMBER:	040747, Sub. 1					
				Origi	inal Fiscal Note	Substitute	X				
SUB				nmon Council Contingent Fund for transfer to the City Attorney Damages and Claims plan providers for reimbursements erroneously paid to the City.							
В)	B) SUBMITTED BY (Name/title/dept./ext.):  Assist. City Attorney Bruce Schrimpf, x2635, City Attorney's Office										
<b>C</b> )	CUECK ONE	- V ADODTION OF THE	S FILE AUTHORIZES	EVDENDITUDES							
C)	CHECK ONE				NITI IDEQ: EI IDTHEI		NOIL ACTION				
	ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW.										
		NOT APPLICABLE/I	NO FISCAL IMPACT.								
D)	D) CHARGE TO: DEPARTMENT ACCOUNT(DA) X CONTINGENT FUND (CF)										
	CAPITAL PROJECTS FUND (CPF)  SPECIAL PURPOSE ACCOUNTS (SPA)										
	PERM. IMPROVEMENT FUNDS (PIF) GRANT & AID ACCOUNTS (G & AA)										
	OTHER (SPECIFY)										
E)	PURPOSE	SPECIFY TY	PE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS				
SAL	ARIES/WAGES	):									
SUP	PLIES:										
	T LILO.										
MAT	ERIALS:										
NEV	/ EQUIPMENT:										
FOL	IIPMENT REPA	JR·									
	AL MICHTINE!	ui\.									
отн	ER	See page 2 for	See page 2 for detail: other								

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0THER:		Resolved, By the Common Council of the City of Milwaukee, that the						
			5,000 shall be reserved					
		-	2004 Common Council					
			t Fund (Account Number					
			0-0001-C001-006300-					
			he City Attorney					
		Damages & Claims Fund (Account Number 0001-1490-0001-S118-						
			001-1490-0001-3116- 004) for the purposes of					
		paying on claims by Medicare, United Healthcare and various other						
		healthcare plan providers; and, be it						
		Tieaitiicaie	pian providers, and, be it					
		Funth on Da	and the City					
		Further Resolved, That the City						
		Comptroller and City Attorney are authorized to review the Milwaukee						
			rtment's financial records					
		as they relate to the reimbursement errors to determine that the						
			claims made by					
			United Healthcare and					
			ner healthcare plan					
			are correct, and to					
			the exact amounts the					
		City must p	pay to each; and, be it					
		_ , ,	1 1 7 44 63					
		Further Resolved, That the City						
			er is authorized to					
			e on an as-needed basis					
			000 from the funds					
			vithin the Common					
			ontingent Fund to the City					
			amages and Claims					
			ne purpose of paying					
			es relating to the claims					
		mentioned above.						
TOTALO		\$0E 000 00						
TOTALS \$95,000.00			<u> </u>		<u> </u>			
<b>F)</b> FO	R EXPENDITURE	S AND REVE	NUES WHICH WILL OCCUR ON	AN <b>ANNUAL</b> BASIS	S OVER SEVERAL	YEARS CHECK THE		
APPROPRIATE BOX BELOW AND THEN LIST EACH ITEM AND DOLLAR AMOUNT SEPARATELY.								
THE TOTAL PORTER OF THE PROPERTY OF THE PROPER								
	1-3 YEARS	1	3-5 YEARS					
<u> </u>	<u>-</u>	+						
1-3 YEARS			3-5 YEARS					
1-3 YEARS			3-5 YEARS					
G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:								
N/A								

COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE:

CC-170 (REV. 6/86)

MFD is eligible for reimbursement from United Healthcare and various other healthcare plan providers for the emergency medical services the department provided. MFD issued its claims for reimbursement, but United Healthcare and various other healthcare plan providers did not issue reimbursement on a timely basis, which resulted in the department making duplicate claims. United Healthcare and various other healthcare plan providers overpaid the City by reimbursing the City on the duplicate and the original claims.

These healthcare plan providers estimate they overpaid the City approximately \$32,000.

On a similar matter, the fire departments of both the City of Milwaukee and the City of Menomonie used Claims, Processing and Receivables (CPR), Inc. of 5225 North Ironwood Road, Glendale, Wisconsin, for their respective EMS billing, collection and data management services. CPR, Inc. erroneously gave the City of Milwaukee's Medicare Provider Number and Tax Identification Number to various billing services. The MFD, consequently, received the Medicare reimbursements for services provided by the City of Menomonie Fire Department. It is estimated said erroneous reimbursements to the City of Milwaukee amount to approximately \$52,000.

The City's erroneous reimbursements were placed in the City's General City Purpose	s Fund.

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE

ccfn.040747.sub.1.fiscalnote, mcw/fiscal