

CITY OF EL PASO, TEXAS
AGENDA ITEM DEPARTMENT HEAD'S SUMMARY FORM

DEPARTMENT: Fire

AGENDA DATE: August 17, 2010

CONTACT PERSON/PHONE: Otto Drozd, Fire Chief 915-771-1000

DISTRICT(S) AFFECTED: All

SUBJECT:

Ordinance reference ambulance Billing fee schedule, to repeal Ordinance no 016964 and the fee schedule and replace with the following ordinance placing the billing schedule in the annual budget resolution.

BACKGROUND / DISCUSSION:

Ambulance billing has previously been tied to ordinance. This will allow the billing schedule to become part of the annual budget resolution.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one?

Yes, ambulance billing was previously set by ordinance no 016964.

AMOUNT AND SOURCE OF FUNDING:

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

N/A

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

N/A

*****REQUIRED AUTHORIZATION*****

LEGAL: (if required) _____ **FINANCE:** (if required) _____

DEPARTMENT HEAD: _____

(Example: if RCA is initiated by Purchasing, client department should sign also)
Information copy to appropriate Deputy City Manager

APPROVED FOR AGENDA:

CITY MANAGER: _____

DATE: _____

ORDINANCE NO. _____

AN ORDINANCE SETTING THE FEE STRUCTURE FOR THE FIRE DEPARTMENT MEDICAL SERVICES SYSTEM; THE PENALTY AS IS PROVIDED IN SECTION 9.52.030 OF THE EL PASO CITY CODE.

WHEREAS, the predecessor ordinance for the Fire Department medical services system, No. 016964 set the fee structure in terms of dollar amounts and repealed the previous fee structure under Ordinance No. 15595; and

WHEREAS, this ordinance removes all dollar amounts previously included in Ordinance No. 016964 so that those amounts may be place in the annual budget resolution for the City of El Paso.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

Section 1.

1. That the City of El Paso Fire Department is authorized to charge the established amount identified for each of the following types of services:
 - a. Base charge, to include but not be limited to basic response, treatment and transport service;
 - b. Specialty care transport, to include but not be limited to response outside the City limits;
 - c. Base charge, Haz-Mat scene, to include but not be limited to medical surveillance and decontamination of response team members, which shall be charged on a per hour basis for each unit assigned to the incident;
 - d. ComSAR search, and ComSAR rescue, which shall all be charged on a per hour basis for each unit assigned to the incident;
 - e. Response fee for an incident where no care is rendered;
 - f. Scene care, which is an all-inclusive charge for care rendered at a scene when the patient refuses transport;
 - g. Mileage, with the charge per mile for transport to hospital, excluding the first mile which is included in base charge;
 - h. Stand-by at events with or without a contract, for services outside the city limits, additional fee above base charge pursuant to the Interlocal Agreement entered into between the City of El Paso and the County of El Paso to provide the County of El Paso back-up emergency medical services;
2. That the Medically Indigent Health Program shall be available to those individuals who qualify under the guidelines attached as "Exhibit A."

Section 2. Ordinance No. 016964, adopted August 12, 2008, is hereby in effect for those referenced services which were rendered prior to September 1, 2010.

Section 3. The effective date of this ordinance for the referenced services shall be September 1, 2010.

ADOPTED THIS ____ DAY OF _____, 2010.

CITY OF EL PASO:

ATTEST:

John F. Cook, Mayor

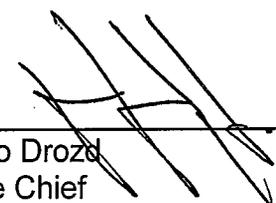
Richarda Duffy Momsen, City Clerk

APPROVED AS TO FORM:



Josette Flores
Assistant City Attorney

APPROVED AS TO CONTENT:



Otto Drozd
Fire Chief

EXHIBIT A

Medically Indigent Program

The Medically Indigent Health Program (MIP) is a program for residents of El Paso County with a household income below the Federal Poverty level. Qualified applicants may be given an allowance for charges assessed for El Paso Fire Medical services.

To qualify for the Medically Indigent Program the following conditions shall be met:

1. The responsible party shall complete an application and certification for a reduction of charges with the El Paso Fire Medical Billing Contractor.
2. The responsible party shall provide proof of residency in El Paso County, Texas.
3. The responsible party shall provide proof of all sources of household income, including but not limited to, three current payroll stubs, current filed tax forms, child support documentation, and other reasonable current documentation.
4. The responsible party shall complete and sign the application and certification form for the MIP in the presence of El Paso Fire Medical Billing personnel.
5. The total amount of the allowance will be calculated using the "County Indigent Health Care Program" currently being used by University Medical Center. The responsible party shall be responsible to pay the minimum amount set by federal law.
6. The responsible party shall make a substantial initial payment and agree to pay the reduced amount in full within Ninety (90) days from the date of the application and certification. If the reduced amount is not paid in full within Ninety (90) days, the amount due shall revert to the full amount due prior to the allowance calculated in paragraph 5, less any payments made by the responsible party.

No exceptions to the above shall be allowed unless approved by the City of El Paso.