



Copper Canyon Fire and Medical
Standard Administrative Guidelines

Financial Hardship Policy

Ambulance Transport Services Balances Forgiveness Policy

Purpose:

The District was formed to provide fire protection services and medical services. Pursuant to that purpose, the District recognizes the importance of providing equitable access to ambulance transport services for all District residents, including those facing financial hardships, ensuring the public welfare and fulfilling the District's moral and legal obligations to provide emergency medical care, while maintaining financial stability in accordance with the District's fiduciary obligation to act in the public interest.

Scope:

This policy applies to ambulance transport patients with outstanding balances for ambulance transportation.

Policy:

The District will review unpaid accounts on a regular basis to identify nonpayment of copayments, coinsurance or deductibles required for any ambulance transport for which the patient is responsible as self-pay.

If a bill remains unpaid for more than 120 days from the date it was first mailed to the patient and reasonable collection attempts have failed, the debt may be deemed bad debt.

Reasonable collection efforts include, but are not limited to the following:

1. The issuance of a bill for ambulance transport services to the patient within 15 days of service for private pay accounts, and 15 days after primary insurance pays and contractual write offs have been done, and if there is no secondary insurance to cover the balance;
2. Subsequence billings;
3. Collection letters; and
4. Telephone calls or personal contacts with the party demonstrating a genuine collection effort.

The District also follows A.R.S. § 36-2239(D) and (H):

D: Except as provided in subsection H of this section, an ambulance service shall not charge, demand or collect any remuneration for any service greater or less than or different from the rate or charge determined and fixed by the department as the rate or charge for that service. An ambulance service may charge for disposable supplies, medical supplies and medication and oxygen related costs if the charges do not exceed the manufacturer's suggested retail price, are uniform throughout the ambulance service's certificated area and are filed with the director. An



Copper Canyon Fire and Medical
Standard Administrative Guidelines

Financial Hardship Policy

ambulance service shall not refund or limit in any manner or by any device any portion of the rates or charges for a service that the department has determined and fixed or ordered as the rate or charge for that service.

H: For each contract year, the Arizona health care cost containment system administration and its contractors and subcontractors shall provide remuneration for ambulance services for persons who are enrolled in or covered by the Arizona health care cost containment system in an amount equal to 68.59 percent of the amounts as prescribed by the department as of July 1st of each year for services specified in subsections F and G of this section and 68.59 percent of the mileage charges as determined by the department as of July 1st of each year pursuant to section 362232. The Arizona health care cost containment system administration shall make annual adjustments to the Arizona health care cost containment system fee schedule according to the department's approved ambulance service rate in effect as of July 1st of each year. The rate adjustments made pursuant to this subsection are effective beginning October 1st of each year.

If the District determines that an invoice sent to a patient is not reasonably collectible, it may be written off. Patients who have applied for and have been determined to qualify for financial hardship consideration may have their accounts approved to be written off as uncollectable bad debt, at the discretion of the Fire Chief or EMS Division Chief. This procedure is detailed below.

An account may be determined to be uncollectible if it meets one or more of the following:

1. The debt is discharged in a bankruptcy.
2. The debtor is deceased and there is no known estate or guarantor.
3. Timely filing or other error deemed un-billable to insurance or patient.
4. It is determined that it is not cost effective to continue collection efforts.
5. The debtor cannot be located.
6. Evidence of financial hardship is demonstrated to the satisfaction of the District. A Financial Hardship Application can be found below.

Cost-effectiveness Analysis:

The District will conduct regular analyses to compare the costs associated with forgiving ambulance fees against the costs and potential revenue recovery associated with collection efforts or possible litigation. This will ensure that the policy is not only compassionate but also fiscally responsible.

Adopted: January 25, 2024

Revised: