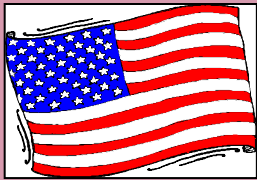




*A Newsletter  
From the Desk  
of  
Rick Martin*

*October 2012*



*America  
Land of the Free  
Home of the Brave*

*BMM 9/11/2001*

# COMSTAR

## Ambulance Billing Service

### 2013 Medicare Rates — Early News

At this time, there are still a number of variables that must be resolved before we can definitely calculate payments under the Medicare Ambulance Fee Schedule for 2013. The most important question is whether Congress will pass legislation extending the temporary adjustments. Based on early numbers, the ambulance inflation factor for 2013 will be approximately 0.5%. This can easily change, slightly, if adjustments are made to the CPI, or if the MFP increases or decreases. In addition to the AIF, the other factors that will impact Medicare reimbursement for ambulance services in 2013 will be:

**Temporary Adjustments – Ground** – The temporary adjustments for ground ambulance transport (urban – 2%, rural – 3%, super-rural – 22.6% base only) are due to expire at the end of 2012. Further legislation is required to extend these adjustments into 2013.

**Temporary Adjustment – Air** – The temporary adjustment for air ambulance transports is set to expire at the end of 2012. This adjustment allows the point of pickup to be paid as “rural” to the extent it was considered rural on December 31, 2006. Further legislation is required to extend this adjustment into 2013.

**Sequestration** – Effective January 1, 2013, all Medicare payments are scheduled to be cut by 2% as a result of the Budget Control Act of 2011. This was the result the so-called “Super Committee” failing to reach agreement on proposed budget cuts. Further legislation is required to avoid sequestration next year.

**Medicare Ambulance Relief Legislation** — *The Medicare Ambulance Access Preservation Act of 2011 (MAAPA)* was introduced in the Senate on March 1, 2011 and would provide a 6% increase under the Medicare ambulance fee schedule for ambulance transports originating in urban or rural areas and extend the bonus base payment of 22.6% for ambulance transports originating in super rural areas. The increases would be for five years starting January 1, 2012.

What does this all mean? Best case is a 6+% increase in Medicare rates in 2013. Worst case, if none of the 4 items above are resolved favorably, Medicare ambulance rates could drop approximately 4%.

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***The only way of  
finding the limits  
of the possible is  
by going beyond  
them into the  
impossible.***

**Arthur C. Clarke**

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## EMS Law Corner

Please go to our website, [www.comstarbilling.com](http://www.comstarbilling.com) , to view the latest Sample Signature Form for use by your crews.

Many clients have or will receive a **Medicare Revalidation** Notice. The Affordable Care Act created a new set of criteria for the screening of Medicare enrollments. The purpose behind these new criteria is to identify prospective providers or suppliers that may pose a significant risk of fraud and abuse. The new criteria went into effect on March 25, 2011. In order to apply these same criteria to existing Medicare providers and suppliers, the Affordable Care Act is requiring Medicare Administrative Contractors (MACs) to revalidate the enrollment information of all providers and suppliers that were already enrolled in the Medicare program as of March 25, 2011. The current revalidation cycle will be completed by March 23, 2015. However, MACs get to set their own timetable for when they will ask specific providers to revalidate. If you receive such a notice, please contact Comstar for assistance in the compliance of this Medicare requirement.

**New Hampshire Medicaid** is requiring a re-enrollment for all providers enrolled within the NH Medicaid program. ACS will be taking over the NH Medicaid in the near future so Medicaid wants to verify Provider credentials prior to setting them up in the new Medicaid system. ACS expect full implementation by 2013. At that time NH providers will gain access to Electronic Funds Transfers for services rendered to Medicaid patients. NH Clients will receive a letter from NH Medicaid Title 19 program. This may be a reminder or a direct request that the provider complete the re-enrollment. Re-enrollments should be addressed immediately after receiving the letter. If you received a letter it should be sent to Comstar Attn: Tiesha Braley, Provider Relations Manager. This can be sent via facsimile to 978-356-2721 or e-mailed to [tbraley@comstarbilling.com](mailto:tbraley@comstarbilling.com) to expedite the process. We will fill in the electronic requirements on your behalf and send all signature forms for completion along with an instructional letter. Please mail the originals via U.S Postal Service Attn: Tiesha. We will submit the re-enrollment and monitor it through completion.

Any questions can be directed to Tiesha Braley directly through the means referred to above or by phone at 800-488-4351.

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***“Even if your  
are on the right  
track, you will  
get run over if  
you just sit  
there”***

***Will Rogers***

*A Newsletter from the desk of Rick Martin.*

## **EMS Operations Best Practice**

Approximately 5 years ago many ambulance services started the implementation process of an electronic patient care reporting system. With mandated state and federal deadlines approaching, many services were scrambling to get an ePCR system off the ground. The different software's, methods of collection and mounting costs were overwhelming for some communities. Many communities were delayed due to lack of funding, implementation and deployment times. 5 Years later, we survived and most ambulance services are collecting patient information electronically. The best software vendors have risen to the top and most of the bugs have been worked out. ePCR's are now routine and part of our every day job functions. So, how are we doing?

In the day of the paper patient care report, keeping track of the PCR was much different than today. The Paper PCR is a tangible item. Today the ePCR is created with in a form on a computer, completed and then sent. But we must ask ourselves, how do we know if it is being sent?

More and more services are complaining that PCR's are not getting to the hospitals, Medical Control, QA programs and billing companies. As the different software vendors are researching the issues, more time than not, it is pointing to human error. Computers and software are only as good as the information that is put into them. Though computers may fail and databases may crash, the amount of time this happens is minimal.

You must ask yourself if you have the systems, control points, checks and balances in place to ensure that the flow of the ePCR is as good as or better than the paper PCR. You must ask yourself the following questions;

How do I know a PCR is created for every run that an ambulance crew is dispatched for?

How do I know that all PCR's are completed?

How do I know all PCR's are sent or left at the receiving facility?

How do I know that all PCR's are being received by QA or Med control?

How do I know that all PCR's are being sent to the billing company?

If you can't answer any of these questions with a definitive process answer, then you have holes in you ePCR operations control system. You must have a process and control mechanism for each function of the ePCR. The lack of oversight in any of these areas could lead to lack of quality control, patient care error's, increased litigation or loss revenue.

Please feel free to contact me anytime with questions.

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Assistant General Manager/I.T. Manager  
[slabbe@comstarbilling.com](mailto:slabbe@comstarbilling.com) — (800) 488-4351  
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**"Behold the  
turtle. He  
makes  
progress only  
when he sticks  
his neck out."**

**James Conant**

**A Newsletter from the desk of Rick Martin.**

**"Comstar supports your operations as well as billing....."**

Thank you for your continued business with Comstar Ambulance Billing Service. We appreciate the opportunity to provide services to you. As a company, Comstar strives to add value to all of our clients. We have the most robust array of service options, some of which you may not be aware of.

**EMT Training Course -- Practical Consideration in Drafting the PCR Narrative**

This course 2 hr training course is provided to upon request to all clients. The objectives of this course are: To refresh and reinforce EMT's patient care report (PCR) writing training. To refresh and reinforce EMT's knowledge of the uses and importance of the PCR. To provide insights and guidance that will result in improvement in the quality and usefulness of the PCR. Note: Though applicable to EMT's in all states, this course is approved by the Commonwealth of Massachusetts Department of Public Health, Office of Emergency Medical Services. Massachusetts certified EMT's can earn 2 (two) credit hours of continuation credit toward their Basic, Intermediate, or paramedic certification by attending this course.

**Software and Data Integration Support and Services**

Comstar has been using the Zoll Data Systems billing software as its billing platform since 2002. We send and receive data in an electronic and seamless manner with existing clients using Zoll's ePCR software. Comstar can also integrate seamlessly with other ePCR software vendors to the point where I guarantee that Comstar will integrate with any ePCR solution that a client may select to use. Comstar is very flexible in this manner, because we feel it is important for you, and every client to select an ePCR solution that you feel most comfortable with and best fits your needs. Our five person in-house IT staff has successfully integrated our Zoll software with the following nine (9) EPCR software solutions: AmbuPro, emsCharts, ESO Solutions, Firehouse, Healthware Solutions, ImageTrend, IMC Public Safety, PURVIS Public Safety, and Zoll Data Systems. Given Comstar's integration guarantee, this list will grow as clients select different ePCR products. In most cases, bridge programming is required to make such integration successful. Comstar's IT staff performs the bridge programming at no additional cost to Comstar's clients. They also will work with your chosen ePCR software vendor, as your technical advocate, should you have any issue with their product.

**"Comstar provides a cost effective ePCR Solution....."**

Comstar has an ePCR Partnership Agreement with Zoll Data Systems. Ambulance services that desire to use the Zoll ePCR solution but do not have the capital resources to fund the cost of deployment, server setup and license purchase now have a cost effective alternative through Comstar. For more information, please contact Jeff Tassi immediately at 800-488-4351 or [JTassi@comstarbilling.com](mailto:JTassi@comstarbilling.com). Jeff is prepared to demonstrate the Zoll ePCR product, discuss Comstar's capabilities to provide the web hosted solution, present a full service outline and discuss pricing.