



Providing Ambulance Billing Service to New England Since 1984

NEWSLETTER

from the desk of Rick Martin

Direct Line: 978-771-6482 E-Mail: Rick.Martin@ComstarBilling.com

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Organizational Change

I am pleased to announce that Don Davis has been promoted to the Position of Operations Manager at Comstar. Don has been with Comstar 5 years and has worked in all functional areas within the company. His strong knowledge of medical billing process, IT hardware & software and leadership skills keep Comstar well positioned to meet the needs of its clients today and in the future.

Management Team Outline

- *Rick Martin, President and CEO
- *Jeff Tassi, Director of Business Development
- *Don Davis, Operations & IT Manager
 - *Jane Schaller, Billing Manager
 - *Michelle Piercy, Client Accounting Manager
 - *Rob Martin, Training & QA Manager

Contact us at 800-488-4351, M-F 8am-9pm EST.

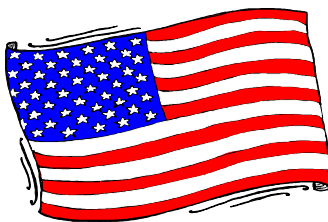
NEW! IT Corner -- A Tip from Don Davis

Many clients are evaluating EMS Data Collection Software. Look for a "Signature Capture Field" in any product you evaluate. Not all products have it. This is a feature you will need.

Rate Change Reminder

If you have not already done so, please reply to the annual rate change mailing that was sent 12/06.

*America
Land of the Free
Home of the Brave*



BMM 9/11/2001

Comstar Service Enhancement

I am pleased to announce that Comstar has entered into a retainer agreement with a nationally known and respected Medicare & EMS Law Attorney. He will be advising the Comstar team via phone, e-mail, comprehensive monthly newsletters, annual on-site audit and other advisories to further ensure Comstar's and its clients compliance with applicable Medicare and OIG rules and regulations.

NEW! EMS Law Corner: Fee Rates & Participating Provider Agreements

The OIG has indicated that the fee rates you charge can not be below the cost to produce the service. Any non-federal payer's participating provider agreement is optional. Read any such agreement closely. Most participating provider agreements contain a fee schedule that is lower than your fee rates. Discounts given in return for referrals could be a violation of anti-kickback statutes. OIG Opinion 99-2...of the Social Security Act states in part f the charge to Medicare substantially exceeds the amount (discounted payments) the ambulance company most frequently expects to receive from non-Federal payers, the company can be excluded from Medicare and Medicaid. On 9/15/03, the OIG issued a proposed rule which attempts to define discounts that would be permitted. OIG proposed a discount at a maximum of 16 2/3% off the Medicare Allowable. **What does this all mean?** If you have signed or are considering signing a non-federal payer participating provider agreement, compare the fee schedule in that agreement to the Medicare allowable. If any of the fees are more than 16 2/3% below the Medicare allowable, you could be at risk for exclusion from Medicare and Medicaid. In such case, you may wish to discuss the issue with the particular non-federal payer directly.

This newsletter is not intended as legal advice. Consult an attorney for specific legal advice concerning your situation.

