

Attachment A - Ambulance Revenue Report

Attachment A: Emergency Ambulance Revenue Report

**Provider Fiscal Year 2019
Massachusetts Emergency
Ground Ambulance Net Operating
Revenue**

**Provider Name and Contact
Information**

Please fill in below

Provider Name	
Federal Employee ID	
PIDSL	
Address1	
Address2	
State	
City	
Zip	
Main Phone Number	
Contact's Extension or Phone	
Fax	
Email	
Contact's Name, who affirms that all information provided is correct under penalties of perjury	
Fiscal Year Ending	2019

Massachusetts Emergency Ground Ambulance Related Revenue		Please fill in below in dollars for Advance Life Support and Basic Life Support (Ground Emergency Ambulance). The "Total" column will fill automatically.		
Line	Category	Advanced Life Support (Ground Emergency)	Basic Life Support (Ground Emergency)	Total
1	Self-Pay / Private Pay (Massachusetts)			\$0

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2	Medicare (Massachusetts)			\$0
3	MassHealth (Massachusetts)			\$0
4	Commercial (Blue Cross, HMO, Other Third Party) (Massachusetts)			\$0
5	Contracts (PPS, DRG or Other) (Massachusetts)			\$0
6	Municipal Subsidy (Massachusetts)			\$0
7	All Other Payers (Massachusetts)			\$0
8	TOTAL MASSACHUSETTS OPERATING REVENUE Emergency Ground Ambulance (Sum Line 1 to Line 7)	\$0	\$0	\$0

Massachusetts Emergency Ground Ambulance Related Expenses		
Line	Expense Category	Total
A	Bad Debt (allocated to Massachusetts emergency ground ambulance)	
B	Charity Care (allocated to Massachusetts emergency ground ambulance)	
C	Payer Discounts (allocated to Massachusetts emergency ground ambulance)	
D	Total Bad Debt, Charity Care, Payer Discounts (Sum Line A-Line C)	\$0

Definitions/Instructions

Total is the sum of revenue from Advance Life Support and Basic Life Support (Ground Emergency)

Advanced Life Support (ALS) Services as defined by the Commonwealth of Massachusetts, Department of Public Health, in 105 CMR 170.020.

Basic Life Support (BLS) Services as defined by the Commonwealth of Massachusetts, Department of Public Health, in 105 CMR 170.020.

Emergency, as defined by the Commonwealth of Massachusetts, Department of Public Health, in 105 CMR 170.020.

Massachusetts revenue or expenses should be broken out consistent with how the provider determines it for other purposes, including but not limited to tax purposes

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Line 1: Self-Pay/Private Pay. Report revenue earned from patients for services rendered that are not sponsored by any governmental or third party entity.

Line 2: Medicare. Report revenue earned from patients insured by Medicare, Railroad Medicare, or Champus/TRICARE.

Line 3: Medicaid. Report revenue earned from patients insured by MassHealth

Line 4: Commercial Insurance. Report revenue earned from patients insured by any commercial insurance, HMO plan, and other third party payers.

Line 5: Contracts (PPS, DRG, other). Report revenue earned from facilities (e.g., hospitals or nursing homes) for transport of their patients or residents.

Line 6: Municipal Subsidy Report revenue earned by an ambulance service provider from a city or town for the purpose of ensuring that said ambulance service shall provide services to that city or town.

Line 7: All Other Payers Report revenue earned from any sources not listed above. Include any amounts received from another ambulance service for use of your company's services, if they are not included elsewhere.

Line A: Bad Debt Expense. Report expenses recognized for accounts receivable that are regarded as uncollectible following reasonable collection efforts (this should only be reported if the revenue including the bad debt was included in the revenue report).

Line B: Charity Care. Report expenses for charitable care for Massachusetts emergency ground ambulance service (this should only be reported if revenue including the charity care was included in the reported revenue).

Line C: Payer Discounts. Report payer discounts for Massachusetts emergency ground ambulance services (this should only be reported if revenue including the payer discount was included in the reported revenue).