

**ORGANIZATION INFORMATION****Name of Organization:**

CITY OF KILLEEN

**Telephone Number:**

254-501-7730

**Fax Number:**

254-501-8984

**Physical Address:**

101 N COLLEGE STREET

**City**

KILLEEN

**State**

TX

**Zip**

76540

**CALL/TRANSPORT DATA****Date Range:** *Please enter the date range for the information provided.***Start Date:** 1/1/2015**End Date:** 12/31/2015*Please note: We prefer 12 months of data 15 months out.**For example: In April 2016 please provide data from February 1, 2014-January 31 2016***Calls:** *This should include all calls, even when there was no response or transport.*

18954

**Billable Calls:** *All calls your current billing company/department deemed 'billable'.*

18827

**Transport Volume:** *Include all calls in which patient was transported.*

9,646

**Emergency Transports:***An emergency transport is any transport in which 911 was called and the team responded immediately to the call.***ALS EM:**2836**BLS EM:**6587**ALS2:**146**SCT:****Non- Emergency Transports:***A non-emergency call is defined as a scheduled transfer and is dispatched from an alternative non-emergency phone number.***ALS NE:****BLS NE:**3**Treatment no Transport:** *Calls in which patient received Treatment but was not transported.***TNT:**428**Average mileage per transport:****Miles:**664.75

**FEE SCHEDULE**

<b>Base Rate</b>	<b>Current</b>	<b>Previous</b>	<b>Other Charge/Describe</b>
BLS Transport-NE	\$N/A	\$ N/A	\$ Interfacility
BLS Transport-EM	<b>\$560</b>	<b>\$ 500</b>	\$ Specialty Care
ALS Transport-NE	\$N/A	\$ N/A	\$ _____
ALS Transport-EM	<b>\$690</b>	<b>\$600</b>	\$ _____
ALS2 Transport	<b>\$770</b>	<b>\$700</b>	\$ _____
Mileage	<b>\$13.00</b>	<b>\$9.00</b>	\$ _____

  

<b>Itemized Charges</b>	<b>Current</b>	<b>Previous</b>	<b>Other Charge/Describe</b>
Non Transport	\$ use level of service	\$ use level of service	
Oxygen	\$ N/A	\$ N/A	
Medicine/Supplies	\$ N/A	\$ N/A	
Misc.	\$ N/A_	\$ N/A	

**Volume**

Total Annual EMS Transports, Current	FY14-
Total Annual EMS Transports, Previous year	FY13-

**Transports Volume Breakdown**

BLS-NE :  
 BLS-EM : **2154000**  
 ALS-NE :  
 ALS-EM : **1048200**  
 ALS2 : **67900**

**Financial Data**

Average Invoice	\$ <b>39145</b>	
Total Gross Charges (previous year)	\$ <b>5790553.18</b>	
Contractual Adjustments	\$ <b>1565215.24</b>	
Other Adjustments/Write-off	\$ <b>1403495.71</b>	
Total Net Revenue * (previous year)	\$ <b>2830338.33</b>	<i>*Net Revenue = Total Revenue-Refunds</i>
Gross Collection Rate	<b>62</b>	%
Net Collection Rate	<b>85</b>	%

**Annual Charge Volume mix \*(Gross Charges by Payer)**

Medicare	% <b>1902385.85</b>	% or \$	Medicare	% <b>1097317.86</b>	% or \$
Medicaid	% <b>845553.46</b>	% or \$	Medicaid	% <b>333500.51</b>	% or \$
Private Insurance	% <b>2034332.82</b>	% or \$	Insurance	% <b>1210991.58</b>	% or \$
Self-pay	% <b>1485737.97</b>	% or \$	Self-Pay	% <b>68154.36</b>	% or \$