

Chapter 9

HUMAN SERVICES*

* **Cross References:** Administration, Ch. 2; parks and recreation areas, § 14-96 et seq.

Art. I. In General, §§ 9-1--9-25

Art. II. Standards, § 9-26

Art. III. Emergency Medical Services, §§ 9-38--9-43

ARTICLE I.

IN GENERAL

Secs. 9-1--9-25. Reserved.

ARTICLE II.

STANDARDS*

* **Editors Note:** At the discretion of the town and pursuant to the enactment of the "General Assistance Ordinance of 1990," adopted April 2, 1990, former Art. II, Divs. 1--6, relative to general assistance, has been amended to read as herein set out in § 9-26. The substantive provisions of former Art. II derived from an ordinance adopted July 10, 1989.

Cross References: Administration, Ch. 2.

State Law References: General assistance, 22 M.R.S.A. § 4301 et seq.

Sec. 9-26. Adoption of human service guidelines.

That certain document, designated as "General Assistance Ordinance of 1996" and subject to annual amendments, is hereby enacted. This ordinance is filed with the Commissioner of the Department of Human Services in compliance with Title 22, M.S.R.A. § 4305.4.

This section references the entire text of the "General Assistance Ordinance of 1996," a full copy of which is located in the office of the Brunswick Town Clerk.
(Ord. of 4-2-90; Emergency Ord. of 1-20-92; Ord. of 2-3-92; Emergency/Regular Ord. of 7-20-92; Ord. of 2-18-97)

ARTICLE III.

EMERGENCY MEDICAL SERVICES*

* **Editors Note:** Ord. of June 18, 2007, did not specifically amend the Code; hence, at the discretion of the editor, these

provisions have been included as article III. See also the Code Comparative Table.

Sec. 9-38. Purpose.

The purpose of this chapter is to establish guidelines and fees relating to emergency medical services provided by the town.
(Ord. of 6-18-07)

Sec. 9-39. General.

The town shall provide emergency medical services within the municipal boundaries of the town and beyond those boundaries by agreement authorized by the town council. However, nothing in this article shall prohibit, on a case-by-case basis, the chief of the emergency medical services unit from providing service beyond the boundaries of the town when the chief determines that a response is appropriate.
(Ord. of 6-18-07)

Sec. 9-40. Definitions.

The following words, terms, and phrases, when used in this chapter, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning.

Accepting assignment is a process in which an emergency medical services provider, in exchange for receiving payment directly from an insurer, agrees to accept a fee other than the provider's stated fee.

Advanced life support intervention is a procedure beyond the scope of an EMT-Basic as defined in the National EMS Education and Practice Blueprint.

Advanced life support level 1 (ALS1) is, when medically necessary, the provision of an assessment and/or the provision of one (1) or more ALS interventions.

Advanced life support level 2 (ALS2) is, when medically necessary, the administration of at least three (3) different medications and/or the provision of one (1) or more of the following ALS procedures:

- Manual defibrillation/cardioversion.
- Endotracheal intubations.
- Central venous line.
- Cardiac pacing.
- Chest decompression.
- Surgical airway.
- Intraosseous line.

ALS assist is the provision of ALS services to another emergency medical services provider for which the town does not transport patients.

Basic life support (BLS) is, when medically necessary, the provision of basic life support services as defined in the National EMS Education and Practice Blueprint for the EMT-Basic including the establishment of a peripheral intravenous (IV) line.

Billing unit shall be the town department or division designated by the town manager to prepare patient invoices, statements, collection notices, insurance claims and any other required information in order to pursue collection of the fees levied under this chapter.

Chief of emergency medical services is the person designated by the town manager to oversee emergency medical services operations.

Emergency medical services division is the division of the fire department that provides emergency medical services.

Emergency medical service unit is a town-owned vehicle, or other craft, that is designed, equipped, and operated for the transportation of sick or injured persons, requiring or likely to require medical attention during transport.

Intraosseous line or infusion is the process of injection directly into the marrow of the bone.

Loaded mile is the mileage, rounded to the nearest mile, from the location where the person is first attended by the emergency medical service unit to an emergency medical care facility or to a rendezvous point with another emergency service provider.

Non-Transport (billable) occurs when a patient, or person representing a patient calls for, or otherwise requests, an emergency medical service response and for which an emergency medical services unit responds and it is determined on-scene or subsequently that a response was not medically necessary.

Non-Transport (non-billable) occurs when a person unrelated, or otherwise not connected to a patient, calls for, or otherwise requests, an emergency medical service response and for which an emergency medical services unit responds and it is determined on-scene that a response was not medically necessary.

Patient is a person for whom an emergency medical services unit is requested, regardless of the origin of request.

Run sheet is a form, completed by the emergency services personnel, that describes a patient's condition and the medical services provided.

(Ord. of 6-18-07)

Sec. 9-41. Fees.

The following fees shall be charged for emergency medical services provided by the town:

Non-Transport (billable)	\$150 per response
ALS Assist	\$250 per response
Basic Life Support (BLS)	\$350 per response
Advance Life Support (ALS)	\$500 per response
Advance Life Support 2 (ALS2)	\$650 per response
Loaded Mile	\$10 per mile

With the exception of ALS assists, all invoices for services rendered by the town's emergency medical services unit shall be billed to the patient or the patient's insurer. ALS assists shall be billed to the emergency medical services provider requesting the assistance.

(Ord. of 6-18-07)

Sec. 9-42. Billing.

The emergency services division shall prepare a run sheet for each patient. The chief of the emergency services division, or the chief's designee, shall review the run sheet for accuracy and completeness. The completed run sheet, along with any supplemental information, shall be provided to the billing unit.

The billing unit shall invoice the patient in accordance with the fees specified in this article. As a matter of law, the billing unit may be required to accept payments from, and at rates determined by a government insurer, in which case an insurance claim will be submitted directly to the government insurer. The billing unit may also make arrangements (known generally as "accepting assignment") with other insurers to accept payments directly from those insurers at fees other than those provided for in this article. Nothing in this article shall require the billing unit to accept assignment from all insurers.

The billing unit shall examine the list of unpaid accounts periodically and may abate, or otherwise deem uncollectible, any amounts the billing unit determines, in its judgment, to be uncollectible.

(Ord. of 6-18-07)

Sec. 9-43. Collection agencies.

The billing unit is authorized to negotiate arrangements with collection agencies to pursue delinquent accounts. Collection agency fees may be negotiated on terms satisfactory to the billing unit.

(Ord. of 6-18-07)