

Standard Operating Procedures Manual
City of Poquoson Fire and Rescue



**City of Poquoson
Fire and Rescue**

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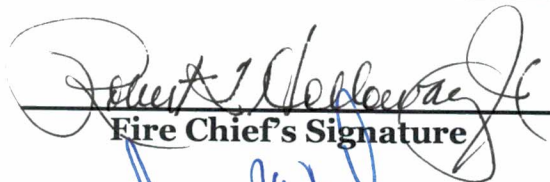
GENERAL ADMINISTRATION

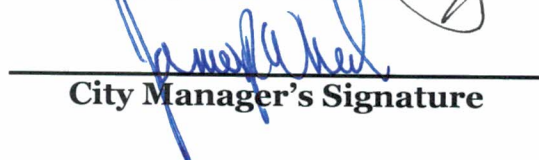
SOP#: GA 20.00

Title: Revenue Recovery

Effective Date: 10/01/2009

Revised Date: 12/15/2018


Fire Chief's Signature


City Manager's Signature

Revenue Recovery

I. PURPOSE

To outline the policy for distribution of the Poquoson Fire/Rescue (PFR) Notice of Privacy Practice Brochure and signing of the PFR Ambulance Billing Authorization and Privacy Acknowledgment Form.

This SOP is not all-inclusive and cannot encompass all situations that may be encountered.

II. PROCEDURES

For each patient that is seen by PFR personnel, the patient or a responsible party for the patient is to be given a brochure titled "Notice of Privacy Practices".

In addition, for each patient that is transported or evaluated by PFR personnel, the patient or a responsible party is to sign the PFR Ambulance Billing Authorization and Privacy Acknowledgment Form which grants permission for PFR and EMS Management & Consultants to use healthcare information for billing purposes.

For all patients that are transported, it is the Attendant In Charge's responsibility to obtain the patient FACE sheet from the receiving medical facility prior to returning to service. For all patients who refuse transport, the Attendant In Charge should make an effort to obtain insurance information prior to leaving the scene.