

# Billing Frequently Asked Questions

**Question: How is Marion County Fire Rescue structured?**

**Answer:** Marion County Fire Rescue is a local government department of Marion County. Marion County has oversight through the Board of County Commissioners and a Commissioner appointed by the Fire Advisory Board.

**Question: Is Marion county Fire Rescue affiliated with any hospitals?**

**Answer:** No. Marion County Fire Rescue is a department of the Marion County Board of County Commissioners.

**Question: How is the Marion County Fire Rescue rated determined?**

**Answer:** Rates are determined through local market studies, carrier allowables, as well as budgetary processes, and are reviewed and approved by the Marion County Board of County Commissioners. For more information about Marion County Fire Rescue rates, see the billing rates page.

**Question: Is the bill for ambulance covered by insurance?**

**Answer:** In most cases, yes. However, this depends in large part on the type of coverage that the patient has and whether the service is considered “Medically Necessary” by the patient’s insurance carrier. For more information, call Marion County Fire Rescue Billing Group Customer Service at 352-291-8030.

**Question: Who should I contact if I have a question on my bill?**

**Answer:** Call the Marion County Fire Rescue Billing Group Customer Service at 352-291-8030.

**Question: I pay for ambulance service on my tax bill. Why do I also get billed when I use the service?**

**Answer:** Marion County Fire Rescue is funded through a combination of ad valorem taxes and user fees. To minimize the impact on Marion County citizens, it was decided that everyone pays for the availability of the service and patients treated and transported pay for the actual usage of the service. In this way, the taxes necessary to support the ambulance service can be held to a minimum. A user fee is charged to the patient who is treated and/or transported by EMS. Instead of assessing property owners large taxes each year to lower EMS operating costs, user fees help spread out the cost between the taxpayer and the service user. Many insurance companies and Medicare may reimburse for portions of EMS transport and treatment charges.

**Question: I was recently transported by ambulance and Medicare denied my bill for Medical Necessity. Why did they deny and what are my rights?**

**Answer:** The Medicare program will only pay for ambulance services that it deems “Medically Necessary.” In all cases, other means of transportation must be contraindicated due to the patient’s condition, regardless of whether other means are available. In simpler words, the patient’s condition must be acute and such that transport by other means would be endangering the patient’s life, limb or bodily organs.

A patient has the right to appeal Medicare’s decision. In the event that a patient’s bill is rejected, they can file an appeal for reconsideration. Simply obtain all of the information in regards to the service (i.e. ambulance run form, emergency room notes, physician notes, discharge orders, lab results, etc.) and mail them to the Medicare carrier requesting an appeal. For more information, call Marion County Fire Rescue Billing Group Customer Service at 352-291-8030.