

**REQUEST FOR BOARD ACTION**

**HENDERSON COUNTY  
BOARD OF COMMISSIONERS**

**MEETING DATE:** June 27, 2006

**SUBJECT:** EMS Accounts Receivable Report

**ATTACHMENTS:** Yes

**SUMMARY OF REQUEST:**

**At the Board's request the attached EMS Accounts Receivable Report is being provided as information for consent approval.**

**EMS ACCOUNTS RECEIVABLE  
BALANCE REPORT  
Period Ending 6/19/06**

<b>A/R Balance @ 5/9/06</b>	<b>\$2,373,533.96</b>
<b>Add: New charges (1)</b>	<b>259,587.07</b>
<b>Less: Payments (2): On calls prior to 6/30/05</b>	<b>( 26,798.29)</b>
<b>On calls after 6/30/05</b>	<b>( 316,082.14)</b>
<b>Insurance contractual adjustments (3)</b>	<b>( 151,952.72)</b>
<b>Write-off of old bills (4)</b>	<b>( 111,892.82)</b>
<b>Estimated insurance contractual adjustments from write-offs (5)</b>	<b><u>( 82,491.52)</u></b>
<b>A/R Balance @ 6/19/06</b>	<b>\$ 1,943,903.54</b>

**(1) – new patient charges from 5/9/06 through 6/19/06**

**(2) – payments/credits received from 5/9/06 through 6/19/06**

**(3) – actual Medicare, Medicaid and other insurance contractual  
adjustments for charges not owed by patients**

**(4) – old account balances prior to 6/30/05 remaining that insurance  
cannot be filed on due to age and written off as uncollectible**

**(5) – estimated Medicare, Medicaid and other insurance contractual  
adjustments/denials for charges not owed by patients on write-  
off of uncollectibles**

