

COVERAGE AGREEMENT
Bayfield-Ashland Counties Ambulance Services

Approved 09/06/2018

Wisconsin Administrative Code DHS 110.04(15) requires an ambulance provider to have “a written agreement between two neighboring ambulance service providers that each will cover the other’s 9-1-1 area when the other knows in advance that it will be unable to do so”.

This written 9-1-1 coverage agreement applies to the following EMS providers:

- Ashland Fire Department – City of Ashland
- Barnes Ambulance – Town of Barnes
- Bayfield Ambulance – Bayfield Community Ambulance
- Great Divide Ambulance – Great Divide Ambulance Board of Directors
- Iron River Ambulance – Town of Iron River
- Madeline Island Ambulance – Town of LaPointe
- Mason Area Ambulance – Mason Area Ambulance Association
- Mellen Ambulance – City of Mellen
- Red Cliff Ambulance – Red Cliff Band of Lake Superior Chippewa
- South Shore Area Ambulance – Town of Clover
- Washburn Area Ambulance – City of Washburn

Each participating ambulance service agrees to cover other 9-1-1 ambulance service areas when a service knows in advance that it will be unable to do so or staffing is not available. The size of 9-1-1 service areas may require notification of more than one ambulance service to adequately cover the response area.

Coverage is not automatic. Nothing in this agreement shall be construed to imply that the requested service has an obligation to provide ambulance coverage in another area if providing additional coverage would jeopardize their primary service area. If an ambulance service agrees to provide coverage and its resources become limited due to unforeseen circumstances, it will notify the closest most appropriate ambulance service to respond to their coverage area through its mutual aid agreements.

The responding/transporting ambulance service agrees to bill the patient and/or their respective health insurance for rendered care and/or transportation to a hospital at their usual and customary fees. After the tenth response in a calendar year, the responding/transporting ambulance service may bill the requesting ambulance a \$200 service fee within 30 days of the response when mutual aid does not apply. The requesting ambulance will pay the service fee within 60 days of receipt of the bill. This fee is not intended to be billed to the patient.

This agreement has been developed through the Bayfield-Ashland Counties EMS Council, Inc. Lack of participation by any individual Ambulance Service shall not terminate the intent, participation and effectiveness of the Coverage Agreement between the remaining Ambulance Services. This agreement does not preclude any service from developing additional agreements.

Authorizing Signature: _____

Title: _____

Ambulance Service: _____

Date: _____