

BOARD OF COUNTY COMMISSIONERS

DATE: March 3, 2009
AGENDA ITEM NO. 22

Consent Agenda

Regular Agenda

Public Hearing

County Administrator's Signature:

Subject:

Proposed Resolution Transferring the Responsibility for Emergency Medical Dispatch from the County's Ambulance Contractor to the County's 911 Center.

Department:

EMS and Fire Administration

Staff Member Responsible:

Richard C. Williams, Director

Recommended Action:

I RECOMMEND THAT THE BOARD OF COUNTY COMMISSIONERS ADOPT THE ATTACHED RESOLUTION FOR THE PURPOSE OF TRANSFERRING THE RESPONSIBILITY OF EMERGENCY MEDICAL DISPATCH FROM THE COUNTY'S AMBULANCE CONTRACTOR TO THE COUNTY'S 911 CENTER.

Summary Explanation/Background:

On February 24, 2008, at the Board of County Commissioner's Workshop, The Board was given a staff Presentation regarding the Emergency Medical Services system and recommendations regarding its future and potential savings that could result through a combination of right sizing services from the Fire Departments and Ambulance Contractor. At that time the Board was advised that staff would be recommending the adoption of three resolutions to effect the recommended changes. At this time staff is recommending that we defer the two resolutions defining levels of service and reasonable and customary costs until the meeting scheduled for March 17, 2009. This will allow time for providers, as well as citizens to fully understand the issues and give staff opportunities to address any concerns. It is important that these items be clearly understood. The drafts are attached.

It is recommended that the board of County Commissioners adopt the resolution for the purpose of moving the responsibility of emergency medical dispatch from the County Ambulance Contractor to the County 911 Center. This item has been fully examined and recommended by the Medical Control Board and the Emergency Medical Services Advisory Council. This item is being brought forth independently of any other system changes, it is expected to result in cost savings over time.

Fiscal Impact/Cost/Revenue Summary:

\$500,000.00 Savings - anticipated recurring savings in the Ambulance Service Agreement in FY09-10.

Exhibits/Attachments Attached:

Resolutions

Resolution Review

A RESOLUTION OF THE PINELLAS COUNTY BOARD OF COUNTY COMMISSIONERS TRANSFERRING THE RESPONSIBILITY FOR EMERGENCY MEDICAL DISPATCH FROM THE COUNTY'S AMBULANCE CONTRACTOR TO THE COUNTY'S 911 COMMUNICATIONS CENTER AND ADOPTION OF A STANDARD FOR SUCH OPERATIONS.

WHEREAS, Pursuant to Chapter 80-585, Laws of Florida, as amended (the "Act"), the Florida Legislature established the Pinellas County Emergency Medical Services Authority (the "Authority") to provide county-wide emergency medical services which was subsequently approved by referendum of the electorate; and

WHEREAS, the Board of County Commissioners is established as the governing body of the Authority; and

WHEREAS, pursuant to the Pinellas County Home Rule Charter §2.04(a), Pinellas County Emergency Communications operates the primary Public Safety Answering Point for the County through the 911 system; and

WHEREAS, under the current 911 system a Fire Medical First responder is dispatched immediately, when a call requesting emergency aid is received, and the call is transferred to the County's ambulance contractor for medical handling; and

WHEREAS, based upon the recommendation of Authority staff, the Medical Control Board and the Emergency Medical Services Advisory Council, it appears that certain changes in call taking and processing as provided herein will result in greater efficiency and cost savings; and

Whereas, in support of the approvals herein, the Board of County Commissioners makes the following legislative findings:

A. The Board of County Commissioners is responsible for the operation of the 911 – Public Safety Answering Point, and as the governing body of the Authority under the Act is responsible for the delivery of Emergency Medical Services in Pinellas County.

B. That at present a call into the 911 center requesting medical assistance results in the emergency dispatch of a Fire First Responder without any significant

review of the medical situation as the medical dispatch function is handled by paramedics at the ambulance contractor's dispatch center, who after conducting a medical interview may dispatch an ambulance or determine that an emergency response is not necessary.

C. That the current system results in ambulances being dispatched when transport is not necessary or desired and fire first response vehicles being dispatched on an emergency basis where immediate intervention is not required.

D. That the Medical Control Board and the Emergency Medical Services Advisory Council have endorsed the use of a system of Emergency Medical Dispatch which entails a selective dispatch of First Responder and Ambulance transport assets based upon the unique medical situation presented by each caller into the 911 center.

E. That cost and response time savings can be realized through the transfer of the Emergency Medical Dispatch function from the ambulance contractor to the 911 center with trained operators meeting the standards established by the National Academy of Emergency Dispatch following protocols adopted by the Medical Control Board.

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PINELLAS COUNTY, FLORIDA in regular session duly assembled this 3rd day of March, 2009, that:

Section 1. The Board of County Commissioners hereby approves the transfer to and assumption of the responsibility for medical dispatch functions from the ambulance contractor to the 911 Center, which shall follow the standards established by the National Academy of Emergency Dispatch as adopted by the Pinellas County Medical Control Board subject to the levels of service for Emergency Medical Providers as set by the Authority in compliance with the Act.

Section 2. The County Administrator is authorized and directed to take such actions as are necessary to effect the transfer of responsibilities as provided herein.

Section 3. This Resolution shall take effect immediately upon its adoption.

In a regular meeting duly assembled this 3rd day of March, 2009,
Commissioner _____ offered the foregoing Resolution and moved its
adoption, which was seconded by Commissioner _____ and upon call the
vote was:

AYES:

NAYS:

ABSENT AND NOT VOTING:

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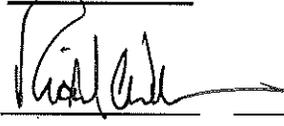
RESOLUTION REVIEW FORM

Type of Resolution: Proposed Resolution Transferring the Responsibility for Emergency Medical Dispatch from the County's Ambulance Contractor to the County's 911 Center.

Estimated Revenue or Expenditure: \$500,000.00 Savings in Ambulance Services Agreement for FY09-10. This is a recurring savings.

Available Budget: Yes

The attached documentation is submitted for your review and comment. Upon finalization of your review, please complete this Review Form below and forward to the next Review Authority on the list.

<u>REVIEW AUTHORITY</u>	<u>REVIEW DATE</u>	<u>SIGNATURE</u>	<u>COMMENTS</u>	<u>COMMENT ADDRESS/ ORIGINATOR INITIALS & D/</u>
<u>EMS and Fire Administration</u> <u>Emergency Communications</u> Richard C. Williams, Director	<u>2-27-2009</u>		_____	_____
<u>County Administration</u> James A. Dates, Assistant County Administrator	<u>2/27/09</u>		_____	_____
<u>County Attorney</u> Robert C. Swain, Senior Assistant Attorney	<u>2/27/09</u>		_____	_____

Please return to Richard (Dick) Williams as soon as possible.

All inquiries should be made to Craig Hare, at 580-4337. Thank you.

RESOLUTION NO: 09-_____

**A RESOLUTION OF THE PINELLAS COUNTY
EMERGENCY MEDICAL SERVICES AUTHORITY
ESTABLISHING LEVELS OF SERVICE OF EMERGENCY
MEDICAL FIRST RESPONDERS IN ACCORDANCE WITH
THE REQUIREMENTS OF CHAPTER 80-585, LAWS OF
FLORIDA, AS AMENDED.**

WHEREAS, The Florida Legislature in Chapter 80-585, Laws of Florida, as amended (the "Act"), established the Pinellas County Emergency Medical Services Authority ("Authority") which was subsequently approved by referendum of the electorate; and WHEREAS, the Board of County Commissioners is established as the governing body of the Authority; and

WHEREAS, the Authority is obligated to provide funding for the reasonable and customary costs associated with the provision of emergency medical services; and

WHEREAS, the Authority is empowered to set the levels of service for all emergency medical services that must be met by EMS providers, provided that the service funded may not be lower than the minimum level of services for those providers which existed as of January 1, 1989; and

WHEREAS, the Authority has previously established minimum levels of service through long term service agreements with the EMS providers; and

WHEREAS, at its public work session held on February 24, 2009, the Board of County Commissioners, sitting as the Authority heard a comprehensive staff presentation regarding legislative history, system operations history, past and current methods of system financing, response statistics, dispatch standards and process and EMS needs in each of the 19 municipalities and fire districts which provide EMS first responder services; and

WHEREAS, given the varied distribution of population within Pinellas County; the nature of the transportation infrastructure; placement of fire stations, and the relationship between staffing and cost, it is important that the Board of County Commissioners exercise its legislative authority as the governing body of the Authority to assess the need for EMS services throughout the county, evaluate the factors that go into

determining the service levels and cost of providing those services and establish the service level which will be funded by the Authority to the various EMS providers; and

Whereas, in support of the approvals herein, the Board of County Commissioners makes the following legislative findings:

1. The Authority currently contracts with 19 municipalities and independent fire districts to provide advanced life support first responder services. These services are supported through a county wide ad valorem levy and funding from other system revenues with payment made to the various providers based upon a system of negotiated contracts. In the past these contracts have allowed for certain automatic cost increases which did not always accurately track the cost of providing services.

2. That while there is no specific legal standard for response times for ALS first responders, by agreement, the providers in Pinellas County have agreed to a response standard for emergencies where an ALS first responder will be on scene within 7 minutes and 30 seconds in 90 percent of their dispatch by emergency operators at the 911 center. This results in an average response time below this figure. Despite some variability among districts, the county-wide system response time currently exceeds this standard which the Authority finds is the result of excess response capacity in the system.

3. Due to certain changes in the law which effect the revenue generated by the EMS system the Authority finds it is in the public's interest to increase the efficiency of the system and to the extent possible eliminate excess capacity to ensure the ability to finance the system on a sustainable basis without requiring regular increases in the tax rate borne by the citizens.

4. The emergency medical services system currently uses a dual response model. This involves the use of advanced life support first responder vehicles staffed by fire department personnel and advanced life support transport vehicles staffed by the ambulance contractor. First responder vehicles are deployed from fire stations and the ambulances are deployed through a more flexible system. In general, this allows for a more efficient use of first responder vehicles as it requires less time spent with the patient by the First Responders.

5. In determining the service levels approved herein, the Authority has considered the staffing pattern of each provider, the deployment of their personnel,

historical and anticipated workload, the distribution of population in the area served by each provider and the transportation system available to emergency equipment. In evaluating an appropriate response time, the Authority has also considered the county wide automatic aid agreements wherein each provider agrees to assist other providers responding to fire and EMS emergencies and the flexible deployment of the ambulance contractor which utilizes ALS transport vehicles.

6. The Authority considered staff recommendations to change dispatch protocols which would streamline the dispatch process and in some cases change the number and type of vehicles sent to a patient. While staff believes that this will result in a reduction in both ALS first responder and Ambulance responses, those assumptions are not relied upon in setting the levels of service.

7. While a uniformity of staffing and service delivery is desirable, the Authority finds that given the variation in access, traffic patterns and station placement, that some variation between providers and areas of the county is unavoidable.

8. The Authority also intends to exercise its authority to designate districts for the provision of services within the county in order to implement the levels of service established herein.

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PINELLAS COUNTY, FLORIDA in regular session duly assembled this 17th day of March, 2009, that:

Section 1. Based upon the specific legislative findings and, pursuant to its authority under the act, the Authority hereby, adopts the levels of service as set forth in the attachment to this resolution.

Section 2. The Authority recommends and encourages the EMS service providers consult with EMS Administration for assistance that may be available in developing deployment plans.

Section 3. The level of services set forth herein shall take effect on October 1, 2009.

In a regular meeting duly assembled this 17th day of March, 2009, Commissioner _____ offered the foregoing Resolution and moved its adoption, which was seconded by Commissioner _____ and upon call the vote was:

AYES:

NAYS:

ABSENT AND NOT VOTING:

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**PINELLAS COUNTY EMERGENCY MEDICAL SERVICES AUTHORITY
STANDARDS REGARDING LEVEL OF SERVICE**

Definitions:

ALS unit: A vehicle that is equipped as an ALS vehicle in accordance with Florida Law which is staffed, at a minimum, with one county authorized paramedic.

Authority: The Pinellas County Emergency Medical Services Authority.

Emergency means a dispatched response where the emergency vehicle utilizes its emergency lights and sirens in accordance with Florida law.

Response numbers shall include only those responses originating with emergency medical dispatches from the Pinellas County primary safety answering point.

Response time: The length of time between dispatch and arrival at the scene. Response time does not include call processing by dispatchers prior to dispatch.

Rescue Unit: A vehicle staffed with two paramedics used exclusively for emergency medical response which is equipped as an ALS vehicle as required by Florida Law as supplemented by Pinellas County regulations.

Service Area: The EMS district of the Provider as determined by the Authority.

Response Zone: The primary geographic area in which an authorized ALS unit responds as determined by the Provider and EMS Administration

I. AMBULANCE TRANSPORT STANDARD

Response Time of the Ambulance is longer by design in Pinellas County because we have an ALS First Responder Program. The standard accounts for customer service and when transport capability is needed to arrive. Ambulance emergency (10 Minutes) and downgraded emergency (20) minutes, 90% or greater.

II. ALS FIRST RESPONDER STANDARD

A. ALS first responders shall arrive at the scene within 7 minutes & 30 seconds at least 90% of the time. This standard shall be determined on a district-wide basis if the district is served by one provider, or across all the response zones of that provider if the district is served by multiple providers.

B. This standard shall not apply to the response zones within the East Lake Fire District. Because of the nature of the transportation system within this fire district a standard of ___% in _____ minutes is adopted. The EMS Administration is directed to work with the fire district to determine other means of decreasing the response time in an

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March 17, 2009

effective and cost efficient manner and shall periodically report to the Authority on the progress in decreasing response times.

C. Those calls where a response is initially dispatched as an emergency call, but is subsequently downgraded to non-emergency shall not be included in the calculation of response times.

III AREAS EXCLUDED FROM STANDARD

Remote Areas such as: off shore, Caladesi Island, Booker Creek Preserve, Fort Desoto Park, Courtney Campbell Causeway, Howard Frankland Bridge, Gandy Bridge, and the Sunshine Skyway Bridge or any other area where the EMS Administration finds that the time standards should be waived based upon response distance and low volume of calls.

Provider agencies may request that other areas be excluded from the response time standard for good cause. Any such waiver may be granted by EMS administration.

Any waivers issued by the EMS Administration shall be reported, no less frequently than on an annual basis to the Authority.

Response time standards may be suspended by the County Administrator or his designee during periods of declared emergency.

IV DETERMINATION OF STAFFING

Volume of responses per response zone	Type of unit/staffing
A. 0-5 Responses per Day	Single Paramedic ALS Unit only in Limited Access Areas
B. 5-10 Responses per Day	Single Paramedic ALS Unit
C. 10-15 Calls per Day	Rescue Unit or two Single Paramedic ALS Units
D. 15-20 Calls per Day	Rescue Unit and Single Paramedic ALS Unit
E. 20+ Calls per Day	Two ALS Rescue Units

In evaluating the need for additional rescue units the call volume shall be based upon all EMS responses and shall not be limited to those in the ALS unit's response zone or service area.

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In assessing the need for additional units, the calculation of calls per day is determined from annual statistics and are not to be based upon any other time frame unless otherwise approved by the Authority.

V Any provider of EMS services which believes that this methodology results in a reduction below the levels of service which existed as of January 1, 1989 may present evidence of the level of service it provided on that date for consideration by the Authority in its determination of appropriate level of service for the provider.

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March 17, 2009

RESOLUTION NO: 09-_____

**A RESOLUTION OF THE PINELLAS COUNTY
EMERGENCY MEDICAL SERVICES AUTHORITY
ESTABLISHING CRITERIA FOR THE DETERMINATION
OF REASONABLE AND CUSTOMARY COST OF
EMERGENCY MEDICAL SERVICE PROVIDERS IN
ACCORDANCE WITH THE REQUIREMENTS OF
CHAPTER 80-585, LAWS OF FLORIDA AS AMENDED.**

WHEREAS, The Florida Legislature in Chapter 80-585, Laws of Florida, as amended ("the Act"), established the Pinellas County Emergency Medical Services Authority ("Authority") which was subsequently approved by referendum of the electorate; and

WHEREAS, the Board of County Commissioners is established as the governing body of the Authority; and

WHEREAS, the Authority is obligated to provide funding for the reasonable and customary costs associated with the provision of emergency medical services; and

WHEREAS, the Authority is empowered to set the levels of service for all emergency medical services that must be met by EMS providers, provided that the service funded may not be lower than the minimum level of services for those providers which existed as of January 1, 1989; and

WHEREAS, the Authority previously funded EMS services through long term service agreements with various methods to determine costs of those services; and

WHEREAS, at its public work session held on February 24, 2009, the Board of County Commissioners, sitting as the Authority heard a comprehensive staff presentation regarding legislative history, system operations history, past and current methods of system financing, response statistics, dispatch standards and process and EMS needs in each of the 19 municipalities and fire districts which provide EMS first responder services; and

WHEREAS, given the varied distribution of population within Pinellas County; the nature of the transportation infrastructure; placement of fire stations, and the relationship between staffing and cost, it is important that the Board of County Commissioners exercise its legislative authority as the governing body of the Authority to

assess the need for EMS services throughout the county, evaluate the factors that go into determining the service levels and cost of providing those services and establish the service level which will be funded by the Authority to the various EMS providers.

Whereas, in support of the approvals herein, the Board of County Commissioners makes the following legislative findings:

1. The Authority currently contracts with 19 municipalities and independent fire districts to provide advanced life support first responder services. These services are financed through a county-wide ad valorem levy along with other system revenues with payment made to the various providers based upon negotiated contracts. In the past these contracts have allowed for certain automatic cost increases which did not always accurately track the cost of providing services.

2. That while there is no specific legal standard for response times for ALS first responders, by agreement, the providers in Pinellas County have agreed to a response standard where an ALS first responder will be on scene within 7 minutes and 30 seconds in 90 percent of emergency dispatches. This results in an average response time below this figure. All providers in Pinellas County currently exceed this standard which the Authority finds is the result of excess response capacity in the system. It is specifically noted that certain providers have determined to provide additional ALS first responder units at their own expense which provides a higher level of service than the Authority has previously funded and which contributes to the current excess response capacity of the system.

3. Due to certain changes in the law which effect the revenue generated by the EMS system the Authority finds it is in the public's interest to increase the efficiency of the system and to the extent possible, eliminate that excess capacity funded by the Authority to ensure the ability to finance the system on a sustainable basis without requiring regular increases in the tax rate borne by the citizens.

4. Under the system as now configured, given factors involving call volume, labor agreements and similar issues presented by staff, there is no way to equalize costs across various providers. At present the only way to fairly evaluate costs is through a thorough review of actual costs of the providers as submitted through a standardized budget submission process.

5. In order to increase efficiency of the system from a cost standpoint, it is crucial that the Authority be able to make a comparison of similar costs between providers. At present there is no standard form of reporting costs to the Authority.

6. In order to discharge its obligation to provide the reasonable and customary cost the Authority must have a line item budget from each provider which follows the same methodology.

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PINELLAS COUNTY, FLORIDA in regular session duly assembled this 17th day of March, 2009, that:

Section 1. Based upon the specific legislative findings above, the Authority, pursuant to its authority under the Act, adopts the criteria for determination of reasonable and customary costs as set forth in the attachment to this resolution.

Section 2. Unless otherwise stated, this Resolution shall take effect immediately upon approval and shall be used in determining funding for the fiscal year commencing October 1, 2009 and all years thereafter

In a regular meeting duly assembled this 17th day of March, 2009, Commissioner _____ offered the foregoing Resolution and moved its adoption, which was seconded by Commissioner _____ and upon call the vote was:

AYES:

NAYS:

ABSENT AND NOT VOTING:

**PINELLAS COUNTY EMERGENCY MEDICAL SERVICES AUTHORITY
CRITERIA FOR DETERMINING
REASONABLE AND CUSTOMARY COSTS**

A. ALLOWABLE COSTS

1. All ALS First Responder service providers are to submit a standardized line item budget solely for the purposes of ALS First Responder Services.
2. The EMS Administration shall adopt appropriate rules and regulations setting forth standard cost center/account definitions and implementation of those specific accounting requirements following GFOA standards. Such regulations shall also provide for cost center/account line item budget structure and definitions for allowable costs.
3. The budget process shall be in accordance with all applicable special laws and ordinances as codified in the Pinellas County code or as otherwise provided by law.
4. Those ALS first responder unit provided at the discretion of the provider and which are not funded by the Authority shall not be contained in the line item budget submitted for services to be funded.
5. Necessity of reserves. EMS funds shall only be utilized for the services contracted under the service agreement. To the extent that funds are received for capital or other items which are not currently expensed, such funds must be held in a reserve account.
6. Unspent excess ALS first responder reserves shall be returned to the Authority at level set by the Authority unless waived by the Authority.
7. Actual paramedic salaries (including overtime) for personnel assigned to staff authorized paramedic positions on ALS first responder units. Payroll detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account.
8. Actual paramedic benefits for personnel assigned to staff authorized paramedic positions on ALS first responder units. Cost detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account.
9. Benefits may include the following: pension/retirement contribution, disability, social security, group health/dental insurance, paid time off (holiday, sick, vacation), group life insurance, worker's compensation, and unemployment compensation.
10. Actual paramedic benefit costs incurred for personnel during actual hours while providing relief staffing for authorized paramedic positions on ALS first responder units. Cost detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account. Such amounts to be paid in arrears based upon reasonable evidence of expenditure.

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11. Such salary pay ranges and benefit costs shall be consistent with the costs incurred by the city or fire district for positions not funded by EMS.
12. Total hours of work by primary or relief staff does not exceed 8,760 hours (24 hours x 365 days) for any authorized paramedic position in any given fiscal year.
13. Actual cost of uniforms, uniform accessories, health screenings, and other protective equipment for personnel assigned to staff authorized paramedic positions on ALS first responder units.
14. EMS shall provide all EKG equipment, medical equipment, radios, computers, medical waste disposal for Authority funded ALS first responder units.
15. EMS shall provide all medical supplies for Authority funded units to ensure standardization.
16. Costs for vehicle insurance for Authority funded rescue units. Cities and fire districts are responsible for fire apparatus.
17. Costs for Professional Liability Insurance to the limits authorized by the EMS Authority. [*Limits and necessity of types of coverage are being evaluated given sovereign immunity limits and claim history.*]
18. Costs for State EMS license and vehicle permits for Authority funded units, certification costs for personnel assigned to staff authorized paramedic positions on ALS first responder units to include (state certification, ACLS, ITLS, etc.)
19. EMS shall provide or cause to be provided all continuing medical education (CME) training and training materials. CME shall be conducted on duty.
20. One (1) EMS Coordinator position (or partial position -25% of a Full Time Equivalent (FTE) for each unit for fire departments with less than four (4) Authority funded ALS first responder units. The actual salary and benefits are an allowable cost. Payroll detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account. Benefits may include the following: pension/retirement contribution, disability, social security, group health/dental insurance, paid time off (holiday, sick, vacation), group life insurance, worker's compensation, and unemployment compensation costs for the EMS Coordinator's uniform, protective equipment, certifications, and training consistent with Paramedic provisions.
21. One (1) Rescue Lieutenant (LR) position for every five (5) Authority funded Rescue Units continuously staffed. New LR Units must be approved by the Authority. The actual Salary and Benefits are an allowable cost. Payroll detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account. Benefits may include the following: Pension/retirement contribution, social security, disability, group health/dental insurance, paid time off (holiday, sick, vacation), group life

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insurance, worker's compensation, and unemployment compensation. Costs for the LR's relief staffing, uniform, protective equipment, certifications, and training consistent with Paramedic provisions.

23. EMS Administrative support positions must be approved by the Authority for only large agencies (more than 20 Authority funded paramedic positions). The actual salary and benefits are an allowable cost. Payroll detail and general ledger detail shall be assigned to the proper ALS first responder cost center/account. Benefits may include the following: Pension/retirement contribution, disability, social security, group health/dental insurance, paid time off (holiday, sick, vacation), group life insurance, worker's compensation, and unemployment compensation. Costs for the administrative support position's uniform, protective equipment, certifications, and training consistent with paramedic provisions for certified paramedics filling any such position.

24. Acquisition, operation, maintenance, fuel and replacement of Authority funded and approved rescue vehicles. A rescue vehicle is a vehicle, staffed by two paramedics and solely intended for use in emergency medical response and which is equipped as an advanced life support vehicle in accordance with state law and local rules. The useful life of rescue vehicles shall be a minimum of 5 years. Fire Departments may maintain a maximum of a 25% in reserve rescue vehicles.

25. Acquisition, operation, maintenance, fuel and replacement of Authority funded and approved EMS coordinator and LR Vehicles. The useful life of EMS coordinator and LR vehicles shall be a minimum of 7 years.

26. Actual cost of fuel for Authority funded ALS engines less 20% to account for non-EMS activity.

B. COSTS WHICH ARE NOT ALLOWABLE

1. The following are NOT "reasonable and customary" costs of providing ALS First Responder Services and are specifically disallowed:

2. Acquisition, Operating, Maintenance and Replacement Costs for:
 - a. Fire Helmets, Bunker Gear, Self Contained Breathing Apparatus
 - b. Fire Stations
 - c. Fire Apparatus
 - d. Contractor Funded Units
 - e. Extrication Tools and Equipment
 - f. Specialized Rescue Equipment
 - g. Fire Related Expenses
 - h. Expenses not specifically authorized as an Allowable Cost.

3. Miscellaneous overhead and indirect cost allocations associated with the city or independent fire district operating as an independent contractor including legal fees.

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C. EXCEPTIONS

If any provider of ALS First Responder services believes that certain items or classes of costs which represent the reasonable and customary costs required to deliver the level of service established by the Authority and which costs are disallowed above or by the EMS Administration during the budget review, such Provider may submit a request for consideration of these items to the Authority at the time the budget is submitted to the Authority for approval.

D. APPLICABILITY

To the extent possible the providers should submit their documentation in support of their budgets in the form above for the 2009-2010 budget year. Commencing in 2010, this format shall be mandatory.

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