



REGULATORY/ MEDICAL HEALTH SERVICES
EMERGENCY MEDICAL SERVICES

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September 7, 2016

To: EMS System Distribution

From: Tammi McConnell, MSN, RN, EMS Administrator 

Subject: **PROPOSED EMERGENCY MEDICAL SERVICES PROVIDER FEES**

This letter serves to advise you of the Orange County Health Care Agency's proposed changes of Emergency Medical Services provider fees (*attached*) and to request your review and written comments.

Recently, the Health Care Agency completed a comprehensive fee study of the Emergency Medical Services (EMS) Program to determine whether 1) current fees are sufficient to recover the reasonable costs of administering the respective programs; 2) current fees should be increased, maintained, reduced, or eliminated; and 3) additional fees should be sought. Fees for services provided by EMS were last revised in 2005.

This issue will be agendized at the October 7, 2016 meeting of the Emergency Medical Care Committee (EMCC) (*see below*) for discussion and recommendation to the Orange County Board of Supervisors. All written comments received on the proposed fees will be provided to the EMCC. In addition, you are welcome to attend the EMCC meeting and address this agenda item should you so desire. Written comments should be directed to Eileen Endo, Orange County Emergency Medical Services, 405 W. Fifth Street, Suite 301A, Santa Ana, CA 92701.

- Meeting: Emergency Medical Care Committee
- Date / Time: Friday, October 7, 2016, 9:00 a.m.
- Location: Hall of Administration - Commission Hearing Room
333 W. Santa Ana Blvd., Santa Ana, CA 92701

A public hearing on the proposed fees has been *tentatively* scheduled by the Board of Supervisors (*see below*). Should the hearing date be changed, a system announcement will be released.

- Meeting: Board of Supervisors Meeting
- Date / Time: Tuesday, November 22, 2016, 9:30 a.m.
- Location: Hall of Administration, 1st Fl. - Board Hearing Room
333 W. Santa Ana Blvd., Santa Ana, CA 92701

TM:ee
#2746

Attachment: EMS Provider Fees



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Attachment

Emergency Medical Services Provider Fees

CURRENT / PROPOSED

Title	Current Fee	Frequency	Proposed Fees		
			2017	2018	2019
Ambulance Company License	\$1,764	Annual	\$2,140	\$2,207	\$2,234
Ambulance Company Unit Inspection/per vehicle	\$150		\$153	\$158	\$160
Ambulance Company Unit Re-Inspection/vehicle	\$150	Variable	\$104	\$107	\$109
Ambulance Driver/Attendant License <i>New Title: EMT OC Accreditation</i>	\$40	Annual	\$82	\$84	\$85
Ambulance Driver/ Attendant License ¹	\$80	Biennial	DELETE		
EMT-1 Certification <i>EMT OC Certification</i>	\$35	Biennial	\$60 ¹	\$62 ¹	\$63 ¹
EMT Lost Card Replacement <i>New Title: Card Replacement</i>	\$23	Variable	\$25	\$25	\$25
EMT-P Accreditation (out of county) <i>New Title: Paramedic OC Accreditation</i>	\$62		\$69	\$72	\$73
Mobile Intensive Care Nurse Application	\$84	Biennial	\$103	\$107	\$108
Trauma Receiving Center	\$22,339	Triennial	\$8,818 ²	\$9,079 ²	\$9,185 ²
Continuing Education Provider Application ³		4 years	\$311	\$321	\$325
EMT Training Program Application ³			\$884	\$912	\$923
Paramedic Training Program Application ³			\$893	\$921	\$932
Interfacility Transport Service Provider Application ³		Annual	\$1,461	\$1,506	\$1,525
Emergency Receiving Center Designation ³			\$1,184	\$1,222	\$1,237
Pediatric Receiving Center Designation ³			\$8,716	\$8,988	\$9,098
Cardiac Receiving Center Designation ³			\$8,282	\$8,541	\$8,645
Stroke/Neuro Receiving Center Designation ³			\$9,923	\$10,233	\$10,358
Customized Data Report ³		Hourly	\$104	\$107	\$109

¹ Does not include State pass-through fee(s) (\$75 initial; \$37 recertification)

² Does not include ACS & hotel accommodation costs

³ New Fee for ongoing subsidies for which there have not been service fees