## Carson City Agenda Report

Date Submitted: November 23, 2015	Agenda Date Requested: December 3, 2015 Time Requested: 5 minutes	
To: Mayor and Board of Supervisors		
From: Carson City Fire Department		
Subject Title: For Possible Action: To adopt Bill No. 112, on second reading, Ordinance No, an ordinance amending the Carson City Municipal Code Title 5, Public Utility Franchises and Requirements, at Chapter 5.18.040—Fees and rates. The amendment adds a fee for Non-emergency Basic Life Support (BLS) ambulance service, at a base rate of \$295.00 per transfer. (Robert Schreihans, rschreihans@carson.org)		
<b>Staff Summary:</b> With the recent addition of a BLS ambulance at the Carson City Fire Department, a base rate for service needs to be established in order for fees to be billed.		
Type of Action Requested: (check one) () Resolution () Formal Action/Motion	(_X_) Ordinance – Second Reading () Other (Specify)	
Does This Action Require A Business Impact Statement: () Yes (_X) No		
Recommended Board Action: I move to adopt Bill No. 112, on second reading, Ordinance No		
the Carson City Fire Department, a billing provided. This new service p support emergency response, reducing workledlivery system. This service does not affect	tion: Due to the addition of the BLS ambulance at rocess must be established for the transfer service provides facility-to-facility transfer and basic life load on the current advanced life support ambulance at emergency rates of our current billing system. It is type of service, Carson City Fire Department must retransfer.	
Applicable Statute, Code, Policy, Rule or	Regulation: N/A	
Fiscal Impact: None		
Explanation of Impact: N/A		
Funding Source: N/A		
Alternatives: Do not approve the initiation of a fee		

Reviewed By: Robert Schreihans, Fire Chief

Reviewed By: Date: 1/23/15

| Date: 11/23/15 |
| Date: 11/23/15

Supporting Material: Carson City current ambulance fee and rate schedule

## CCMC 5.18.040 Proposed Amendments

EXPLANATION – Matter in **bolded italics** is new; matter stricken [omitted material] is material to be omitted.

## 5.18.040 - Fees and rates.

The fees for ambulance service provided by the city are as follows:

1. Advanced airway	\$ 115.00
2. ALS 1 base rate	990.00
3. ALS 2 base rate	1,100.00
4. <i>Emergency</i> BLS base rate	990.00
5. Non-emergency BLS base rate	295.00
6. SCT base rate	1,210.00
5 7. C-spine immobilization	85.00
<b>7</b> 8. Defibrillation	110.00
9. EKG monitor	102.00
9 10. IV administration	85.00
1011. Medication	110.00
11/2. Mileage/per mile	23.00
1213. Nitrous oxide	55.00
<del>13</del> 14. Oxygen	66.00
1415. Stand-by time (per 30 minutes)	82.00
1516. Treat at scene	198.00
Description of Charge for Service or Procedure	Rate
	(in dollars)

 $\begin{array}{l} (Ord.\ 2007-27\ \S\ 1,\ 2007:\ Ord.\ 2006-16\ \S\ 1,\ 2006:\ Ord.\ 2005-13\ \S\ 1,\ 2005:\ Ord.\ 2004-11\ \S\ 1,\ 2004:\ Ord.\ 2003-8\ \S\ 1,\ 2003:\ Ord.\ 2002-24\ \S\ 1,\ 2002:\ Ord.\ 1999-10\ \S\ 1,\ 1999:\ Ord.\ 1998-19\ \S\ 1,\ 1998:\ Ord.\ 1997-37\ \S\ 1,\ 1997:\ Ord.\ 1996-42\ \S\ 2,\ 1996). \end{array}$