

Memorandum



Date: July 24, 2007

To: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

From: George M. Burgess
County Manager

A handwritten signature in black ink, appearing to read "Burgess", written over the printed name of George M. Burgess.

Subject: City of Hialeah Fire Rescue Department Rate Increase Request

Agenda Item No. 14(A)(4)

RECOMMENDATION

It is recommended that the Board approve a request by the City of Hialeah to increase the City's Fire Rescue Department emergency medical services rate schedule. The requested schedule was approved by the City of Hialeah Council on April 11, 2007.

SCOPE

This proposed resolution affects the City of Hialeah.

FISCAL IMPACT/FUNDING SOURCE

There is no fiscal impact to the County.

TRACK RECORD/MONITOR

The Consumer Services Department (CSD) is responsible for regulating for-hire transportation, including ambulance services.

BACKGROUND

Chapter 4, Article I of the Code, relating to air and ground ambulances and emergency medical transport vehicles requires all owners and operators to file with the County Manager a schedule of the rates which will be charged for the transportation of persons in these units. Pursuant to Section 4-7 all rates shall be established by the Board after public hearing. No other rates may be charged except as provided in Section 4-7(a), which includes rates as may be determined by Federal law.

In 1997, Congress passed the Balanced Budget Act of 1997. A section of the Act mandated a change in the method that Medicare payments for ambulance transports are made, changing from a reasonable charge methodology to a fee schedule. The fee schedule was to be established by a negotiated rule making. The final regulation was published in the Federal Register on February 27, 2002. Under the new Medicare Ambulance Fee Schedule, ambulance/emergency medical services providers are paid at a pre-established fee for each different service provided. The fee schedule was implemented on April 1, 2002 and was phased-in over a five-year period which ended in April, 2006.

Concurrent with the publication of the final rule and fee schedule implementation, Fire Rescue departments and ambulance service providers conducted reviews of their emergency medical services rate schedules establishing revised rate structures. These are aligned in many cases with the transportation categories established under the Medicare Ambulance Fee Schedule for various levels of service: Advanced Life Support 1; Advanced Life Support 2; and Basic Life Support.

In 2003, the Board approved requests by the City of Miami, the City of Miami Beach and Miami-Dade to increase their Fire Rescue Departments emergency medical services rate schedule. Similarly, in October 2006, the Board approved a request by the Village of Key Biscayne Fire Rescue Department to increase its emergency medical services rate schedule.

The current fee schedule for the City of Hialeah Fire Rescue Department has been in place since 1996. The City of Hialeah has determined that its current fee schedule is well below industry standards and does not account for increases in the cost of fuel, staffing, health care supplies, and emergency vehicles since 1996. In addition, the City's Fire Rescue Department has recently implemented new state of the art equipment in its rescue units and needs to recoup the cost of certain consumables used during the treatment and transport of cardiac arrest patients.

The City is requesting a revised emergency medical services rate schedule for all transports, as approved by the City Council on April 11, 2007 (Resolution No. 07-36, attached), that mirrors the Miami-Dade County Fire Rescue Department (MDFR) rate schedule. The requested fee schedule change aligns the City's rates to be congruent with the rates of MDFR. In addition, the City's Fire Rescue rate schedule would be automatically adjusted to the MDFR rates every time these rates change. Finally, the schedule adds four rates for consumables associated with cardiac arrest.

The proposed schedule of rates per patient is as follows:

	Current Rate	Proposed Rate
Advanced Life Support (ALS)	290.00	N/A
Advanced Life Support 1 Transport (ALS1)	N/A	380.00
Advanced Life Support 2 Transport (ALS2)	N/A	490.00
Basic Life Support Transport (BLS)	175.00	330.00
Oxygen per tank or fraction thereof	25.00	30.00
Mileage, per mile or fraction thereof	7.50	7.50
IV/IO Solutions	25.00	25.00
Cardiac Monitoring	25.00	25.00
Cervical Collar	25.00	25.00
Backboard	25.00	25.00
Cardiac Arrest		
• Auto-pulse Life Band	N/A	175.00
• Rescue Pod	N/A	100.00
• Defibrillation Pads	N/A	100.00
• Bone Injection Gun Intra-osseous	N/A	100.00

The proposed schedule balances consumer and industry needs and will have minimal impact on consumers because ambulance transports are typically paid by Medicare, Medicaid and private insurance. In the case of the City of Hialeah approximately 30% of the collections are Medicare related; 14%, Medicaid; 32%, private insurance; and 24%, private pay. As for uninsured or underinsured patients who are unable to pay, it has been the policy of the City of Hialeah not to pursue payment and their outstanding balances are not collected.

The current Medicare maximum allowable reimbursement rates are: \$321.52 for BLS (emergency) trips, \$381.81 for ALS1 trips, and \$552.62 for ALS2 trips. Medicare pays 80% of the allowable rate, the other 20% represents the co-pay amount, which is to be submitted to the patient's secondary insurance, Medicaid (if applicable), or billed directly to the patient. Medicare will not pay more than their allowable rate regardless of the local fee structure. However, having a rate schedule that is less than the Medicare reimbursement rate schedule results in forfeiture of funds that could be legitimately be collected by the City from Medicare. The proposed rates impact on the out of pocket amount for Medicare clients is an additional \$29 for BLS trips, \$18 for ALS1 trips and \$40 for ALS2 trips.

The proposed rate increase will have no impact on Medicaid clients. Medicaid pays a flat rate of \$136 for BLS trips and \$190 for ALS trips regardless of whether ALS1 or ALS2. The provider cannot charge the difference to the client.

A comparison of ambulance and emergency medical service rates in Florida and in the nation is attached. The comparison provides an average of rates in Florida for each of the different categories, an average of rates in jurisdictions around the nation and a comparison of Florida/nationwide jurisdictions. The proposed rates are in line with the various rates around Florida and the nation. The requested rates are identical to those that were approved by the Board for the Miami-Dade Fire Rescue Department (MDFR) in 2003, plus the additional cardiac arrest fees not covered by MDFR.

The City's Fire Rescue Department operates eight ambulance units which provide about 7,500 ambulance transports a year. Six percent of the trips are BLS trips, 93% are ALS1 and 1% are ALS2. Last year, the City derived approximately \$1,900,000 in revenue from emergency transports. For this year, the City has projected approximately \$2,200,000 in revenue under the present rate schedule while the expenses associated with the provisions of these services are projected to be about \$2,900,000. The approval of the new schedule will help the City to close the gap between expenses and revenue.

Attachments



Roger M. Carlton
Assistant County Manager

Julio Robaina
Mayor

Esteban Bovo
Council President

Carlos Hernandez
Council Vice President



Council Members

Jose F. Caragol
Vivian Casals-Muñoz
Luis Gonzalez
Cindy Miel
Jose Yedra

City of Hialeah

April 24, 2007

Mr. Raul A. Gonzalez, Special Projects Administrator II
Miami-Dade County Consumer Services Department
140 West Flagler Street, Room #904
Miami, Florida 33130

Dear Mr. Gonzalez:

In an effort to continue providing the highest possible level of patient care and the cover costs associated with the Emergency Medical Services, it is essential to periodically reassess the rescue transport fee schedule established by the City of Hialeah Fire Department and on record with the Miami Dade County Consumers Services Department (CSD). The current fee schedule on record is as follows:

- Basic Life Support (BLS) \$175
- Advanced Life Support \$290
- Advanced Life Support 1 (ALS1) \$0
- Advanced Life Support 2 (ALS2) \$0
- Mileage \$7.50 per mile
- Supplemental Fees
 - Oxygen \$25
 - IV \$25
 - Cardiac Monitor \$25
 - Cervical Collar \$25
 - Backboard \$25

In 2003 Advance Data Processing Inc. (ADPI) performed a research study and found that the average cost for a larger system (i.e. more than 10,000 transports annually) was over \$800 per transport.

The current fee schedule is well below the industry standard and does not account for increases in the cost of fuel, health care supplies, and emergency vehicles. Furthermore, the City of Hialeah Fire Department is on the cutting edge of medical technology and in the forefront of patient treatment as specified by the American Heart Association.

The recent implementation of new state of the art equipment also necessitates that the Hialeah Fire Department recoup the costs of certain consumables used during the treatment and transport of cardiac arrest patients. Hialeah uses the Zoll Autopulse, a battery operated Circumferential Cardiac Compression machine which provides the highest levels of cardiac output in a cardiac arrest. This machine uses a single use, disposable band which has a cost in excess of \$175 per band. The Rescue Pod is also utilized by the City, and is a one way valve that is used in cardiac

Raul L. Martinez Government Center
501 Palm Avenue, Hialeah, Florida 33010-4719
www.hialeahfl.gov

4

arrest in conjunction with the Autopulse. This equipment prevents unnecessary air from rushing into the chest during chest decompression. The cost of the Rescue Pod is \$100. Additionally the use of the Bone Injection Gun (BIG IO), an intraosseous injection catheter that provides quick safe and secured IV line to the cardiac arrest patient. The BIG IO cost is \$100. In addition, the Zoll M-Series and the E-Series, cardiac monitors use special single use pads that cost nearly \$100.

The proposed fee schedule change is in accord with City of Hialeah Code § 38-2, which authorizes the adjustments of the city rates to be congruent with the rates of Miami Dade County Fire Rescue (MDFR) without further City Council action. The MDFR Units and the City of Hialeah Units are staffed, equipped, and dispatched in a similar manner. The City of Hialeah Code also provides for additional fees for services not covered by MDFR transport fee schedule. Therefore the proposed fee schedule is as follows:

- Basic Life Support (BLS) As per MDFR Fee
- Advanced Life Support 1 (ALS1) As per MDFR Fee
- Advanced Life Support 2 (ALS2) As per MDFR Fee
- Mileage As per MDFR Fee
- Supplemental Fees
 - Oxygen As per MDFR Fee
 - IV As per MDFR Fee
 - Cardiac Monitor As per MDFR Fee
 - Cervical Collar As per MDFR Fee
 - Backboard As per MDFR Fee
 - Cardiac arrest
 - Autopulse Life Band \$175
 - Rescue Pod \$100
 - BIG IO \$100
 - Defibrillation Pads \$100

Your attention and consideration of this request is greatly appreciated. Granting this request will allow the City of Hialeah to continue providing excellent service with highly trained and qualified personnel, state of the art equipment, and low response times. With the increased threat of terrorism, pandemic illness, and disaster response, communities have a greater interest in ensuring adequate funding for such valuable services.

Sincerely Yours,


Otto Drozd III
Fire Chief
Hialeah Fire Department

MA/OD/nc

RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF HIALEAH, FLORIDA AUTHORIZING THE MAYOR AND/OR HIS DESIGNEE TO SUBMIT A FIRE RESCUE TRANSPORT FEE CHANGE REQUEST TO THE MIAMI-DADE BOARD OF COUNTY COMMISSIONERS ACCORDING TO THE PROVISIONS OF THE CODE OF MIAMI-DADE COUNTY, FLORIDA, CHAPTERS 4-7 AMBULANCE AND MEDICAL TRANSPORTATION VEHICLES - RATES. FOR THE PURPOSE OF ADOPTING THE MIAMI-DADE COUNTY FEE SCHEDULE AS AMENDED FROM TIME TO TIME BY THE COUNTY WITHOUT FURTHER LEGISLATIVE ACTION PURSUANT TO HIALEAH CODE § 38-2.

WHEREAS, the City of Hialeah Fire Department serves as the provider of fire rescue transport services, and in order to comply with the provisions of the Code of Miami-Dade County, Florida, Chapters 4-7 Ambulance and Medical Transportation - Rates, the City of Hialeah seeks permission to adopt the County fee structure for fire rescue transport services; and

WHEREAS, Hialeah Code § 38-2 provides for the adoption and adjustment of city rates without further Council action, including rates based on County fees, as well as additional fees for services not charged or covered by the Miami-Dade Fire Rescue Transport Fee Schedule.

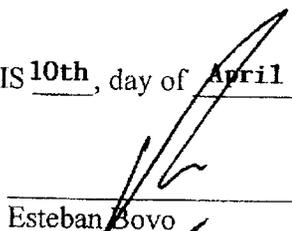
NOW, THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF HIALEAH, FLORIDA, THAT:

Section 1: The City of Hialeah, Florida hereby authorizes the Mayor and/or his designee to submit a Fire Rescue Transport Fee change request, to the Miami-Dade Board of County Commissioners, that will be based on the Miami-Dade County Fee Schedule, as amended from time to time.

RESOLUTION NO. 07-36

Page 2

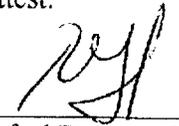
PASSED AND ADOPTED THIS 10th, day of April, 2007.



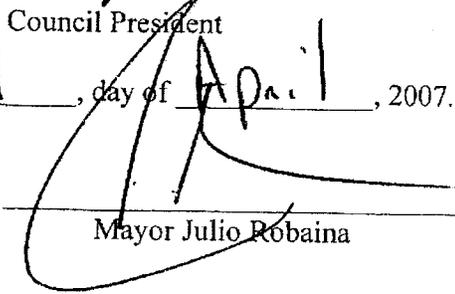
Esteban Bovo
Council President

Attest:

Approved on this 11, day of April, 2007.

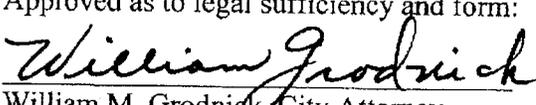


Rafael E. Granado, City Clerk



Mayor Julio Robaina

Approved as to legal sufficiency and form:



William M. Grodnick, City Attorney

S:\WMG\LEGISLATIVE\RESO\Reso - 2007\Submission of Fire Rescue Transport Fee Rate Chage.doc

Resolution was adopted by a unanimous vote with Councilmembers Bovo, Caragol, Casals-Muñoz, Gonzalez, Hernandez, Miel and Yedra voting "Yes".



**CONSUMER SERVICES DEPARTMENT
PASSENGER TRANSPORTATION REGULATORY DIVISION
OFFICE OF AMBULANCE REGULATION COORDINATION**

**PRIVATE GROUND AMBULANCE
UNIFORM RATE SCHEDULE**

(Effective June 30, 2006)

	BASIC LIFE SUPPORT	ADVANCED LIFE SUPPORT	BASIC LIFE SUPPORT - EMERGENCY
Base Rate (per trip**)	\$256.00	\$380.00	\$330.00
Mileage (per transport mile or fraction thereof)	\$7.50	\$7.50	\$7.50
Oxygen (per tank or fraction thereof including administration and supplies)	\$30.00	\$30.00	\$30.00
Waiting Time (per half-hour)	\$80.00	\$120.00	\$80.00
Special Handling	\$30.00	\$60.00	\$30.00
Disposable Items	At cost	At cost	At cost
* Rural – Homestead Hospital Indigent & Medicaid Patient Transports (prevailing Federal Medicaid flat rate)	\$136.00	\$190.00	N/A

*** Authorized 7/24/01 for inter-facility indigent and Medicaid transports to and from Homestead Hospital.**

** In accordance with Section 4-8(k) of the County Code: “The transportation of more than one patient in one ambulance vehicle shall be prohibited, except that this Section shall not apply to transportation pursuant to a contract between a certificate holder and Miami-Dade County or to transportation pursuant to direction by the fire chief having territorial jurisdiction.”

NOTE: Section 4-7 of the County Code provides that it is unlawful for any certificate holder to charge, demand, request, or accept any fare other than the rates established by the Board of County Commissioners except as may be provided by Federal law.

Section 4-7 of the County Code also provides that every ambulance shall have posted in a conspicuous place, readily visible to the occupants, a schedule showing all authorized rates.



**CONSUMER SERVICES DEPARTMENT
PASSENGER TRANSPORTATION REGULATORY DIVISION
OFFICE OF AMBULANCE REGULATION COORDINATION**

**PRIVATE AIR AMBULANCE
RATE SCHEDULE
(Effective 12/01)**

Private Hospital Based Intra-County Air Ambulance Company	Rate
Variety Childrens Hospital d/b/a Miami Childrens Hospital *	\$3,500.00
Base Rate, including all services and supplies	
Mileage, per loaded mile	\$30.00

*

In accordance with the County Code, before making an intra-county transfer, Miami Children’s Hospital must: 1) obtain certification from treating physician indicating ground transport would likely result in deterioration of patient’s condition, and 2) verify that Miami-Dade Air Rescue is unavailable or declines to transport patient.

NOTE: Section 4-7 of the County Code provides that it is unlawful for any certificate holder to charge, demand, request, or accept any fare other than the rates established by the Board of County Commissioners except as may be provided by Federal law.



**CONSUMER SERVICES DEPARTMENT
PASSENGER TRANSPORTATION REGULATORY DIVISION
OFFICE OF AMBULANCE REGULATION COORDINATION**

**FIRE RESCUE DEPARTMENTS – MIAMI-DADE COUNTY
RATE SCHEDULE**

Fire Rescue Department	Other Costs	Base Rates BLS	Base Rates ALS	ALS 1	ALS2	SCT**
City of Miami Fire Rescue (approved by BCC 7/22/2003)		\$330	N/A	\$390	\$550	\$650
Oxygen per tank or fraction	\$30					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$30					
Cardiac Monitoring	\$30					
Cervical Collar	\$30					
Special Handling*	\$30					
*Extrication, Anti-shock trousers, etc						
City of Miami Beach Fire Rescue (approved by BCC 10/7/03)		\$330	N/A	\$380.00	\$490.00	N/A
Oxygen per tank or fraction	\$30					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Intubation	\$25					
Backboard	\$25					
City of Coral Gables Fire Rescue		\$150	\$250			
Oxygen per tank or fraction	\$22					
Mileage, per mile or fraction	\$6.50					
City of Hialeah Fire Rescue		\$175	\$290			
Oxygen per tank or fraction	\$25					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Cervical Collar	\$25					
Backboard	\$25					
Miami-Dade Fire Rescue – Ground (approved by BCC 7/22/03)		\$330	N/A	\$380	\$490	\$600
Oxygen per tank or fraction	\$30					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Cervical Collar	\$25					
Backboard	\$25					
Miami-Dade Fire Rescue – Air		Not charging	Not charging			
Village of Key Biscayne Fire Rescue (approved by BCC 10/10/2006)		\$330	N/A	\$390	\$550	\$650
Oxygen	\$30					
Mileage, per mile or fraction	\$7.50					
IV Solution	\$30					
Cardiac Monitoring	\$30					
Cervical Collar	\$30					
Special Handling*	\$30					
*Extrication, Anti-shock trousers, etc						

** Specialty Care Transport



CONSUMER SERVICES DEPARTMENT
PASSENGER TRANSPORTATION REGULATORY DIVISION
OFFICE OF AMBULANCE REGULATION COORDINATION

In accordance with Section 4-8(k) of the County Code: "The transportation of more than one patient in one ambulance vehicle shall be prohibited, except that this Section shall not apply to transportation pursuant to a contract between a certificate holder and Miami-Dade County or to transportation pursuant to direction by the fire chief having territorial jurisdiction."

NOTE: Section 4-7 of the County Code provides that it is unlawful for any certificate holder to charge, demand, request, or accept any fare other than the rates established by the Board of County Commissioners except as may be provided by Federal law.

11

RESOLUTION NO. R-127-96

RESOLUTION APPROVING AN APPLICATION TO INCREASE
THE NUMBER OF ADVANCED LIFE SUPPORT GROUND UNITS
AUTHORIZED UNDER THE CITY OF HIALEAH FIRE
DEPARTMENT'S CERTIFICATE OF PUBLIC CONVENIENCE AND
NECESSITY AND A REQUEST FOR A RATE INCREASE

WHEREAS, this Board desires to accomplish the purposes outlined in the accompanying memorandum, a copy of which is incorporated herein by reference,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF DADE COUNTY, FLORIDA, that this Board, in accordance with Chapter 4 of the Code, approves an increase in the number of authorized Advanced Life Support (ALS) ground units to the City of Hialeah Fire Department's Certificate of Public Convenience and Necessity from eight (8) ALS units to eleven (11) ALS units and an increase in the vehicle transport rates.

The foregoing resolution was offered by Commissioner Bruce Kaplan, who moved its adoption. The motion was seconded by Commissioner James Burke, and upon being put to a vote, the vote was as follows:

James Burke	aye	Miguel Diaz de la Portilla	aye
Betty T. Ferguson	aye	Maurice A. Ferre	aye
Bruce Kaplan	aye	Gwen Margolis	aye
Natacha S. Millan	aye	Dennis C. Moss	aye
Alexander Penelas	aye	Pedro Reboredo	aye
Katy Sorenson	aye	Javier D. Souto	aye
Arthur E. Teele, Jr.	aye		

The Chairperson thereupon declared the resolution duly passed and adopted this 6th day of February, 1996.



DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

Approved by County Attorney
as to form and legal sufficiency. OKS

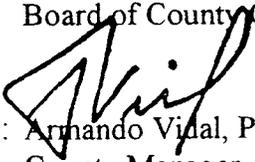
By: **KAY SULLIVAN**
Deputy Clerk



MEMORANDUM Agenda Item No. 7(Q)

Honorable Chairperson and Members
Board of County Commissioners

DATE: February 6, 1996

FROM: 
Armando Vidal, P.E.
County Manager

SUBJECT: City of Hialeah Fire Department's
Rate Increase and Vehicle Increase
Requests

RECOMMENDATION

It is recommended that the Board approve the City of Hialeah Fire Department's request for an emergency medical transport vehicle rate increase and application to increase the number of Advanced Life Support (ALS) ground transport vehicles authorized by their Certificate of Public Convenience and Necessity.

BACKGROUND

Chapter 4 of the Code, relating to ambulances and emergency medical transport vehicles, requires all owners and operators to obtain a Certificate of Public Convenience and Necessity. The Certificate contains authorization for the number of units owned and operated by the Certificate Holder. The Code also requires operators of these services to file with the County Manager a schedule of the rates which will be charged for the transportation of persons in these vehicles. All such rates and adjustments in number of vehicles shall be subject to approval by the Board after a public hearing and after recommendation by the County Manager.

The City of Hialeah Fire Department is requesting a rate increase for their emergency medical transport vehicles due to increased operational expenses and to have rates consistent with those approved by the Board and currently charged by Metro-Dade Fire Rescue, local private ambulance service providers and other municipal Fire Rescue departments. The City's current flat rate of \$250.00 per transport was approved by the Board in December, 1992. The schedule of rates being requested is as follows:

Advanced Life Support Transport	\$290.00
Basic Life Support Transport	175.00
Oxygen	25.00
Mileage, per mile	7.50
IV Solutions	25.00
Cardiac Monitoring	25.00
Cervical Collar	25.00
Special Handling (Extrication, antishock garment, intubation, traction splints, etc.)	25.00

Honorable Chairperson and Members
Board of County Commissioners
Page 2

The City is also applying to increase the number of ALS transport vehicles from eight (8) units currently authorized to eleven (11) units. The City's justification for the request is to better serve the community by having newer, roomier and more reliable front-line units and more spare vehicles. The results will be less wear and less frequent equipment breakdowns and unit swaps will be less time consuming. Also, the addition of these units will decrease City-wide response times. The City of Hialeah Mayor and City Council approved bid award #95-063 on October 24, 1995 to purchase the three vehicles. County approval is necessary before the State will issue permits to operate the vehicles.

In accordance with the Code, a law enforcement background check was conducted on the department director. The results were satisfactory. In addition, a notice of the City of Hialeah's application filing was transmitted to all County municipalities and Certificate holders. No objections were registered.

This item is being submitted for review by the Health and Public Safety Committee at their January 22, 1996 meeting.

Attachments

METROPOLITAN DADE COUNTY, FLORIDA

PUBLIC NOTICE

THE BOARD OF COUNTY COMMISSIONERS of Dade County, Florida will meet on Tuesday, the 6th of February, 1996 at approximately 2:00 p.m., in the County Commission Chambers, Second Floor, Stephen P. Clark Center, 111 N. W. First Street, Miami, Florida to consider the application by the City of Hialeah Fire Department to increase their number of emergency medical transport vehicles and a request for a vehicle transport rate increase.

A person who decides to appeal any decision made by the Board of County Commissioners with respect to any matter considered at its hearing, will need a record of the proceedings. Such person may need to ensure that a verbatim record of the proceedings is made including the testimony and evidence upon which the appeal is to be based.

HARVEY RUVIN, CLERK

KAY SULLIVAN, DEPUTY CLERK

GROUND TRANSPORT FEE SURVEY

JURISDICTION	ALS	ALS 1	ALS 2	BLS	IV		WAIT TIME	SPECIAL HANDLING			
					OXYGEN MILEAGE SOLUTIONS & SET	CARDIAC CERVICAL BACKBOARD/ INTUBATION					
MDFR	\$380.00	\$380.00	\$490.00	\$330.00	\$600.00	\$30.00	\$75.00	\$25.00	\$25.00	\$0.00	\$0.00
Miami Bch Fire Rescue	\$380.00	\$380.00	\$490.00	\$330.00	N/A	\$30.00	\$75.00	\$25.00	\$25.00	\$0.00	\$0.00
City of Miami Fire Rescue	\$380.00	\$390.00	\$550.00	\$330.00	\$650.00	\$30.00	\$75.00	\$30.00	\$30.00	\$0.00	\$30.00
Miami-Dade Private Company	\$380.00	see ALS	see ALS	\$256.00	see ALS	\$25.00	\$75.00	at cost	at cost	\$80-\$120/30 min	\$30-\$60
Current Hialeah Fire Rescue	\$290.00	see ALS	see ALS	\$175.00	see ALS	\$25.00	\$75.00	\$25.00	\$25.00	\$0.00	\$0.00
Village of Key Biscayne	\$390.00	\$390.00	\$550.00	\$330.00	\$650.00	\$30.00	\$75.00	\$30.00	\$30.00	\$0.00	\$0.00
City of Coral Gables Fire	\$250.00	see ALS	see ALS	\$150.00	see ALS	\$22.00	\$6.50	included	included	\$0.00	\$0.00

STATE OF FLORIDA	ALS	ALS 1	ALS 2	BLS	IV		WAIT TIME	SPECIAL HANDLING			
					OXYGEN MILEAGE SOLUTIONS	CARDIAC CERVICAL BACKBOARD/ INTUBATION					
Broward County, FL	\$360.00	\$360.00	\$480.00	\$330.00	n/a	\$26.25	\$7.25	NOTE 1	NOTE 1	NOTE 1	YES
Citrus County Emergency, FL	\$473.00	\$473.00	\$598.00	\$330.00	\$598.00	NOTE 1	\$7.50	NOTE 1	NOTE 1	NOTE 1	YES
Flagler County, FL	\$415.00	\$415.00	\$580.00	\$330.00	n/a	NOTE 1	\$7.50	NOTE 1	NOTE 1	NOTE 1	YES
Polk County	\$360.00	\$360.00	\$500.00	\$320.00	\$600.00	\$20.00	\$9.00	NOTE 1	NOTE 1	NOTE 1	YES
Halleandale, FL	\$500.00	\$500.00	\$500.00	\$500.00	n/a	NOTE 1	\$7.50	included	included	included	YES
Highlands County, FL	\$330.00	\$330.00	\$485.00	\$300.00	n/a	NOTE 1	\$7.50	NOTE 1	NOTE 1	NOTE 1	YES
North Lauderdale, FL	\$360.00	\$360.00	\$480.00	\$330.00	n/a	included	\$7.00	included	included	included	YES
Oakland Park, FL	\$350.00	\$350.00	\$480.00	\$350.00	n/a	NOTE 1	\$6.50	NOTE 1	NOTE 1	NOTE 1	YES
Okaloosa County, FL	\$340.00	\$340.00	\$480.00	\$340.00	n/a	NOTE 1	\$5.00	NOTE 1	NOTE 1	NOTE 1	YES
Tampa, FL	\$360.00	\$360.00	\$500.00	\$330.00	\$550.00	included	\$5.00	included	included	included	YES
Mount Dora, FL - Lake Sumptr	\$430.00	\$430.00	\$475.00	\$300.00	\$500.00	included	\$7.50	included	included	included	YES
Orange County, FL	\$280.00	see ALS	see ALS	\$280.00	n/a	included	\$6.00	included	included	included	YES
Monroe County, FL	\$352.61	see ALS	see ALS	\$352.61	n/a	included	\$7.14	NOTE 1	NOTE 1	NOTE 1	YES
Brevard County, FL	\$275.00	see ALS	see ALS	\$275.00	n/a	\$25.00	\$6.00	NOTE 1	NOTE 1	NOTE 1	YES
Palm Bch County, FL	\$340.00	\$340.00	\$450.00	\$300.00	n/a	NOTE 1	\$7.50	included	included	included	YES
Lauderdale Lakes, FL	\$350.00	\$350.00	\$480.00	\$350.00	\$550.00	NOTE 1	\$7.00	NOTE 1	NOTE 1	NOTE 1	YES
Jacksonville, FL	\$400.00	\$400.00	\$500.00	\$300.00	n/a	NOTE 1	\$5.00	NOTE 1	NOTE 1	NOTE 1	YES
Lauderhill, FL	\$375.00	\$375.00	\$480.00	\$280.00	n/a	\$25.00	\$6.50	NOTE 1	NOTE 1	NOTE 1	YES
Plantation, FL	\$360.00	\$360.00	\$480.00	\$330.00	n/a	\$25.00	\$7.00	NOTE 1	NOTE 1	NOTE 1	YES
Coral Springs, FL	\$350.00	\$350.00	\$475.00	\$300.00	n/a	NOTE 1	\$6.50	NOTE 1	NOTE 1	NOTE 1	YES
NOTE 1 - Additional charges for separate services											

OTHER AREAS JURISDICTION	ALS	ALS 1	ALS 2	BLS	IV		WAIT TIME	SPECIAL HANDLING			
					OXYGEN MILEAGE SOLUTIONS	CARDIAC CERVICAL BACKBOARD/ INTUBATION					
San Fran, Ca -King Amb	\$670.16	\$670.16	\$670.16	\$454.33	\$670.16	\$71.39	\$15.27	\$28.55	included	included	\$0.00
L.A. County, Ca	\$593.00	\$593.00	see ALS	\$386.75	n/a	\$45.50	\$13.00	\$58.00	\$32.00	\$35.50	\$0.00
Denver, Co	\$425.00	see ALS	see ALS	\$425.00	n/a	\$54.50	\$10.00	\$58.00	included	\$64.75	\$239.40
Detroit, MI Fire EMS	\$430.00	see ALS	see ALS	\$300.00	n/a	\$30.00	\$6.00	included	included	included	\$0.00
Dallas TX-City	\$320.00	see ALS	see ALS	\$320.00	n/a	\$50.40	\$7.40	\$73.37	\$47.23	\$56.40	\$42.00
Dekalb County, Ga	\$475.00	\$475.00	\$475.00	\$425.00	n/a	\$36.00	\$6.50	included	included	included	\$0.00
Natick, Mass-private	\$475.00	see ALS	see ALS	\$375.00	\$1,700.00	\$80.00	\$15.50	\$160.00	included	included	\$0.00
Las Vegas, Nevada	\$492.91	\$492.91	\$518.39	\$441.57	n/a	included	\$10.27	included	included	#####	\$0.00
San Diego, Ca-Rural Metro	\$449.23	see ALS	see ALS	\$336.72	n/a	\$74.00	\$11.15	included	included	included	\$150.00
Phoenix, Az	\$409.20	see ALS	see ALS	\$304.51	n/a	\$7.40	\$11.40	\$15.65	included	included	\$0.00
Piano, TX	\$330.00	see ALS	see ALS	\$330.00	n/a	\$30.00	\$7.00	\$183.38	included	included	\$0.00
AVG OTHER AREAS	\$460.86	\$546.02	\$554.52	\$372.63	\$7,185.08	\$44.97	\$10.32	\$86.49	\$92.41	\$52.22	\$140.70
AVERAGE MDC	\$351.43	\$385.00	\$520.00	\$271.57	\$633.33	\$27.43	\$7.36	\$27.00	\$27.50	\$25.00	\$38.33
AVERAGE FLORIDA	\$368.03	\$379.59	\$495.47	\$327.38	\$559.60	\$25.03	\$6.74	\$0.00	\$0.00	\$0.00	\$0.00
AVERAGE-FLA/OTHER	\$400.97	\$404.55	\$504.33	\$343.44	\$738.31	\$35.58	\$8.01	\$86.49	\$92.41	\$52.22	\$140.70

MIAMI-DADE COUNTY

PUBLIC NOTICE

THE ECONOMIC DEVELOPMENT AND HUMAN SERVICES COMMITTEE OF THE BOARD OF COUNTY COMMISSIONERS of Miami-Dade County, Florida will meet on Wednesday, July 18, 2007, at approximately 9:30 a.m. in the County Commission Chambers, Second Floor, Stephen P. Clark Center, 111 NW First Street, Miami, Florida to consider:

Resolution approving a request to increase the City of Hialeah Fire Rescue Department's authorized emergency Medical services rate schedule

A person who decides to appeal any decision made by the Economic Development and Human Services Committee of the Board of County Commissioners, with respect to any matter considered at its hearing, will need a record of the proceedings. Such person may need to ensure that a verbatim record of the proceedings is made including the testimony and evidence upon which the appeal is to be based.



MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: July 24, 2007

FROM: R.A. Cuevas, Jr.
Acting County Attorney

SUBJECT: Agenda Item No. 14(A)(4)

Please note any items checked.



- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 14(A)(4)
07-24-07

RESOLUTION NO. _____

RESOLUTION APPROVING REQUEST TO INCREASE
THE CITY OF HIALEAH FIRE RESCUE DEPARTMENT'S
AUTHORIZED EMERGENCY MEDICAL SERVICES RATE
SCHEDULE

WHEREAS, this Board desires to accomplish the purposes outlined in the accompanying memorandum, a copy of which is incorporated herein by reference,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board, in accordance with Chapter 4, Article I of the Code, approves an increase in the City of Hialeah Fire Rescue Department's authorized emergency medical services rate schedule.

The foregoing resolution was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Bruno A. Barreiro, Chairman	
Barbara J. Jordan, Vice-Chairwoman	
Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Carlos A. Gimenez
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 24th day of July, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

GKS

Gerald K. Sanchez