

Implementing Order



Implementing Order No.: IO 4-127

Title: FEE SCHEDULE FOR THE MIAMI-DADE FIRE RESCUE DEPARTMENT - EMERGENCY MEDICAL SERVICES

Ordered: 9/22/2011

Effective: 10/3/2011

AUTHORITY:

Sections 4.02 of the Code of Miami-Dade County Home Rule Charter.

POLICY:

This Implementing Order provides a schedule of fees for emergency medical and emergency transportation services and supplies provided or operated by the Miami-Dade Fire Rescue Department.

PROCEDURE:

The administration of this Implementing Order is designated to the Director, Miami-Dade Fire Rescue Department, who will be responsible for the collection of fees and the delivery of the required services. The Director shall review the contents of the implementing order annually and, if appropriate, make recommendations to the Board of County Commissioners for revisions or adjustments.

FEE SCHEDULE:

The fee schedule adopted by this Implementing Order is attached hereto and made a part hereof. This official fee schedule is also filed with and subject to the approval of the Board of County Commissioners and on file with the Clerk thereof. Fees that are charged by the County shall be the same as those listed in the official fee schedule on file with the Clerk of the County Commission.

This Implementing Order is hereby submitted to the Board of County Commissioners of Miami-Dade County, Florida.

Approved by the County Attorney as
to form and legal sufficiency _____

**MIAMI-DADE FIRE RESCUE DEPARTMENT
Emergency Medical Services Rate Schedule**

	Adopted 2012
Basic Life Support (BLS) (A0429)	\$800.00
Advanced Life Support 1 (ALS1) (A0427)	\$800.00
Advanced Life Support 2 (ALS2) (A0433)	\$900.00
Specialty Care Transport (A0434)	\$900.00
Ground Mileage (per transport mile or fraction thereof) (A0425)	\$15.00
Oxygen (per tank or fraction thereof)	\$30.00
IV / IO Solutions	\$25.00
Cardiac Monitoring	\$25.00
Cervical Collar	\$25.00
Backboard	\$25.00

These are the new rates that will generate approximately \$2 million annually for MDRF. Medicare (anyone over 65) and Medicaid (poor) patients will not pay one cent more and the federal and state reimbursements will not increase. The revenue will come from private insurance companies, not county residents. Uninsured residents accounted for less than 5% of the revenue collected annually.