

COAST LIFE SUPPORT DISTRICT

P.O. Box 1056, Gualala, CA 95445
Tel: (707) 884-1829 Fax: 884-9119

AGENDA
REGULAR MEETING OF THE BOARD OF DIRECTORS
>>> 3:00 PM Monday July 24, 2017 <<<
CLSD Headquarters – Bill Platt Training Room

- | | | |
|---|--------------|----------|
| 1. 3:00 Start: Call to Order | Hughes | |
| 2. Closed Session - deferred from June Meeting | Hughes | |
| a. District Administrator's semi-annual Performance Evaluation | | |
| 3. 3:30 Begin Open Session and report back from Closed Session | Hughes | |
| 4. 3:30 – 4:30 – Board Goal setting for FY18 | Hughes | |
| 5. 4:30 onward: Adoption of the agenda | Hughes | pg 1 |
| 6. Minutes Approval | Hughes | pg 2-5 |
| 7. Privilege of the floor | Hughes | |
| 8. New Business | | |
| 9. Old Business | | |
| a. Update Legal Services Agreement and Conflict Waiver with County Counsel – ACTION | Caley | pg 6-15 |
| b. Resolution No 248: Adoption of Ambulance Rates for FY18 – ACTION | Caley | pg 16 |
| i. See Level of Service document for rate definitions | | pg 17-21 |
| c. Resolution No 250: Prop 4 Appropriations Limit FY18 – ACTION | Caley | pg 22 |
| 10. Reports: | | |
| a. Finance: YTD | Beaty/Hughes | |
| i. Wittman ambulance revenue – FY17 Apr | | pg 23 |
| ii. Expenses – FY17 YTD | | pg 24-27 |
| b. Communication Committee | Bower/André | |
| c. MHA update | Tittle | |
| 11. DA report | Caley | |
| a. Ambulance run data | | pg 28-30 |
| 12. Adjourn | Hughes | |

NEXT MEETINGS: Scheduled Board of Director meetings are held at the Bill Platt Training Center unless otherwise noted.
Upcoming meetings are:
Aug 28, 2017
Sep 25, 2017
Oct 23, 2017



MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS
June 26th, 2017

Call to Order: Director Hughes called the meeting to order at 4:00 p.m. at the Bill Platt Training Room. Present: Directors: André, Bower, Beaty, Perry, and Schwartz. Also, present: District Administrator Caley, Ops Manager Evan Dilks, and Executive Assistant Robin Bean. Excused Absence: Director Tittle.

Adoption of the Agenda: Director Hughes requested we discuss Financial Reports first to accommodate Director Beaty. André moved to adopt the agenda and seconded by Director Hughes. All ayes.

Approval of May 22nd, 2017 Board Minutes: Director Beaty moved to approve the May 22nd meeting minutes and was seconded by Director Perry. All ayes.

Privilege of the Floor – Public Comment: No Comments from the public.

Reports:

a. Finance: YTD

- i. **Wittman ambulance revenue – FY17 May:** May gross charges \$142,371.40. Net receipts received for May. \$65,512.94.
- ii. **Expenses – FY17 YTD:** Expenses continue to be within budget.

b. P&L Actuals vs Budget: FY17 Report:

- i. Board of Directors reviewed the "P&L Actuals vs Budget" Report.
- ii. Director Beaty shared with the BOD the monthly ambulance runs for May (28) may be down but, at months' end, net payments were up.
- iii. CLSD transport volume remains ahead of projection, which are showing by end of year to be over 500.

- c. 180+ Day Aging:** DA Caley shared with the FC that after isolating the Medicare transports to RCMS in limbo, true A/R Balance is around ~\$410. EA Bean continues to make reducing the 180+ day aging (populating batches of aging claims for possible collections/write-off) a priority.

New Business:

- a. Resolution 250: Prop 4 Appropriations Limit FY18-INFO:** DA Caley introduced the Resolution to adopt the Proposition 4 Appropriation Limit for the FY 2017-18 as calculated by Sonoma County Treasurer's office in the amount of \$2,067,112. This Resolution will be voted on at the next BOD meeting.

Old Business:

- a. Resolutions 247, 248, 249:** DA Caley reviewed resolutions 247, 248, and 249 with the BOD and reviewed the following:
- Draft Resolution 247: CLSD Adoption of Preliminary Budget for Fiscal Year 2018
 - Updates/changes to the overall Budget (assessment of special tax rates, anticipated revenues, etc.).
 - The above RESOLUTION was introduced by Director Schwartz, who moved for its adoption, seconded by Director Beaty, and passed on this 26th day of June 2017 by the following roll call vote: Directors: AYES: Hughes, Beaty, Bower, Schwartz, Perry, André. ABSENT: Director Tittle. Total 6 (Ayes), 0 (Noes), and 1 (Absent).

- Draft Resolution 248: CLSD Adoption of Ambulance Rates for Fiscal Year 18
 - Director Perry moved to continue until next meeting to vote, and seconded by Hughes until they can review specific Level of Service definitions.
 - Draft Resolution 249: CLSD Adoption of Tax Rates for Fiscal Year 18
 - The Tax Rates for FY 18 remain unchanged from FY 17. Introduced by Director Perry, who moved for its adoption, seconded by Director Schwartz, and passed on this 26th day of June 2017 by the following roll call vote: Directors: AYES: Hughes, Beaty, Bower, Schwartz, Perry, André. ABSENT: Director Tittle. Total 6 (Ayes), 0 (Noes), and 1 (Absent).
- b. Update Legal Services Agreement and Conflict Waiver with County Counsel:** DA Caley received the revised updated Disclosure Letter and Advance Waiver of Potential Conflicts by the Board of Supervisors of Sonoma County. Director Hughes requested the Letter to be added to next month's agenda for approval at next BOD meeting.
- a. Board Goals – Update:** Director Hughes will provide updated goals one week prior to the next BOD meeting. He also requested the Directors prepare the Goal Planning session to be facilitated at the next BOD meeting at 3:30.
- b. EMS Appreciation BBQ:** CLSD and RCMS will be co-hosting an EMS Appreciation BBQ. Invitations have been sent out for our District's EMS First Responders, to be held on Friday Aug 18th from 5:30 – 8:00 pm.
- c. EMS Surveys: EMS Customer Survey:** The EMS Survey Team has mailed February, March, and April Customer Surveys. May's Customer Survey is currently in the works and will be sent in by the end of the month.

Communications Committee:

- a. Community Fall Prevention:** Director André shared with the BOD that the Fall Prevention Public Service Announcement Videos are in development. These will be used as a tool at trade fairs, senior lunches, etc. This video will be available on the CLSD website.

MHA update: deferred to next meeting (in absence of Director Tittle).

DA report:

- EMT Course completion:
 - 19 initially enrolled
 - 17 completed coursework
 - 17 passed their Practical Exams
 - Many thanks to Instructor Anthony Macedo, Heidi Horvitz (Timbercove FPD) Practical Exam logistics and coordination of many volunteers (local FD, CalFire, CLSD staff, CLSD Director Schwartz, Community volunteers, and make-up artist Starr Swindt)
 - We'll send a letter of recognition to MCOE thanking them for supporting this program in our community
 - Current budget reflects subsidy to instructor to help assure program sustainability (only paid teaching time and 1 hour prep) and lower costs of books/registration.
 - Hope to hire a couple of recruits from this class

- Thank you to Rich Hughes – provided a Supervisor’s Training to help implement the new Performance Management Review process. Performance reviews are now in progress.
- Healthy Habits – Steven Winningham (Aging in Place Mendonoma, and Community Fall Prevention Program Matter of Balance Coach, presented on “Letting Go of Myths of Aging”. DA attended to help reinforce information about our Number 1 reason for dispatch – Falls and benefits of the CFPP.
- EMS Appreciation BBQ: Reminder is Aug 18th at 5:30. Please RSVP to Robin (x 17).
- Thanks from the crew for the EMS Appreciation Week insulated bag and goodies (see note).
- Governmental Emergency Medical Transport update:
 - Accrued \$20,250 for FY 16
 - Received \$8,117 (Non-ACA reimbursement at 50%)
 - Remaining balance (ACA reimbursement at 100%) \$25,334
 - Total 33,451 (13,201 > expected)
 - Audited FY12 - \$7,600 overpayment – refunded
 - Audited FY13 - \$4,958 overpayment – refunded
 - Pending Audit FY10/11 (Q2-4) – estimated overpayment pending ~\$11,000
 - Pending Reimbursement dependent on Federal approval for FY9/10 and Q1 FY 10/11 = \$53,157 has been adjusted off the books at the completion of the recent audit.
- FYI: there is a Sonoma County Ambulance ordinance out for public comment drafted by CVEMS. This is similar to the one recently passed in Mendocino County. Sonoma County is currently pursuing a collective effort to regionalize the fire districts & VFD to assure efficient/effective and sustainable countywide service. Part of the ordinance may be premature awarding Exclusive Operating Areas. Thus, there is dialog to delay the ordinance until the regionalization process moves downstream. Supervisor Lynda Hopkins opposes it. I believe CLSD, a State and LAFCO established district on the far edge of the rural county, will not be in competition for an EOA.

Deployment / Staffing

- ALS (M-120) and second out BLS (B-121) was staffed 100% with the exemption of 12 hours BLS

Facilities

- Installation nearly complete on the Ambulance Bay exhaust system. Thanks to Evan, Joe, Ethan, and Matt – saved CLSD ~\$5,000
- Training room improvements—carpet arrived. Final design presentation this week. Execution will begin once finalized.
- Spare room in the bay cleared and will be converted to dual purpose – alternative sleeping space and spare office
- Improvements in progress in the bay area to improve inventory control and ordering

Vehicles/Equipment

- Three power gurneys and one power chair arrived – crews currently being trained and demos are being provided to local Fire Depts.
- New Cardiac monitor already in service

Community events / Training

- Goldie Pounds continues to organize and develop the CPR and community programs.

- Initial round TSR employees trained for CPR / First Aid Training. Four classes scheduled (40-50 total).
- Survivors reunion... CLSD survivor crew and patient honored 5-25-2017 in Glen Ellen. Chris Ottolini, Bronwyn Golly, Scott Kwon, Paul Eaton (CAL Fire). Thank you to the ICO publishing the story.

Next Board of Directors Meeting July 24th:

- 3:00 – 3:30 - Closed Session: District Administrator's semi-annual Performance Evaluation
- 3:30 – 4:30 - Open Session: Board Goal Setting
- 4:30 – end - Regularly scheduled BOD meeting

Adjournment: at 5:06 pm. Director Perry moved for adjournment, Director Bowers seconded, all ayes.

- Monday, July 24th, 2017 to start 3:30 pm **Goal Setting / 4:30 – routine BOD meeting**
- Monday, Aug 28th, 2017
- Monday, Sept 25th, 2017

Minutes Approved:

_____ (Date) _____

DRAFT

COUNTY ADMINISTRATION CENTER
575 ADMINISTRATION DRIVE,
ROOM 105A
SANTA ROSA, CALIFORNIA 95403

TELEPHONE: (707) 565-2421
FACSIMILE: (707) 565-2624

ASSISTANT COUNTY COUNSEL
ROBERT H. PITTMAN



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CORY W. O'DONNELL
TAMBRA CURTIS
LISA A. PHEATT
JOSHUA A. MYERS
HOLLY RICKETT
VERNE BALL
IAN TRUEBLOOD
ADAM BRAND
ELIZABETH COLEMAN WITH
LAUREN WALKER
PETRA BRUGGESSER
LESLIE A. THOMSEN
LESLEY A. PAH
CHRISTA L. SHAW
MICHAEL KING
KARA ABELSON
DIANA E. GOMEZ
ALDO MERCADO
MARIANNE GREENE
KATHERINE P. MCGRATH
NICOLAS R. OLIVER

July 5, 2017

David Caley, Administrator
Coast Life Support District
P. O. Box 1056
Gualala, CA 95445

Re: Updated Legal Services Agreement and Conflict Waiver with County Counsel


Dear David:

As you are aware, our office provides legal services to Coast Life Support District. Our records show that the Coast Life Support District last executed a legal services agreement with County Counsel on 10/30/06. Recent changes to the law necessitate that we update the Legal Services Agreement and associated waiver to meet current requirements.

Enclosed please find an updated Legal Services Agreement and Conflict Waiver. Please review these documents and have your Board formally approve both agreements. Once you have obtained Board approval, please return the fully-executed Legal Services Agreement and Conflict Waiver to my attention.

If you have any questions, please feel free to contact me at (707) 565-3310. Thank you in advance for your prompt attention to this matter.

Very truly yours,


Robert H. Pittman
Assistant County Counsel

RHP:kl

LEGAL SERVICES AGREEMENT

The Coast Life Support District ("District") and the County of Sonoma ("County"), acting by and through the Office of the Sonoma County Counsel ("Counsel"), enter into this agreement for legal services which shall become effective on the date set forth in Section 1. State law provides that Counsel will provide legal services upon District's request. (Government Code section 27645.)

1. Effective Date.

This Agreement shall be effective upon its signature by both parties, and shall continue in effect until terminated as specified in Section 9.

2. Scope of Services.

Counsel will provide legal services upon request of the District. Such services may include, but are not limited to, legal research and advice; preparation of legal documents such as contracts; representation in negotiations; and attendance at public meetings. District is retaining Counsel, not any particular attorney, and both Counsel and District agree that the attorney services to be provided to District will not necessarily be performed by a particular attorney.

3. Compensation for Services.

In consideration for Counsel's performance, District shall pay Counsel the amount determined to be the hourly cost to the County of providing such service which is determined every fiscal year when County adopts its annual budget. Such amount may be adjusted annually as of July 1 to reflect the actual cost of providing such services. In addition, District shall be billed for actual costs and reasonable expenses incurred by Counsel in providing service requested by District. The hourly rate for services of County Counsel for FY 2016/17 is \$254.

4. Billing and Payment.

Charges for services rendered pursuant to the terms and conditions of this Agreement shall be billed one month in arrears. Time will be billed in quarter-hour increments, rounded off for each particular activity to the nearest quarter-hour. The minimum charged for any particular activity will be one quarter hour. The time charged will include the time Counsel spends on telephone calls relating to District matters, including calls with District and other parties and attorneys. The legal personnel assigned to District matters may confer among themselves about the matter, as required and appropriate. When they do confer, each person will charge for the time expended, as long as the work done is reasonably necessary and not duplicative. Likewise, if more than one of the legal personnel attends a meeting or other proceeding, each will charge for the time spent. Counsel will charge for waiting time and for

travel time, both local and out of town. Payment shall be made by the District to Counsel at the address specified in Section 11 within thirty (30) days of the invoice date.

5. Authorized Representative of District.

The parties understand that Counsel has been retained to represent the interests of the District as a whole. In order to facilitate Counsel's representation of the District, District designates David Caley, District Administrator, as the authorized representative to direct Counsel and to be the primary person to communicate with Counsel regarding the subject matter of Counsel's representation of District under this Agreement. This designation is intended to establish a clear line of authority and to minimize potential uncertainty, but not to preclude communication between Counsel and other representatives of District. Should District desire to change the designated authorized representative, District shall provide Counsel with a District resolution that designates the name of the individual who shall act as the replacement authorized representative.

6. Responsibility of District.

District will be truthful and cooperative with Counsel and keep Counsel reasonably informed of developments and of District's address and telephone number.

7. Conflict of Interest.

No attorney shall be assigned to represent or advise District on any matter in which that attorney has a personal financial interest. In the event a conflict arises during the course of representation, Counsel shall take such steps as might be necessary to provide District with substitute counsel.

8. Representational Conflicts.

District understands that Counsel serves as the County's legal advisor and representative in all civil matters. Counsel also serves as the legal advisor for a number of other separate legal entities that are governed by the same five (5) individuals that sit as the Board of Supervisors for the County, such as the Sonoma County Water Agency, the Sonoma County Agricultural Preservation and Open Space District, the Community Development Commission, and others (hereinafter referred to as "Related Public Entities"). In addition, Counsel may, upon request, represent local governmental entities that are distinct from County government, such as joint powers agencies and independent special districts. From time to time, the interests of District may potentially conflict with the interests of the County or Related Public Entities, such as in a situation where the District and the County both require assistance of Counsel in negotiating a contract with each other, or with the interests of an independent special district. As required by the Rules of Professional Conduct, Counsel will take all steps possible to safeguard the confidential information of District in such situation. A copy of Counsel's internal policy governing the management of conflicts of interest is available to District upon request. Upon execution of this Agreement, District agrees to execute the Advance Waiver of Conflict attached hereto as Exhibit A, so that Counsel may continue to represent the County (or Related Public

Entities) and District in the absence of actual conflict. Further, should an actual conflict develop between District and County (or Related Public Entities), District expressly waives its right to disqualify Counsel from representing County (or Related Public Entities) in any matter involving District.

9. Termination and Withdrawal.

This Agreement may be terminated by District at any time by written notice to Counsel issued by District's Board. Counsel may withdraw at any time if required under the Rules of Professional Conduct of the State Bar of California. Counsel will retain all records in accordance with Counsel's adopted records retention schedule.

10. Modification.

If, during the term of this Agreement, it becomes necessary to amend or add to the terms, conditions, scope, or requirements of this Agreement, such amendment or addition shall only be made in writing upon the mutual agreement of Counsel and District.

11. Malpractice Insurance.

The Office of the County Counsel does not carry malpractice insurance. Because County Counsel attorneys are county employees, any claims for recovery for negligence would be covered by the County's self-insurance program and governed by the provisions of the Government Code.

12. Notices.

Notices regarding this Agreement may be delivered in person, by first class mail, or by fax, addressed to the following persons:

For the District:

David Caley, District Administrator
Coast Life Support District
PO Box 1056
38901 Ocean Drive
Gualala, CA 95445

For Counsel:

Office of the County Counsel
County of Sonoma
575 Administration Drive, Room 105A
Santa Rosa, CA 95403
Attn: Diana Gomez

13. Merger.

This Agreement contains the entire agreement of the parties. No other agreement, statement, or promise made on or before the effective date of this Agreement will be binding on the parties.

To the extent necessary, this agreement hereby rescinds, replaces and supersedes any existing agreement between the parties for legal services.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date set forth below.

COUNTY: The Office of the County Counsel

By: 
Bruce D. Goldstein, County Counsel

Date: 7/5/17

DISTRICT: Coast Life Support District

By: _____
David Caley, District Administrator

Date: _____

EXHIBIT A

COUNTY ADMINISTRATION CENTER
575 ADMINISTRATION DRIVE,
ROOM 105A
SANTA ROSA, CALIFORNIA 95403

TELEPHONE: (707) 565-2421
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COUNSEL**
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County Counsel

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LISA A. PHEATT	CHRISTA L. SHAW
JOSHUA A. MYERS	MICHAEL KING
HOLLY RICKETT	KARA ABELSON
	DIANA GOMEZ

Board of Supervisors
County of Sonoma
575 Administration Drive, Room 100-A
Santa Rosa, CA 95403

Board of Directors
Coast Life Support District
PO Box 1056
Gualala, CA 95445

RE: Disclosure Letter and Advance Waiver of Potential Conflicts

Dear Board members:

We are writing to make you aware of the duties and responsibilities that attach to County Counsel in our role as legal advisor to and representative of the County, the other separate legal entities that are governed by the Board of Supervisors, such as the Sonoma County Water Agency, the Sonoma County Agricultural Preservation and Open Space District, the Community Development Commission ("Related Public Entities"), and how those duties and responsibilities may be affected by our representation of those Related Public Entities and other public entity clients ("Independent Districts").

In addition to advising and representing the County and its officers, County Counsel is required by law (Government Code section 27645) to represent and advise special districts organized within the County where the governing board requests County Counsel to so act, and the governing board of the district is composed in whole or in part by members of the Board of Supervisors. In addition, by Government Code section 26520, County Counsel is authorized to render legal services to other local public entities (Independent Districts) upon request. From time to time, the interests of the County or other Related Public Entities may potentially or actually conflict with each other or with the interests of Independent Districts represented by County Counsel.

The California Rules of Professional Conduct (CRPC) require that we inform you of and obtain your written consent to our participation as counsel in transactions which present any potential for conflict of interest. To comply with these requirements, and to fulfill our ethical obligations to you, as the governing body of the County and the Related Public Entities, we hereby disclose to you the following.

We wish to make you aware of the various provisions in the CRPC and state law that govern our relationship with clients that have potential or actual conflicts.

CRPC 3-310(B) prohibits an attorney from "accept[ing] or continu[ing] representation of a client without providing written disclosure to the client where the member has or had a legal, business, financial, professional, or personal relationship with a party or witness in the same matter" This would include our relationship with our existing clients.

CRPC 3-310(C) prohibits an attorney "without informed written consent of each client [from] accept[ing] representation of more than one client in a matter in which the interests of [such] clients would actually conflict"

CRPC 3-310(E) prohibits an attorney "without the informed written consent of the client or former client, [from] accept[ing] employment adverse to the client or former client where, by reason of the representation . . . the [attorney] has obtained confidential information material to the employment."

Evidence Code section 962 provides that where two or more clients have retained an attorney upon a matter of common interest, information disclosed to the attorney in the course of representation on the matter will not be considered confidential from the other client in any civil proceeding that may develop between the clients as adversaries.

Examples of conflicts that may develop include

- If our representation pertains to the defense or prosecution of a lawsuit in which the County and another client are parties, it may subsequently develop that one client has rights against the other, or defenses that disadvantage the other client. We could not continue representing both parties should this occur, and may possibly be disqualified from representing either party.
- If our representation pertains to the negotiation of an agreement, it may develop that one or more terms of the agreement remain unresolved, are in dispute, or require further negotiations. A conflict could also develop, if an agreement is reached, over the meaning of one of the terms or the performance responsibilities of one of the parties.
- If our representation pertains to a negotiation of two clients with a third party, consummation of the transaction may require compromises that may benefit one client more than the other.
- One client may wish to prevent the attorney from sharing confidential information with the other client, or may issue instructions that are impossible to carry out without disadvantaging another client. Counsel may not be able to forcefully advance the County or Related Public Entities' position because to do so might disadvantage another client.

Although County Counsel will do its best to honor its duty of loyalty to each client and to respect client information as confidential, the following circumstances could arise:

- If our representation on a matter is deemed a joint representation by a court, information disclosed during the course of the representation would be available to the other party in any civil action between the two clients. We believe it is likely that our representation of two Related Public Entities would be considered a joint representation; however, the likelihood that a lawsuit would be filed between two such entities is extremely remote. Information would remain confidential from third parties even if there is no confidentiality between the two clients.
- Our Legal Services Agreement with independent districts provides that in the event of a dispute between the independent district and the County, County Counsel will continue as representative of the County and withdraw from representing the independent district. Further, the Agreement requires that the independent district waive its right to disqualify counsel in such event. It is possible, however, that a court may nevertheless agree that County Counsel should be disqualified in the interest of justice. The County or Related Public Entity would then need to engage separate counsel, which could result in additional cost.

We have done our best, in our agreements with outside agencies, to protect the interests of the County, Related Public Entities and Independent Districts. However, by executing this advance waiver, you are agreeing to waive our duty of loyalty, i.e., to remain conflict-free in our representation of the County and Related Public Entities. You are agreeing that you understand the various adverse consequences, as described above, which could occur because of the conflicts that could arise between our clients. We are happy to meet with you to discuss any questions you might have concerning the contents of this letter. We strongly believe that, in a transaction between the County and another client, despite divided loyalty, we can nevertheless be of great assistance to both clients in reaching a resolution that serves both their interests and the public good.

If you have questions that you are uncomfortable addressing with County Counsel, you may consult with an independent attorney before agreeing to execute this advance waiver.

Your signature below will acknowledge that the above information has been disclosed to you; that you have been advised of your right to seek the advice of independent counsel; that you have had a reasonable opportunity to consider this waiver, to ask questions, and to seek any advice you deemed necessary; and that you have decided to engage County Counsel notwithstanding any potential conflict or actual conflict, present or future, of the nature discussed in this disclosure letter.

Very truly yours,


Bruce Goldstein, County Counsel

AGREED AND ACCEPTED:

Sheryl Bratton, County Administrator

Date

David Caley, District Administrator

Date

**COAST LIFE SUPPORT DISTRICT
RESOLUTION No. 248**

ADOPTION OF AMBULANCE RATES FOR FISCAL YEAR 2018

WHEREAS, the Coast Life Support District last adjusted the rates at which Ambulance Services are billed in June of 2016, and

WHEREAS, with the passage of AB 2091 Berg, as of January 1, 2007, the District may charge Residents and Taxpayers of the District a Fee for Service Rate less than that of Non-Residents and Non-Taxpayers, and

WHEREAS, the District recognizes the disparity between what a Resident/Taxpayer actually pays for services versus what a Non-Resident/Non-Taxpayer pays, by their parcel tax contribution, and

WHEREAS, as Resident/Taxpayer is defined as either having a mailing address within the District or owning property within the District or both,

BE IT THEREFORE RESOLVED that the rate schedule adopted, effective July 1, 2017 and in effect until changed by resolution, be as follows:

<i>Service</i>	<i>BLS</i>	<i>ALS I</i>	<i>ALS II</i>
Non-Emergency	\$1,381	\$2,726	
Emergency	\$1,887	\$3,258	\$3,814
Night	\$130	\$415	\$415
Mileage	\$36	\$36	\$36
Oxygen	\$162	\$162	\$162
EKG		\$227	\$227
Treat & Release	\$250	\$500	
Late Payment Fee	\$25	\$25	\$25

AND BE IT FURTHER RESOLVED, that Resident/Taxpayers will receive a fifty percent reduction of the balance owed after third-party payments, if any, and if that reduced balance is paid in full within sixty days.

AND BE IT FURTHER RESOLVED, that for transport of a Resident/Taxpayer which does not leave the District, the balance owed after third party payments will not exceed fifty percent of the sum of the applicable Treat & Release fee plus mileage charge.

AND BE IT FURTHER RESOLVED, that these charges be reviewed annually and changes included in the Budget for the following year.

The above RESOLUTION was introduced by Director _____, who moved for its adoption, seconded by Director _____, and passed on this 24th day of July, 2017.

WHEREUPON, the President declared the foregoing RESOLUTION adopted and SO ORDERED.

Naomi Schwartz, Secretary

Level of Service

It is the responsibility of the Biller to review the documentation on the Patient Care Report and determine the appropriate level of service that was provided to the patient. This is a very important step in the billing process. The level of service is determined in the following ways:

- Emergent Response VS Non Emergent Response
- The type of assessment that was provided (i.e. ALS or BLS)
- The type of interventions that were performed (i.e. ALS or BLS)
- The patient's chief complaint
- You must look at the whole picture to determine the level of service

Emergency VS Non-Emergency

An Emergency level of ambulance service depends upon how the ambulance was dispatched and how it responded. An Emergency is determined based on the information available to the dispatcher at the time of the call, using standard dispatch protocols.

Definition of Emergency

The patient's condition is an emergency that renders the patient unable to go to the hospital by other means. Emergency ambulance services are services provided after the sudden onset of a medical condition. Acute signs and/or symptoms of sufficient severity must manifest the emergency medical condition such that the absence of immediate medical attention could reasonably be expected to result in one or more of the following:

- Place the patient's health in serious jeopardy.
- Cause serious impairment to bodily functions.
- Cause serious dysfunction of any bodily organ or part.

The above definition has been extended to include responding immediately.

Emergency response means responding immediately at the BLS or ALS1 level of service to a 911 call or the equivalent in areas without a 911 call system. An immediate response is one in which the ambulance supplier begins as quickly as possible to take the steps necessary to respond to the call.

Non-Emergency

Medical Necessity

Ambulance services are covered in the absence of an emergency condition in either of the two general categories of circumstances that follow:

The patient being transported has, **at the time of ground transport**, a condition such that all other methods of ground transportation (e.g., taxi, private automobile, wheelchair van or other vehicle) are contraindicated. In this circumstance, "contraindicated" means that the patient cannot be transported by any other means from the origin to the destination without endangering the individual's health. Having or having had a serious illness, injury or surgery does not necessarily justify Medicare payment for ambulance transportation; thus a thorough assessment and documented description of the patient's current state is essential for coverage. All statements about the patient's medical condition must be validated in the documentation using contemporaneous objective observations and findings.

The patient is bed-confined before, during and after transportation. The definition of "bed-confined" means the patient must meet all of the following three criteria:

- Unable to get up from bed without assistance.
- Unable to ambulate.
- Unable to sit in a chair (including a wheelchair).

As stated in the bullet above, statements about the patient's bed-bound status must be validated in the record with contemporaneous objective observations and findings as to the patient's functional physical and/or mental limitations that have rendered him bed-bound.

Levels of Service

There are 6 levels of service that can be provided to the patient. ALS1 Emergency, ALS2 Emergency, BLSE Emergency, SCT (Specialty Care Transport), ALS Non-Emergency, BLS Non Emergency.

Advanced Life Support (ALS1) Level 1

An ALS ambulance has complex, specialized, life-sustaining equipment and, ordinarily, equipment for radiotelephone contact with a physician or hospital. Typically, this type of ambulance would require mobile coronary care units and other ambulance vehicles that are appropriately equipped and staffed by personnel trained and authorized to administer IVs, provide anti-shock trousers, establish and maintain a patient's airway, defibrillate the heart, relieve pneumothorax conditions, and perform other advanced life support procedures or services such as cardiac (EKG) monitoring. The ambulance must be staffed by at least two people, one of whom must be certified by the state of local authority as an EMT-Intermediate or an EMT-Paramedic.

ALS assessment is an assessment performed by an ALS crew as part of an **emergency response** that was necessary because the patient's reported condition at the time of dispatch was such that only an ALS crew was qualified to perform the assessment. An ALS assessment does not necessarily result in a determination that the patient requires an ALS level of service.

ALS Intervention – ALS Intervention: A procedure that is, in accordance with state and local laws, required to be furnished by ALS personnel. The service must be medically necessary to qualify as an intervention for payment of an ALS level of services.

ALS1 – ALS, Level 1 A0427: Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services, and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention. EMT-Intermediate scope includes but is not limited to:

- Administration of IV fluids (except blood or blood products).
 - **Note:** An unsuccessful attempt to perform an ALS intervention (e.g., endotracheal intubation was attempted, but was unsuccessful) may qualify the transport for billing at the appropriate ALS level provided that the intervention would have been reasonable and necessary had it been successful.
- Peripheral venous puncture.
- Blood drawing.
- Monitoring IV solutions during transport that contain potassium.

- Administration of approved medications, IV, Sub Q, sublingual, nebulizer inhalation, IM (limited to deltoid and thigh sites only).

Advanced Life Support (ALS2) Level 2

ALS2 – ALS, Level 2 A0433: Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services, and at least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion, excluding crystalloid hypotonic, isotonic and hypertonic solutions (dextrose, normal saline, or Ringer's lactate); by intravenous push/bolus or by continuous infusion excluding crystalloid hypotonic, isotonic and hypertonic solutions (dextrose, normal saline, or Ringer's lactate); or transportation, medically necessary supplies and services, and the provision of at least one of the following procedures:

- Manual defibrillation/cardio version
- Endotracheal intubation
- Central venous line
- Cardiac pacing
- Chest decompression
- Surgical airway
- Intraosseous line

Note: An unsuccessful attempt to perform an ALS intervention (e.g., endotracheal intubation was attempted, but was unsuccessful) may qualify the transport for billing at the appropriate ALS level provided that the intervention would have been reasonable and necessary had it been successful.

Note: Crystalloid fluids include fluids such as 5 percent Dextrose in water, Saline and Lactated Ringer's. Medications that are administered by other means, for example: intramuscular/subcutaneous injection, oral, sublingually or nebulized, do not qualify to determine whether the ALS2 level rate is payable. However, this is not an all-inclusive list. Likewise, a single dose of medication administered fractionally (i.e., one-third of a single dose quantity) on three separate occasions does not qualify for the ALS2 payment rate. The criterion of multiple administrations of the same drug requires a suitable quantity and amount of time between administrations that is in accordance with standard medical practice guidelines. The fractional administration of a single dose (for this purpose meaning a standard or protocol dose) on three separate occasions does not qualify for ALS2 payment.

Manual External Defibrillator units are used in conjunction with (or more often have inbuilt) electrocardiogram readers, which the healthcare provider uses to diagnose a cardiac condition (most often fibrillation or tachycardia although there are some other rhythms which can be treated by different shocks). The healthcare provider will then decide what charge (in joules) to use, based on proven guidelines and experience, and will deliver the shock through paddles or pads on the patient's chest. As they require detailed medical knowledge, these units are generally only found in hospitals and on some ambulances. In the United States, many advanced EMTs and all paramedics are trained to recognize lethal arrhythmias and deliver appropriate electrical therapy with a manual defibrillator when appropriate.

Cardioversion is a medical procedure by which an abnormally fast heart rate or cardiac arrhythmia is converted to a normal rhythm using electricity or drugs.

Endotracheal Intubation is a procedure by which a tube is inserted through the mouth down into the trachea (the large airway from the mouth to the lungs). Before surgery, this is often done under deep sedation. In emergency situations, the patient is often unconscious at the time of this procedure.

Central Venous Line is a long fine catheter with an opening (sometimes multiple openings) at each end used to deliver fluids and drugs. The central line is inserted through the skin into a large vein that feeds into a larger vein sitting above the heart, so that the tip of the catheter sits close to the heart. There are several veins that are suitable for access, and the line may be inserted above or below the collarbone, on the side of your neck, in your groin or at the front of the elbow. The actual skin entry site depends on which vein is used. The line that is inserted at the elbow is called a PICC (**P**eripherally **I**nserted **C**entral **C**atheter), and the lines that enter the shoulder or neck are called Central Venous Lines.

Cardiac Pacing is a temporary means of pacing a patient's heart during a medical emergency. It is accomplished by delivering pulses of electric current through the patient's chest, which stimulates the heart to contract. The most common indication for cardiac pacing is an abnormally slow heart rate.

Chest Decompression involves decompression of the affected chest cavity to release the pressure that has developed. Decompression can be achieved, with minimal risk, by the insertion of a 14 or 16 gauge needles into the second inter-costal space at the midclavicular line. The needle must be inserted superior to the rib because the intercostal artery, vein and nerve follow along the inferior portion of the rib.

Surgical Airway is also known as Cryothyroidotomy. The simplest technique is needle cricothyroidotomy. This involves placing a 12 gauge cannula into the trachea via the cricothyroid membrane. This will allow adequate ventilation for up to 45 minutes.

Intraosseous Line is the process of injecting directly into the marrow of the bone. The needle is injected through the bone's hard cortex and into the soft marrow interior. Often the antero-medial aspect of the tibia is used as it lies just under the skin and can easily be palpated and located. Anterior aspect of the femur and the superior iliac crest are other sites that can be used.

Basic Life Support Emergency (BLSE)

BLSE A0429 - is transportation by ground ambulance vehicle and the provision of medically necessary supplies and services, including BLS ambulance services as defined by the state. The ambulance must be staffed by an individual who is qualified in accordance with state and local laws as an EMT-Basic. These laws may vary from state to state or within a state. For example, only in some jurisdictions is an EMT-Basic permitted to operate limited equipment onboard the vehicle, assist more qualified personnel in performing assessments and interventions, and establish an IV line.

Emergency – When medically necessary, the provision of BLS services, as specified above, in the context of an emergency response. An emergency response is one that, at the time the ambulance provider or supplier is called, it responds immediately. An immediate response is one in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

Specialty Care Transport (SCT)

SCT A0434- is the interfacility transportation of a critically injured or ill beneficiary by a ground ambulance vehicle, including the provision of medically necessary supplies and services, at a level of service beyond the scope of the EMT-Paramedic. SCT is necessary when a beneficiary's condition requires ongoing care that must be furnished by one or more health professionals in an appropriate specialty area, for example, emergency or critical care nursing, emergency medicine, respiratory

Advance Life Support Non-Emergency

ALS Non-Emergency (ALS1 H-H) A0426-Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention. EMT Intermediate scope includes but not limited to:

- Administration of IV fluids (except blood or blood products).
- Peripheral venous puncture.
- Blood drawing.
- Monitoring IV solutions during transport that contain potassium.
- Administration of approved medications, IV, Sub Q, sublingual, nebulizer inhalation, IM (limited to deltoid and thigh sites only).

Basic Life Support Non-Emergency

BLS1 Non-Emergency A0428- Basic Life Support (BLS): Medically necessary transportation by ground ambulance vehicle and medically necessary supplies and services, plus the provision of BLS ambulance services. The ambulance must be staffed by an individual who is qualified in accordance with state and local laws as an Emergency Medical Technician-Basic (EMT-Basic). These laws may vary from state to state. For example, only in some states is an EMT-Basic permitted to operate limited equipment on board the vehicle, assist more qualified personnel in performing assessments and interventions, and establish a Peripheral Intravenous (IV) line.

BLS1 level of service would be used if the response was not immediate. You may see the patient transported to one of the following.

- Skilled Nursing Facility
- Residence
- Dialysis Center
- Clinic
- Scheduled appointment
- Hospital

**COAST LIFE SUPPORT DISTRICT
RESOLUTION No. 250**

**RESOLUTION OF THE BOARD OF DIRECTORS OF COAST LIFE SUPPORT
DISTRICT, STATE OF CALIFORNIA, ADOPTING THE PROPOSITION 4
APPROPRIATION LIMIT FOR THE FISCAL YEAR 2017-2018**

WHEREAS, each fiscal year a Proposition 4 limit must be established; and

WHEREAS, Proposition 111, Article XIII B, requires the Board of Directors of the Coast Life Support District to choose and adopt a certain method to increase this limit every year; and

WHEREAS, the Coast Life Support District had approved and adopted an Appropriation Limit for Fiscal Year 2016-2017 of \$1,983,632; and

WHEREAS, the Coast Life Support District has chosen the California Per Capita Personal Income and the Sonoma County Population Change Percentage factors in establishing the Proposition 4 limit; and

WHEREAS, the Board of Directors of the Coast Life Support District, now accepts the Sonoma County Treasurer's calculation for the Appropriation Limit to be \$2,067,112, based on sum of the tax income increase and the annual percentage change for the California Per Capita Personal Income which is 3.69% and the local population growth change which is 0.85%,

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the Coast Life Support District hereby adopts a new Appropriation Limit in the amount of \$2,067,112 for the Fiscal Year 2017-2018,

THE FOREGOING RESOLUTION was introduced by Director Schwartz, who moved its adoption, seconded by Director Bower, and then adopted by the following vote on the ____ day of July, 2017,

Directors:	Hughes	Aye	No	Abstain
	André	Aye	No	Abstain
	Bower	Aye	No	Abstain
	Schwartz	Aye	No	Abstain
	Beaty	Aye	No	Abstain
	Perry	Aye	No	Abstain
	Tittle	Aye	No	Abstain

Ayes: Noes: Abstain: Absent:

WHEREUPON, the President declared the foregoing RESOLUTION adopted and

SO, ORDERED

Naomi Schwartz, Secretary to the Board

**Coast Life Support District
Year to Date Report**

	A	B	C	D	E	F	G	H	I	J	K	L
	CHARGES	MCARE WRITE DOWNS	MCAL WRITE DOWNS	OTHER CONTRACTUAL WRITE DOWNS	NET CHARGES	PAYMENTS	REFUNDS	NET PAYMENTS	BAD DEBT WRITE OFFS	OTHER WRITE OFFS	ADJUSTMENTS	NEW A/R BALANCE
JULY '16	\$ 214,203.40	\$ 100,241.73	\$ 40,757.42	\$ 13,306.83	\$ 59,897.42	\$ 38,546.83	\$ -	\$ 38,546.83	\$ -	\$ 1,340.00	\$ -	\$ 601,927.15
AUGUST '16	\$ 210,141.00	\$ 100,470.04	\$ 42,856.02	\$ 2,020.79	\$ 64,794.15	\$ 62,639.13	\$ -	\$ 62,639.13	\$ 109,593.70	\$ 118.87	\$ -	\$ 494,369.60
SEPTEMBER '16	\$ 196,638.88	\$ 107,297.19	\$ 49,069.31	\$ 11,544.16	\$ 28,728.22	\$ 51,800.66	\$ -	\$ 51,800.66	\$ -	\$ 488.00	\$ 96.59	\$ 470,905.75
OCTOBER '16	\$ 196,349.32	\$ 102,512.05	\$ 24,756.58	\$ (47.90)	\$ 69,128.59	\$ 78,359.30	\$ -	\$ 78,359.30	\$ -	\$ -	\$ -	\$ 461,675.04
NOVEMBER '16	\$ 232,993.80	\$ 90,082.43	\$ 32,507.29	\$ 638.60	\$ 109,765.48	\$ 65,480.62	\$ -	\$ 65,480.62	\$ -	\$ 0.01	\$ -	\$ 505,959.89
DECEMBER '16	\$ 191,565.00	\$ 85,425.39	\$ 35,904.12	\$ 76.96	\$ 70,158.53	\$ 44,376.73	\$ 917.38	\$ 43,459.35	\$ 29,016.67	\$ 3,902.68	\$ -	\$ 499,739.72
JANUARY '17	\$ 295,900.10	\$ 135,364.56	\$ 31,435.52	\$ 10,840.81	\$ 118,259.21	\$ 76,233.22	\$ -	\$ 76,233.22	\$ -	\$ -	\$ -	\$ 541,765.71
FEBRUARY '17	\$ 181,704.60	\$ 66,854.12	\$ 54,733.20	\$ 13,899.32	\$ 46,217.96	\$ 48,692.55	\$ 8,002.56	\$ 40,689.99	\$ -	\$ -	\$ -	\$ 547,393.68
MARCH '17	\$ 231,975.80	\$ 130,377.38	\$ 48,901.17	\$ 1,832.80	\$ 50,864.45	\$ 58,969.91	\$ 2,000.00	\$ 56,969.91	\$ (727.00)	\$ 8,318.00	\$ -	\$ 533,997.22
APRIL '17	\$ 197,864.60	\$ 98,026.99	\$ 52,661.70	\$ 5,416.60	\$ 41,759.31	\$ 51,483.74	\$ -	\$ 51,483.74	\$ -	\$ 3,399.01	\$ -	\$ 520,473.78
MAY '17	\$ 142,371.40	\$ 79,566.61	\$ 38,383.20	\$ 1,337.00	\$ 23,084.59	\$ 65,743.42	\$ 230.48	\$ 65,512.94	\$ 32,757.37	\$ (0.01)	\$ 1,075.63	\$ 446,363.70
JUNE '17	\$ 256,096.60	\$ 112,883.94	\$ 42,393.70	\$ 5,226.27	\$ 95,592.69	\$ 32,541.83	\$ 220.32	\$ 32,321.51	\$ -	\$ -	\$ -	\$ 509,634.88
YEAR TO DATE TOTALS	\$ 2,547,804.50	\$ 1,209,102.43	\$ 494,359.23	\$ 66,092.24	\$ 778,250.60	\$ 674,867.94	\$ 11,370.74	\$ 663,497.20	\$ 170,640.74	\$ 17,566.56	\$ 1,172.22	
YTD PERCENTAGE OF REVENUE		47.46%	19.40%	2.59%	30.55%	26.49%	1.68%	26.04%	6.70%	0.69%	0.10%	
YTD PERCENTAGE OF NET REVENUE								85.25%				
Average Charges per month	\$ 212,317.04											
Average Payments per month	\$ 56,239.00											

Coast Life Support District
Profit & Loss Budget vs. Actual
July 2016 through June 2017

	Jul '16 - Jun 17	Budget	\$ Over Budget	% of Budget
Ordinary Revenue/Expense				
Revenue				
4000 - CLSD Special Taxes	1,595,393.61	1,573,279.00	22,114.61	101.4%
4100 - Interest Revenue	79.67			
4200 - Ambulance Revenue	748,141.08	535,576.00	212,565.08	139.7%
4400 - Miscellaneous Revenue	14,679.98	2,150.00	12,529.98	682.8%
4410 - Intergovernmentl Transport...	0.00	81,500.00	-81,500.00	0.0%
4420 - Ground Emerg Med Tran...	-4,639.70	10,000.00	-14,639.70	-46.4%
Gross Revenue	2,353,654.64	2,202,505.00	151,149.64	
Expense				
5000 - Wages and Benefits	1,068,410.67	1,073,990.00	-5,579.33	99.5%
6000 - Ambulance Operations	143,055.54	172,720.00	-29,664.46	82.8%
6700 - Overhead/Administration	175,516.02	190,561.00	-15,044.98	92.1%
7000 - Urgent Care	647,437.00	647,419.00	18.00	100.0%
8000 - Interest Expense	4,007.85	4,086.00	-78.15	98.1%
9500 - Depreciation Expense	81,713.82	80,794.00	919.82	101.1%
Total Expense	2,120,140.90	2,169,570.00	-49,429.10	97.7%
Net Ordinary Operating Surplus	233,513.74	32,935.00	200,578.74	709.0%
Other Revenue/Expense				
Other Expense				
Other Miscellaneous Expense	188.70			
Total Other Expense	188.70			
Net Other Revenue	-188.70	0.00	-188.70	100.0%
Net Operating Surplus	233,325.04	32,935.00	200,390.04	

1. HIGHER VOL/GROSS THAN EXPECTED
2. DONATIONS, CPR, AMER. CAP, REIMB. OF COLLECTIONS
3. COMBO OF SPECIAL TAXES, AMBULANCE REVENUE, CONTROLLED EXPENSES

Coast Life Support District
 Profit & Loss Budget vs. Actual
 July 2016 through June 2017

	Jul '16 - June '17	Budget	\$ Over Budget	% of Budget
Ordinary Revenue/Expense				
Revenue				
4000 - CLSD Special Taxes				
4001 - Mendocino County Taxes				
4004 - Mendocino Ambulance Tax	497,664.20	474,012.00	23,652.20	105.0%
4009 - Mendocino Urgent Care Tax	364,844.37	335,188.00	29,676.37	108.9%
4010 - Mendocino Special Tax	89,234.07	92,672.00	-3,437.93	96.3%
4001 - Mendocino County Taxes - Ot...	0.00	0.00	0.00	0.0%
Total 4001 - Mendocino County Taxes	951,742.64	901,852.00	49,890.64	105.5%
4002 - Sonoma County Taxes				
4024 - Sonoma Ambulance Tax	353,902.27	368,632.00	-14,729.73	96.0%
4029 - Sonoma Urgent Care Tax	289,748.70	302,795.00	-13,046.30	95.7%
Total 4002 - Sonoma County Taxes	643,650.97	671,427.00	-27,776.03	95.9%
Total 4000 - CLSD Special Taxes	1,595,393.61	1,573,279.00	22,114.61	101.4%
4100 - Interest Revenue	79.67			
4200 - Ambulance Revenue				
4201 - Amb Transport Billings				
4220 - Writedowns - Misc.				
4220 - Writedowns - Misc. - Other	-96,201.76	-40,000.00	-56,201.76	240.5%
Total 4220 - Writedowns - Misc.	-96,201.76	-40,000.00	-56,201.76	240.5%
4225 - Writedowns - MediCare/Cal	-1,703,461.66			
4201 - Amb Transport Billings - Other	2,547,804.50	575,576.00	1,972,228.50	442.7%
Total 4200 - Ambulance Revenue	748,141.08	535,576.00	212,565.08	
4400 - Miscellaneous Revenue				
4400 - Miscellaneous Revenue - Other	14,679.98	2,150.00	12,529.98	682.8%
Total 4400 - Miscellaneous Revenue	14,679.98	2,150.00	12,529.98	682.8%
4410 - Intergovernmentl Transport(IGT)	0.00	81,500.00	-81,500.00	0.0%
4420 - Ground Emerg Med Transport	-4,639.70	10,000.00	-14,639.70	-46.4%
Gross Revenue	2,353,654.64	2,202,505.00	151,149.64	
Expense				
5000 - Wages and Benefits				
5200 - Health Insurance	112,692.63	96,000.00	16,692.63	117.4%
5300 - Payroll Taxes Emplr Costs	32,424.50	31,057.00	1,367.50	104.4%
5350 - PERS Employer Costs	98,664.28	117,595.00	-18,930.72	83.9%
5405 - Administration Salaries				
5405.1 - Admin Salaries-Alloc/UC	-22,681.00	-22,681.00	0.00	100.0%
5405 - Administration Salaries - Other	203,462.97	188,779.00	14,683.97	107.8%
Total 5405 - Administration Salaries	180,781.97	166,098.00	14,683.97	108.8%
5410 - Ambulance Operations Wages	571,172.67	599,482.00	-28,309.33	95.3%
5430 - Extra Duty/Stipend Pay/DA	32,808.00	32,808.00	0.00	100.0%
5500 - Work Comp Insurance	39,866.62	30,950.00	8,916.62	128.8%
Total 5000 - Wages and Benefits	1,068,410.67	1,073,990.00	-5,579.33	99.5%
6000 - Ambulance Operations				

Coast Life Support District
Profit & Loss Budget vs. Actual
July 2016 through June 2017

	Jul '16 - June '17	Budget	\$ Over Budget	% of Budget
6030 - Med. Director Fee-non AHUC	37,800.00	37,800.00	0.00	100.0%
6040 - Dispatch Services	10,246.00	31,020.00	-20,774.00	33.0%
6100 - Station/Crew Expenses				
5100 - Uniforms & Med Tests				
5100 - Uniforms & Med Tests - Ot...	5,890.42	5,000.00	890.42	117.8%
6101 - Facility Repair & Maintenance	4,099.36			
6102 - Facility Furniture	184.65			
6110 - Supps, Rental, Clean, etc	12,980.27	21,800.00	-8,819.73	59.5%
6210 - Veh. Repair & Maintenance	21,861.92	15,000.00	6,861.92	145.7%
6240 - Vehicle Fuel	16,734.03	15,000.00	1,734.03	111.6%
6410 - Radios & Comm Equip				
6410 - Radios & Comm Equip - Ot...	2,551.49	8,100.00	-5,548.51	31.5%
6510 - Medical Supplies & Equip	28,344.93	28,900.00	-555.07	98.1%
Total 6100 - Station/Crew Expenses	92,647.07	93,800.00	-1,152.93	98.8%
6980 - Misc. Employee Train. Exps	2,362.47	10,100.00	-7,737.53	23.4%
Total 6000 - Ambulance Operations	143,055.54	172,720.00	-29,664.46	82.8%
6700 - Overhead/Administration				
6180 - Utilities	12,752.56	12,000.00	752.56	106.3%
6188 - Telephone	5,954.71	12,000.00	-6,045.29	49.6%
6300 - Insurance	16,259.00	16,350.00	-91.00	99.4%
6713 - Ambulance Billing	42,977.83	33,031.00	9,946.83	130.1%
6718 - Office Supp/Equip/Software				
6718.1 - Office Supplies	1,492.66			
6718.3 - Software	754.59			
6718 - Office Supp/Equip/Software - ...	2,869.57	5,300.00	-2,430.43	54.1%
Total 6718 - Office Supp/Equip/Software	5,116.82	5,300.00	-183.18	96.5%
6720 - Board Expenses	552.70	5,000.00	-4,447.30	11.1%
6730 - Consultants				
6734 - IT	6,488.80	6,750.00	-261.20	96.1%
6735 - EMS Survey	436.00	3,500.00	-3,064.00	12.5%
6737 - Financial/Bookkeeping	14,097.25	14,000.00	97.25	100.7%
6738 - Legal	19,101.25	10,000.00	9,101.25	191.0%
6740 - Audit	0.00	8,500.00	-8,500.00	0.0%
6741 - Tax Administration	10,301.51	10,345.00	-43.49	99.6%
Total 6730 - Consultants	50,424.81	53,095.00	-2,670.19	95.0%
6742 - Bank/Merchant Fees	2,567.16	1,000.00	1,567.16	256.7%
6755 - Property Tax Admin	14,092.78	27,785.00	-13,692.22	50.7%
6760 - Education/Professional Dev	11.50	2,500.00	-2,488.50	0.5%
6765 - Election Costs/Reserve	0.00	10,000.00	-10,000.00	0.0%
6770 - Dues, Subscrip, Membership	8,992.49	4,500.00	4,492.49	199.8%
6788 - Printing & Reproduction	856.03	2,000.00	-1,143.97	42.8%
6795 - Travel/Transportation	1,999.49	1,500.00	499.49	133.3%
6970 - Community Dev/Training	12,958.14	4,500.00	8,458.14	288.0%
Total 6700 - Overhead/Administration	175,516.02	190,561.00	-15,044.98	92.1%
7000 - Urgent Care				
7011 - Admin Salaries-Alloc to UC	22,681.00	22,681.00	0.00	100.0%

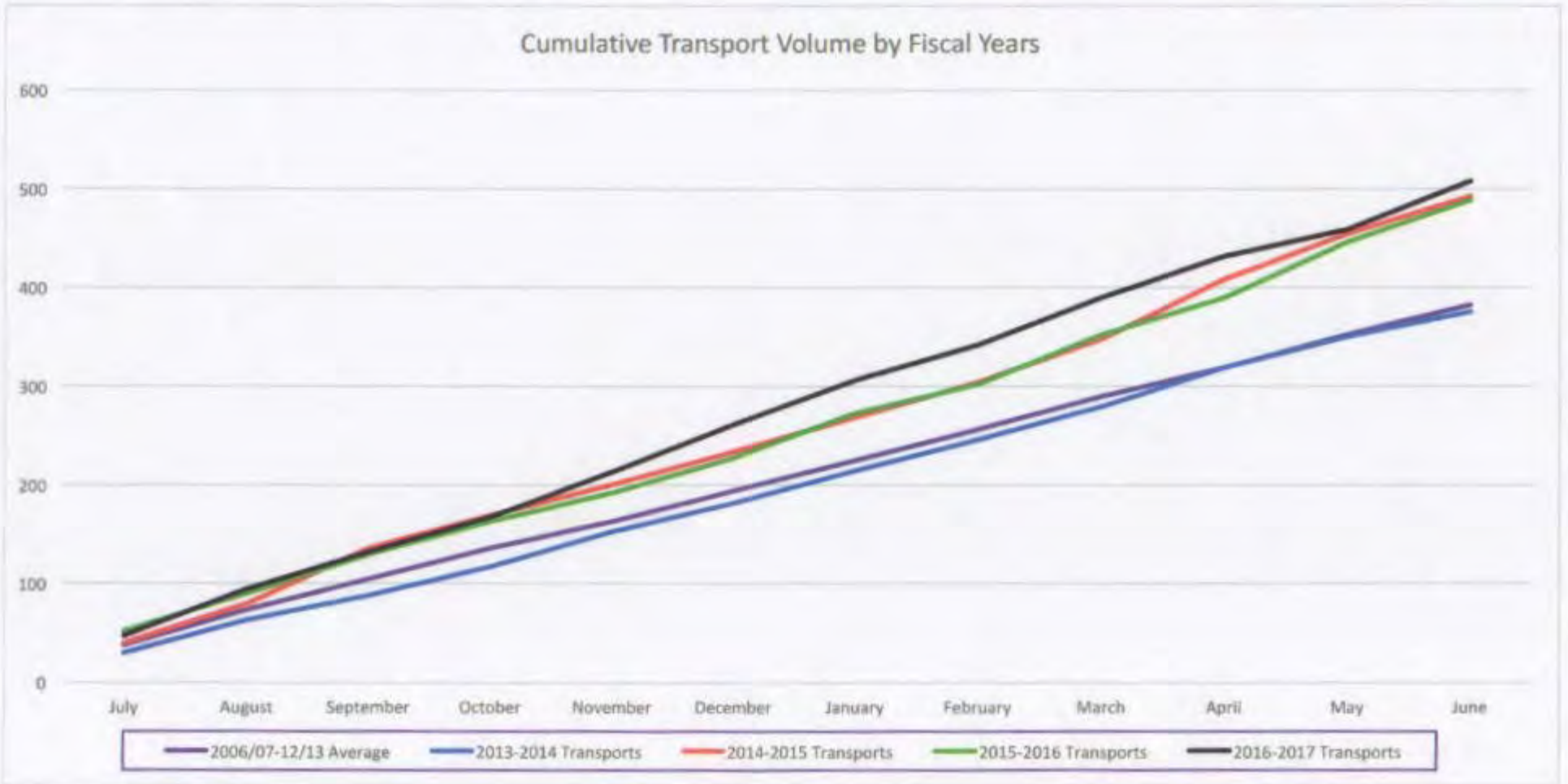
Coast Life Support District
Profit & Loss Budget vs. Actual
 July 2016 through June 2017

	Jul '16 - June '17	Budget	\$ Over Budget	% of Budget
7050 · UC Contract	624,756.00	624,738.00	18.00	100.0%
Total 7000 · Urgent Care	647,437.00	647,419.00	18.00	100.0%
8000 · Interest Expense - Other	4,007.85	4,086.00	-78.15	98.1%
9500 - Depreciation Expense	81,713.82	80,794.00	919.82	101.1%
Total Expense	2,120,140.90	2,169,570.00	-49,429.10	97.7%
Net Ordinary Operating Surplus	233,513.74	32,935.00	200,578.74	
Other Revenue/Expense				
Other Expense				
Other Miscellaneous Expense	188.70			
Total Other Expense	188.70			
Net Other Revenue	-188.70	0.00	-188.70	100.0%
Net Operating Surplus	<u>233,325.04</u>	<u>32,935.00</u>	<u>200,390.04</u>	

1. OTHER CONTRACTUAL/WRITE DOWNS, REFUNDS, OTHER WIRTE OFFS, ADJUSTMENTS
2. GROSS BILLINE
3. DONATIONS, CPR, AMER. CAP. REIMB. FOR COLLECTIONS
4. HSA CATCH-UP
5. ANNUAL PAYMENT
6. NEW HIRES
7. UNPLANNED REPAIR
8. COMMISSION BASED ON REVENUE
9. CONSULTATION
10. LOC FEES
11. LAFCO, CSDA ANNUAL
12. DA BUSINESS
13. CPR OVER-HAUL. (CPR CARDS, SUPPLIES), CREST MEETING, Community Program Development: EMR Fall 2016 EMT Winter/Spring 2017, EMS Appreciation Week.

Cumulative Transports	July	August	September	October	November	December	January	February	March	April	May	June
2006/07-12/13 Average	38	73	105	137	164	195	226	257	290	320	353	383
2013-2014 Transports	30	63	89	118	153	182	215	246	280	320	350	376
2014-2015 Transports	40	81	136	170	201	233	269	304	349	408	455	493
2015-2016 Transports	52	91	130	164	192	227	274	303	352	390	447	489
2016-2017 Transports	47	94	131	168	213	261	306	343	391	431	459	508

Cumulative Transport Volume by Fiscal Years



CLSD AMBULANCE RUN DATA (Month/Cumulative)

Monthly Transports	July	August	September	October	November	December	January	February	March	April	May	June
2006/07-12/13 Average	38	36	32	32	27	31	31	31	33	30	33	30
2013-2014 Transports	30	33	26	29	35	29	33	31	34	40	30	26
2014-2015 Transports	40	41	55	34	31	32	36	35	45	59	47	38
2015-2016 Transports	52	39	39	34	28	35	47	29	49	38	57	42
2016-2017 Transports	47	47	37	37	45	48	45	37	48	40	28	49

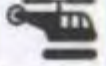

Monthly Transport Volume by Fiscal Years



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CLSD RUN DATA for the PRECEEDING 12 MONTHS

MONTH MOST CURRENT ON TOP	A/O		PCR		ALS		ALS>BLS		BLS		BLS>ALS		TOTAL		LANDING		DRY RUN		T&R		TO RCMS				FROM RCMS						
	AUTHORIZED		PATIENT		ADVANCED				BASIC				TRANSPORTS				CANCELLED				ALS		BLS		ALS		BLS				
	ORDER		CARE		LIFE				LIFE						ON		ROUTE														
DISPATCHED		RECORD		SUPPORT				SUPPORT																							
Current		Yr Prior		Current		Yr Prior		Current		Yr Prior		Current		Yr Prior		Current		Yr Prior		Current		Yr Prior		Current		Yr Prior		Current		Yr Prior	
17-Jun	99	90	61	63	33	26	4	6	16	16	2	2	49	42	7	8	28	18	15	23	2	1	1	0	6	3	10	4			
17-May	67	101	42	77	20	32	2	10	5	25	0	0	28	57	7	5	21	24	21	10	0	3	0	0	5	3	1	4			
17-Apr	84	91	58	60	27	34	2	4	13	14	1	4	40	48	4	8	23	23	18	12	2	1	0	0	10	6	6	6			
17-Mar	91	91	60	70	34	31	4	6	14	18	4	0	48	49	8	5	23	20	12	13	1	2	0	1	6	7	6	7			
17-Feb	72	59	53	47	28	18	3	8	9	11	1	0	37	29	3	4	13	12	16	10	4	1	0	0	4	2	3	0			
17-Jan	87	83	60	68	34	34	2	4	11	12	1	1	45	46	7	6	25	15	15	16	5	5	0	0	7	4	4	5			
16-Dec	95	67	92	57	32	29	6	3	18	6	3	2	48	35	7	5	25	10	10	14	4	2	1	1	3	4	4	0			
16-Nov	89	66	58	42	33	19	2	2	12	9	1	0	45	28	5	4	27	24	15	12	5	4	1	2	5	2	6	2			
16-Oct	83	72	57	50	24	28	4	2	13	6	1	1	37	34	6	7	22	22	20	16	3	4	0	0	2	5	5	2			
16-Sep	74	82	56	50	25	30	1	2	12	9	0	0	37	39	4	5	15	20	19	8	1	4	0	0	8	7	8	2			
16-Aug	90	78	61	61	35	31	3		12	10	2		47	41	8	10	23	14	10	16	6	5	1	3	6	8	5	2			
16-Jul	106	96	71	82	30	36	7	7	17	16	1	1	47	52	9	10	31	14	17	16	5	1	1	2	6	7	6	2			
	1037	976	729	727	355	348	40	54	152	152	17	11	508	500	75	77	276	216	188	166	38	33	5	9	68	58	64	36			
	A/O		PCR		ALS		ALS>BLS		BLS		BLS>ALS		TOTAL		LZ		DRY RUN		T&R		TO RCMS				FROM RCMS						

ALL SHADED COLUMNS ARE PREVIOUS YEAR DATA

Last update July 14, 2017

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