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| Signed Application Form and Attachments (original with five copies and correct fees) If applicant is a corporation or limited liability company (LLC), the following is also required: • Statement of Information • Articles of Incorporation (corporations) • Articles of Organization (LLC) • Certificate of Status | Application Instructions Section A 7.06.020 | X | | | Application for TransLife, Inc., dba TransLife Ambulance (TransLife) was received on 06/23/2011. On 10/03/2013 an updated application form was received. "Haigouhi Blikian" is identified as the TransLife's President and Chief Executive Officer (CEO) and "Peter Bkikian" is identified as TransLife's Vice-President and Chief Financial Officer (CFO). On the initially submitted application form (dated 06/15/2011), Ms. Blikian is identified as the sole corporate officer/director. The following corporate documentation for TransLife was received: A "Shareholder's Share of Income, Deductions, Credits, etc." document that shows "Haigouhi Blikian" having a 90% share of stock ownership and "Petros Blikian" having 10% share of stock ownership for tax year 2011. A copy of the Articles of Incorporation (dated 03/25/2008) certified by the SOS was received. A Statement of Information (dated 04/07/2008) certified by the California Secretary of State (SOS). On 02/27/2014, received the following TransLife documents: An amended Application for Ambulance Operator's License with "Haigouhi Blikian" identified as TransLife's CEO/President, and "Petros (Peter) Blikian" identified as TransLife's Vice-President/CFO/Billing Director. |

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| | | | | | TransLife's amended Statement of Information was also received, certified by the SOS. A copy of the Certificate of Status issued by the SOS for TransLife. A copy of a letter from the Internal Revenue Service (IRS) confirming that TransLife has been assigned an Employer Identification Number (EIN). |
| | Α٦ | TTACHMENT I | – FINANCIAL CA | \PABILIT\ | 1 |
| Financial Statements* (must be prepared by a Certified Public Accountant) Current (for the last two fiscal years) and/or pro forma (if new company) profit and loss statements Current Balance Sheet Current Bank Statement (3 months) Disclosure of all Liabilities Financial statement shall demonstrate that the applicant has adequate financial health, based on liquidity, profitability, and sustainability, to maintain ambulance service operations. | 7.16.050 (A) 1-3 | X | | | On 10/03/2013 the following financial documentation was submitted: A cover letter verifying that the financial statements for TransLife were compiled by a verified Certified Public Accountant (CPA). A Balance Sheet for the period 08/31/2013. A "Statement of Income and Retained Earnings for Eight Months" document dated 08/31/2013. On 10/09/2013 received an email from Rick Larson, TransLife General Manager with the following attachments: "Payments Journal By Pay Class" documents Bank statements from National Bank of California for the period of 07/01/2013 to 09/30/2013 and Wells Fargo Bank Statements for the period of 07/01/2013 to 09/01/2013. |

| AIVIDULANCE OPERATOR LICENSE APPLICATION SUIVINART | | | | | | | |
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| | | | | | The "Payments Journal By Pay Class" documents show a breakdown of payments by payor source; however, this breakdown must be included in the TransLife Balance Sheet prepared by a CPA. Additionally, financial statements must be current and cover a full twelve month period; therefore, at this time complete financial statements for the entire 2013 fiscal year (FY) and bank statements for the final quarter of the 2013 are required. On 02/18/2014, received an emailed request to extend the due date of the revised financial statements through 03/31/2014 due to the CPA workload secondary to tax season. Requested extension approved, submission of financial documents pending at this time. On 03/20/2014, received the financial statements for TransLife. It was noted that the revenue was not broken down by payor source; however, the financial documents were forwarded to the Financial Manager to begin the review process pending receipt of revised financial statements. Subsequently, the Financial Manager also requested an inquiry regarding a possible long term liability that was categorized as a current liability. Revised financial statements to address these issues were requested. On 04/22/2014, received TransLife's revised financial statements which were forwarded to the Financial Manager to complete the financial review and evaluation. | | |

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| Data showing estimated cost of | 7.16.050 | | INCOMPLETE | X | It was noted that the breakdown of revenue by payor source was listed as "Revenues from Insurance", "Medical Income" and "Medicare Income". It is unclear what is meant by "Medical Income" it appears that this may be "Medi-Cal" revenue. On 04/24/2014, received the Financial Manager's review of TransLife's financial statements stating: "Based on financial statements for calendar year 2013 along with corresponding bank statements; TransLife Inc., is not able to demonstrate that it has sufficient current assets to sustain operations as required by County ordinance as this company is running a deficit for 2013." Established company. Not required. |
| operating one trip/number of trips per day vehicle must run to be profitable; costs per trip should be itemized. Break-even type formulas may be used to show economic feasibility. | (A) 4 | | | | |
| | АТ | TACHMENT II | - EVIDENCE OF | SUPPOR | т |
| Evidence of Support Three (3) written statements, and/or Written notice of verbal testimony | 7.16.050 (C) | Х | | | On 10/03/2013 received ten (10) letters of support from the following individuals: Rhodora "Jane" Nepomoceno, RN, Assistant Director of Nursing – Topanga Terrace. Fanny Rodriguez – Administrator – Country Villa Sheraton Nursing and Rehabilitation Center. |

| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
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| | | | | | Marjory Luczon, Assistant Administrator – Chandler Convalescent Hospital. Jocelyn Poblete, Director of Nursing – Country South Healthcare Center. Connie Bergado, RN, Director of Nursing – Villa Oaks Convalescent Hospital. Evangeline Gilera, RN, Director of Nursing Services – Sycamore Park Care Center. Mark Shapiro, Administrator – Windsor Terrace Healthcare Center. Jerry Catama, Administrator – California Healthcare and Rehabilitation Center. Emma B. Camanag, Administrator – Western Convalescent Hospital. Susan A. Rifenbark, LCSW – San Fernando- West Kidney Center. |
| | ATTA | CHMENT III – F | PROPOSED RAT | E SCHED | ULE |
| Proposed Rate Schedule Current Rate Schedule Written Statement that General Public Rates will not be exceeded | 7.16.280 7.16.290 7.16.310 | X | | | A written statement signed by Haigouhi Blikian, President/CEO of TransLife was received (dated 06/01/2011) stating: "Trans Life, Inc. affirms that it will adhere to the maximum rates as specified in the County of Los Angeles General Public Ambulance Rates pursuant to Section 7.16.340. We also affirm that we will charge the allowable rate in cities that have rate ordinances that differ from the County of Los Angeles but will not exceed the rates set forth by Los Angeles County." |

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| | | | | | TransLife did not submit its rate schedule; a copy of the "County of Los Angeles General Public Ambulance Rates Effective July 1, 2013" from the EMS Agency was submitted. This document includes rates for "Response to call with equipment and personnel at an advanced life support (ALS) level" and "Automated external defibrillator (AED)". TransLife is not an approved ALS/Paramedic or AED provider in Los Angeles County; therefore such charges may not be included in the rate schedule. Additionally, charges related to Critical Care Transports (CCTs) (i.e. "Nurse critical care transport – per hour", Respiratory therapist for the first three hours", Infusion pump [per line], continuous positive airway pressure [CPAP], etc.). Pursuant to the County Code, Sections 7.16.100 (A) (7) and 7.16.040 (D), TransLife must have had a Critical Care Transport (CCT) program in place prior to 07/28/2011 in order to provide such services pending the processing of its application. If TransLife can demonstrate that it was performing CCT transports prior to 07/28/2011, it will be required to apply for approval as a Critical Care Transport (CCT) Provider as outlined in the Los Angeles County Prehospital Care Manual, Reference No. 414, Critical Care (CCT) Transport Provider (copy enclosed), within thirty (30) days of approval of an Ambulance Operator Business License. |
| | | | | | Documentation that TransLife was providing CCT |
| | | | | | level transports prior to 07/28/2011 was not submitted; therefore TransLife may not provide |

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| | | | | | CCT level services prior to approval as a CCT provider by the EMS Agency. On 02/27/2014, received TransLife's "County of Los Angeles General Public Ambulance Rate Schedule", signed by Haigouhi Blikian that states that TransLife will adhere to the County of Los Angeles General Public Ambulance Rate Schedule and never exceed the allowable rate. Charges for CCT and ALS level transports have been removed. |
| | ATTACH | MENT IV – INS | URANCE LIABIL | ITY COV | ERAGE |
| Insurance Liability Coverage A certificate or other evidence of insurance coverage confirming that applicant carries insurance with coverage and limits that are in accordance with the County Code. | 7.16.050 (G) 7.16.180 7.16.190 | X | | | The following insurance documents were received: Certificate of Insurance (COI) for General and Professional Liability Insurance from ARCH Insurance Company (expires 10/10/2014). COI for Automobile Liability (AL) Insurance from ARCH Insurance Company (expires 10/10/2014). TransLife's Vehicle Schedule for twelve (12) vehicles. A letter from Barrett Business Services, Inc. (BBSI) was received indicating that TransLife's worker's compensation coverage is provided through BBSI's state approved Self-Insured Worker's Compensation Plan. On 11/07/2013 the TransLife COI was forwarded to the CEO-Risk Management Branch for review and approval. On 12/20/2013, received approval from Risk Management of TransLife's insurance |

| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS coverage limits and AM Best rating. It was noted that the documentation of Workers' Compensation Insurance does not include coverage period and policy expiration date. On 02/27/2014, received a copy of a letter from |
|--|---------------------|--------------|-----------------------------|----------|--|
| | | | | | Barrett Business Services, Inc. (BBSI) indicating that TransLife's worker's compensation coverage is provided through BBSI's state approved Self-Insured Worker's Compensation Plan. TransLife's Worker's Compensation insurance coverage is effective 12/21/2013 to 12/20/2014. |
| | ATTA | CHMENT V - N | MAXIMUM RESP | ONSE TIM | MES |
| Maximum Response Times Written agreement to respond to requests for service within the County response time standards. | 7.16.050 (B) 1-2 | X | | | A written statement (dated 06/01/2011), signed by "Haigouhi Blikian", CEO/President, affirming TransLife's maximum response times was submitted; The document indicated that TransLife "affirms to respond to requests for service within the following County standards for maximum response times" as follows: • Emergency calls: urban areas = eight (8) minutes, rural areas = twenty (20) minutes, wilderness areas = as quickly as possible. • Critical Care Transport and non-emergency call maximum response time is ninety (90) minutes from the time of call, or scheduled pick-up, whichever applies. |

| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or | N/A | COMMENTS | | | | | |
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| ATTACHMENT VI – QUALIFIED MANAGEMENT | | | | | | | | | | |
| Organizational Chart Resume(s)/Curriculum Vitae(s) *Evidence that company has technically qualified managers. Evidence shall include manager's resume showing type/duration of transportation experience, including at least five years of increasingly responsible experience in the operation or management of a basic life support or advance life support service. | 7.16.050 (D) | X | | | An organizational chart was received that contained the names and titles of all TransLife managers. The following resumes were received: Haigouhi Blikian, President/CEO President/CEO, TransLife, Inc. (2008-present) Vice President, G&A Jewelry Manufacturing (1991-2007) Peter Blikian, Vice-President Billing Director/Vice President of Administration, TransLife, Inc. (2008-present). Structural Engineering Associate, Construction Manager, Street Improvement Division, City of Los Angeles Department of Public Works (2008-present). Structural Engineering Associate, Construction Manager, Bridge Improvement Program, City of Los Angeles Department of Public Works (2007-2008). Structural Engineering Associate, Design Engineer, Structural Engineering Division, City of Los Angeles Department of Public Works (2006-2007). Rick J. Larson, General Manager Title/position not provided, Medcare Medical Transportation (2010-2011). Vice President, Firstmed Ambulance Service (2007-2009). | | | | | |

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| | | | | | Title/position not provided, Jorgensen-Beard Partnership (1987-1997). Operations Director, American Medical Response (1996-1997). President, Adams Ambulance Service, Inc. (1995-1996). Vice President, Adams Ambulance Service, Inc. (1982-1995). David Molyneux, Field Operations Manager Field Operations Manager, TransLife, Inc. (2011-present). Communications Manager, TransLife, Inc. (2009-2011). Emergency Room Tech, Henry Mayo Hospital (2007-2008). Safety and Risk Manager/Operations Supervisor, Antelope Ambulance Service (2004-2007). Firefighter/Lead Paramedic III, Los Angeles City Fire Department (1982-2004). Emergency Medical Technician, Crippen Ambulance Service (1978-1982). Brigeli P. Westerband, MD, Medical Director Medical Director, TransLife, Inc. (date of employment not provided). Medical Director, Glendale Memorial Hospital and Health Center Emergency Department. Medical Director, FirstMed Ambulance (2008-present). Medical Director, MedLife Ambulance (2009-present). |

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| | | | | | Associate Director and Medical Staff, |
| | | | | | Glendale Memorial Hospital and Health |
| | | | | | Center (1999-2004). |
| | | | | | Emergency Department Medical Staff, Arcadia Methodist Hospital (1999-present). |
| | | | | | Emergency Department Medical Staff, Daniel |
| | | | | | Freeman Marina Hospital (1994-1998). |
| | | | | | Internal Medicine Private Practice, Honolulu Medical Group (1993-1994). |
| | | | | | Emergency Department Medical Staff, Warren Hospital (1992-1993). |
| | | | | | Emergency Department Medical Staff, Westlake Community Hospital (1988-1992). |
| | | | | | Internal Medicine Private Practice, |
| | | | | | Westerband MDs (1987-1992). |
| | | | | | The Organizational Chart did not identify who holds the position of "Medical Billing" and a resume for this position was not submitted. Additionally, the resume for Rick Larson did not include his current position and dates of employment with TransLife. Additionally, Mr. Larson did not state what title/position he had when he was working for Medcare Medical Transportation (2010-2011) and his title/position for Jorgensen-Beard Partnership (1987-1997). Further, the resume for Brigeli P. Westerband did not list her dates of employment as TransLife's Medical Director. |
| | | | | | On 02/20/2014, EMS Agency staff met with Rick Larson, TransLife's General Manager who clarified that Peter Blikian is the current Billing Manager for TransLife. |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
| | | | | | On 02/27/2014, received TransLife's revised Technically Qualified Management documents that included the following: TransLife's revised organizational chart that identifies "Peter Blikian" as the Billing Director for TransLife. A revised resume for Rick Larson, listing his current position as TransLife's General/Regional Manager (2011-present). Additionally, Mr. Larson included the requested missing portions of his resume; as Vice-President for Medcare Medical Transportation (2010-2011), and Vice President for Jorgensen-Beard Partnership (1987-1997). A revised resume for Brigeli P. Westerband, MD, including the requested documentation as TransLife's Medical Director (2011-present). A signed "Affirmation and Adherence" letter from Justin Frith stating that he would adhere to local, state, and federal laws and will continue to adhere to regulations on a continued basis. Received a "Notification of Personnel Change Form" for a change in Operations Manager from "David Molyneux" to "Justin Frith". This change was reflected in the new TransLife organizational chart; a resume for Mr. Frith was also received as follows: Justin Frith, Operations Manager Operations Manager, TransLife, Inc. (date of hire as Operations Manager not provided). |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
| | | | | | EMT, Dispatcher, F.T.O., TransLife, Inc. (2009-present). EMT, Ambuserve, Inc. (2006-2011). EMT, AmeriCare Ambulance Service (2005-2006). Motel Manager, Sierra Pelona Motel (2004-2006). Manager, Antelope Valley Radiator Service (2002-2005). Cashier, Wal-Mart (2001-2002). On 04/21/2014, received a revised resume for Justin Frith that identifies his date of hire as TransLife's Field Operations Manager on "05/01/2013 to present." However, an inconsistency was noted on the "Notification of Personnel Change Form" (received on 02/27/2014), which stated that Justin Frith replaced David Molyneux as the Operations Manager for TransLife on 01/24/2014. |
| Adherence to Rules and Regulations Affirmation (page 1) - Disclosure of whether applicant or management personnel has or has not ever: • Held any other licenses or franchises during the past ten (10) years. • Had a license revoked or denied | 7.16.050 (I) 1, 3 and 4 | X | | | Affirmation (page 1) Forms were submitted for most of TransLife's owners and management personnel. The Affirmation (page 1) Form for Haigouhi Blikian has both boxes checked suggesting that she both has and has NOT held licenses and/or franchises during the past 10 years. Additionally, a signed Affirmation (page 1) Form for the "Medical Billing" Manager was not submitted. |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | or INCOMPLETE | N/A | COMMENTS |
| | | | | | On 02/27/2014, received a revised Affirmation (page 1) for Haigouhi Blikian that states that she has not held licenses and/or franchises during the past 10 years. |
| Adherence to Rules and Regulations Affirmation (page 2) - Disclosure of whether applicant or management personnel has or has not ever: • Been investigated by any governmental agency • Been convicted of any misdemeanor or felony | 7.16.050 (I) 2-3 | X | | | Affirmation (page 2) forms were submitted for most of TransLife's owners and management personnel. The Affirmation (page 2) Form for Haigouhi Blikian has her name spelled as "Haigojhi Blikian". As previously stated, there should be consistency and accuracy in the spelling of the names of TransLife's owners and management personnel. Additionally, a signed Affirmation (page 2) Form for the "Medical Billing" Manager was not submitted. On 02/27/2014, received a revised Affirmation (page 2) Form for Haigouhi Blikian that states that she has not ever been investigated by any government agency and not ever been convicted. |
| Adherence to Rules and Regulations Written and signed agreement of ongoing adherence to all rules and regulations for applicant and management personnel. | 7.16.050 (I) | X | | | government agency and not ever been convicted of a misdemeanor or a felony. Written and signed agreements affirming ongoing adherence to all rules and regulations were received for most of TransLife's owners and management personnel. The individually signed statements state that TransLife's owners and management personnel, "affirms that TransLife, Inc. and myself will adhere to all local, state, and federal laws and will continue to adhere to the above regulations on a continued basis." |

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| ORDINANCE REQUIREMENT | KEF.# | SOBIMITIED | INCOMPLETE | IN/A | COMMENTS |
| | | | | | A written and signed agreement affirming ongoing adherence to all rules and regulations was not received for the "Medical Billing" Manager. On 02/20/2014, met with Rick Larson, General Manager, who clarified that Peter Blikian, Vice-President for TransLife is also the Billing Manager. On 02/27/2014, received a written and signed agreement affirming ongoing adherence to all rules and regulations for Justin Frith, Operations Manager for TransLife. |
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| | ATTACH | MENT VII – BU | ISINESS FACILIT | TIES / VEH | HICLES |
| Business Facilities Description of premises (including billing area and security measures to protect patient confidentiality) to serve as the base of operations and any other facilities or stations that deploy or house vehicles. | 7.16.050 (F) | X | | | Received a document (dated 05/29/2011) on TransLife letterhead, signed by Haigouhi Blikian, describing the company location in Van Nuys. The crews quarters are described as follows: |

| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
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| | | | | | description of how field personnel would hand off Patient Care Records (PCR) and other confidential information, the process of storing them to ensure patient confidentiality and the identification of the specific personnel that has access to the PCRs. On 02/27/2014, received TransLife's revised "Business Facilities" document that outlines TransLife's facilities and details the transfer and control of confidential patient information, Health Insurance Portability & Accountability Act (HIPAA) training for employees, consultants, and contractors. Additionally, the document mentions that only company executives and management have access to the secure areas where PCRs and other confidential information are stored. |
| Business Facilities Certificate of Zoning Compliance | 7.16.050 (I) 5 | X | | | In a signed letterhead describing TransLife's facilities, Haigouhi Blikian stated, "This facility is in a M1 zone so conditional use permits and zoning variances are not needed; This was verified by Building and Safety in Van Nuys" A certificate or other documentation of zoning compliance, issued by the approving authority for the City of Van Nuys was not received. On 02/27/2014, received a copy of a "Certificate of Occupancy" issued by the City of Los Angeles for TransLife's business address at: 7742 Gloria Avenue Van Nuys, California. |

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| OPPINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED | N/A | COMMENTS |
| ORDINANCE REQUIREMENT | KEF.# | SOBMILLED | or INCOMPLETE | IN/A | COMMENTS |
| Vehicles Unit number, license number, VIN, make, model year, model type, mileage, projected vehicle life and patient capacity for each vehicle to be licensed and documentation of the following for each: • Vehicle Registration • Odometer Testing and Certification • CHP Vehicle License • Most Recent CHP Inspection | 7.16.050 (F) 7.16.040 7.16.210 7.16.215 | X | | | A vehicle listing and vehicle registrations, odometer testing/certification, CHP licenses and CHP inspection reports were received for the following vehicles: • Unit #01 2008 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 101,383). • Unit #02 2008 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 90,563.3). • Unit #03 2008 (first placed in service in 2009) Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 84,821). • Unit #05 2009 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 69,681.1). • Unit #06 2009 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 64,817.7). • Unit #07 2009 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 59,526.3). • Unit #08 2010 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 22,185.1). • Unit #09 2010 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 4,777.7). |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS | |
| | | | | | Unit #11 2012 Ford Model (No additional information provided). | |
| | | | | | Patient capacity was not included on either listing submitted and as indicated above, full descriptions of Unit #10 and Unit #11 was not received. Additionally, although vehicle registrations, Odometer Testing and Certification, CHP vehicle licenses and most recent CHP Ambulance Inspection Reports were submitted, some of these documents have subsequently expired; however, Submission of updated vehicle documentation is not required at this time. Current vehicle documentation will be required prior to licensing of the vehicles. | |
| | | | | | On 02/27/2014, received an updated "TransLife Ambulance Vehicle List" for twelve (12) vehicles as follows: Unit #1 2008 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 178,050) Patient capacity: 2. Unit #2 2008 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 152,319) Patient capacity: 2. Unit #3 2008 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 172,054) Patient capacity: 2. Unit #5 2009 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 159,901) Patient capacity: 2. Unit #6 2009 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 160,241) Patient capacity: 2. Unit #7 2009 Ford Model E350 projected | |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | or | N/A | COMMENTS |
| ONDINANCE NEGOINEMENT | IXLI . # | SODIVITIED | _ | 13/7 | COMMENTS |
| | | | INCOMPLETE | | vehicle life of ten (10) years. (Mileage at time of application: 180,355) Patient capacity: 2. • Unit #8 2010 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 137,181) Patient capacity: 2. • Unit #9 2010 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 146,741) Patient capacity: 2. • Unit #10 2011 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 57,584) Patient capacity: 2. • Unit #11 2012 Ford Model E350 projected vehicle life of ten (10) years. (Mileage at time of application: 44,613) Patient capacity: 2. • Unit #14 2013 Chevrolet Model 3500 projected vehicle life of ten (10) years. (Mileage at time of application: 2,795) Patient capacity: 2. • Unit #16 2013 Chevrolet Model 3500 projected vehicle life of ten (10) years. (Mileage at time of application: 8,934) Patient capacity: 2. • Unit #16 2013 Chevrolet Model 3500 projected vehicle life of ten (10) years. (Mileage at time of application: 8,934) Patient capacity: 2. Although an updated TransLife vehicle list was received, it was noted that the DMV vehicle registration for Unit #14 was expired (exp. 10/31/2013). Submission of updated vehicle documentation is not required at this time; however, current vehicle documentation will be required prior to licensing of the vehicles. |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
| Vehicles Color scheme/insignia used to designate ambulances of applicant | 7.16.050 (H) | X | | | Color photographs of each of TranLife's ten (10) ambulance vehicles were submitted; however, the photographs submitted were only of one side for each vehicle. Hence, the full color scheme/insignia of TransLife's vehicles cannot be identified. Color photographs of the complete right, left, front and rear sides of a TransLife Ambulance Vehicle is required. On 02/27/2014, received color photographs of the left, right front and rear of a TransLife Ambulance vehicle. TransLife's vehicle color scheme is a white base color with a blue stripe going horizontally across the sides, front and rear of the vehicle with a single EKG tracing. The company name is placed on the left and right rear of the vehicle in red letters with an "EMS star" and "ambulance" is written on the blue stripe below the company name. |
| | АТ | TACHMENT VI | II – STATEMENT | OF WOR | K |
| Statement of Work Detailed description of area(s) within which applicant is proposing to operate Copy of CHP Operators License Results of most recent CHP inspection Copy of all current business licenses held by applicant | 7.16.050 (E) (I) 5 (J) | X | | | A "Proposed Operation" document was received that describes the services that TransLife intends to provide its customers. However, it does not give a detailed description of the specific area(s) within which TransLife is proposing to operate. Additionally, a "Business Plan" document was received that states "TransLife Ambulance is seeking to obtain a Los Angeles County EMS Agency Ambulance Provider Permit in order to allow us to more fully serve our client facilities." |

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| | | | | | However, this document does not provide a detailed description of the area(s) TransLife intends to operate. A copy of the most recent CHP Operator inspection (dated 06/05/2013) was received. The CHP Operators License that was submitted expired on 06/04/2013. On 10/03/2013 updated copies of Business Licenses were received for the following cities: Los Angeles (no exp. date, issued 04/15/2008) Santa Monica (06/30/2014) Glendora (05/01/2014) Simi Valley (12/31/2013) Beverly Hills (no exp. date) Palmdale (exp. 06/30/2014) Long Beach (exp. 01/01/2014) Downey (exp. 12/31/2013) Culver City (exp. 12/31/2013) Pasadena (04/30/2014) Lynwood (12/31/2013) West Hollywood (02/01/2014) Inglewood (12/31/2013) West Covina (12/31/2013) La Canada Flintridge (06/30/2014) Montebello (12/31/2013) |

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| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | PLEASE NOTE: The business licenses submitted with the original Application packet have not been included in this listing as they have all expired. Additionally, due to the length of time since the application update was submitted we are requesting that updated City Business Licenses, be submitted. On 02/27/2014, received a revised "Proposed Operation" document that outlines TransLife's days and hours of operation (twenty-four (24) hours a day, seven (7) days a week), and intends to expand to the City of Santa Clarita and City of Lancaster upon receiving a Los Angeles County Operators Permit. TransLife stated that they hold current business licenses and are operating in the following cities: City of Los Angeles City of Palmdale (exp. 06/30/2014) |
| | | | | | City of Pasadena (exp. 04/30/2014) City of Paramount (exp. 12/01/2014) City of Glendora (exp. 05/01/2014) City of Culver City (exp. 12/31/2014) City of Maywood (exp. 12/31/2014) City of Huntington Park (exp. 12/31/2014) City of West Covina (exp. 12/31/2014) City of Lakewood (exp. 06/30/2014) City of Lynwood (Renewal in Process) City of Hawthorne (Renewal in Process) City of Downey (exp. 12/31/2014) City of Montebello (exp. 12/31/2014) City of Beverly Hills (exp. 12/31/2014) City of Torrance (exp. 12/31/2013) |

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| | | | | | City of Signal Hill (exp. 12/31/2014) |
| | | | | | City of Inglewood (exp. 12/31/2014) |
| | | | | | City of Whittier (exp. 11/30/2014) |
| | | | | | City of Willtier (exp. 17/30/2014) City of Baldwin Park (exp. 11/30/2014) |
| | | | | | City of La Canada Flintridge (exp. 06/30/2014) |
| | | | | | 1 |
| | | | | | • City of Compton (exp. 02/25/2015) |
| | | | | | City of Santa Monica (exp. 06/30/2014) City of West Helbras ed (exp. 08/04/2014) |
| | | | | | City of West Hollywood (exp. 02/01/2014, Renewal in Process) |
| | | | | | City of South Gate (exp. 12/31/2014) |
| | | | | | City of Long Beach (exp. 01/01/2015) |
| | | | | | Oity of Long Beach (exp. 01/01/2013) |
| | | | | | A copy of TransLife's CHP Operator's License |
| | | | | | (exp. 06/04/2014) was received. |
| | | | | | |
| | | | | | On 04/21/2014, received copies of business |
| | | | | | licenses for the following cities: |
| | | | | | City of Baldwin Park (exp. 11/30/2014) |
| | | | | | City of Beverly Hills (exp. 05/15/2014) |
| | | | | | • City of Compton (exp. 02/25/2015) |
| | | | | | • City of Culver City (exp. 12/31/2014) |
| | | | | | City of Downey (exp. 12/31/2014) |
| | | | | | City of Glendora (exp. 05/01/2015) |
| | | | | | City of Hawthorne (exp. 12/31/2014) |
| | | | | | City of Huntington Park (exp. 12/31/2014) |
| | | | | | City of Inglewood (exp. 12/31/2014) |
| | | | | | City of La Canada Flintridge (exp. 06/30/2014) |
| | | | | | City of Lakewood (exp. 06/30/2014) |
| | | | | | City of Long Beach (exp. 01/01/2015) |
| | | | | | City of Los Alamitos (exp. 07/31/2014) |
| | | | | | City of Los Angeles |
| | | | | | City of Lynwood (exp. 12/31/2014) |
| | | | | | City of Maywood (exp. 12/31/2014) |
| | | | | | City of Montebello (exp. 12/31/2014) |

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| Quality Improvement Applicant's EMS Quality Improvement Program Plan | Prehospital Care Policy Manual Ref. 620, 620.1 | | X | | City of Palmdale (exp. 06/30/2014) City of Paramount (exp. 12/01/2014) City of Pasadena (exp. 04/30/2014) City of Santa Monica (exp. 06/30/2014) City of Signal Hill (exp. 12/31/2014) City of Simi Valley (exp. 12/31/2014) City of South Gate (exp. 12/31/2014) City of South Pasadena (01/31/2015) City of Torrance (12/31/2014) City of West Covina (exp. 06/30/2014) City of West Hollywood (exp. 02/01/2015) City of Whittier (exp. 11/30/2014) City of Whittier (exp. 11/30/2014) An EMS Quality Improvement (QI) Plan titled "TransLife Ambulance QI Program/Plan", dated 03/21/2011, was submitted. TransLife's QI plan has met the requirements specified in Reference No. 620, EMS Quality Improvement Program. Refer to the attached "EMS Quality Improvement Program Monitoring Instrument" for the results of this review. To further evaluate TransLife's QI program, documentation that demonstrates the implementation of the QI Plan and a copy of TransLife's policies and procedures is required. On 02/27/2014, received TransLife's current indicators. A review of TransLife's seven (7) indicators showed that although it appears that quality improvement activities are occurring, all seven indicators were not clearly defined, did not have an identifiable threshold, and time periods for each study. Additionally, the trending graphs submitted by TransLife do not present a clear report of the indicator study results. |

| ORDINANCE REQUIREMENT | REF.# | SUBMITTED | OMITTED or INCOMPLETE | N/A | COMMENTS |
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| | | | | | On 04/21/2014, received copies of TransLife's "Quarterly Safety Meeting – Minutes" (dated 06/02/2013, 09/08/2013 and 02/16/2014), copies of graphs for Chute Times, Dispatch Times, Scene Times, Patient Diversions and Call Cancellations. Additionally, received a "QI Trending/Analysis" for "Cancelled Calls" and "F.O.C.U.SP.D.S.A." document (dated 01/12/2014) for "Call Cancellation." TransLife's submitted current indicators were not clearly defined, had an insufficient indicator threshold, did not specify the time period for each study, nor identify the data source where the data will be obtained from. Although graphs were provided for the five (5) indicators that TransLife is currently studying, it was noted that there was insufficient analysis provided for the "Call Cancellation" indicator and it is unclear what is being studied. |
| Non 9-1-1 Medical Dispatch Policies and Procedures Dispatch Policies and Procedures Qualifications for Dispatchers Dispatch Logs (most current 30-days) | 7.16.050 (K)(L) Prehospital Care Manual Ref. 226 | | X | | TransLife's Communications Manual and dispatch logs for the most current thirty (30) day period (06/01/2013 to 08/31/2013) were received. While some of the requirements specified in Reference No. 226, Private Ambulance Provider Non 9-1-1 Medical Dispatch, were addressed in TransLife's "Communications Manual", several deficiencies were identified. Refer to the attached "EMS Private Ambulance Provider Non 9-1-1 Medical Dispatch Monitoring Instrument" (dated 01/28/2014) for the specific details. |

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| | | | | | TransLife's dispatch logs that were submitted did not include all of the data elements that were specifically requested and are therefore insufficient to complete our review. Although "complaints" are listed on TransLife's dispatch logs, they do not present a clear rationale for warranting patient transport. On most calls the complaint is merely listed as "Renal Failure". Also noted that on some runs where the destination is an acute care facility/hospital, the patient complaint is listed as "Transfer/Inter Facility" and does not specify the reason why transportation via ambulance was required. On 02/27/2014, TransLife's revised "Communications Manual" (dated 12/01/2013), signed by Brigeli Westerband, M.D. and TransLife's revised dispatch logs for the most current three (3) month period (11/01/2013 to 01/31/2014) were received. The review of the revised "Communication Manual" showed that TransLife successfully met the requirements specified in Reference No. 226, Private Ambulance Provider Non 9-1-1 Medical Dispatch. Refer to the attached "Private Ambulance Provider Non 9-1-1 Medical Dispatch Monitoring Instrument" (dated 03/11/2014) for the specific results of the medical dispatch policy and procedure review. |
| | | | | | A review of the TransLife dispatch logs for the period 06/01/2013 to 08/31/2013 identified nine (9) transports (at the same address) in the City of Lawndale for which a current business license was not received. |

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| | | | | | See attached Dispatch Log Compliance Report | |
| | | | | | (dated 01/28/2014). | |
| | | | | | | |
| | | | | | Subsequently, a secondary review of the most | |
| | | | | | current dispatch logs for the period 11/01/2013 to | |
| | | | | | 01/31/2014 identified eighteen (18) patient pick- | |
| | | | | | ups from four (4) different addresses located in | |
| | | | | | the unincorporated areas of Los Angeles County | |
| | | | | | (County). Refer to the attached "Dispatch Log | |
| | | | | | Compliance Report" (dated 03/18/2014) for the | |
| | | | | | specific results of this review. | |
| | | | | | | |
| | | | | | During review of the dispatch logs for the period | |
| | | | | | 11/01/2013 to 01/31/2014, it was noted that there | |
| | | | | | were patient transports that may have warranted | |
| | | | | | referral to the 9-1-1 jurisdictional provider. A | |
| | | | | | review of patient care records (PCRs) was | |
| | | | | | required. | |
| | | | | | roquirou. | |
| | | | | | On 04/22/2014, TransLife submitted a corrective | |
| | | | | | action plan (CAP) addressing the unincorporated | |
| | | | | | pick-ups and the failure to refer calls to the | |
| | | | | | jurisdictional 9-1-1 provider. PCRs, dispatch | |
| | | | | | histories, Physician Certification Statements | |
| | | | | | (PCS), and various billing records were received | |
| | | | | | for most of the transports identified as | |
| | | | | | unincorporated pick-ups in the "Dispatch Log | |
| | | | | | Compliance Report" as well as the PCRs and | |
| | | | | | dispatch histories for the calls identified as | |
| | | | | | • | |
| | | | | | possibly requiring 9-1-1 referral. Further, a written | |
| | | | | | statement regarding TransLife's review of the aforementioned PCRs was received. | |
| | | | | | alorementioned PCRS was received. | |
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| | | | INCOMPLETE | | TransLife's CAP outlines their plan to use "Thomas Brother's Map Book" or "web-based GIS system" to verify cities where they are licensed. TransLife's CAP also stated that they conducted training sessions on "L.A. County Protocol" to prevent transports of patients that require 9-1-1 referral. A review on TransLife's submitted PCRs has shown that out of the seventeen (17) transports identified as runs that may require 9-1-1 referral; thirteen (13) runs identified indeed met the criteria that required referral to the jurisdictional 9-1-1 provider. Three of the identified runs have been cleared as not requiring 9-1-1 referral and one (1) run that had a typographical error resulting in the inability of TransLife to locate and submit the requested PCR (Trip Number: 3315053). The identified thirteen (13) PCRs that required jurisdictional 9-1-1 referral are as follows: | |
| | | | | | 11/04/2013 - Trip Number: 3308010 11/08/2013 - Trip Number: 3312043 11/13/2013 - Trip Number: 3317034 11/14/2013 - Trip Number: 3318058 11/15/2013 - Trip Number: 3319028 11/18/2013 - Trip Number: 3322047 11/19/2013 - Trip Number: 3323013 11/28/2013 - Trip Number: 3332034 12/11/2013 - Trip Number: 3345044 12/23/2013 - Trip Number: 3357049 12/31/2013 - Trip Number: 3365027 01/02/2014 - Trip Number: 4002052 01/28/2014 - Trip Number: 4028051 | |

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| | | | | | Although TransLife has submitted a CAP to address the identified issues, the outlined plans do not provide sufficient solutions to prevent further County Code violations. As TransLife has already stated, they have previously purchased a "program" that was designed to prevent errors by verifying addresses to prevent pick-ups in cities that TransLife does not hold licenses and in unincorporated areas of the County. The CAP failed to identify specific programs/software to be used to prevent further violations. Additionally, TransLife's CAP also failed to provide the specific training course outline and/or state the specific County policies/protocols that were provided to their staff to prevent patient pick-ups that warrant referral to the jurisdictional 9-1-1 provider. |
| Background Checks LASD Information Form and copy of California Department of Motor Vehicles (DMV) Driver's License LASD Personal Information Form Photo Identification (State issued drivers license or identification card or passport) | 7.16.050 (O) | X | | | A completed "Los Angeles County Sheriff's Department (LASD) License Detail Business License Applicant's Personal Information (Personal Information) Form", a completed "Request for Live Scan Service Form" and a copy of a state issued driver's license for Haigouhi Blikian was received. The above documents for Ms. Blikian were forwarded to the LASD Investigator for completion of the background check and on 09/07/2013 received notification from the LASD Investigator that the background check for Haigouhi Blikian found no basis for protest. |

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| | | | | | Completed "Request for Live Scan Service Forms", "LASD Personal Information" forms and copies of a state issued driver's license or identification card or passport were not submitted for Peter Blikian, Rick Larson, David Molyneux or the "Medical Billing" Manager. On 02/27/2014, received completed LASD Personal Information Forms and copies of California Driver's Licenses for Haigouhi Blikian, Peter Blikian, Rick Larson, and Justin Frith. On 4/30/14, Personal Information Forms and copies of California Driver's Licenses sent to LASD for background processing. |
| | | ADDITION | IAL INFORMATION | ON | |
| Additional Information Requested by the EMS Agency | | X | | | |
| Additional Information Requested by the Ambulance Licensing Hearing Board | | | | Х | Public Hearing is pending. |

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