


ANALYSIS

This ordinance amends Title 7 – Business Licenses of the Los Angeles County Code, by revising the maximum charges that a ground ambulance may charge for its services and revising the methodology for the annual adjustment of these rates.

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By


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ORDINANCE NO. _____

An ordinance amending Title 7 – Business Licenses of the Los Angeles County Code, by revising the maximum charges that a ground ambulance may charge for its services and revising the methodology for the annual adjustment of these rates.

The Board of Supervisors of the County of Los Angeles ordains as follows:

SECTION 1. Section 7.16.280 is hereby amended to read as follows:

7.16.280 Rate sSchedule for aAmbulances.

A. A ground ambulance operator shall charge no more than the following rates for one patient:

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| 1. | Response to call with equipment and personnel at an advanced life support (ALS) level | \$1,561.00 |
| 2. | Response to call with equipment and personnel at a basic life support (BLS) level | \$1,012.75 |
| 3. | Code 3 (or emergent) used during response or transport, per incident | \$126.75 |
| 4. | Code 2 (or non-emergent) used during response or transport per incident | \$50.00 |
| 5. | Mileage Rate. Each mile or fraction thereof | \$18.50 |
| 6. | Waiting Time. For each 15-minute period or fraction thereof after the first 15 minutes of waiting time at the request of the person hiring the ambulance | \$50.00 |

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| 7. | Standby Time. The base rate for the prescribed level of service and, in addition, for each 15-minute period or fraction thereof after the first 15 minutes of standby time | \$47.75 |
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| 1. | <u>Response to a non-emergency call with equipment and personnel at an advanced life support (ALS) level</u> | <u>\$1,776.00</u> |
| 2. | <u>Response to an emergency 9-1-1 call with equipment and personnel at an advanced life support (ALS) level</u> | <u>\$1,900.00</u> |
| 3. | <u>Response to a non-emergency call with equipment and personnel at a basic life support (BLS) level</u> | <u>\$1,183.00</u> |
| 4. | <u>Response to an emergency 9-1-1 call with equipment and personnel at a basic life support (BLS) level</u> | <u>\$1,268.00</u> |
| 5. | <u>Mileage Rate. Each mile or fraction thereof</u> | <u>\$18.00</u> |
| 6. | <u>Waiting Time. For each 30-minute period or fraction thereof after the first 30 minutes of waiting time at the request of the person hiring the ambulance</u> | <u>\$100.00</u> |
| 7. | <u>Standby Time. The base rate for the prescribed level of service and, in addition, for each 30-minute period or fraction thereof after the first 30 minutes of standby time</u> | <u>\$96.00</u> |

B. This section does not apply to a contract between the ambulance operator and the county where different rates or payment mechanisms are specified.

* Editor's note: Fee changes in this section include changes made by the Director of Emergency Medical Services Agency due to increases in the Consumer Price Index in accordance with County Code Section 7.16.340 – Modification of Rates and are effective July 1, 2015~~2017~~, and every July 1 thereafter.

SECTION 2. Section 7.16.310 is hereby amended to read as follows:

7.16.310 Special eCharges.*

A. A ground ambulance operator shall charge no more than the following rates for special ancillary services:

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| 1. | Request for service after 7:00 p.m. and before 7:00 a.m. of the next day will be subject to an additional maximum charge of | \$82.25 |
| 2. | Persons requiring oxygen shall be subject to an additional maximum charge per tank or fraction thereof, of | \$63.75 |
| 3. | Backboard, splints, KED | \$49.75 |
| 4. | Traction splints | \$90.00 |
| 5. | Transport—noncompany staff medical personnel—first one half hour | \$31.75 |
| 6. | Neonatal transport | \$189.75 |
| 7. | Ice packs | \$26.50 |
| 8. | Bandages, dressing | \$26.50 |
| 9. | Oxygen cannula/mask | \$26.50 |
| 10. | Cervical collar | \$44.75 |

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| 11. | Obstetrical kit | \$48.75 |
| 12. | Burn-kit | \$48.75 |
| 13. | Nurse critical care transport—per hour | \$226.25 |
| 14. | Volume ventilator | \$170.75 |
| 15. | Respiratory therapist for the first three hours, and \$117.25 per hour after the first three hours | \$257.75 |
| 16. | Pulse oximeter | \$86.00 |
| 17. | Infusion pump (per line) | \$86.00 |
| 18. | Automated external defibrillator (AED) | \$86.00 |
| 19. | Continuous positive airway pressure (CPAP) | \$86.00 |

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| 1. | <u>Request for service after 7:00 p.m. and before 7:00 a.m. of the next day will be subject to an additional maximum charge of</u> | <u>\$20.00</u> |
| 2. | <u>Persons requiring oxygen shall be subject to an additional maximum charge per tank or fraction thereof and oxygen delivery equipment to include nasal cannula and/or oxygen mask, of</u> | <u>\$92.00</u> |
| 3. | <u>Neonatal transport</u> | <u>\$190.00</u> |
| 4. | <u>Registered Nurse or Respiratory Therapist Specialty Care Transport with equipment and personnel for up to 3 hours of transportation time</u> | <u>\$2,137.00</u> |
| 5. | <u>Registered Nurse and Respiratory Therapist Specialty Care Transport</u> | <u>\$2,416.00</u> |

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| | <u>with equipment and personnel for up to 3 hours of transportation time</u> | |
| 6. | <u>Registered Nurse and/or Respiratory Therapist for per hour after the first 3 hours</u> | <u>\$114.00</u> |
| 7. | <u>Volume ventilator</u> | <u>\$176.00</u> |
| 8. | <u>Disposable Medical Supplies</u> | <u>\$27.00</u> |

B. Where other special services are requested or needed by any patient or authorized representative thereof, a reasonable charge commensurate with the cost of furnishing such special service may be made, provided that the ambulance operator shall file with the dDirector of the dDepartment of hHealth sServices a schedule of each special service proposed and the charge therefore, which charge shall be effective unless modified, restricted, or denied by the dDirector of the dDepartment of hHealth sServices. Special services are defined as services provided to a patient that are unique and individual to a specific patient's needs, and are performed on a limited basis.

C. Charges for special services provided to patients that are new services, but will become an industry standard, must be reviewed and a rate commensurate with the service developed prior to ambulance operators charging such rate to the general public. Such rates shall not be charged to patients until approved by the bBoard of sSupervisors.

D. This section does not apply to a contract between an ambulance operator and the eCounty where different rates or payment mechanisms are specified.

* Editor's note: Fee changes in this section include changes made by the Director of Emergency Medical Services Agency ~~due to increases in the Consumer Price Index in~~ accordance with County Code Section 7.16.340 – Modification of Rates and are effective July 1, ~~2015~~ 2017, and every July 1 thereafter.

SECTION 3. Section 7.16.340 is hereby amended to read as follows:

7.16.340 Modification of Rates.

The maximum rates chargeable to the general public as set forth in Sections 7.16.280 and 7.16.310 of this chapter shall be adjusted effective July 1, 1992, and on July 1st of each year thereafter, to reflect changes in the value of the dollar. For each of the one year periods respectively beginning July 1, 1992 and July 1, 1993 such adjustments shall be made by multiplying the base amounts by the percentage change in the transportation portion of the Consumer Price Index for All Urban Consumers, Western Region, as compiled and reported by the Bureau of Labor Statistics for the 12-month period ending with the last day of the prior month of February. Beginning July 1, 1994, and on each July 1 thereafter, such adjustments shall be determined by multiplying the base amounts by the average of the percentage changes of the transportation portion and of the medical portion of the Consumer Price Index for All Urban Consumers, Western Region, as compiled and reported by the Bureau of Labor Statistics for the 12-month period ending with the last day of the prior month of February. The result so determined shall be rounded to the nearest \$0.25 and added or subtracted, as appropriate, to the rate. Beginning July 1, 2017, and on every July 1, thereafter, such adjustments shall be determined by multiplying seventy-five (75)

percent of the base amounts by the percentage change of the minimum wage change in Los Angeles County as defined in County Code Section 8.100.040 – Minimum Wage and by multiplying twenty-five (25) percent of the base amounts by the percentage change of the Medical Care line item of the Consumer Price Index for All Urban Consumers, Western Region, as compiled and reported by the Bureau of Labor Statistics for the 12-month period ending with the last day of the prior month of February, except for the following charges: Registered Nurse/Respiratory Therapist per hour after the first three (3) hours adjustment shall be determined by multiplying the current charge by the percentage change of the minimum wage change in Los Angeles County as defined in County Code Section 8.100.040 – Minimum Wage; mileage adjustment shall be determined by multiplying the current charge by the percentage change of the transportation line item of the Consumer Price Index for All Urban Consumers, Western Region, as compiled and reported by the Bureau of Labor Statistics for the 12-month period ending with the last day of the prior month of February; and Oxygen, Disposable Medical Supplies, and Ventilator adjustments shall be determined by multiplying the current charges by the percentage change of the Medical Care line item of the Consumer Price Index for All Urban Consumers, Western Region, as compiled and reported by the Bureau of Labor Statistics for the 12-month period ending with the last day of the prior month of February. The result so determined shall be rounded to the nearest whole number and added or subtracted, as appropriate, to the rate. The dDirector of the dDepartment of hHealth sServices, or authorized designee, shall initiate implementation of these rate changes by notifying in writing each

licensed private ambulance operator in Los Angeles County thereof, and any other individual or agency requesting such notification from the dDirector. Such notice shall be sent by first class mail no later than June 15 of the prior period.

SECTION 4. Section 7.16.341 is hereby deleted in its entirety:

~~7.16.341 – Period base rate review.~~

~~The maximum base rates for ALS and BLS services, as reflected in Section 7.16.280, shall be reviewed in accordance with the following procedures, and adjusted, if appropriate, effective first on January 1, 2005 and later, also if appropriate, on January 1 of every other year thereafter.~~

~~On or about July 1 of the year prior to the January 1 adjustment date, the director of the department of health services shall review the ALS and BLS ambulance rates of all other counties in California to determine the average rates for these services in effect for these counties as of the review date. If the Los Angeles County rates are equal to or above average, no adjustment to the Los Angeles County Code rates will be made under this provision. If one or both of the Los Angeles County rates are less than the average, then an appropriate adjustment to the rate or rates shall be made to bring it (them) to the average. Any required adjustment shall be rounded to the nearest \$0.25. The director of the department of health services shall initiate implementation of these rate adjustments by notifying in writing each licensed private ambulance operator in Los Angeles County thereof, and any other individual or agency who has requested such notification from the director. Such notice shall be sent by first class mail no later than December 15 of the prior rate period.~~

~~Nothing herein is intended to prevent licensed ambulance operators from demonstrating that ALS and BLS rates in Los Angeles County fail to provide operators with a reasonable rate of return on their investment. A licensed operator at any time may submit to the director of the department of health services its cost and revenue data, and other pertinent documentation which the director may require for this purpose. If this information evidences to the director's satisfaction that the ALS rate or BLS rate, or both, fail to provide the operator with a reasonable rate of return, the director shall propose a different base rate structure to the board of supervisors for consideration.~~

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