

Resolution 2021-64
Kootenai County Emergency Medical Services System Fee Schedule

WHEREAS, the Kootenai County Board of Commissioners, acting in its capacity as the governing board of Kootenai County Ambulance District, is authorized under *Idaho Code* §31-3904 and §63-1311 to set fees for service within Kootenai County; and

WHEREAS, legal notice was published and a public hearing was held as required per *Idaho Code* §63-1311A; and

WHEREAS, it is the desire of the Board of Commissioners that the Kootenai County Emergency Medical Services System (KCEMSS) continue to be supported, to the extent possible, by user fees; and

WHEREAS, the Board of Commissioners desires to ensure that the quality of Emergency Medical Services (EMS) in Kootenai County remains high; and

WHEREAS, the existing fees were established in 2013 through the adoption of Resolution 2013-68, and an adjustment of these fees is necessary due to changes in the expenses incurred by KCEMSS in the provision of emergency medical services in Kootenai County; and

WHEREAS, the KCEMSS Joint Powers Board considered a rate schedule for EMS services contained in Attachment "A" hereto at its regular meeting on April 22, 2021, and recommended that the Kootenai County Board of Commissioners approve the same as presented;

NOW THEREFORE, BE IT HEREBY RESOLVED that, as of October 1, 2021, the rates for EMS Services shall be as set forth in Attachment "A" hereto for those agencies responding to emergent and non-emergent calls for service within Kootenai County.

BE IT FURTHER RESOLVED that this Resolution shall supersede Resolution Nos. 2006-19, 2012-62 and 2013-68.

Upon a motion to adopt the text of the foregoing Resolution made by Commissioner _____, seconded by Commissioner _____, the following vote was recorded:

Commissioner Brooks:
Commissioner Duncan:
Chairman Fillios:

Upon said roll call, the text of the foregoing was duly enacted as a Resolution of the Board of County Commissioners of Kootenai County, Idaho on the 6th day of July, 2021.

KOOTENAI COUNTY
BOARD OF COMMISSIONERS

Chris Fillios, Chairman

Leslie Duncan, Commissioner

Bill Brooks, Commissioner

C: KCEMSS, Resolution File

ATTEST:
JIM BRANNON, CLERK

By: _____
Deputy Clerk

ATTACHMENT "A"
KCEMSS Ambulance Rates Beginning FY2022

SERVICE TYPE		Rates as of 10/1/2021
CHG CODE	DESCRIPTION	
BASE RATES		
A0429	BLS EMERG BASE RATE	\$ 642.00
A0429	BLS EMERG BASE RATE - NR	\$ 753.00
A0428	BLS NON EMERG BASE RATE	\$ 586.00
A0428	BLS NON EMERG BASE RATE - NR	\$ 697.00
A0427	ALS EMERG BASE RATE	\$ 837.00
A0427	ALS EMERG BASE RATE - NR	\$ 948.00
A0426	ALS NON EMERG BASE RATE	\$ 780.00
A0426	ALS NON EMERG BASE RATE - NR	\$ 891.00
A0433	ALS2 EMERG BAS RATE	\$ 948.00
A0433	ALS2 EMERG BAS RATE - NR	\$ 1,059.00
A0434	CCT SPECIALTY CARE RATE	\$ 1,114.00
A0434	CCT SPECIALTY CARE RATE - NR	\$ 1,225.00
A0998	TREAT - NO TRANSPORT	\$ 224.00
A0998	TREAT - NO TRANSPORT - NR	\$ 335.00
MILEAGE		
A0425	SCT MILEAGE (PER MILE)	\$ 23.00
A0425	SCT MILEAGE - NOT COVERED	\$ 23.00
A0425	BLS MILEAGE (PER MILE)	\$ 17.50
A0425	BLS MILEAGE - NOT COVERED	\$ 17.50
A0425	ALS MILEAGE (PER MILE)	\$ 17.50
A0425	ALS MILEAGE - NOT COVERED	\$ 17.50
MISCELLANEOUS CHARGES		
A0420	BLS AMBULANCE WAIT TIME (PER 30 MIN)	\$ 67.00
A0420	ALS AMBULANCE WAIT TIME (PER 30 MIN)	\$ 90.00
A0420	CCT AMBULANCE WAIT TIME (PER 30 MIN)	\$ 112.00
A0424	EXTRA AMBULANCE ATTENDANT	\$ 168.00
A0432	PI - PARAMEDIC INTERCEPT	\$ 224.00
A0432	PI - PARAMEDIC INTERCEPT - NR	\$ 335.00
COMBINED	STANDBY RATE FOR EVENTS*	\$ 140.00
* STANDBY RATE BASED ON FSO RATE BOOK		