

| CLEARANCES | Initial | Date | Date Received in Council Office: | Agenda date | Assigned to: |
|-----------------------|---------|---------|--|-------------|---------------------|
| Originator: Executive | | 10/1 | RECEIVED OCT 07 1992 WHATCOM COUNTY COUNCIL | 10/13/92 | Finance and Council |
| Division Head: | | | | 11/3/92 | Hearing/Council |
| Dept. Head: | | | | | |
| Prosecutor: | DGW | | | | |
| Purchasing/Budget: | | | | | |
| Executive: | | 10/5/92 | | | |

SUBJECT:

Ordinance establishing service fees and setting a fee schedule relating to ambulance service charges

ATTACHMENTS:

Ordinance
 Memo from Dave Hammers
 City agenda bill and Attachment B

SUMMARY STATEMENT: Please complete sections of box as appropriate & explain the item below.

| | |
|---|--|
| Related County contract #: | Should Clerk schedule a hearing? NO / / YES /XX/ Requested date: 10/27 |
| Amount budgeted for this item/project: \$ | Is it (or will it be) within budget? YES / / NO / / (Please explain below) |
| Budget line item number(s): | |

The last rate increase for ambulance services proposed by the City and County Councils was effective in January, 1989. The Bellingham Fire Department has initiated a rate increase to offset the operational costs of Whatcom Medic One. Approximately 50% of the operational cost of Medic One is generated by billing a fee for service.

ORIGINATOR'S RECOMMENDED ACTION:

Pass

COMMITTEE ACTION TAKEN:

COUNCIL ACTION TAKEN:

10/13/92: Introduced
 11/3/92: Council adopted the ordinance. 7-0

SPONSORED BY: Consent
PROPOSED BY: County Executive
INTRODUCTION DATE: October 13, 1992

ORDINANCE NO. 92-083

**Ordinance Establishing Service Fees
and Setting a Fee Schedule
Relating to Ambulance Service Charges**

WHEREAS, Ordinance 88-103 set the ambulance rates from January, 1989 to the present;
and,

WHEREAS, the subsidy amount for ambulance service has been incorporated into the 1993
proposed County Budget; and,

WHEREAS, it is now necessary to adjust user rates to raise that portion of the operating
funds to make the County-wide ambulance service fully funded;

NOW, THEREFORE, BE IT ORDAINED by the Whatcom County Council that the fee
schedule for ambulance services below is approved:

A. Base rate plus those charges described in B,C,D,E, F, and G.

Emergency Medical:

| | |
|--|-----------|
| Basic life support, no transport | \$ 75.00 |
| Basic life support, transport (county) | \$ 250.00 |
| Basic life support, out of county | \$ 300.00 |
| Advanced life support, no transport | \$ 200.00 |
| Advanced life support, transport (county) | \$ 345.00 |
| Advanced life support, transport (out of county) | \$ 395.00 |

Non-emergency Transfers:

| | |
|---|-----------|
| Basic life support (county) | \$ 200.00 |
| Basic life support (out of county) | \$ 250.00 |
| Advanced life support (county) | \$ 250.00 |
| Advanced life support (out of county) | \$ 295.00 |

B. Mileage (per mile) \$ 7.00

Ordinance - 1
Ambulance Fees

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- C. Standby service (per hour) \$ 50.00
- D. Oxygen \$ 18.00
- E. Night charge (5 p.m. to 8 a.m.) \$ 10.00
- F. Non-resident \$ 100.00
- G. Supplies Cost plus 10%

Multiple patients transported in one ambulance are charged the base fee plus \$75.00 for each patient divided by the number of patients.

This ordinance supersedes Ordinance 88-103 and becomes effective November 30, 1992.

ADOPTED this 3rd day of November, 1992.

ATTEST:

WHATCOM COUNTY COUNCIL
WHATCOM COUNTY, WASHINGTON

Ramona Reeves
Ramona Reeves, Council Clerk

Daniel M. Warner
Daniel M. Warner, Chairman

APPROVED AS TO FORM:

Approved Denied

Randall J. Webb
Civil Deputy Prosecutor

Shirley Van Zanten
Shirley Van Zanten, Executive
Date: 11/20/92