



City of Milwaukee Fiscal Impact Statement

A **Date** 3/16/2016 **File Number** 151498 **Original** **Substitute**
Subject Authority for third party ambulance providers to utilize the City's tax refund intercept program (TRIP)

B **Submitted By (Name/Title/Dept./Ext.)** Martin Matson Comptroller x2301

C **This File**

- Increases or decreases previously authorized expenditures.
- Suspends expenditure authority.
- Increases or decreases city services.
- Authorizes a department to administer a program affecting the city's fiscal liability.
- Increases or decreases revenue.
- Requests an amendment to the salary or positions ordinance.
- Authorizes borrowing and related debt service.
- Authorizes contingent borrowing (authority only).
- Authorizes the expenditure of funds not authorized in adopted City Budget.

D **Charge To**

- Department Account
- Capital Projects Fund
- Debt Service
- Other (Specify) _____
- Contingent Fund
- Special Purpose Accounts
- Grant & Aid Accounts

E

Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages	Administrative Control	\$31,713.00	
		\$0.00	\$0.00
Supplies/Materials		\$0.00	\$0.00
		\$0.00	\$0.00
Equipment		\$0.00	\$0.00
		\$0.00	\$0.00
Services		\$0.00	\$0.00
		\$0.00	\$0.00
Other	Potential Revenue Decrease	\$0.00	(\$59,044.00)
		\$0.00	\$0.00
TOTALS		\$31,713.00	(\$59,044.00)

F

Assumptions used in arriving at fiscal estimate. See attached spreadsheet

G

For expenditures and revenues which will occur on an annual basis over several years check the appropriate box below and then list each item and dollar amount separately.

- 1-3 Years 3-5 Years
- 1-3 Years 3-5 Years
- 1-3 Years 3-5 Years

May incur an additional \$91,000 annually of combined increased expenditures and lost revenue

H

List any costs not included in Sections D and E above.

I

Additional information.

It appears to be more efficient to administer if the private ambulance companies utilized the city's collection agency Harris & Harris for the TRIP program

J

This Note Was requested by committee chair.

2015 Provider Information				Est Avg Rate \$423	3% Increase \$436
	# of Calls	# of Transports	# of Submissions for 2015	Amount	Revised Amount
Paratech	17,686	15,518	1,350	591,000	588,600
Bell	15,350	13,412	1,153	508,000	502,708
Curtis	15,268	11,948	1,198	467,915	522,328
Medacare	13,478	3,274	282	119,286 **	122,952
Total:	61,782	44,152	3,983	\$ 1,686,201	\$ 1,736,588

Assumes 3.4% collection rate: \$ 57,331 \$ 59,044

Harris & Harris 18% Fee \$ 10,320 \$ 10,628

Management Accountant Senior at 1/2 time: \$ 22,652

Fringes at 40% \$ 9,061

 \$ 31,713

For purposes of estimating total cost:

Potential lost revenue: 59,044

Administrative Costs: 31,713

Total: \$ 90,757

**Estimated number of submissions at 8.6%, using \$423 as multiplier