



City of Milwaukee Fiscal Impact Statement

A

Date April 14, 2011 **File Number** 101520
Subject A substitute ordinance related to ambulance conveyance rates.

B

Submitted By (Name/Title/Dept./Ext.) Eric Gass/Research and Policy Director/Health Department/x2903

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

- This Note** Was requested by committee chair.

E

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

F

Assumptions used in arriving at fiscal estimate.

Increases the amount charged for BLS and BLS Emergency ambulance conveyance for two categories of patients established by code, residents of the City of Milwaukee and non-residents by 7.0%, from \$471 to \$504 and from \$545 to \$583, respectively. The mileage rate remains the same at \$14.00 per mile.

Proposes that whenever a certified ambulance provider provides ALS conveyance they are authorized to charge the same rates as established by the fire department. Further proposes that the BLS and ALS ancillary charges and drug rates, which have not been adjusted since 2007, be increased 22.8% from \$693.28 to \$851.34.

G			
Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages			
Supplies/Materials			
Equipment			
Services			
Other			
TOTALS			

H	
<p>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.</p>	
<input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years	_____
<input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years	_____
<input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years	_____

I
<p>List any costs not included in Sections E and F above.</p> <p>_____</p>

J
<p>Additional information.</p> <p>_____</p>

