



City of Milwaukee Fiscal Impact Statement

A

Date March 22, 2017 **File Number** 170039

Subject An ordinance related to ambulance conveyance rates and ancillary charges for services rendered by certified private ambulance companies.

B

Submitted By (Name/Title/Dept./Ext.) Ali Reed, Compliance Analyst x3524

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 3.6 %, from \$632 to \$655 and from \$732 to \$758, respectively. When patients require treatment without transport, the amount charged increases from \$150 to \$155 for residents and from \$214 to \$222 for non-residents. The mileage rate is established using a three year rolling average for 2014-2016 and comes to \$19.28 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 remain at \$1004.63.

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>
