

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS <u>AGENDA ITEM SUMMARY</u>

Meeting Date: December 2, 2014		[ ] [ ]	Consent Ordinance	[X] [ ]	Regular Public Hearing		
Department Submitted By: Submitted For: =============	ted By: Department of Public Safety						

#### I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to: Adopt** a Resolution of the Board of County Commissioners of Palm Beach County, Florida, establishing a schedule of Emergency Medical Services fees relating to the EMS Ordinance of Palm Beach County, Florida, as codified in the Palm Beach County Code of Ordinances.

**Summary:** This resolution implements an application fee of \$500 for all applicants requesting a Certificate of Public Convenience and Necessity (COPCN). It implements an annual vehicle permit (decal) fee of \$150 per vehicle for all <u>secondary and special secondary</u> providers (non-government, private). It also implements an annual vehicle permit (decal) fee of \$50 for all <u>primary</u> providers (government), effective October 1, 2015. The permit fees charged will include an annual vehicle inspection provided by the Public Safety Department's Division of Emergency Management. All fees implemented by the resolution are non-refundable. <u>Countywide</u> (DW)

**Background and Justification:** The EMS Ordinance requires that a fee is to be paid by an applicant requesting a COPCN and a fee is to be paid by a Certificate holder for the annual vehicle inspection process, as established by Resolution. Primary provider means the agency that provides advanced life support emergency medical services and/or transport within the area or zone stated upon their COPCN. Secondary provider means the agency that provides secondary advanced life support transport and basic life support transfer services. Special secondary service provider means the agency that provides special secondary advanced life support or basic life support services within those gated communities which request to have such services at costs borne by the requesting gated communities.

#### Attachment

1) Proposed Resolution

Recommended by: Department Director Date **Approved By:** 

Assistant County Administrator

Date

#### II. FISCAL IMPACT ANALYSIS

### A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>
Capital Expenditures					
Operating Costs					
External Revenues					
Program Income (County)					
In-Kind Match (County)					
Net Fiscal Impact	*				
# ADDITIONAL FTE					
POSITIONS (Cumulative)	0	0	0	0	0
Is Item Included In Curr	ent Budget?	Yes	No <u>X</u>		
Budget Account Exp No Rev No		) Department _ Department _	Unit Unit	_ Object _ Object	

## B. Recommended Sources of Funds/Summary of Fiscal Impact:

\*The fiscal impact is indeterminable at this time, however, any additional revenue collected from the fee changes will be accounted for in the General Fund.

rohe 114/14 Departmental Fiscal Review: Standam 0 0

#### III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

OFMB An

Contract

Y & wheeles

B. Legal Sufficiency: Assistant County Attorney

C. Other Department Review:

**Department Director** 

This summary is not to be used as a basis for payment.

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#### RESOLUTION NO. R-2014-\_\_\_\_

**RESOLUTION OF THE BOARD OF COUNTY** A COMMISSIONERS OF PALM BEACH COUNTY. FLORIDA; **ESTABLISHING** A **SCHEDULE** OF **EMERGENCY MEDICAL SERVICES FEES RELATING** то THE **EMERGENCY** MEDICAL **SERVICES** ORDINANCE OF PALM BEACH COUNTY, FLORIDA, AS **CODIFIED IN THE PALM BEACH COUNTY CODE OF ORDINANCES.** 

WHEREAS, the Board of County Commissioners of Palm Beach County, Florida adopted the Palm Beach County Emergency Medical Services Ordinance of 2010 ("Emergency Medical Services Ordinance"), as codified in the Palm Beach County Code of Ordinances, Chapter 13 Article II, Division 1, to provide and maintain for the citizens of the County standards which ensure their health, welfare, and well being; and

WHEREAS, the Emergency Medical Services Ordinance establishes reasonable standards for issuing Certificates of Public Convenience and Necessity for Advance Life Support, Advance Life Support Transportation, and Air Ambulance Services; and

WHEREAS, the Emergency Medical Services Ordinance requires certain fees to be paid by the applicant requesting a Certificate of Public Convenience and Necessity, as well as certain fees to be paid by the Certificate holders, said fees to be established by Resolution of the Board of County Commissioners.

# NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, that:

The Palm Beach County Emergency Medical Services Ordinance Schedule of Fees applicable to the issuance of Certificates of Public Convenience and Necessity is as follows:

- 1. A non-refundable application fee of \$500.00 must be submitted with a completed application, which will be effective December 2, 2014.
- A non-refundable \$150 vehicle permit (decal) fee per vehicle per year (annually) for all secondary and special secondary providers, which will be effective December 2, 2014.
- A non-refundable \$50 vehicle permit (decal) fee per vehicle per year (annually) for all primary providers which will be effective October 1, 2015.

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The foregoing Resolution was offered by Commissioner	who moved			
its adoption. The motion was seconded by Commissioner	, and upon			
being put to a vote, the vote was as follows:				
DISTRICT 1: HAL R. VALECHE				
DISTRICT 2: PAULETTE BURDICK				
DISTRICT 3: SHELLEY VANA				
DISTRICT 4:				
DISTRICT 5: MARY LOU BERGER				
DISTRICT 6:				
DISTRICT 7: PRISCILLA A. TAYLOR				

The Mayor thereupon declared the Resolution duly passed and adopted this \_\_\_\_\_ day of December, 2014.

PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS

Sharon R. Bock Clerk & Comptroller

By: \_\_\_\_\_

Deputy Clerk

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APPROVED AS TO FORM AND LEGAL SUFFICIENCY

By: Assistant County Attorney

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