

CITY OF BETHLEHEM

DEPARTMENT OF FIRE INTEROFFICE MEMORANDUM

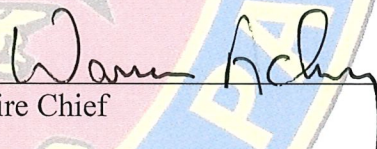
TO: Robert G. Vidoni, Esquire, City Clerk
FROM: Warren Achey, Fire Chief
RE: Request to Amend EMS Fees
DATE: September 1, 2021

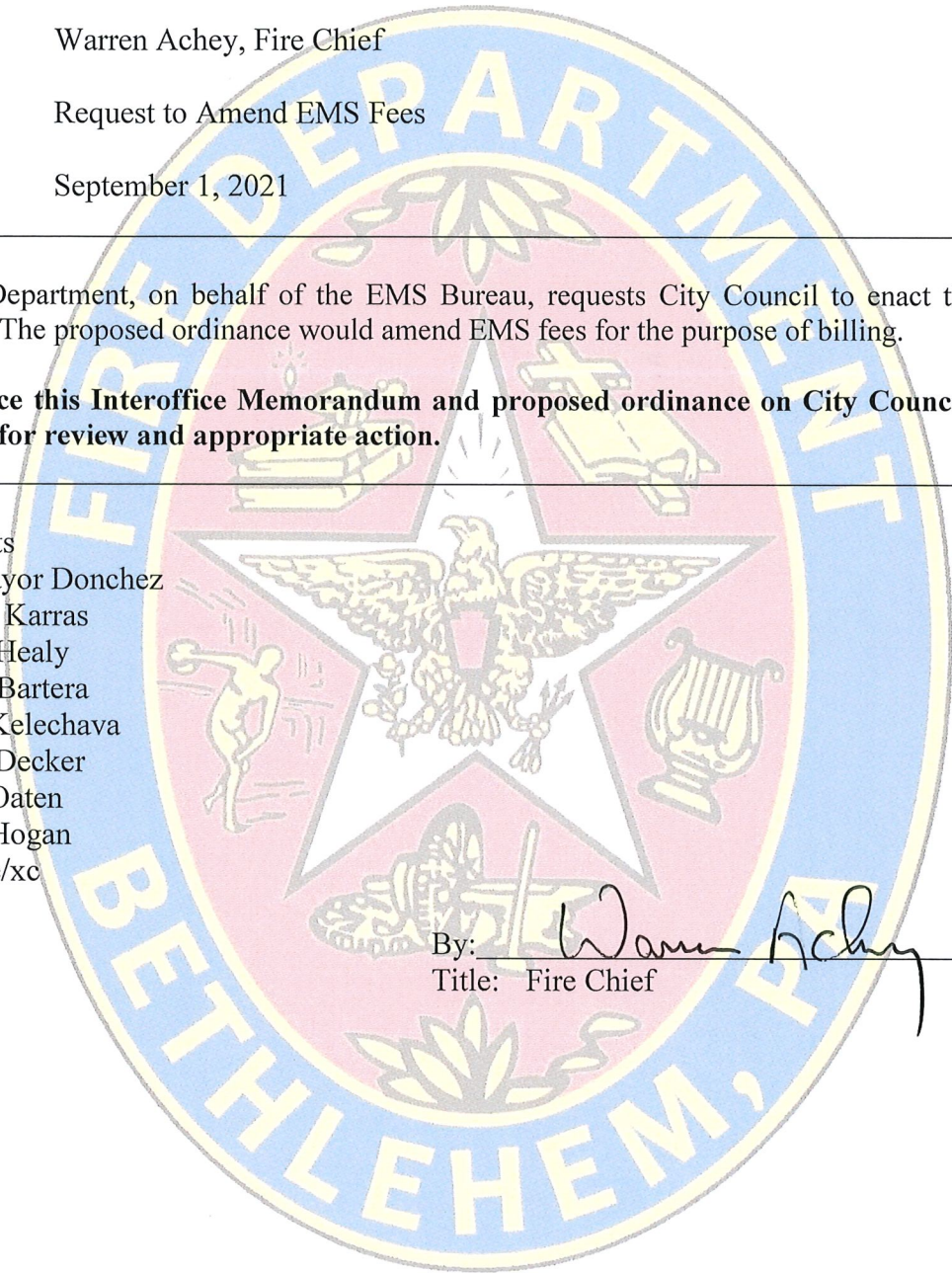
The Fire Department, on behalf of the EMS Bureau, requests City Council to enact the attached ordinance. The proposed ordinance would amend EMS fees for the purpose of billing.

Please place this Interoffice Memorandum and proposed ordinance on City Council's agenda as needed for review and appropriate action.

WA/mob
attachments

cc: Mayor Donchez
W. Karras
E. Healy
C. Bartera
J. Kelechava
T. Decker
J. Oaten
J. Hogan
file/xc

By: 
Title: Fire Chief



BILL NO. ____ - 2021

ORDINANCE NO. 2021-_____

AN ORDINANCE OF THE CITY OF BETHLEHEM, COUNTIES OF LEHIGH AND NORTHAMPTON, COMMONWEALTH OF PENNSYLVANIA, AMENDING ARTICLE 1120.05.C OF THE CODIFIED ORDINANCES RELATING TO THE FEE SCHEDULE FOR EMERGENCY MEDICAL SERVICES.

THE COUNCIL OF THE CITY OF BETHLEHEM HEREBY ORDAINS AS FOLLOWS:

SECTION 1. Article 1120.05 (Procedure for EMS Billing), subsection C which presently reads as follows:

C. The fee schedule for emergency medical services shall be as follows:

- (1) Advanced Life Support, Level 1 (ALS1): \$800.00
- (2) Advanced Life Support, Level 2 (ALS2): \$875.00
- (3) Basic Life Support, (BLS-E): \$700.00
- (4) Mileage (ALS/BLS) (Per Loaded Mile): \$ 15.00
- (5) Service charge: \$ 75.00
- (6) Standby Service Fee (per hour): \$ 95.00
- (7) ALS Treatment No Transport: \$400.00
- (8) ALS Assist with BLS: \$200.00
- (9) Patient Care Report (PCR): \$ 25.00

is hereby amended and shall read as follows (deletions shown in ~~strikeouts~~; new text is shown as underlined):

C. The fee schedule for emergency medical services shall be as follows:

- (1) Advanced Life Support, Level 1 (ALS1): \$800.00
- (2) Advanced Life Support, Level 2 (ALS2): \$875.00

- (3) Basic Life Support, (BLS-E): \$700.00
- (4) Mileage (ALS/BLS) (Per Loaded Mile): \$ 15.00
- (5) Service charge : \$ 75.00
- (6) ~~Standby Service Fee (per hour):~~ ~~_____~~ \$ 95.00 <reserved.>
- (7) ALS Treatment No Transport: \$400.00 \$440.00
- (8) ALS Assist with BLS: \$200.00
- (9) Patient Care Report (PCR): \$ 25.00

SECTION 2. All Ordinances and parts of Ordinances inconsistent herewith be, and the same are hereby repealed.

Sponsored by _____

PASSED finally in Council on the _____ day of _____, 2021.

President of Council

ATTEST:

City Clerk

This Ordinance approved this _____ day of _____, 2021.

Mayor