COUNTY OF EL DORADO

HEALTH & HUMAN SERVICES

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BOARD OF SUPERVISORS

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MEMORANDUM

To:Honorable Board of SupervisorsFrom:Patricia Charles-HeathersDirectorDirectorRE:HHSA Fee Study Update FY 16/17
Board Agenda Date – August 30, 2016
Legistar Item # 16-0805Date:August 24, 2016

This memo is to provide you with additional information related to the August 30, 2016 Board presentation recommending changes to the HHSA fee schedules. After receiving BOS direction during the addenda process in August 2015, HHSA began reviewing current fee schedules and internal staff resources. Due to the volume of programs in HHSA, HHSA determined it was reasonable to utilize an outside resource. MGT of America, Inc. was awarded the contract via request for proposal (RFP) in October 2015. Since that time, HHSA has worked diligently to review our programs, historical fee structures, and potential new fees for services that could be part of the FY 16/17 updated fee schedules.

A cost of service or fee study is comprised of two basic elements. The first element is to calculate the hourly rates of staff providing the service and the second is the time spent to provide the service. Hourly rates were calculated using FY 14/15 actual expenditures inclusive of an indirect cost allocation. Time spent providing service was developed by reviewing tasks associated with each service and meeting with program staff to understand the program service delivery models.

Given this information, MGT was able to calculate the cost of providing service, both on a per-unit and total annual basis (utilizing annual volumes.) Finally, certain service costs or if other divisions provided support into certain user fee activities, these crossover expenditures were added to the total cost of the service. Full costs are then compared to current fees (revenue collected) and subsidies (or over-recoveries) are identified.

This analysis, along with certain legal, economic and policy considerations, assisted in the development of recommended fee schedules for the following programs: Animal Services, Emergency Medical Services Authority (EMSA, non-ambulance), Public Guardian, Mental Health, Senior Day and Senior Programs, Public Health Clinic, Lab and Vital Statistics. As you will see in the Board agenda, there are six different resolutions to establish HHSA fees.

To provide additional information to you, we have developed a chart for each program that outlines the name of the fee, the new recommended fee amount, the original fee, and the percentage change in the fee if we are recommending an increase or decrease.

A recommendation to change a fee could occur for a variety reasons.

- 1. The fee could be new for HHSA based on a new or enhanced service.
- 2. The original fee could have been in excess of our actual cost of providing the service.
- 3. We could have been significantly under-recovering our cost and are making the recommendation to incrementally increase the recovery percentage.
- 4. We could be recommending recovering full cost with an updated sliding scale option.
- 5. It could have been a substantial number of years since we updated the fee and comparing fees in other Counties in combination with our cost analysis, make it necessary to recommend an incremental increase.

For each fee that has changed by more than 25%, we have provided you with a brief explanation of the change. In the notes column, we provided you with information related to the prior recovery percentage and volume of service. For example, you will notice in Animal Services, we are recommending a decrease in the cat adoption fee from \$80 to \$42. While this represents a 47% decrease in the fee, there is a substantial public benefit to the shelter for cats to be priced at a competitive fee. Additionally, due to the volume of cats typically at the shelter, the program is regularly running discounts for cats.

There are also situations where the fees were decreased due to our actual cost of providing the service was lower than the original fee. There were several examples of this type of fee change in the Public Health Clinic.

The overall impact of the fee study allows us to see how much revenue was calculated utilizing the original fee and how much revenue could be generated if volumes stayed the same utilizing the new recommended fee. Based on the results of the fee study, we calculated a potential increase in revenue of approximately \$134K. While this increase in revenue is an estimate, we will be monitoring fee revenue closely in FY 16/17.

HHSA is recommending the changes to the current fee schedules and we intend on returning to the BOS next year to determine if our fees are appropriate as compared to our actual costs, or if there should be an incremental change in our fees. Additionally, we will be working to establish an annual time to return to the BOS to update the HHSA fee schedules in the future years.

Please let me know if you have any questions or need additional information.

c. Chief Administrative Officer Clerk of the Board

Public Health Laboratory Fees				Increase (Decrease)	
	Recommended			% Change in	
Fee Description	Fee	Origi	nal Fee	Fee	Notes
Blood Lead Level Testing (83655)	\$28.00	\$	28.00	0%	
Rapid Plasma Reagin Qualitative Test	\$7.00	\$	7.00	0%	
Rapid Plasma Reagin Quantitative Test	\$8.00	\$	8.00	0%	
Human Immunodeficiency Virus Antibody Test (Oral or Serum)	\$20.00	\$	16.00	25%	Incremental increase in fee to recover 12% of actual costs. Current fee recovering 9% of full cost.
Treponema pallidum (TP-PA) Syphilis Confirmation	\$25.00	\$	22.00	14%	Incremental increase in fee to recover 14% of actual costs. Current fee recovering 12% of full cost.
Acid-Fast Bacilli Concentrated Test	\$30.00	\$	15.00	100%	Incremental increase in fee to recover 52% of actual costs. Current fee recovering 26% of full cost.
Stool Culture (87045 / 87081)	\$40.00	\$	22.00	82%	Incremental increase in fee to recover 47% of actual costs. Current fee recovering 26% of full cost.
Acid-Fast Bacilli Culture	\$40.00	\$ \$	20.00	100%	Incremental increase in fee to recover 25% of actual costs. Current fee recovering 13% of full cost.
Gram Stain (87205)	\$12.00	\$	12.00	0%	Incremental increase in fee to recover 17% of actual costs. Current
Acid-Fast Bacilli Smear	\$25.00	\$	10.00	150%	fee recovering 7% of full cost.
Stat Standard Wet Mount (87210)	\$15.00	\$	7.00		Incremental increase in fee to recover 17% of actual costs. Current fee recovering 7% of full cost.
Chlamydia Amplified (87491)	\$49.00	\$	49.00	0%	
Gonorrhea Amplified (87591)	\$49.00	\$	49.00	0%	

Public Health Laboratory Fees	Increase (Decrease)									
	Recommended			% Change in						
Fee Description	Fee	(Original Fee	Fee	Notes					
Water Testing: Colilert Presence	\$35.00	\$	18.00		Incremental increase in fee to recover 50% of actual costs. Current fee recovering 26% of full cost.					
Water Testing: Most Probable Number Method	\$46.00	\$	28.00	64%	Incremental increase in fee to recover 50% of actual costs. Current fee recovering 31% of full cost.					
Pertussis Culture (87070)	\$45.00	\$	27.00	67%	Incremental increase in fee to recover 84% of actual costs. Current fee recovering 50% of full cost.					
Viral Polymerase Chain Reaction	\$75.00	\$	45.00	67%	Incremental increase in fee to recover 22% of actual costs. Current fee recovering 13% of full cost.					
Rabies Fluorescent Rabies Antibody: Small Animal	\$60.00	-	60.00	0%						
Rabies Fluorescent Rabies Antibody: Medium Animal	\$100.00		100.00	0%						
Rabies Fluorescent Rabies Antibody: Large Animal	\$150.00	\$	150.00	0%						
Hepatitis C Antibody Test	\$15.00	\$	-		New to fee schedule - Starting to see increase request in this service. Need to establish fee. Recommended fee to recover 12% actual cost.					
QuantiFERON Test	\$80.00	\$	70.00		Incremental increase in fee to recover 37% of actual costs. Current fee recovering 32% of full cost.					
Research/Testing - Hourly Rate	\$161.00	\$	-		New to fee schedule					

Lab fees are potentially recoverable by third party billing entities such as Medi-Cal and Medicare. Additionally, the sliding fee schedule is available to clients who utilize the Public Health Lab.

Public Health Clinic Fees and Vital Statistics Fees

	Recommended	(Original		
Fee Description	Fee		Fee	% of Change	Notes
Public Health Clinic					
Wart Treatment (Male) (54050)	\$99.00	\$	65.00	52%	Incremental increase to recover full cost.
Wart Treatment (Female) (56501)	\$137.00	\$	175.00	-22%	See Note 1
Intrauterine Device (IUD) Removal (58301)	\$182.00	\$	140.00	30%	Incremental increase to recover full cost.
Vision Screening (92499)	\$61.00	\$	50.00	22%	Incremental increase to recover full cost.
Audiometry (92551)	\$61.00	\$	50.00	22%	Incremental increase to recover full cost.
Vision Screening (Snellen) (99173)	\$61.00	\$	50.00	22%	Incremental increase to recover full cost.
Phlebotomy, Therapeutic (99195)	\$50.00	\$	20.00	150%	Incremental increase to recover full cost.
New Focused Visit (99201)	\$79.00	\$	95.00	-17%	See Note 1
New Expanded Visit (99202)	\$91.00	\$	125.00	-27%	See Note 1
New Detailed Visit (99203)	\$117.00	\$	180.00	-35%	See Note 1
New Comprehensive Visit (99204)	\$183.00	\$	235.00	-22%	See Note 1
Established Focused Visit (99211)	\$63.00	\$	65.00	-3%	See Note 1
Established Expanded Visit (99212)	\$74.00	\$	95.00	-22%	See Note 1
Established Detailed Visit (99213)	\$85.00	\$	125.00	-32%	See Note 1
Established Comprehensive Visit (99214)	\$108.00	\$	180.00	-40%	See Note 1
Prolonged Evaluation and Management Before/After Direct Care (99358)	\$91.00	\$	72.00	26%	
Counseling: Initial 10 Minutes (COUN10)	\$79.00	\$	58.00	36%	
Counseling: 11- 15 Minutes (COUN15)	\$74.00	\$	85.00	-13%	See Note 1
Counseling: 16 - 30 Minutes (COUN30)	\$108.00	\$	150.00	-28%	See Note 1
Counseling: 31 - 45 Minutes (COUN45)	\$142.00	\$	210.00	-32%	See Note 1
Urine Dipstick without Microscopy (81002)	\$13.00	\$	13.00	0%	
Pregnancy Test - Urine (81025)	\$30.00	\$	30.00	0%	
Hemoglobin (85018)	\$47.00	\$	26.00	81%	Incremental increase to recover full cost.
Microscopy Provider (87210)	\$57.00	\$	7.00	714%	Incremental increase to recover full cost.
Therapeutic Injection	\$62.00	\$	30.00	107%	Incremental increase to recover full cost.
Antibiotic Injection (90788)	\$62.00	\$	30.00	107%	Incremental increase to recover full cost.
Immunization Administration - Purchased (1 - 3 injections) (90471/90472)	\$40.00	\$	30.00	33%	Incremental increase to recover full cost.
Immunization - Vaccines for Children and State Programs	\$10.00	\$	10.00	0%	
Purchased Vaccine	Actual Cost	Ac	tual Cost	0%	
Occupational Health Clinic Exam (OCC99387)	\$171.00	\$	157.00	9%	
Occupational Health - Fit For Duty (OCC99455)	\$171.00	\$	88.00	94%	Incremental increase to recover full cost.
Tuberculosis Risk Assessment	\$30.00	\$	25.00	20%	Incremental increase to recover full cost.
					Cost reduced to encourage community
Hepatitis "C" Screening	\$25.00	\$	50.00	-50%	screening which is a public health benefit.
Human Immunodeficiency Virus Screening (86701)	\$25.00	\$	22.00	14%	
Occupational Exposures	\$142.00	\$	-	0%	
					New Fee needs to be established on fee
Tuberculosis Purified Protein Derivative (PPD) Skin Test	\$6.00	\$	-	0%	schedule.
Direct Observed Therapy	\$19.50	\$	19.50	0%	

Public Health Clinic Fees and Vital Statistics Fees

	Recommended	Original		
Fee Description	Fee	Fee	% of Change	Notes
Vital Statistics				
Birth Certificate	State			See Note 3
Death Certificate	State			See Note 3
Still Birth Certificate	\$20.00	\$ 20.00		See Note 3
Fetal Death Certificate	State			See Note 3
Disposition (Burial) Permit	State			See Note 3
Home Birth	State			See Note 3
				Fee provided if requested to research vital
Research - Per Hour	\$65.00	\$ -		stats for third party.

Note 1 - Upon review, several fees were determined to be established at a level in excess of full cost to provide the service. We adjusted fees to actual cost if the fee was in excess of full cost.

Note 2 - Clinic fee were reviewed to determine possible over/under recovery of full cost. Additionally, Clinic services utilizes a sliding fee scale for clients that meet the income levels as defined by Medicare. In most cases, a third party payor (ie. Medi-Cal, Medicare, insurance) would cover the cost or a portion of the cost.

Note 3 - Vital statistic fees are set by the California Department of Public Health. HHSA only has the ability to set the fee for the death certificate related to a still birth as defined by Senate Bill 850, the Missing Angels Act.

Senior Day Care and Senior Services Fees

						Increase (Decrease)	
		Rec	ommended				
Fee Description	Unit		Fee	O	riginal Fee	% Change	Notes
Senior Day Care							
*Ten percent (10%) monthly discount for clients who attend at least eleven (1	1) days per month	l					Applies to the per day fee at SDC.
*Twelve percent (12%) monthly discount for clients who attend at least eighted	een (18) days per	month					Applies to the per day fee at SDC.
Enrollment Application Fee		\$	50.00	\$	50.00	0%	
Extended hour fees per 30 minutes	30 Minutes	\$	10.00	\$	10.00	0%	
Late Fee - per minute	Minute	\$	2.00	\$	2.00	0%	
Senior Day Care Fee*	Day	\$	58.00	\$	53.00	9%	This is an incremental increase in the per day rate to recover 73% of actual costs. This change in rate should have occurred over the past several years in accordance with the prior resolution. The SDC facilities have been receiving this additional request for services. By reviewing our current practice, we have determined this is a reasonable service and the fee is established to recover 47% of actual costs to provide the service. The program hopes to increase facility utilization
Client Shower Assistance Fee	Per Event	\$	25.00	\$	-	0%	by making this service available.
Senior Center Services							
Room Charge	Per Use	\$	20.00	\$	20.00	0%	
Kiln Firing, Large	Per Use	\$	7.00	\$	7.00	0%	
Kiln Firing, Small	Per Use	\$	5.00	\$	5.00	0%	
Lapidary Equipment	Per Use	\$	2.00	\$	2.00	0%	
Lost keys (swipe card)	Per Event	\$	15.00	\$	15.00	0%	

Health and Human Services Agency

Public Guardian Fees

				Increase (Decrease)	
Fee Description	Unit	Recommended Fee	Original Fee	% Change	Notes
	Umt	rtt	Original Fee	70 Change	notes
					Incremental change to recover
					50% of actual costs. Currently
					only collecting 34%. Volume of
Estate or Trust Management	Annual	\$1,179.00	\$ 800.00	47%	clients is approx. 155.
Esteradiana Constant de la definidada 2014 California Dalas of Court, Dala 7.702	TT	¢110.00	¢ 05.00	1.00	Based on 75% of cost of Deputy
Extraordinary Compensation as defined by 2016 California Rules of Court, Rule 7.703	Hour	\$110.00	\$ 95.00	16%	Public Guardian.
					Incremental change to recover
					20% of actual costs. Currently
					only collecting 17%. Volume of
New Case	One-time	\$1,433.00	\$ 1,200.00	19%	clients is approx. 17 per year.
					Same recovery percentage based
			* * • • • • • • • • • • • • • • • • • • •		on increased salary and benefit
Per Year (non-Targeted Case Management clients)	Annual	\$1,809.00	\$ 1,800.00	1%	costs.
					Same recovery percentage based on increased salary and benefit
Per year (Targeted Case Management clients)	Annual	\$808.00	\$ 800.00	1%	costs.
	1 1111041	\$000.00	+ 000.00	170	This is a new fee. Currently, we
					store client belonging and do not
					recover funding for this service.
					Amount was set based on local
					storage unit comparable lease
Storage of Belongings	Month	\$35.00	\$ -	0%	rates.

Emergency Medical Services (EMS) Agency Fees

Recumended Fee Recommended Fee Recrease Contract Applications and Fees Recrease Fee Notes Contract Applications and Fees 5 5 0 -200 Resemmend dences in fie to actual costs. Contract Applications 518200 5 25000 -20% Resemmend dences in fie to actual costs. Wheelchair or formey Van Permit Application 53500 5 4.000 -20% Resemmend dences in fie to actual costs. Wheelchair or formey Van Permit Application Fee (Country) 563.00 5 4.000 -20% Incremental change to recover 19% of actual costs. Cortification and Re-Certification Application Fee (Country) 563.00 \$ 1.000 5.00% Incremental fee increase to account for 50% recovery of Incremental fee increase to account for 50% recover						
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Contractor Ambulance Inspection S189.00 \$255.00 <th< th=""><th>Contract Applications and Fees</th><th></th><th></th><th></th><th></th><th></th></th<>	Contract Applications and Fees					
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Reciprocity Certification (County) \$54.00 \$ 10.00 440% full cost. Reciprocity Certification (State) \$75.00 \$ 75.00 0% 0% Reciprocity Certification, background check on file (County) \$51.00 \$ 10.00 410%, full cost. Incremental fee increase to account for 50% recovery of tall cost. Re-Certification, background check on file (County) \$51.00 \$ 10.00 410%, full cost. Re-Certification, no background check on file (County) \$51.00 \$ 37.00 0% Incremental fee increase to account for 50% recovery of tall cost. Re-Certification, no background check on file (County) \$51.00 \$ 37.00 0% Incremental fee increase to account for 50% recovery of tall cost. Re-Certification, no background check on file (County) \$55.00 \$ 10.00 440%, full cost. Re-Certification, no background check on file (State) \$75.00 \$ 10.00 440%, full cost. Re-Certification, no background check on file (State) \$75.00 \$ 10.00 440%, full cost. Re-Certification \$88.00 \$ > 0% New Fee Late Fee for EMT Certification / Accredita	Certification and Re-Certification Application Fee (State)	\$75.00	\$	75.00	0%	
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Re-Certification, background check on file (County) \$51.00 \$ 10.00 410% Incremental fee increase to account for 50% recovery of full cost. Re-Certification, background check on file (State) \$37.00 \$ 37.00 0% Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of full cost. Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of full cost. Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% full cost. Re-Certification no background check on file (County) \$54.00 \$ 10.00 440% full cost. Re-Certification \$88.00 \$ -00% New Fee Incremental fee increase to account for 50% recovery of full cost. Re-Certification \$88.00 \$ -00% New Fee Incremental fee increase to account for 50% recovery of full cost. Re-Certification \$88.00 \$ -00% New Fee Incremental fee increase to account for 50% recovery of full cost. Intermental fee increase \$48.00 \$ 10.00 380% Incremental fee increase to account for 50% recovery of full cost. Intermental fee increase \$48.0		\$54.00	\$	10.00	440%	full cost.
Re-Certification, background check on file (County) S51.00 S 10.00 410% full cost. Re-Certification, background check on file (State) S37.00 S 37.00 0% Re-Certification, background check on file (State) S37.00 S 37.00 Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Automatication, no background check on file (State) S10.00 S 10.00 Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Current fees were established in approximately 1988. Incremental fee increase to account for 50% recovery of Memory Experimental fee increase to account for 50% recovery of Current fees were established in approximately 1988. Incremental fee increase in 6% recover 100% full cost. Re-Certification no background check on file (State) S 0% New Fee Late Fee for EMT Certification / Accreditation S 0 S 0% Mobile Intensive Care Nurse S48.00 S 10.00 380% Increase in fee to recover 100% of full cost. Mobile Intensive Care Nurse EMS Programs	Reciprocity Certification (State)	\$75.00	\$	75.00	070	
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Re-Certification, background check on file (State) \$37.00 \$37.00 0% Re-Certification, no background check on file (County) \$54.00 \$10.00 440% full cost. Re-Certification, no background check on file (State) \$75.00 \$75.00 0% Re-Certification, no background check on file (State) \$75.00 \$75.00 0% Re-Certification no background check on file (State) \$75.00 \$75.00 0% Rush Fee for EMT Certification \$88.00 \$ 0% New Fee Late Fee for EMT Certification \$88.00 \$ 0% New Fee EMS Certification / Accreditation First Responder Tech (Level of Certificate) \$44.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. Mobile Intensive Care Nurse \$44.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. EMS Programs Image: Section 100083, which states: "A LEMSA may establish a schedule of fees for EMT training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this						Incremental fee increase to account for 50% recovery of
Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% full cost. Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% full cost. Re-Certification, no background check on file (State) \$75.00 \$ 75.00 0% Rush Fee for EMT Certification \$88.00 \$ - 0% New Fee Late Fee for EMT Certification \$88.00 \$ - 0% New Fee EMS Certification \$88.00 \$ - 0% New Fee Its Responder Tech (Level of Certificate) \$44.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. Mobile Intensive Care Nurse \$48.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. EMS Programs Increase This new fee is authorized by regulation, Title 22, Chapter 2, Article 6, section 100083, which states: "A tiele 6, section 100083, which states: "A LEMSA may establish a schedule of fees for EMT training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this				10.00		full cost.
Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% Incremental fee increase to account for 50% recovery of the content of the conte	Re-Certification, background check on file (State)	\$37.00	\$	37.00	0%	
Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% Incremental fee increase to account for 50% recovery of the content of the conte						
Re-Certification, no background check on file (County) \$54.00 \$ 10.00 440% Incremental fee increase to account for 50% recovery of the content of the conte						Current fees were established in approximately 1988.
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Late Fee for EMT Certification 588.00 \$ - 0% New Fee EMS Certification / Accreditation First Responder Tech (Level of Certificate) \$48.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. Mobile Intensive Care Nurse \$48.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. EMS Programs This new fee is authorized by regulation, Title 22, Chapter 2, Article 6, section 100083, which states: "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA may establish a schedule of fees for EMT "A LEMSA for experimentation in an amount sufficient to cover the reasonable cost of complying with the provisions of this				75.00	0%	
EMS Certification / Accreditation Image: Construction of the second	Rush Fee for EMT Certification	\$88.00	\$	-	0%	New Fee
First Responder Tech (Level of Certificate) \$48.00 \$10.00 380% Increase in fee to recover 100% of full cost. Mobile Intensive Care Nurse \$48.00 \$10.00 380% Increase in fee to recover 100% of full cost. EMS Programs Image: Comparison of the tot to tot tot tot tot tot tot tot tot	Late Fee for EMT Certification	\$88.00	\$	-	0%	New Fee
Mobile Intensive Care Nurse \$48.00 \$ 10.00 380% Increase in fee to recover 100% of full cost. EMS Programs This new fee is authorized by regulation, Title 22, Chapter 2, Article 6, section 100083, which states: This new fee is authorized by regulation, Title 22, Chapter 2, Article 6, section 100083, which states: "A LEMSA may establish a schedule of fees for EMT raining program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this	EMS Certification / Accreditation	•				
EMS Programs Image: Constraint of the program is a state of the program is a	First Responder Tech (Level of Certificate)	\$48.00	\$	10.00	380%	Increase in fee to recover 100% of full cost.
EMS Programs Image: Constraint of the program is a state of the program is a	Mobile Intensive Care Nurse	\$48.00	\$	10.00	380%	Increase in fee to recover 100% of full cost.
2, Article 6, section 100083, which states: "A LEMSA may establish a schedule of fees for EMT training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this	EMS Programs					
2, Article 6, section 100083, which states: "A LEMSA may establish a schedule of fees for EMT training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this						This new fee is sutherized by send the Tide 00. Cl
"A LEMSA may establish a schedule of fees for EMT training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this						
training program review approval, EMT certification and EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this						
EMT re-certification in an amount sufficient to cover the reasonable cost of complying with the provisions of this						
reasonable cost of complying with the provisions of this						01 0 11 1
	EMT Training Program	\$529.00	\$	-		Chapter."

Emergency Medical Services (EMS) Agency Fees

			Increase (Decrease)	
	Recommended		(Decrease)	
Fee Description	Fee	Original Fee	% Change	Notes
Continuing Education (CE) Provider Designation	\$237.00			This new fee is authorized by regulation, Title 22, Chapter 4, Article 8, section 100172, which states: "A LEMSA may establish a schedule of fees for paramedic training program review and approval, CE provider approval, and paramedic accreditation in an amount sufficient to cover the reasonable cost of complying with the provisions of this Chapter." This fee will provide compensation to cover the time required to review the application, approve the CE Program, monitor the program for compliance, provide updates to the EMS Authority.
	\$257.00	φ -		Autority.
Trauma Center Designation	\$1,001.00	\$ -		This is a new fee for the application of Level III Trauma Centers (specifically Barton and Marshall Hospital) for certification by the EMS Agency. This fee will provide compensation to cover the time required to review the application, develop a contract, and monitor the requirements of the contract as identified in Title 22, Article 3, section 100263.
Air medical Services Rights (New, non-exclusive)	\$1,135.00	\$ -		This new fee will provide compensation to cover the time required to review the Air Ambulance Application, develop a contract, and monitor the requirements of the contract as identified in Title 22, Chapter 8, section 100280.
Medical Marijuana				
Medical Eligible - Medical Marijuana ID (County)	\$142.00	\$ 48.00	10.00	Incremental increases to recover 1000/ of fullt
Medical Eligible - Medical Marijuana ID (County) Medical Eligible - Medical Marijuana ID (State)	\$142.00		196%	Incremental increase to recover 100% of full cost.
Medical Engible - Medical Marijuana ID (State) Medi-Cal Marijuana ID -Patient or Caregiver (County)	\$66.00			Incremental increase to recover 50% of full cost.
Medi-Cal Marijuana ID -Patient of Caregiver (County)	\$33.00	\$ 33.00	0%	
Paramedic Accreditation	\$55.00	- 25.00	070	
Paramedic, Initial Accreditation	\$221.00	\$ 10.00	2110%	
Paramedic- Renew Lapsed Accreditation	\$83.00	\$ 10.00	730%	

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Animal Services Fees					Increase (Decrease)		
	Recommended				% Change to		
Fee Description	. NC	Fee	0	riginal Fee	Original Fees		Notes
Adoptions			Ť	inginari ee	onginarreed		
Dog	Ś	120.00	Ś	120.00	0%		
	Ş	120.00	Ş	120.00	0%		
							New Fee - Public benefit for shelter to be able to
							adopt older dogs. This coincides with a program
Senior Dog (6+ years old)	\$	60.00	Ş	-	0%	New Fee	for seniors to purchase senior dogs.
							Decrease to enhance public adoption of cats due to
							the high volume of animals that are regularly in the
							shelter. HHSA regularly offers a discount program
							for kittens and cats. Adoption fee better matches
Cat/Kitten	\$	42.00	\$	80.00	-47%		current discounted cat program.
Other Small Animals (rabbits, rodents, etc.)	\$	15.00	\$	15.00	0%		
	4			10.00	00/		New Fee - Increasing small animals in the shelter or
Small Livestock	\$	40.00	Ş	40.00	0%	New Fee	being impounded. Establish fee for adoption.
Large Livestock (high act hid over minimum threshold emount set by Chief Animal							Now Food Increasing small onimals in the shelter or
Large Livestock (highest bid over minimum threshold amount set by Chief Animal Services Officer (ACO)	\$	162.00	\$	100.00	630/		New Fee - Increasing small animals in the shelter or
	Ş	163.00	Ş	100.00	03%	New Fee	being impounded. Establish fee for adoption.
							New Fee - Increasing small animals in the shelter or
Exotic Animals	\$	39.00	Ś	_	0%	New Fee	being impounded. Establish fee for adoption.
Dog Licensing	Ŷ		Ŷ		0,0		
	1						Incremental increase to full cost of service. Animal
							Services now recovering full cost. Previously
Dog License - Altered / 1 year license	\$	23.00	Ś	20.00	15%		recovering at 87% of cost.
Dog License - Altered / 3 year license	\$	53.00	\$	50.00	5%		
Dog License - Unaltered / 1 year license	\$	100.00	\$	100.00	0%		
Dog License - Unaltered / 3 year license	\$	150.00	\$	150.00	0%		
Veterinarian License Sale Rebate (1 or 3 year license)	\$	(5.00)	\$	(5.00)	0%		
							Recommend to only recover cost of tag. Takes
							minimal staff time to assist with issuing duplicate
Duplicate License/tag	\$	5.00	\$	18.00	-70%		licenses.
Delinquent License Penalty (30 days past due - added to cost of license)	\$	20.00	Ş	20.00	0%		
Additional penalties for dogs-at-large without valid license:	ć	20.00	ć	20.00	00/		
Expired License (after 30 days - added to cost of license)	\$ \$	20.00	\$ \$	20.00 100.00	0% 0%		
Never Licensed (added to cost of license) Potentially Dangerous Dogs (PDD) / Vicious Dogs (VD):	Ş	100.00	Ş	100.00	0%		
PDD/VD License with Investigation - 1st year (single dog)	Ś	700.00	Ś	700.00	0%		
	ې ا	700.00	ç	700.00	0%		Decrease to full cost as we are not allowed to
PDD/VD License with Investigation - 1st year per additional dog(s) involved in the	ć	106.00	ć	200.00	20/		Decrease to full cost as we are not allowed to
same Incident/Investigation and Annual Renewals	\$ \$	196.00	\$ \$	200.00 20.00	-2% 0%		charge in excess of full cost for fees.
PDD/VD Replacement Dog License	ې د	20.00 25.00	ې د	20.00	0%		
PPD/VD Collar (enables PDD/VD identification, per Ordinance)	Ş	25.00	Ş	25.00	0%		

Animal Services Fees					Increase		
			(Decrease)				
	кесс	ommended	_		% Change to		
Fee Description		Fee	Or	riginal Fee	Original Fees		Notes
Facility Licensing	T						
							Decrease to full cost as we are not allowed to
Grooming Facility License	\$	197.00	\$	355.00	-44%		charge in excess of full cost for fees.
							Decrease to full cost as we are not allowed to
Noncommercial Kennel License	ć	304.00	ć	305.00	-1%		charge in excess of full cost for fees.
Commercial Kennel License	ې \$	355.00	ې Ś	355.00	-1%		charge in excess of full cost for fees.
Kennel re-Inspection(s) required within permit year due to violations (fee	Ş	333.00	Ş	333.00	078		
pplicable to each re-inspection)	Ś	205.00	Ś	205.00	0%		
County Established Impound Fees	Ŷ	205.00	Ļ	205.00	070		
Note: An additional surcharge of 50% is charged for animals impounded in the	City of	South Lake					
Tahoe limits.	city of	Journ Luke					
	ć	75.00	ć	75.00	00/		
Small Animal Impound - 1st (same household, per animal) Small Animal Impound - 2nd (same household, per animal)	\$ \$		\$ \$	75.00 200.00	0% 0%		
onian Annhai Impounu - zhu (same nousenoid, per animal)	Ş	200.00	Ş	200.00	0%		
Small Animal Impound - 3rd, or more (same household, per animal)	Ś	350.00	Ś	350.00	0%		
Small Animal Field Release	ې Ś		ې \$	50.00	0%		
	Ş	50.00	Ş	50.00	078		
			4	175.00	4 70 (Originally recovering only 38%. Incremental
Large Animal Impound - 1st (same household, per animal)	\$	204.00	Ş	175.00	17%		increase to recover 44% of actual costs.
Large Animal Impound - 2nd (same household, per animal)	\$	300.00	\$	300.00	0%		
	~	450.00	÷	450.00	00/		
Large Animal Impound - 3rd or more (same household, per animal) Large Animal Field Release (plus add'l officer(s) charged at hourly rate x actual	\$	450.00	\$	450.00	0%		
ime incurred)	\$	150.00	Ś	150.00	0%		
Unaltered Animal Impound - 1st (same household, per animal)	ې \$		ې Ś	35.00	0%		
Jnaltered Animal Impound - 2nd (same household, per animal)	ş Ś		ş Ś	50.00	0%		
	Ş	50.00	Ş	50.00	078		
Unaltered Animal Impound - 3rd, or more (same household, per animal)	Ś	100.00	Ś	100.00	0%		
Board & Care (Fee Per Day)	Ŷ	100.00	Ļ	100.00	070		
Dogs	\$	27.00	Ś	27.00	0%		
Cats	\$	9.00	Ś	18.00	-52%		
All other Small Animals	\$	9.00	\$	9.00	0%		
	Ľ				0,0		Original recovery rate of 34%. Incremental
Large Animal / Livestock	Ś	37.00	Ś	25.00	48%		increase in fee to recover 50% of cost.
Owner Surrender of Animal (no fee for strays)	\$		\$	60.00	0%		
Dwner Surrender of litter (no fee for strays)	\$		\$	-	\$ 7.5	New Fee	
Miscellaneous							
Microchip (owner request)	\$	25.00	\$	25.00	0%		
Animal Products (e.g., cat carriers)	1	At Cost	\$	-	0%		
Quarantine Initiation / Administration Fee (if quarantined at shelter, other charges	1						
lso apply)	\$	75.00	\$	75.00	0%		
Fluorescent Rabies Antibody (small animal)	\$	148.00	\$	160.00	-8%		
luorescent Rabies Antibody (large animal)	\$	300.00	\$	-	0%	New Fee	
Spay & Neuter							
Spay - Cat	\$	61.00	\$	-	0%	New Fee	

Animal Services Fees	Increase (Decrease)							
	Re	ecommended			% Change to			
Fee Description		Fee	0	Original Fee	Original Fees		Notes	
Neuter - Cat	\$	40.00	\$	-	0%	New Fee		
Spay - Dog	\$	102.00	\$	-	0%	New Fee		
Neuter - Dog	\$	93.00	\$	-	0%	New Fee		
Euthanaisa								
Euthanaisa	\$	60.00	\$	60.00	0%			
Euthanasia with Owner Present	\$	143.00	\$	-	0%	New Fee		
Dead Animal Pick Up/Disposal								
Dead Animal Pick up (Hourly, One Hour Minimum)	\$	100.00	\$	100.00	0%			
Animal Disposal - Dog	\$	30.00	\$	-	0%	New Fee		
Animal Disposal - Cat	\$	30.00	\$	-	0%	New Fee		
Administrataive Fees/Hourly Rates								
Administrative Citation	\$	101.00	\$	70.00	44%			
Kennel Attendant Hourly Rate (adjust annually based on adopted budget)	\$	84.00	\$	90.00	-7%			
Public Services Assistant/Sr. Office Assistant Hourly Rate	\$	89.00	\$	-	0%	New Rate		
Animal Control Officer Hourly Rate (adjust annually based on adopted budget)	\$	107.00	\$	100.00	7%			