

**Cosumnes Community Services District Fire Department
2020 Ordinance No. 7 Fee Schedule (Effective 01-1-2020)**

Task Code	Task Name	Current Fee	Notes
Emergency Medical Services (EMS) Response			
	Ambulance Transport	\$ 1,914	
	Ambulance Transport (Hospital to Hospital)	\$ 1,914	
	Medical Assessment - No Transport	\$ 431	
	Medical Treatment - No Transport	\$ 431	
	Medical Treatment - No Transport (Declaration of Death)	\$ 1,914	
	Supplies (ALS 1)	\$ 66	
	Supplies (ALS 2)	\$ 110	
	BLS (Supplies)	\$ 46	
	Oxygen	\$ 130	
	EKG Monitoring	\$ 117	
	Night Call	\$ 61	
	Cervical Spine Immobilization	\$ 92	
	Cricothyrotomy Kit	\$ 77	
	Continuous Positive Airway Pressure	\$ 167	
	Decontamination (Medic Unit)	\$ 101	
	EZ-IO (Intraseous Infusion)	\$ 158	
	King Tube	\$ 65	
	Intubation (Direct Larangoscopy)	\$ 80	
	King Vision (Video Larangoscopy)	\$ 101	
	Thoroacostomy Kit	\$ 135	
	Mileage	\$ 35	per mile

Ambulance to Patient Offload Time			
	Ambulance to Patient Offload Time (Wall Time)	\$ 38	per 10 minutes

Fee for Ambulance to Patient Offload Time

The fee shall be paid in 10 minute increments after the first 20 minutes of wall time

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First Responder Fee			
	First Responder Fee (fee for service)	\$ 226	per patient

First Responder Fee

The fee shall be paid when an engine company provides basic or advanced life support to patients on emergency medical services incidents.

Lift Assist/Invalid Fee			
	Lift Assist - Invalid Fee	Actual Hourly Rate	3 or more in a calendar year

Fee for Responding to an Excessive Number of Lift Assists

The fee shall be paid by the party, facility, or patient requesting the lift assist when the third lift assist is requested in a given 12-month period