

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

544



FROM: Community Health Agency/ Department of Public Health

SUBMITTAL DATE:
December 2, 2004

SUBJECT: Approve the First Amendment to the Master Ambulance Agreement with American Medical Response (AMR) for emergency ambulance service. #04-038.

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Approve the First Amendment to the Master Agreement with AMR for the placement of an ambulance at Casino Morongo in the amount of \$425,000 annually; and
- 2) Authorize the Chairperson to execute said Amendment on behalf of the County

BACKGROUND: On June 22, 2004, the Riverside County Indian Gaming Local Community Benefit Committee (CBC) approved an MOU with Riverside County EMS Agency in the amount of \$450,000 annually for five (5) years for the placement of an ambulance at Casino Morongo. This MOU will ensure that the Casino's negative impact on ambulance response times to the Banning/Beaumont pass area is mitigated.

In 2003, AMR responded to 246 requests for service to Casino Morongo through the 9-1-1 system. These requests resulted in 138 transports to area hospitals and were handled by existing ambulance

(Continued on Page 2)

SH:cb

Susan D. Harrington
Susan Harrington, Director

Departmental Concurrence

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 318,750	In Current Year Budget:	YES
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	NO FOR FY: 04/05
	Annual Net County Cost:	\$ 0	For Fiscal Year:	

SOURCE OF FUNDS: 100% funded by the Riverside County Indian Gaming Local Community Benefit Committee (CBC).	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION: **APPROVE**

County Executive Office Signature *Dan Martin*

Dept't Recomm.: Consent Policy
 Per Exec. Ofc.: Consent Policy

5007 DEC 12 11:11:07

COUNTY OF RIVERSIDE
07 DEC 13 10:53

Prev. Agn. Ref.: 3/30/04, 16.2 | **District:** 5 | **Agenda Number:**

**ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD**

3.4

Form 11:

COMMUNITY HEALTH AGENCY

SUBJECT: Approve the First Amendment to the Master Ambulance Agreement with American Medical Response (AMR) for emergency ambulance service. #04-038.

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resources in the Banning/Beaumont pass area. The additional calls for service to Casino Morongo often resulted in extended ambulance response times to the Banning/Beaumont pass area.

FINANCIAL DATA:

This amendment will increase the amount of monies paid to AMR by \$425,000 per year for five years, from October 1, 2004, through June 30, 2009. Year 1 funding, covering October 1, 2004 through June 30, 2005 will be prorated accordingly. AMR will receive quarterly payments from the Riverside County EMS Agency and will be required to provide the Riverside County EMS Agency with annual financial and other reports. The remaining \$25,000 will be used to cover the annual Community Health Agency (CHA) and County overhead costs associated with this Amendment.

Form 11 Attachment
Contract/Lease/Purchase Summary Data

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Contract | <input type="checkbox"/> Lease | <input type="checkbox"/> Purchase |
| <input type="checkbox"/> Approval/Renewal | <input type="checkbox"/> Approval/Renewal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Sole Source | <input type="checkbox"/> Mult-Year Lease | <input type="checkbox"/> Other Than Low Bid |
| <input type="checkbox"/> Personal Services | <input type="checkbox"/> Equipment | <input type="checkbox"/> Change Order |
| <input type="checkbox"/> Independent Contractor | <input type="checkbox"/> Real Property | |
| <input type="checkbox"/> Other than low Bid | <input type="checkbox"/> Change Order | |
| <input type="checkbox"/> Change Order | | |

User Department:	Community Health Agency
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Vendor/Lessor Name:	American Medical Response
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Vendor/Lessor Location:	897 Marlborough Ave Riverside, CA 92507-2133

Selection Committee Member Names (RFP=s Only)
Minority

Applicable Board Policy #

Comments:

RFQ/RFP Process:

Date Mailed:
 Response Date:
 # of Responses:
 # of Qualified Responses:

Bidding Process:

Bid Range:	\$	To: \$
Local Bid Range:	\$	To: \$
Responsive and Responsible Bid Range:	\$	To: \$
Local Performance Award Cost (5% maximum preference)	\$	To: \$
Local Preference FYTD: Cost	\$	To: \$

Contract/Lease Renewals Only
Proposed Differences

Existing Agreement Items

Proposed Agreement Items

1. Rates
2. Terms
3. Conditions
4. Legal Issues
5. Accountability