

**AMBULANCE REVENUE and COST REPORT
FIRE DISTRICT and SMALL RURAL COMPANY**

**Arizona Department of Health Services
Annual Ambulance Financial Report**

TOWN OF KEARNY AMBULANCE SERVICE
Reporting Ambulance Service

Address: PO BOX 639
City: KEARNY Zip: 85137

Report Fiscal Year

From: July 1, 2012 To: June 30, 2013
Mo. Day Year Mo. Day Year

I hereby verify that I have directed the preparation of the enclosed annual report in accordance with the reporting requirements of the State of Arizona.

I have read this report and hereby verify that the information provided is true and correct to the best of my knowledge.

This report has been prepared using the accrual basis of accounting.

Authorized Signature:  Date: January 22, 2014
Print Name and Title: ANNA FLORES, INTERIM TOWN MANAGER/TOWN CLERK
Phone: 520-363-5547

Mail to:
Department of Health Services
Bureau of Emergency Medical Services
Certificate of Necessity and Rates Section
150 North 18th Avenue, Suite 540
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AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: TOWN OF KEARNY

FOR THE PERIOD FROM: July 1, 2012 TO: June 30, 2013

STATISTICAL SUPPORT DATA

Line No.	DESCRIPTION	(1) SUBSCRIPTION SERVICE TRANSPORTS	* (2) TRANSPORTS UNDER CONTRACT	(3) TRANSPORTS NOT UNDER CONTRACT	(4) TOTALS
1	Number of ALS Billable Transports:			118	118
2	Number of BLS Billable Transports:			286	286
3	Number of Loaded Billable Miles:				9,303
4	Waiting Time (Hr. & Min.):				
5	Canceled (Non-Billable) Runs:				

AMBULANCE SERVICE ROUTINE OPERATING REVENUE

6	ALS Base Rate Revenue				\$ 135,277
7	BLS Base Rate Revenue				326,349
8	Mileage Charge Revenue				120,273
9	Waiting Charge Revenue				
10	Medical Supplies Charge Revenue				
11	Nurses Charge Revenue				
12	Standby Charge Revenue (Attach Schedule)				
13	TOTAL AMBULANCE SERVICE ROUTINE OPERATING REVENUE			(Post to Page 3, Line 1)	\$ 581,899

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SALARY AND WAGE EXPENSE DETAIL

GROSS WAGES:

			** No. of FTE's
14	Management	\$	
15	Paramedics and IEMTs	\$ 137,300	2.0
16	Emergency Medical Technician (EMT)	\$	
17	Other Personnel	\$	
18	Payroll Taxes and Fringe Benefits - All Personnel	\$ 40,268	
19	Total Wages, Taxes & Benefits (Sum Lines 14 through 18; Post to Page 3, Line 10)	\$ 207,568	

* This column reports only those runs where a contracted discount rate was applied.
 ** Full-time equivalents (F.T.E.) is the sum of all hours for which employees wages were paid during the year divided by 2080.

AMBULANCE REVENUE AND COST REPORT
FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

TOWN OF KEARNY

FOR THE PERIOD

FROM:

July 1, 2012

TO:

June 30, 2013

SCHEDULE OF REVENUES AND EXPENSES

Line No.	<u>DESCRIPTION</u>		
Operating Revenues:			
1	Total Ambulance Service Operating Revenue	(From: Page 2, Line 13)	\$ 581,899
<u>Settlement Amounts:</u>			
2	AHCCCS		_____
3	Medicare		_____
4	Subscription Service		_____
5	Contractual		_____
6	Other		_____
7	Total	(Sum of Lines 2 through 6)	_____
8	Total Operating Revenue	(Line 1 minus Line 7)	\$ 581,899
Operating Expenses:			
9	Bad Debt		\$ 298,449
10	Total Salaries, Wages, and Employee-Related Expenses	(From: Page 2, Line 19)	207,568
11	Professional Services		18,436
12	Travel and Entertainment		-
13	Other General Administrative		2,559
14	Depreciation		25,046
15	Rent / Leasing		_____
16	Building / Station		1,300
17	Vehicle Expense		10,268
18	Other Operating Expense		4,464
19	Cost of Medical Supplies Charged to Patients		24,823
20	Interest		_____
21	Subscription Service Sales Expense		_____
22	Total Operating Expense	(Sum of Lines 9 through 21)	592,913
23	Total Operating Income or (Loss)	(Line 8 minus Line 22)	\$ (11,014)
24	Subscription Contract Sales		_____
25	Other Operating Revenue		45,590
26	Local Supportive Funding		_____
27	Other Non-Operating Income (Attach Schedule)		_____
28	Other Non-Operating Expense (Attach Schedule)		37,000
29	NET INCOME or (LOSS) Before Income Taxes	(Sum of Lines 23 through 27, minus Line 28)	\$ (2,424)
Provision for Income Taxes:			
30	Federal Income Tax		_____
31	State Income Tax		_____
32	Total Income Tax	(Line 30, plus Line 31)	_____
33	Ambulance Service Net Income (Loss)	(Line 29, minus Line 32)	_____