

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

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

CITY OF PAGE FIRE DEPARTMENT AMBULANCE SERVICE

Reporting Ambulance Service

Address: P O BOX 1180

City: PAGE, ARIZONA Zip: 86040

Report Fiscal Year

From: July 1, 2013 To: June 30, 2014
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: Linda Watson Date: December 1, 2014

Print Name and Title: Linda L. Watson, Finance Director

Phone: (928) 645-4203

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Department of Health Services
Bureau of Emergency Medical Services
Certificate of Necessity and Rates Section
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AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: CITY OF PAGE FIRE DEPARTMENT AMBULANCE SERVICE

FOR THE PERIOD FROM: July 1, 2013 TO: June 30, 2014

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:				233
2	Number of BLS Billable Transports:				713
3	Number of Loaded Billable Miles:				13,880
4	Waiting Time (Hr. & Min.):				-
5	Canceled (Non-Billable) Runs:				75

AMBULANCE SERVICE ROUTINE OPERATING REVENUE

6	ALS Base Rate Revenue				\$ 243,130
7	BLS Base Rate Revenue				744,105
8	Mileage Charge Revenue				170,411
9	Waiting Charge Revenue				
10	Medical Supplies Charge Revenue	Included with ALS/BLS Rate Revenue			
11	Nurses Charge Revenue				
12	Standby Charge Revenue (Attach Schedule)				
13	TOTAL AMBULANCE SERVICE ROUTINE OPERATING REVENUE			(Post to Page 3, Line 1)	\$ 1,157,646

SALARY AND WAGE EXPENSE DETAIL

GROSS WAGES:				** No. of FTE's
14	Management		\$ 108,671	2.2
15	Paramedics and IEMTs		\$ 429,096	14.3
16	Emergency Medical Technician (EMT)		\$ 275,981	11.3
17	Other Personnel		\$	
18	Payroll Taxes and Fringe Benefits - All Personnel		\$ 329,971	
19	Total Wages, Taxes & Benefits	(Sum Lines 14 through 18; Post to Page 3, Line 10)	\$ 1,143,720	28

* 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:

CITY OF PAGE FIRE DEPARTMENT AMBULANCE SERVICE

FOR THE PERIOD

FROM:

July 1, 2013

TO:

June 30, 2014

SCHEDULE OF REVENUES AND EXPENSES

<u>Line No.</u>	<u>DESCRIPTION</u>		
Operating Revenues:			
1	Total Ambulance Service Operating Revenue	(From: Page 2, Line 13)	\$ <u>1,157,646</u>
Settlement Amounts:			
2	AHCCCS		<u>107,521</u>
3	Medicare		<u>158,118</u>
4	Subscription Service		<u> </u>
5	Contractual		<u> </u>
6	Other		<u>19,895</u>
7	Total	(Sum of Lines 2 through 6)	<u>285,534</u>
8	Total Operating Revenue	(Line 1 minus Line 7)	\$ <u>872,112</u>
Operating Expenses:			
9	Bad Debt		\$ <u>-</u>
10	Total Salaries, Wages, and Employee-Related Expenses	(From: Page 2, Line 19)	<u>1,143,720</u>
11	Professional Services		<u>49,502</u>
12	Travel and Entertainment		<u>21,443</u>
13	Other General Administrative		<u>52,645</u>
14	Depreciation		<u>-</u>
15	Rent / Leasing		<u>88,093</u>
16	Building / Station		<u>7,848</u>
17	Vehicle Expense		<u>59,912</u>
18	Other Operating Expense		<u>65,563</u>
19	Cost of Medical Supplies Charged to Patients		<u>29,379</u>
20	Interest		<u>12,560</u>
21	Subscription Service Sales Expense		<u>-</u>
22	Total Operating Expense	(Sum of Lines 9 through 21)	<u>1,530,667</u>
23	Total Operating Income or (Loss)	(Line 8 minus Line 22)	\$ <u>(658,555)</u>
24	Subscription Contract Sales		<u> </u>
25	Other Operating Revenue		<u> </u>
26	Local Supportive Funding		<u>658,555</u>
27	Other Non-Operating Income (Attach Schedule)		<u> </u>
28	Other Non-Operating Expense (Attach Schedule)		<u> </u>
29	NET INCOME or (LOSS) Before Income Taxes	(Sum of Lines 23 through 27, minus Line 28)	\$ <u>0</u>
Provision for Income Taxes:			
30	Federal Income Tax		<u>-</u>
31	State Income Tax		<u>-</u>
32	Total Income Tax	(Line 30, plus Line 31)	<u>-</u>
33	Ambulance Service Net Income (Loss)	(Line 29, minus Line 32)	<u>-</u>

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: CITY OF PAGE FIRE DEPARTMENT AMBULANCE SERVICE

FOR THE PERIOD FROM: July 1, 2013 TO: June 30, 2014

BALANCE SHEET

SEE ATTACHED COPY OF ANNUAL FINANCIAL STATEMENT

ASSETS

CURRENT ASSETS

1	Cash	\$		
2	Accounts Receivable			
3	Less: Allowance for Doubtful Accounts			
4	Inventory			
5	Prepaid Exper			
6	Other Current Assets			
7	TOTAL CURRENT ASSETS			\$ <u> </u>

9	PROPERTY & EQUIPMENT			
10	Less: Accumulated Depreciation			

11 OTHER NON CURRENT ASSETS

12 TOTAL ASSETS \$

LIABILITIES & EQUITY

CURRENT LIABILITIES

13	Accounts Payable	\$		
14	Current Portion of Notes Payable			
15	Current Portion of Long-Term Debt			
16	Deferred Subscription Income			
17	Accrued Expenses and Other			
18			
19			
20	TOTAL CURRENT LIABILITIES			\$ <u> </u>

21 NOTES PAYABLE

22 LONG-TERM DEBT, OTHER

23 TOTAL LONG-TERM DEBT

EQUITY & OTHER CREDITS

Paid-In Capital:

24	Common Stock			
25	Paid-In Capital in Excess of Par Value			
26	Contributed Capital			
27	Retained Earnings			
28			-
29			-
30	Fund Balance			-
31	TOTAL EQUITY			<u> </u>

32 TOTAL LIABILITIES & EQUITY \$

AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: _____

CITY OF PAGE FIRE DEPARTMENT AMBULANCE SERVICE

FOR THE PERIOD

FROM: July 1, 2013

TO: June 30, 2014

STATEMENT OF CASH FLOWS

SEE ATTACHED COPY OF ANNUAL FINANCIAL STATEMENT

OPERATING ACTIVITIES:

1	Net (loss) Income		\$ _____
	<i>Adjustments to Reconcile Net Income to Net Cash</i>		
	<i>Provided by Operating Activities:</i>	Note: a increase in these accounts improves cash flow	
2	Depreciation Expense		_____
3	Deferred Income Tax		_____
4	Loss (gain) on Disposal of Property & Equipment		_____
	<i>(Increase) Decrease in:</i>	Note: a decrease in these accounts improves cash flow	
5	Accounts Receivable		_____
6	Inventories		_____
7	Prepaid Expenses		_____
	<i>Increase (Decrease) in:</i>	Note: a increase in these accounts improves cash flow	
8	Accounts Payable		_____
9	Accrued Expenses		_____
10	Deferred Subscription Income		_____
11	NET CASH PROVIDED (Used) BY OPERATING ACTIVITIES		\$ _____

INVESTING ACTIVITIES:

12	Purchases of Property & Equipment		
13	Proceeds from Disposal of Property & Equipment		_____
14	Purchases of Investments		_____
15	Proceeds from Disposal of Investments		_____
16	Loans Made		_____
17	Collections on Loans		_____
18	Other		_____
19	NET CASH PROVIDED (Used) BY INVESTING ACTIVITIES		_____

FINANCING ACTIVITIES:

	<i>New Borrowings:</i>		
20	Long-Term		_____
21	Short-Term		_____
	<i>Debt Reduction:</i>		
22	Long-Term		_____
23	Short-Term		_____
24	Capital Contributions		_____
25	Dividends Paid		\$ _____
26	NET CASH PROVIDED (Used) BY FINANCING ACTIVITIES		_____
27	NET INCREASE (Decrease) IN CASH		_____
28	CASH AT BEGINNING OF YEAR		_____
29	CASH AT END OF YEAR		_____

SUPPLEMENTAL DISCLOSURES:

	<i>Non-cash Investing and Financing Transactions:</i>		
30	_____		_____
31	_____		_____
32	_____		_____
33	Interest Paid (Net of Amounts Capitalized)		_____
34	Income Taxes Paid		\$ _____