

Discussed in brief with the RASEC team on Jul 15 – as of this date, I find no answers communicated to the public.

What are the measures by which we gauge success of an ambulance service? What are those values now, throughout the past 12 months, and in previous years under other providers and under the county?

What are we endeavoring to do relative to how we measure quality and efficiency of the service?

Were unrecoverable receivables written off by the current provider? By previous providers or during the periods when the county ran the service? If so, how much and what were the categories of unrecoverables?

Cost to run ambulance

Total

Revenue to county run model

Billable riders

Private

Medicare/caid

Frontier profit

Transfers

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= Net gap for county/others?

County or city contribution today?

What are the qualifications/experience you'd look for in an ambulance dept leader? Why did previous leaders while under the county depart or were removed whatever the case may have been? How do we mitigate the risk of those situations coming up again going forward