

**SPECIAL MEETING NOTICE/AGENDA OF THE
SPOKANE CITY COUNCIL**

**MEETING OF THURSDAY, MAY 21, 2020
11:00 A.M. – CITY COUNCIL CHAMBERS**

Notice is hereby given that, pursuant to Governor Jay Inslee's Third Updated Proclamation 20.28.2 dated May 5, 2020, all public meetings subject to the Open Public Meetings Act, Chapter 42.30 RCW, are to be held remotely and that the in-person attendance requirement in RCW 42.30.030 has been suspended until at least May 31, 2020.

A Special Administrative Session of the Spokane City Council will be held virtually via WebEx teleconferencing at 11:00 a.m., Thursday, May 21, 2020, in order to consider the matters listed below. In addition, the City Council will hold its regularly scheduled Study Session.

The public will be able to tune into the meeting by viewing the meeting live at Channel 5, or at <https://my.spokanecity.org/citycable5/live>, or by calling 1-408-418-9388 and entering the access code #964 089 318; meeting password 0320. Due to the suspension of the in-person attendance requirement, no public testimony will be taken on the items under consideration. However, written public comment may be submitted via email to CityCouncil2@SpokaneCity.org.

Following the Special Administrative Session, the City Council will re-adjourn into its regularly scheduled Study Session. The meeting will be conducted in a study session format. Discussion will be limited to appropriate officials, presenters and staff.

SPECIAL ADMINISTRATIVE SESSION AGENDA

ROLL CALL

CONTRACTS

1. Contract Amendment/Extension with American Medical Response Ambulance Service, Inc. (Spokane, WA) from June 1, 2020, through May 31, 2025—\$329,112 for 2020. (deferred from May 18, 2020, Agenda)
2. Letter to the WA State Liquor and Cannabis Board regarding restaurant alcohol service during COVID-19 recovery

ORD C35909	Modifying requirements for sidewalk cafes, parklets and streateries in Spokane; amending SMC Sections 10.28.040, 10.28.050, 10.55.040, and 10.55.050; and declaring an emergency
-------------------	--

STUDY SESSION AGENDA

- Presentation on Childcare Impacts of COVID-19
- Finance Presentations:
 - Police Operations Presentation
 - Fire Operations Presentation

EXECUTIVE SESSION

At any time during or after the special meeting, the City Council may choose to adjourn into Executive Session for the purpose of discussing privileged legal matters. This portion of the meeting would be closed to the public pursuant to RCW 42.30.110.



Agenda Sheet for City Council Meeting of:

05/18/2020

Date Rec'd	5/6/2020
Clerk's File #	OPR 2015-0314
Renews #	

Submitting Dept	FIRE	Cross Ref #	
Contact Name/Phone	MIKE LOPEZ X7092	Project #	
Contact E-Mail	MLOPEZ@SPOKANE CITY.ORG	Bid #	
Agenda Item Type	Contract Item	Requisition #	
Agenda Item Name	FIRE - AMBULANCE SERVICES CONTRACT AMENDMENT		

Agenda Wording

Contract amendment/extension with American Medical Response Ambulance Service, Inc.. Contract extension will be June 01, 2020 through May 31, 2025.

Summary (Background)

AMR agreed to provide advanced Life Support (ALS - paramedic) emergency and non-emergency ambulance services at the request of the Combined Communications Center on behalf of the Fire Department twenty four (24) hours daily, seven (7) days a week. All persons needing service shall be served without regard to place of residence, financial condition, presence or absence of medical insurance and type of ailment or injury suffered.

Fiscal Impact	Grant related?	NO	Budget Account
	Public Works?	NO	
Revenue	\$ \$329,112 (2020)		# 1970-35121-99999-34221-99999
Select	\$	#	
Select	\$	#	
Select	\$	#	
Approvals	Council Notifications		
<u>Dept Head</u>	SCHAEFFER, BRIAN	<u>Study Session\Other</u>	PSCHC 05/04/2020
<u>Division Director</u>	SCHAEFFER, BRIAN	<u>Council Sponsor</u>	
<u>Finance</u>	BUSTOS, KIM	Distribution List	
<u>Legal</u>	ODLE, MARI	mlopez@spokanecity.org	
<u>For the Mayor</u>	CRAGO, WES	fireaccounting@spokanecity.org	
Additional Approvals		bschaeffer@spokanecity.org	
<u>Purchasing</u>			

Expenditure Control Form



1. All requests being made must be accompanied by this form.
2. Route ALL requests to the Finance Department for signature.
3. If request is greater than \$100,000 it requires signatures by Finance and the City Administrator. Finance Dept. will route to City Administrator.

Today's Date: 04/16/2020 **Type of expenditure:** Goods Services

Department: Fire

Approving Supervisor: Mike Lopez

Amount of Proposed Expenditure: n/a-revenue contract

Funding Source: 1970-35121-99999-34221-99999

Please verify correct funding sources. Please indicate breakdown if more than one funding source.

Why is this expenditure necessary now?

N/A

What are the impacts if expenses are deferred?

N/A

What alternative resources have been considered?

N/A

Description of the goods or service and any additional information?

Person Submitting Form/Contact:

FINANCE SIGNATURE:

CITY ADMINISTRATOR SIGNATURE:



City of Spokane

CONTRACT AMENDMENT/EXTENSION

Title: AMBULANCE SERVICES

This Contract Amendment/Extension is made and entered into by and between the **City of Spokane** as ("City"), a Washington municipal corporation, and **AMERICAN MEDICAL RESPONSE AMBULANCE SERVICE, INC.**, a Delaware corporation, whose address is 915 West Sharp Avenue, Spokane, Washington 99201 ("AMR"), individually hereafter referenced as a "party", and together as the "parties".

WHEREAS, the parties entered into a Contract wherein AMR agreed to provide advanced Life Support (ALS - paramedic) emergency and non-emergency ambulance services at the request of the Combined Communications Center on behalf of the Fire Department twenty four (24) hours daily, seven (7) days a week. All persons needing service shall be served without regard to place of residence, financial condition, presence or absence of medical insurance and type of ailment or injury suffered. AMR shall provide Advanced Life Support (ALS - paramedic) staffed ambulances at all times; and

WHEREAS, a change or revision of the contract terms has been requested, and the Contract time for performance shall be extended, thus the original Contract needs to be formally Amended and Extended by this written document; and

-- NOW, THEREFORE, in consideration of these terms, the parties mutually agree as follows:

1. CONTRACT DOCUMENTS.

The Contract, dated May 1, 2015 and May 18, 2015, any previous amendments, addendums and / or extensions / renewals thereto, are incorporated by reference into this document as though written in full and shall remain in full force and effect except as provided herein.

2. EFFECTIVE TERM.

This Contract Amendment/Extension shall begin on June 1, 2020 and end on May 31, 2025. This contract term may be renegotiated prior to end date if mutually agreed upon by all parties.

3. AMENDMENT/ADDITIONAL WORK.

The original contract is hereby amended to include the following:

- Article 1, Section 1- Modify "AMR shall provide Advanced Life Support (ALS - paramedic) staffed ambulances at all times" to "AMR shall provide Advanced Life Support (ALS - paramedic) staffed ambulances and Basic Life Support (BLS-emergency medical technician) staffed ambulances at all times"

- Article 2, Section 1. Modify “Prior to the Agreement commencement, AMR shall present to the City’s Contract Administrator a written system status plan of Ambulance transport coverage to be approved by the City’s Fire Chief for the term of the Agreement” to “*Prior to addition of BLS resources, AMR shall present to the City’s Contract Administrator a written system status plan of Ambulance transport coverage to be approved by the City’s Fire Chief for the term of the Agreement or Public Health Crisis*”
- Article 2, Section 5. “...AMR shall not accept any request for ambulance service unless it is able to respond immediately with a paramedic-staffed vehicle...” to “*...AMR shall not accept any request for ambulance service unless it is able to respond immediately with a transport capable vehicle (ALS or BLS)*”.
- Article 2 Section 11. Response Time Requirements and Liquidated Damages. Response time requirements and liquidated damages may be deferred, at the discretion of the City’s Fire Chief, should the public health crisis result in a surge of EMS patients that inhibits the ability to safely meet response time criteria due to prolonged decontamination procedures, loss of personnel to staff ambulances due to exposure, or excess demand on ambulance resources.
- -AMR shall partner in the responsibility for certain 31A and 31B call types as the sole responding agency.
- Exhibit C to the original Agreement is amended and attached hereto.

IN WITNESS WHEREOF, in consideration of the terms, conditions and covenants contained, or attached and incorporated and made a part, the parties have executed this Contract Amendment/Extension by having legally-binding representatives affix their signatures below.

AMERICAN MEDICAL RESPONSE
AMBULANCE SERVICE, INC.

By _____
Signature _____ Date _____

Type or Print Name

Title

Attest:

City Clerk

CITY OF SPOKANE

By _____
Signature _____ Date _____

Type or Print Name

Title

Approved as to form:

Assistant City Attorney

AMENDED APPENDIX C
INITIAL RATE SCHEDULE

Item	Amount charged (2020-2021 Agreement year)
BLS Emergency Rate	\$975
ALS – 1 Emergency Rate	\$975
ALS – 2 Rate	\$975
Mileage Rate (per mile)	20.99
Oxygen Rate	52.49



Spokane Fire Department Ambulance Contract

June 2020 Contract Renewal

Introduction

The City of Spokane has a sole provider contract for the provision of emergency medical transportation with American Medical Response (AMR). The current contract is a five-year contract with an automatic renewal for five years at the discretion of the City and based upon the contractor's clinical, customer service and operational performance. The initial five-year period concludes in June and the five-year renewal period is currently being discussed. The Fire Department is presenting, at this time, a one-year contract extension to address the impacts of the COVID-19 Pandemic Public Health Crisis.

The current Pandemic health care crisis requires the City to consider interim modifications to the contract in order to mitigate impacts of the COVID-19 outbreak on normal operations. These impacts include:

1. Significant increase in the number of, and time spent performing crew, equipment and vehicle decontamination;
2. Increased surge of patients. The outbreak quickly overwhelmed EMS and hospital emergency departments in the Puget Sound area; and
3. Increased absenteeism of the AMR workforce as a result of exposure and required isolation.

Recommended modifications to the proposed contract extension include:

1. During the course of the COVID-19 outbreak, the City waives liquidated damages and response time penalties due to extended out-of-service times for decontamination procedures;
2. Permits AMR to use EMT-staffed ambulance to compensate for reduced numbers of Paramedics due to exposure and predicted surge in number of COVID-19 related EMS incidents;
3. To conserve essential Fire Department resources, AMR will respond without Fire Department resources to all Alpha and Bravo (low acuity) EMS incidents; and
4. Authorizes an increase in the ambulance service rates outside of the contractually allowed inflationary adjustments based on the All Urban Consumer Price Index.

Pricing

Spokane's ambulance rates are among the lowest in comparison to a number of communities in the Pacific Northwest. The Fire Department recently conducted a rate survey of thirteen different communities in Washington, Oregon and Idaho. Rates in these communities increased at a much higher percentage than Spokane's. The changes are in response to increased costs associated with providing ambulance service and the closely regulated reimbursement policies of both Federal and State government insurers. The following chart provides a summary of the findings of this survey that was done in April of 2020.

	ALS I Base	ALS II Base	BLS Base	Per Mile	O2 Fee	Treat/No Transp.- BLS	Treat/No Transport -ALS
Cowlitz Co.	\$2,007.21	N/A	\$2,007.21	\$31.14	N/A	N/A	N/A
Clark Co.	\$1,234.21	N/A	\$1,234.21	\$16.22	N/A	N/A	N/A
Grant Co.	\$1,691.20	N/A	\$1,691.20	\$24.94	N/A	N/A	N/A
Lewis Co.	\$1,629.45	N/A	\$1,629.45	\$24.94	N/A	N/A	N/A
Tacoma	\$2,827.44	N/A	\$2,827.44	\$23.38	N/A	N/A	N/A
East Pierce Fire	\$1,050.00	\$1,150.00	\$850.00	\$22.00	N/A	N/A	N/A
Seattle	N/A	N/A	\$2,860.00	N/A	N/A	N/A	N/A
Spokane- Current	\$757.39	N/A	\$757.39	\$22.88	\$57.21	N/A	N/A
Spokane Co.- Current	\$857.39	N/A	\$857.39	\$20.99	\$57.21	N/A	N/A
So. Snohomish Fire & Rescue	\$975.00	\$1,075.00	\$650.00	\$18.00	N/A	N/A	N/A
Clackamas Co., OR	\$1,257.05	N/A	\$1,257.05	\$26.33	N/A	N/A	N/A
Kootenai Co. ID	\$903.00	\$1,009.00	\$717.00	\$16.50	N/A	\$319.00	N/A
Ada Co., ID	\$978.15	\$1,087.42	\$660.94	\$14.32	\$64.71	\$136.86	\$317.21
Kittitas Valley Fire	\$875.00	\$960.00	\$675.00	\$19.00	N/A	N/A	N/A



Ambulance Service Contract Extension

April 2020

Impact of a Rate Increase

Spokane is unique in that a major percentage (76%) of people transported in the community are enrollees of Medicare, Medicaid, Government-managed health insurance (e.g., VA) or Medicare Managed Programs. These insurers all have “fixed” rates of reimbursement that do not change in the face of a rate increase. Rates charged by ambulance services are regulated by these insurers and ambulance providers are prohibited from collecting the difference between the charges “allowed” by these insurers and the actual charge. In essence, there is no additional out-of-pocket expense incurred by the patient due to the rate increase for this portion of the patient population. The table below provides a comparison between the current AMR rate and the amount allowed by both Medicaid and Medicare.

Charge Category	Current AMR Rate	Medicaid Reimbursement	Medicare Reimbursement
ALS Base Rate	\$757.39	\$168.43	\$381.77
BLS Base Rate	\$757.39	\$115.34	\$381.77
Mileage Rate	\$22.88	\$7.62	\$5.08
Oxygen	\$57.21	Not Allowed	Not Allowed

The remaining 24% of patients are covered by third-party commercial insurers with whom AMR has pre-set contractual prices (typically 80% of the recognized patient charges) or individuals who are not insured and not employed whose charges will, in most cases, be written off to uncompensated care. The actual impact to the consumer is minimal and the ambulance company projects that their organization will actually receive about 6% of the increase that the City grants due to the nuances of ambulance service reimbursement.

Conclusion

The recommended modifications to the current contract will allow the EMS System to continue responding in an efficient manner during the current public health crisis. Proposed operational modifications will:

- Permit safe and methodical decontamination of personnel and equipment without the increased pressure of quick turn-around times;
- Permits the ambulance company to adequately respond in the face of work force isolation due to exposure; and
- Conserves Fire Department resources by assigning AMR to respond to low acuity (Alpha and Bravo) calls and avoid sending Fire Department resources that may be stressed by a surge in EMS incidents due to the outbreak.

Spokane enjoys one of the lowest ambulance rate amounts among a number of communities in Washington, Oregon and Idaho. An increase in the contractual rates addresses the changes in labor agreements as well as the increased cost of providing service. The amount of out-of-pocket expense faced by the patient is minimal among the more vulnerable people living in Spokane (older adults, low income, and chronically ill individuals) because Medicare and Medicaid have fixed reimbursement amounts that do not change in the face of a rate increase. AMR consistently provides quality service and when issues arise, they are quick to work with the Fire Department to resolve concerns.



CITY OF SPOKANE FIRE DEPARTMENT
AMBULANCE RATE BRIEFING

Introduction

The City of Spokane has a current sole provider contract for the provision of emergency medical transportation with American Medical Response (AMR). The current contract is a five-year contract with an automatic renewal for five years at the discretion of the City and based upon the contractor's clinical, customer service and operational performance. The initial five-year period concludes in June and the five-year renewal period is currently being discussed.

The current COVID-19 outbreak is significantly influencing this process and an interim contract extension period of one (1) year is proposed. The interim period considers the impact of the COVID-19 outbreak on the provision of EMS services as a whole, inclusive of AMR's operations. This includes

1. Significant increase in the number of, and time spent performing crew, equipment and vehicle decontamination;
2. Increased surge of patients. The outbreak quickly overwhelmed EMS and hospital emergency departments in the Puget Sound area; and
3. Increased absenteeism of the AMR workforce as a result of exposure and required isolation.

Discussion and Recommendations

The interim period considers the impact of the COVID-19 outbreak on the provision of EMS services. Interim language addresses the known impacts of the outbreak including:

- **Impact on Response Times.** The nature of the pandemic outbreak requires extended ambulance and equipment decontamination procedures. This includes making sure AMR personnel are adequately decontaminated as well as ambulance equipment (stretcher, medical equipment, etc.) and the ambulance itself. Extended ambulance decontamination provides protection for subsequent patients as well as EMS response personnel to minimize exposure to the disease. Extended decontamination procedures result in delays. **Recommendation:** During the course of the COVID-19 outbreak, the City waives the liquidated damages and response time penalties due to extended out of service times for decontamination procedures.
- **Workforce Impacts.** While every precaution is taken to assure the safety of EMS responders, inadvertent exposure to the disease requires isolation from work. Recently, as many as twelve AMR employees were under self-isolation. This can have a profound impact on Paramedic staffing to the point where it may not be possible to staff all AMR units with a Paramedic. In the event of such a situation, staffing with EMT's is a viable solution. **Recommendation:** The interim renewal language allows use of EMT staffed ambulances to compensate for reduced numbers of Paramedics as the pandemic continues.
- **Potential Volume Surge.** Currently, the prevalence of the disease in the Spokane community is manageable. A sudden change in that status resulting in a significant increase in transport requests will result in the need to utilize ambulances staffed with EMT's to provide transport for people with moderate symptoms. Permitting use of EMT-staffed ambulances allows the system to maintain adequate transport service. **Recommendation:** The interim renewal language allows use of EMT staffed ambulances to augment existing resources to adequately address surge that occurs.

- **Conservation of SFD Resources.** In the presence of the pandemic outbreak, assigning Fire Department resources to an increased number of low-acuity incidents reduces the Fire Department's readiness for high acuity EMS patients, fire suppression and other fire-related calls. Assigning only AMR units to low acuity (Alpha and Bravo) calls preserves the Fire Department's resources while still maintaining appropriate service to the citizens.
Recommendation: The interim contract language assigns AMR only to respond to low acuity (Alpha and Bravo) calls without Spokane Fire Department resources responding concurrently.
- **Pricing.** The increased cost of PPE, decontamination equipment and additional ambulances that respond to Alpha and Bravo level calls increases the cost of providing service. The interim contract language permits an increase in current pricing structure to offset these costs. Pricing will be discussed further in the following information.

Pricing

In addition to the operational modifications to the existing contract, AMR requests the City's consideration for an increase in the contractually agreed upon pricing structure. Since the inception of the sole provider ambulance service contract, ambulance prices in Spokane continue to be among the lowest in the Region as well as some other areas in the U.S. The cost of providing the service exceeds the revenue generated by transports. This is due, in part, to several factors including:

- Increased labor costs;
- Increased benefits including the mandatory sick leave that WA State law requires;
- Increased costs associated with the COVID-19 response (e.g., increased PPE use, and decontamination supplies); and
- Proposed system modifications previously discussed will increase AMR's costs (additional system resources to respond to any surge that occurs).

Part of the due diligence associated with considering any rate increase beyond the contractually permitted cost of living increase includes evaluating ambulance rates in other areas of the Pacific Northwest. A similar study was performed during the pre-bid period associated with the ambulance service bid in 2015. At that time, AMR's pricing was below the majority of the communities that responded to our inquiry. In early April of 2020, the Fire Department conducted another survey of the same communities as well as several others in the Northwest. Current AMR Spokane Rates are significantly below those of most other communities we polled. AMR Spokane's rate increase is based upon the all urban consumer price index. Since 2015, the increase is approximately 7%. During the same time period, the communities that we polled experienced a range of inflation from a low of 5% to a high of 60%. The experience in many other communities reflects the changes in wages and benefits, low reimbursement from insurers, and the increased cost of capital equipment. The following chart provides a summary of the information gathered during the most current rate comparison exercise.

	ALS I Base	ALS II Base	BLS Base	Per Mile	O2 Fee	Treat/No Transp.-BLS	Treat/No Transport- ALS
Cowlitz Co.	\$2,007.21	N/A	\$2,007.21	\$31.14	N/A	N/A	N/A
Clark Co.	\$1,234.21	N/A	\$1,234.21	\$16.22	N/A	N/A	N/A
Grant Co.	\$1,691.20	N/A	\$1,691.20	\$24.94	N/A	N/A	N/A
Lewis Co.	\$1,629.45	N/A	\$1,629.45	\$24.94	N/A	N/A	N/A
Tacoma	\$2,827.44	N/A	\$2,827.44	\$23.38	N/A	N/A	N/A
East Pierce Fire	\$1,050.00	\$1,150.00	\$850.00	\$22.00	N/A	N/A	N/A
Seattle	N/A	N/A	\$2,860.00	N/A	N/A	N/A	N/A
Spokane- Current	\$757.39	N/A	\$757.39	\$22.88	\$57.21	N/A	N/A
Spokane Co.- Current	\$857.39	N/A	\$857.39	\$20.99	\$57.21	N/A	N/A
So. Snohomish Fire & Rescue	\$975.00	\$1,075.00	\$650.00	\$18.00	N/A	N/A	N/A
Clackamas Co., OR	\$1,257.05	N/A	\$1,257.05	\$26.33	N/A	N/A	N/A
Kootenai Co. ID	\$903.00	\$1,009.00	\$717.00	\$16.50	N/A	\$319.00	N/A
Ada Co., ID	\$978.15	\$1,087.42	\$660.94	\$14.32	\$64.71	\$136.86	\$317.21
Kittitas Valley Fire	\$875.00	\$960.00	\$675.00	\$19.00	N/A	N/A	N/A

Notes:

1. N/A is used to denote that there is no charge for this item
2. Clark County, Tacoma, Seattle, Clackamas Co. Oregon, Spokane and Spokane County are all AMR operations under a sole provider contract with that jurisdiction. Source of data is AMR's contractual rates as identified in that jurisdiction
3. Cowlitz, and Lewis Counties reflect AMR rates as they are the primary ambulance provider in those jurisdictions
4. Kittitas Valley Fire & Rescue has a County resident fee and a Non-Resident fee. The charges in the table are for residents of Kittitas County. Non Resident fees are: ALS I- \$1,145; ALS II - \$1,275; BLS- \$885. KVF&R also charges a non-emergent BLS fee for interfacility transports.
5. Kootenai Co. EMS and Ada Co. EMS in Idaho charge a "Treat and No Transport" Fee.
6. Kootenai Co. EMS charges based on resident vs. non-resident as Kootenai County is considered a legal "Ambulance District" under Idaho state law and receives a county tax subsidy through the ambulance district tax. The rates reflect non-resident charges.

The reimbursement environment is also a key component in the consideration of a rate increase above the contractual limits of the consumer price index. There is a perception that the effects are most pronounced among our community's vulnerable populations including older adults, unemployed, and low wage earners. Any additional out-of-pocket expense will negatively impact these people.

Fortunately, the greater percentage of these vulnerable people are insured by either Medicare (older adults), Medicaid (expansion of coverage as a result of the Affordable Care Act) or a combination of

both. Federal and State insurers control this impact by establishing fixed levels of reimbursement for ambulance services and prohibiting providers from pursuing payment for a significant amount of the difference between the actual charge and the fixed reimbursement amount. Therefore, a rate increase does not affect the actual out-of-pocket expense to the consumer.

For Medicare enrolled recipients, the Federal government has a fixed “allowed” level that an ambulance service will receive. Medicare will reimburse the ambulance provider 80% of the allowed \$381.77 (ALS). The ambulance service may only seek payment for the remaining 20% which in many cases is covered by a commercial Medicare co-insurance program or Medicaid. The difference between the fixed amounts “allowed” by Medicare and the actual charge is required to be written off by the ambulance provider and they cannot seek payment from the patient for this difference. Medicare does not pay for ancillary items such as medications, heart monitoring, IV fluids, bandages, etc. An increase in the contractual base rate does not impact the amount Medicare reimburses the ambulance provider. The \$381.77 (ALS Base rate) is the maximum amount Medicare will reimburse the provider.

Medicaid follows a similar path but at a much lower “allowed” amount. In Washington State, the Health Care Authority reimburses \$115.34 for Basic Life Support Service and \$168.43 for Advanced Life Support Service. Medicaid pays the ambulance provider \$5.08 per mile. Medicaid also does not reimburse for ancillary items such as IV fluids, bandages, etc. The amount that Medicaid reimburses the ambulance service is the total amount of revenue received by the provider. The provider is prohibited from seeking payment for the difference between the Medicaid amount and the actual charge.

In Spokane, Medicare and Medicaid programs comprise approximately 76% of the total number of people transported in Spokane. Of this, 27% are Medicaid and 49% are Medicare, Government Managed Care or a Medicare Managed program. There is no incremental increase in the out-of-pocket expense resulting from a rate increase and no additional revenue realized by the ambulance provider. The following table provides a comparison of the current contractual rate and the fixed rate of reimbursement for Medicare and Medicaid enrollees.

Charge Category	Current AMR Rate	Medicaid Reimbursement	Medicare Reimbursement
ALS Base Rate	\$757.39	\$168.43	\$381.77
BLS Base Rate	\$757.39	\$115.34	\$381.77
Mileage Rate	\$22.88	\$7.62	\$5.08
Oxygen	\$57.21	Not Allowed	Not Allowed

The remaining 24% of individuals are covered by a variety of commercial third party payers (e.g., Regence, Kaiser, etc.) with 7% of the transports considered to be “private pay”. All of the third party commercial insurers negotiate a reduced rate of reimbursement for ambulance services (typically reimbursing at 80% of the actual rate, depending upon the contract).

This information is presented to demonstrate that the ambulance provider will actually capture about 6% of the increased rate as a result of the nuances of insurance reimbursement for ambulance service (e.g., a \$500 rate increase will generate \$30 in actual revenue).

Conclusion

The recommended modifications to the current contract will allow the EMS System to continue responding in an efficient manner during the current public health crisis. Spokane enjoys one of the lowest ambulance rate experience among a number of communities in Washington, Oregon and Idaho. An increase in the contractual rates addresses the changes in labor agreements as well as the increased cost of providing service. The amount of out-of-pocket expense faced by the patient is minimal among the more vulnerable people living in Spokane (older adults, low income, and chronically ill individuals) because Medicare and Medicaid have fixed reimbursement amounts that do not change in the face of a rate increase. AMR consistently provides quality service and when issues arise, they are quick to work with the Fire Department to resolve concerns.

ORDINANCE NO. C35909

An ordinance modifying requirements for sidewalk cafes, parklets and streateries in Spokane; amending SMC Sections 10.28.040, 10.28.050, 10.55.040, and 10.55.050; and declaring an emergency.

WHEREAS, restauranteurs and bar owners have successfully implemented sidewalk cafés, parklets and streateries in Spokane in recent years;

WHEREAS, the City understands it is necessary and prudent to continue to reevaluate our regulations as we learn from each permitting cycle; and

WHEREAS, in an effort to aid businesses that are trying to recover from the impacts of the COVID-19 pandemic, the City Council wishes to remove barriers; and

WHEREAS, the provisions of this Ordinance are procedural in nature and is exempt from the requirements of a threshold determination under the State Environmental Policy Act pursuant to WAC 197-11-800(19) and does not require transmittal to the Washington State Department of Commerce for comment; and

WHEREAS, the City Council finds that it is in the public interest to adopt this Ordinance and that such Ordinance is necessary for the immediate preservation of the public peace, health, and safety and for the immediate support of City government and its existing public institutions.

NOW THEREFORE, the City of Spokane does ordain:

Section 1. That SMC Section 10.28.040 is amended to read as follows:

[Chapter 10.28 Sidewalk Cafes](#)

[Section 10.28.040 Application](#)

- A. In addition to the information required by [SMC 10.28.060](#) an application for a sidewalk café permit shall state:
 1. The anticipated periods of use during the year, and the proposed hours of daily use, including Saturdays, Sundays and holidays; and
 2. Whether any liquor as defined in RCW 66.04.010 will be sold or consumed in the area to be covered by the permit.
- B. At the time of application the city engineer shall set a ~~((time for an administrative hearing before which))~~ public comment period in which the public may offer objections to the issuance of the license.

Section 2. That SMC Section 10.28.050 is amended to read as follows:

[Section 10.28.050 Notice to Abutting Property Owners](#)

- A. The applicant shall mail or serve a notice stating the:

1. Nature of the application;
2. Sidewalk area sought to be used; and
3. Date ((~~time and place at~~) of public commenter period, after which the city engineer will consider such application

At least ten days prior thereto, upon the owners, building managers and street level tenants of the properties that abut on the street segment that contains the sidewalk area sought to be used and that lie within the nearest intersections or depend upon such street segment for access, and shall file with the city engineer a copy of the notice mailed and a list of the persons to whom it was sent.

- B. The city engineer shall prepare notices containing the aforesaid information and shall deliver to the applicant a public notice, which shall be posted in a window or on the building exterior of the adjacent property.

Section 3. That SMC Section 10.55.040 is amended to read as follows:

[Chapter 10.55](#) Parklets and Streateries

[Section 10.55.040](#) Application

- A. In addition to the information required by [SMC 10.55.060](#), an application for a parklet or streatery license shall state:
 1. The anticipated periods of use during the year, and the proposed hours of daily use, including Saturdays, Sundays and holidays; and
 2. Whether any liquor as defined in RCW 66.04.010 will be sold or consumed in the area to be covered by the license.
- B. At the time of application the city engineer shall set a ((~~time for an administrative hearing before which~~) public comment period in which the public may offer objections to the issuance of the license.

Section 4. That SMC Section 10.55.050 is amended to read as follows:

[Section 10.55.050](#) Notice to Adjacent Property Owners and Users

- A. The applicant shall mail or serve a notice stating the:
 1. Nature of the application;
 2. The parklet or streatery area sought to be used; and
 3. Date((~~time and place at~~) of public commenter period, after which the city engineer will consider such application

At least ten days prior thereto, upon the owners, building managers and street-level tenants of the properties on the block face on which would be located the proposed parklet or streatery and the block face across the street from the proposed parklet or streatery, as well as any parking meters or loading zones to be impacted and shall file with the city engineer a copy of the notice mailed and a list of the persons to whom it was sent.

- B. The city engineer shall prepare notices containing the license application details and shall deliver to the applicant a public notice, which shall be posted in a window or on the building exterior of the adjacent property.

Section 5. Declaration of Emergency and Effective Date. This Ordinance, passed by at least a majority plus one of the whole membership of the City Council as a public emergency ordinance necessary for the immediate preservation of the public peace, health, property, or safety and for the immediate support of City government and its existing public institutions, shall be effective immediately upon its adoption as provided in Section 19 of the City Charter.

PASSED by the City Council on _____.

Council President

Attest:

City Clerk

Approved as to form:

Assistant City Attorney

Mayor

Date

Effective Date