DEPARTMENT OF HEALTH SERVICES
1800 3rd STREET, ROOM 100
P. O. BOX 942732
SACRAMENTO, CA 94234-7320
(916) 322-1223

September 28, 2001

«FirstName» «LastName»
«JobTitle»
«County» County
«Company»
«Address1»
«POBox»
«City», «State» «ZipCode»

This letter was mailed to the individual RHS county contacts.

Dear «Salutation»:

EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA), FISCAL YEAR (FY) 2001-02

The purpose of this letter is to notify you of EMSA and the availability of $2,479,000 to Rural Health Services counties for the reimbursement of uncompensated emergency physician services. The original appropriation under Chapter 826, Statutes of 2000 (Senate Bill 2132) was reauthorized under the Health Trailer Bill, Chapter 171, Statutes of 2001 (Assembly Bill 430). These monies are for services provided in FY 2001-02.

Rural Health Services' counties have the option to receive EMSA directly or through the EMSA Contract Back Program. For detailed information on how to contract for EMSA and/or the EMSA Contract Back Program funds, please refer to the enclosed package which contains guidelines, an EMSA table, a copy of the legislation, and necessary documents with instructions and due dates. This package is also available on the Office of County Health Services' web site at http://www.dhs.ca.gov/hisp/ochs/index.htm with a link to the EMSA Contract Back Program.

Please review the package carefully and return all necessary documents to the Office of County Health Services so we may begin releasing payments. If you have any questions concerning the EMSA Contract Back Program, please contact the Contract Back Unit at (916) 445-3194. For questions concerning the enclosed EMSA package, contact your County Health Services Analyst at (916) 322-1086.

Sincerely,

George B. (Peter) Abbott, M.D., M.P.H., Chief
Office of County Health Services

cc: See next page.

cc: The following cc list without enclosures

Ms. Eileen Eastman
Executive Secretary
California Conference
of Local Health Officers
Department of Health Services
714 P Street, Room 1492
P.O. Box 942732
Sacramento, CA 94234-7320

Ms. Kimberly Gates
Assistant Secretary
California Health and Human
Services Agency
1600 Ninth Street, Room 460
Sacramento, CA 95814

Mr. Gregory Jolivette
Senior Fiscal and Policy Analyst
Legislative Analyst's Office
925 L Street, Suite 1000
Sacramento, CA 95814

Mr. Patrick Kemp
Principal Program Budget Analyst
Health and Human Services Unit
Department of Finance
915 L Street, Ninth Floor
Sacramento, CA 95814

Ms. Agnes Lee
Budget Consultant
Assembly Budget Committee
State Capitol, Room 6026
Sacramento, CA 95814

Mr. Don Maddy
Chief Legislative Advocate
Research and Health Policy
California Healthcare Association
1215 K Street, Suite 800
Sacramento, CA 95814

Ms. Charleen Milburn
Managing Director
California Medical Association
1201 K Street, Suite 1050
Sacramento, CA 95814

Ms. Holly J. Mitchell
Health Advocate
Western Center on Law and
Poverty, Inc.
1225 8th Street, Suite 415
Sacramento, CA 95814-4879

Mr. Santiago Muñoz
Director, Finance Policy
California Association of Public
Hospitals and Health Systems
2000 Center Street, Suite 308
Berkeley, CA 94704

Mr. Dwight Nelsen
Supervising Staff Counsel III
Office of Legal Services
714 P Street, Room 1216
P.O. Box 942732
Sacramento, CA 94234-7320

Ms. Caitlin O'Halloran
Legislative Representative
California State Association
of Counties
1100 K Street, Suite 101
Sacramento, CA 95814

Mr. Bruce Pomer
Executive Director
Health Officers Association
of California
1100 11th Street, Suite 321
Sacramento, CA 95814

cc: The following cc list without enclosures

Ms. Judith Reigel
Executive Officer
County Health Executives
Association of California
1127 11th Street, Suite 309
Sacramento, CA 95814

Ms. Mickey Richie
Local Liaison
Office of the Director
714 P Street, Room 1253
P.O. Box 942732
Sacramento, CA 94234-7320

Ms. Diane Van Maren
Senior Consultant
Senate Budget and Fiscal
Review Committee
State Capitol, Room 5013
Sacramento, CA 95814

Chair, Board of Supervisors

Auditor/Controller

Health Officers

Emergency Medical Services Appropriation

(EMSA)

Chapter 171, Statutes of 2001
Assembly Bill (AB) 430

Prepared by
Office of County Health Services
Department of Health Services
September 28, 2001

Emergency Medical Services Appropriation (EMSA)

Package Contents

- EMSA Guidelines
  - Charts A - D
  - AB 430 Legislation
- EMSA Tables
- Declaration of Intent
- Standard Agreement (two originals and one copy)
- Expenditures and Physicians Data Report

EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA) GUIDELINES

The purpose of Assembly Bill (AB) 430 is to reimburse physicians for uncompensated emergency services.

Background

AB 430 provides reimbursement for uncompensated emergency services provided by physicians to the indigent population in the current fiscal year. The bill appropriates $24,803,000 of Proposition 99 Tobacco Tax money from the Cigarette and Tobacco Products Surtax Fund (CTPSF) through the California Healthcare for Indigents Program (CHIP) and the Rural Health Services (RHS) Program accounts (See Chart A). AB 430 is separate from the CHIP and RHS Program and is referred to as the ***"Emergency Medical Services Appropriation (EMSA)"***.

The Office of County Health Services (OCHS), which administers the CHIP and RHS Program is responsible for disbursing EMSA through the Hospital Services Account (HSA), Physician Services Account (PSA), and Unallocated Account (UA). Of the total funds available, OCHS will disburse $22,324,000 to CHIP counties and $2,479,000 to RHS counties (see EMSA Tables). RHS counties have the option of receiving the funds through EMSA (see Chart B) or the EMSA Contract Back Program (see Chart C).

It is the responsibility of each CHIP and RHS county that receives EMSA directly to administer the monies for the purposes of the bill. CHIP and RHS counties shall deposit the PSA and UA monies into the PSA of their Emergency Medical Services (EMS) fund. In addition, CHIP and RHS counties may deposit the HSA monies into an existing or new account at the discretion of the county (see Charts B and D). Counties are required to account for HSA and PSA/UA monies separately.

EMSA Requirements

The following outlines the EMSA components and requirements:

A. Fiscal Year (FY)

The appropriation is for emergency services rendered in FY 2001-02.

B. Standard Agreement (SA)

The Department of Health Services (DHS) and the County will enter into a SA that will include language covering expenditure requirements, general requirements, administrative cost and recoupment. The Chairperson or designee of the Board of Supervisors shall sign the SA.

C. Allocation of Funds

The OCHS shall allocate monies through the HSA ($9,015,000), PSA ($2,328,000) and UA ($13,460,000) to each CHIP and RHS county. Each county shall receive monthly payments once the SA is fully executed. All funds shall be allocated and expended in FY 2001-02. All unexpended monies including interest earned shall be returned to DHS.

D. Use of Funds

EMSA monies shall be used for reimbursement of uncompensated emergency services, as defined in Welfare and Institutions Code Section 16953, for physicians who provide services to patients who cannot afford to pay for those services, and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal government. No physician shall be reimbursed more than 50 percent of losses. Emergency services means physician services provided in one of the following:

- A general acute care hospital which provides basic or comprehensive emergency services;
- A paramedic receiving station approved by a county prior to January 1, 1990;
- A facility which contracts with the National Park Service prior to January 1, 1990;
- A standby emergency room in a hospital.

EMSA monies shall not be used to reimburse physicians employed by county hospitals and physicians who provide services in a primary care clinic.

E. Administrative Cost

Counties may spend up to ten percent (10%) of the total EMSA monies on administrative costs.

F. Reporting Requirements

OCHS will require each county to complete and submit an EMSA Expenditures and Physicians Data Report on the use of HSA and PSA/UA funds. One Progress Report (due November 15, 2002) and one Final Report (due April 15, 2003) shall be submitted.

G. Net County Cost (NCC)

The EMSA may affect a county's NCC if the revenues are not fully expended by the end of the fiscal year. This would lower a county's NCC.

Chart A

Emergency Medical Services Appropriation

Chapter 171, Statutes of 2001

Assembly Bill 430

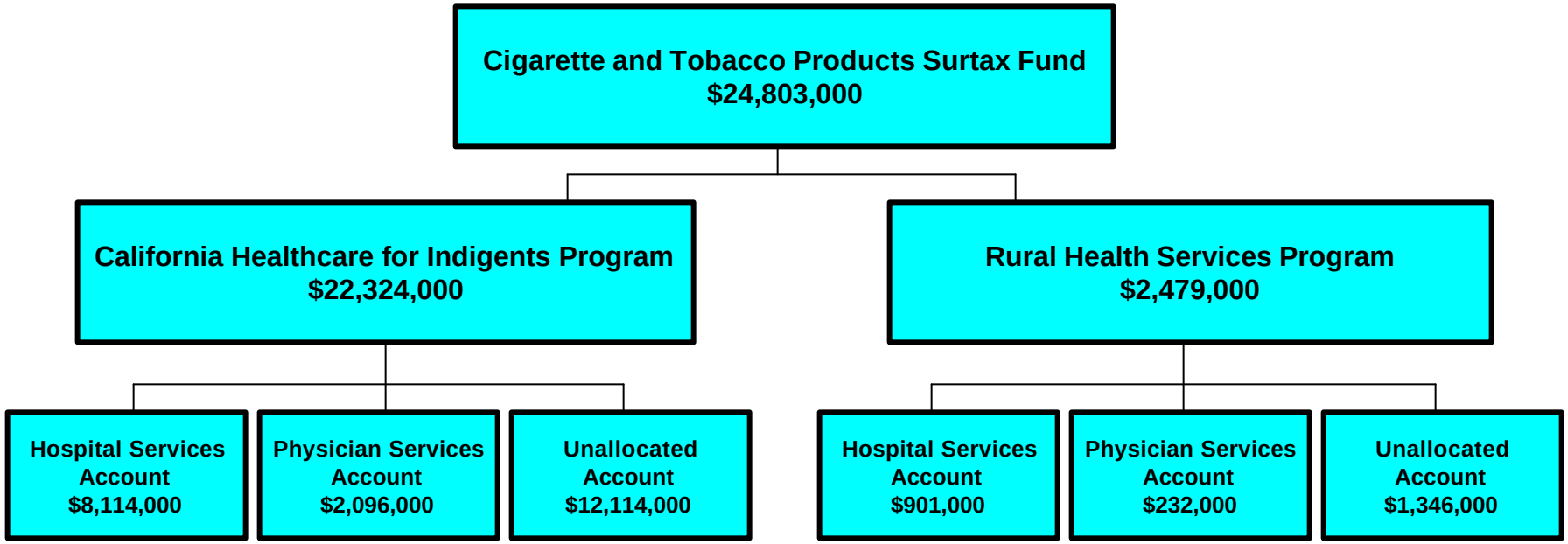
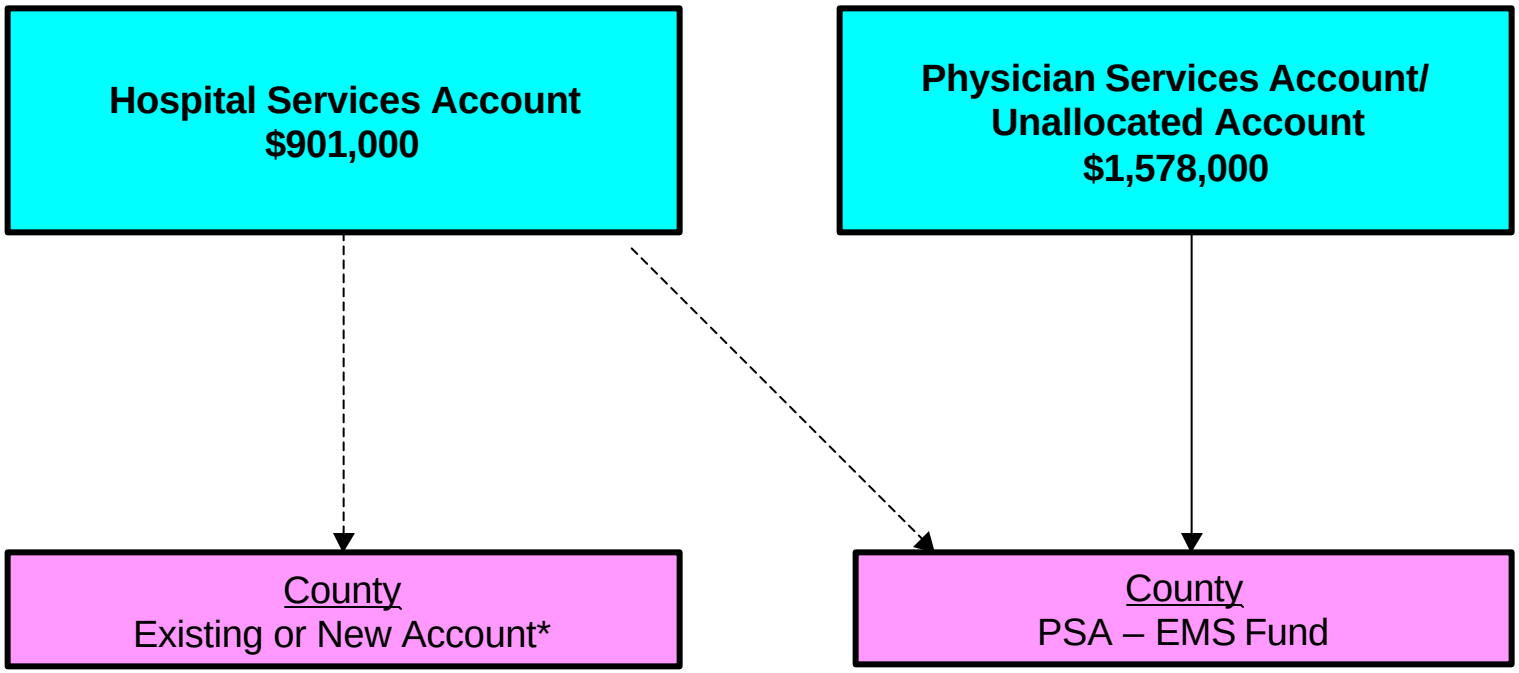


Chart B

Emergency Medical Services Appropriation

$2,479,000 (Funding for RHS Counties)



Counties may transfer

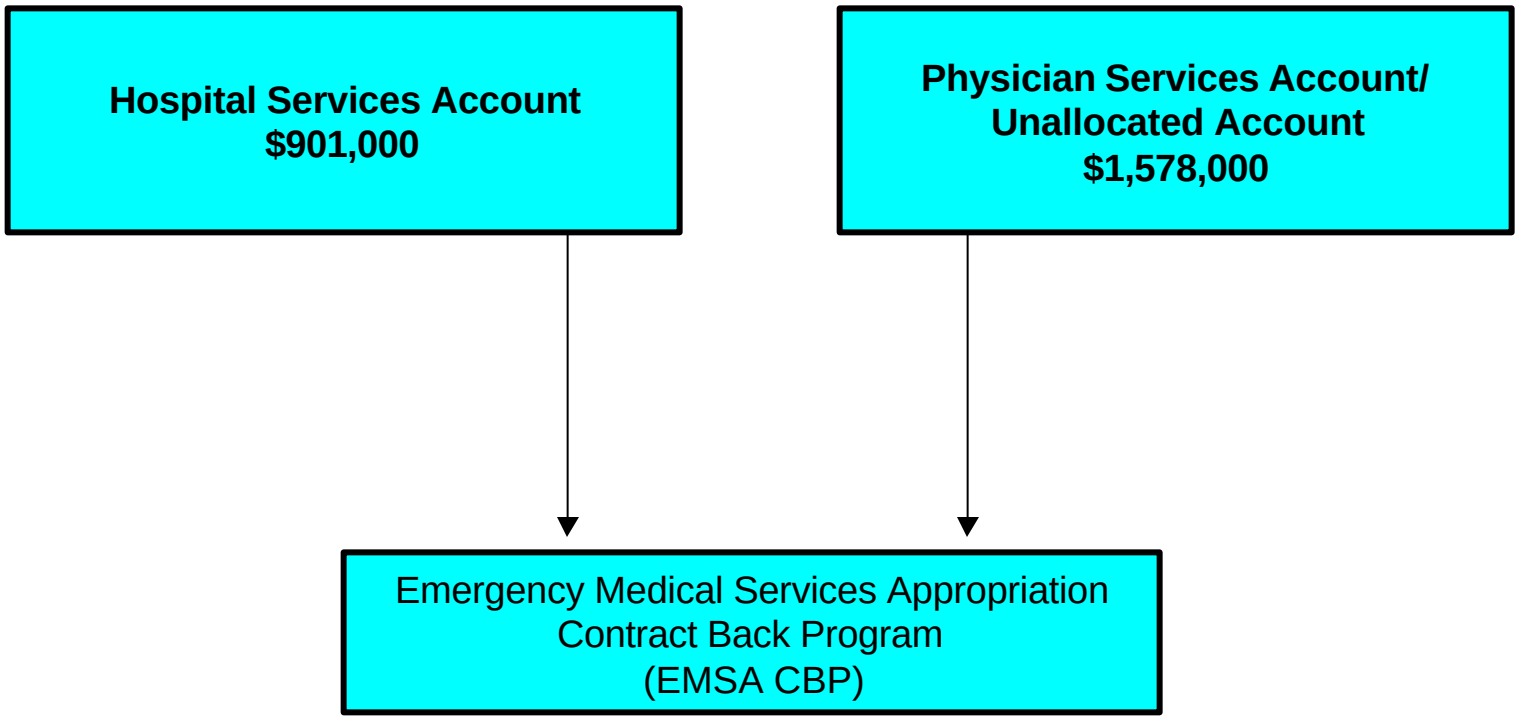
Counties are required to transfer

*Any unexpended funds may be transferred to the County's PSA – EMS Fund

Chart C

Emergency Medical Services Appropriation

$2,479,000 (Funding for RHS Counties that are EMSA Contract Back Counties)

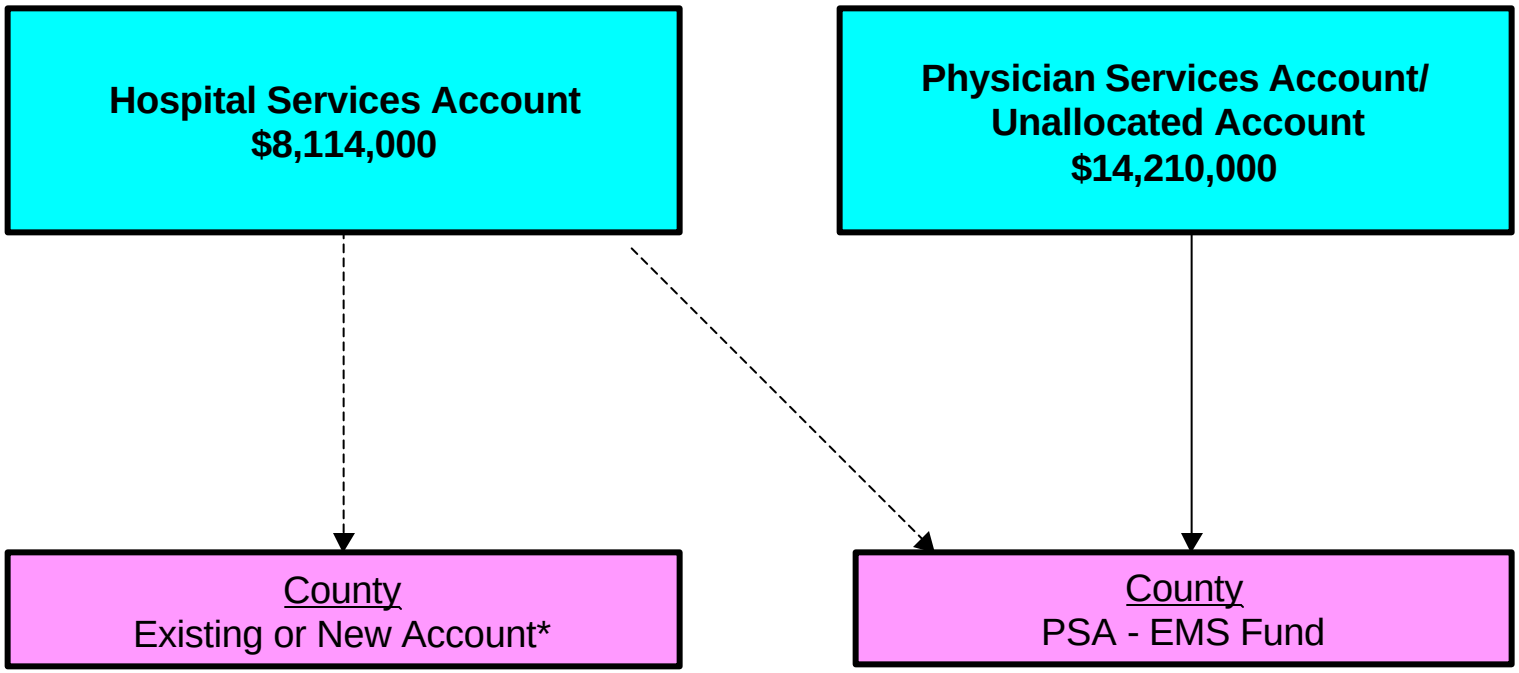


DHS transfers monies to the EMSA CBP and administers funds on behalf of the counties. →

Chart D

Emergency Medical Services Appropriation

$22,324,000 (Funding for CHIP Counties)



Counties may transfer - - - - - - - - - - - - ▶

Counties are required to transfer ———————▶

*Any unexpended funds may be transferred to the County's PSA – EMS Fund

BILL NUMBER: AB 430 CHAPTERED
BILL TEXT

CHAPTER 171
FILED WITH SECRETARY OF STATE AUGUST 10, 2001
APPROVED BY GOVERNOR AUGUST 9, 2001
PASSED THE ASSEMBLY JULY 23, 2001
PASSED THE SENATE JULY 22, 2001
AMENDED IN SENATE JULY 20, 2001
AMENDED IN ASSEMBLY MAY 23, 2001

INTRODUCED BY Assembly Member Cardenas
(Coauthors: Assembly Members Alquist, Aroner, Canciamilla, Cedillo, Chan, Chu, Corbett, Diaz, Firebaugh, Goldberg, Havice, Hertzberg, Keeley, Kehoe, Koretz, Liu, Longville, Lowenthal, Migden, Oropeza, Pavley, Reyes, Salinas, Shelley, Steinberg, Strom-Martin, Thomson, Vargas, Washington, Wesson, and Wiggins)
(Coauthors: Senators Alarcon, Chesbro, Costa, Escutia, Figueroa, Kuehl, Machado, Ortiz, Perata, Romero, Scott, and Speier)

FEBRUARY 20, 2001

" . . . SEC. 58. (a) Of the amount appropriated in Item 4260-111-0001 of the Budget Act of 2001 from the Cigarette and Tobacco Products Surtax Fund, twenty-four million eight hundred three thousand dollars ($24,803,000) shall be allocated in accordance with subdivision (b) for the 2001-02 fiscal year from the following accounts:
(1) Nine million fifteen thousand dollars ($9,015,000) from the Hospital Services Account.
(2) Two million three hundred twenty-eight thousand dollars ($2,328,000) from the Physician Services Account.
(3) Thirteen million four hundred sixty thousand dollars ($13,460,000) from the Unallocated Account.
(b) Funds appropriated pursuant to subdivision (a) shall be allocated proportionately as follows:
(1) Twenty-two million three hundred twenty-four thousand dollars ($22,324,000) shall be administered and allocated for distribution through the California Healthcare for Indigents Program (CHIP), Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the Welfare and Institutions Code, as provided in this act.
(2) Two million four hundred seventy-nine thousand dollars ($2,479,000) shall be administered and allocated through the rural health services program, Chapter 4 (commencing with Section 16930) of Part 4.7 of Division 9 of the Welfare and Institutions Code, as provided in this act.
(c) Funds appropriated by this act from the Physician Services Account and the Unallocated Account in the Cigarette and Tobacco Product Surtax Fund shall be used only for the reimbursement of uncompensated emergency services as defined in Section 16953 of the Welfare and Institutions Code. Funds shall be transferred to the Physician Services Account in the county Emergency Medical Services Fund established pursuant to Sections 16951 and 16952 of the Welfare and Institutions Code.
(d) Funds appropriated by this act from the Hospital Services Account in the Cigarette and Tobacco Products Surtax Fund shall be used only for reimbursement of uncompensated emergency services, as defined in Section 16953 of the Welfare and Institutions Code, provided in general acute care hospitals providing basic, comprehensive, or standby emergency services. Reimbursement for emergency services shall be consistent with the provisions of Section 16952 of the Welfare and Institutions Code.
SEC. 59. (a) The addition of Article 1.3 (commencing with Section 104150) to Chapter 2 of Part 1 of Division 103 of the Health and Safety Code by Section 8.5 of this act shall become operative on January 1, 2002.

(b) The repeal and addition of Article 1.5 (commencing with Section 104160) of Chapter 2 of Part 1 of Division 103 of the Health and Safety Code made by Sections 8.9 and 9 of this act shall become operative on January 1, 2002.

SEC. 60. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution for certain costs that may be incurred by a local agency or school district because in that regard this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIIIB of the California Constitution.

However, notwithstanding Section 17610 of the Government Code, if the Commission on State Mandates determines that this act contains other costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code. If the statewide cost of the claim for reimbursement does not exceed one million dollars ($1,000,000), reimbursement shall be made from the State Mandates Claims Fund.

SEC. 61. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to provide for the administration of this act relating to health for the entire 2001-02 fiscal year, it is necessary that this act go into immediate effect.”

Emergency Medical Services Appropriation (EMSA) Table

FINAL RUNDATE: SEPTEMBER 17, 2001 5:05 PM TYC

FISCAL YEAR 2001-02

PURSUANT TO: CHAPTER 106, STATUTES OF 2001 (SB 739)

AND TRAILER BILL CHAPTER 171 STATUTES OF 2001 (AB 430)

CALIFORNIA HEALTHCARE FOR INDIGENTS PROGRAM (CHIP) COUNTIES

COUNTY	EMSA HOSPITAL SERVICES ACCOUNT	EMSA PHYSICIAN SERVICES ACCOUNT	EMSA UNALLOCATED SERVICES ACCOUNT	TOTAL EMSA
Alameda	$384,830	$99,407	$574,530	$1,058,767
Contra Costa	146,310	37,795	218,440	402,545
Fresno	217,904	56,288	325,322	599,514
Kern	138,614	35,806	206,944	381,364
Lake	14,814	3,827	22,120	40,761
Los Angeles	3,554,363	918,169	5,306,623	9,779,155
Mendocino	21,618	5,583	32,272	59,473
Merced	58,778	15,183	87,754	161,715
Monterey	104,971	27,116	156,719	288,806
Orange	416,912	107,696	622,442	1,147,050
Placer	30,000	7,749	44,785	82,534
Riverside	258,256	66,711	385,564	710,531
Sacramento	267,128	69,005	398,817	734,950
San Bernardino	308,110	79,589	459,993	847,692
San Diego	486,602	125,699	726,488	1,338,789
San Francisco	437,330	112,970	652,921	1,203,221
San Joaquin	141,292	36,498	210,941	388,731
San Luis Obispo	65,692	16,969	98,075	180,736
San Mateo	118,318	30,564	176,646	325,528
Santa Barbara	64,246	16,597	95,919	176,762
Santa Clara	425,586	109,935	635,379	1,170,900
Santa Cruz	62,554	16,158	93,386	172,098
Stanislaus	103,800	26,814	154,975	285,589
Tulare	111,716	28,858	166,785	307,359
Ventura	125,540	32,430	187,428	345,398
Yolo	48,716	12,584	72,732	$134,032
TOTALS	**$8,114,000**	**$2,096,000**	**$12,114,000**	**$22,324,000**

PREPARED BY TOM CHINN (916) 324-1122

Emergency Medical Services Appropriation (EMSA) Table

FINAL RUNDATE: SEPTEMBER 17, 2001 5:05 PM TYC

FISCAL YEAR 2001-02

PURSUANT TO: CHAPTER 106, STATUTES OF 2001 (SB 739)

AND TRAILER BILL CHAPTER 171 STATUTES OF 2001 (AB 430)

RURAL HEALTH SERVICES (RHS) PROGRAM COUNTIES

COUNTY	EMSA HOSPITAL SERVICES ACCOUNT	EMSA PHYSICIAN SERVICES ACCOUNT	EMSA UNALLOCATED SERVICES ACCOUNT	TOTAL EMSA
Alpine	$0	$93	$538	$631
Amador	12,416	2,688	15,596	30,700
Butte	98,716	15,628	90,669	205,013
Calaveras	860	3,121	18,107	22,088
Colusa	2,532	1,458	8,459	12,449
Del Norte	8,384	2,134	12,380	22,898
El Dorado	31,802	12,127	70,359	114,288
Glenn	2,672	2,035	11,807	16,514
Humboldt	60,014	9,705	56,305	126,024
Imperial	43,092	11,459	66,482	121,033
Inyo	11,750	1,378	7,996	21,124
Kings	30,878	10,335	59,962	101,175
Lassen	4,236	2,726	15,816	22,778
Madera	16,870	9,826	57,010	83,706
Marin	65,966	19,015	110,319	195,300
Mariposa	1,646	1,306	7,578	10,530
Modoc	1,704	729	4,229	6,662
Mono	3,562	1,014	5,882	10,458
Napa	33,726	9,583	55,600	98,909
Nevada	20,754	7,138	41,414	69,306
Plumas	6,492	1,602	9,296	17,390
San Benito	6,042	4,192	24,319	34,553
Shasta	114,566	12,583	73,003	200,152
Sierra	106	270	1,568	1,944
Siskiyou	16,452	3,364	19,517	39,333
Solano	77,234	30,633	177,726	285,593
Sonoma	150,114	35,602	206,539	392,255
Sutter	0	6,143	35,642	41,785
Tehama	17,358	4,313	25,024	46,695
Trinity	2,310	991	5,749	9,050
Tuolumne	21,572	4,192	24,319	50,083
Yuba	37,174	4,617	26,790	68,581
TOTALS >	$901,000	$232,000	$1,346,000	$2,479,000

PREPARED By: TOM Y CHINN (916) 324-1122

Emergency Medical Services Appropriation (EMSA)

Instructions for
Declaration of Intent
and
Standard Agreement

All RHS counties have three options concerning EMSA funds. Counties are requested to inform the State of the option they prefer by completing and submitting the enclosed Declaration of Intent form. The three options are:

Option 1: Directly administer all of its EMSA allocation. This requires signature of a Standard Agreement with the State.

Option 2: Directly administer a portion of EMSA funds and have the State administer the rest. This also requires signature of a Standard Agreement with the State.

Option 3: State directly administers EMSA funds, in which case the State will perform this function. This option does not require signing a Standard Agreement with the State.

To implement **Option 1:**

- Complete the enclosed Declaration of Intent document
- Check Option 1
- Have your Board of Supervisors sign and date the document
- Submit the signed Declaration of Intent document (original copy), along with two signed EMSA Standard Agreements, to the Office of County Health Services (OCHS).

To implement **Option 2:**

- Complete the enclosed Declaration of Intent document
- Check Option 2
- In addition, check options to contract back HSA and/or PSA/UA
- Have your Board of Supervisors sign and date the document
- Submit the signed Declaration of Intent document (original copy), along with two signed EMSA Standard Agreement to OCHS.

To implement **Option 3:**

- Complete the enclosed Declaration of Intent document
- Check Option 3
- Have your Board of Supervisors sign and date the document
- Submit the signed document (original copy) to OCHS
- No further county action is required.

- See Standard Agreement instructions on reverse -

Standard Agreement:

Enclosed are three copies of the Standard Agreement. The Chairperson or designee of the Board of Supervisors should sign the two stamped "ORIGINAL". If your designee signs the Agreement, please include documentation showing the individual is authorized to sign for the Board. For your records, you may retain the Agreement stamped "COPY" as an interim copy. The Agreement will not be fully executed until the Chief of the Office of County Health Services signs it. One original copy of the Agreement will be returned to you after it has been fully executed. We will begin releasing monthly payments once the Standard Agreement is fully executed.

Please submit the signed Declaration of Intent and two, signed Standard Agreements to the following address:

Office of County Health Services
California Department of Health Services
Attention: County Health Services Unit
1800 3rd Street, Room 100
P.O. Box 942732
Sacramento, CA 94234-7320

EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA)
ASSEMBLY BILL 430, CHAPTER 171, STATUTES OF 2001

DECLARATION OF INTENT
FY 2001-02

The Rural Health Services County of _____ (hereinafter called the County) notifies the California Department of Health Services (hereinafter referred to as the Department), as indicated below, its intention to either contract and administer the EMSA Hospital Services Account (HSA) and Physician Services Account/Unallocated Account (PSA/UA), have the Department administer the EMSA for the county, or a combination of the both. (Commencing with Welfare and Institutions Code Section 16930).

Declaration of intent to contract or not to contract for EMSA:

(CHECK ONE OF THE FOLLOWING)

OPTION 1 _____ Declaration of intent to contract for its FY 2001-02 EMSA, and administer the HSA and PSA/UA.

OPTION 2 _____ Declaration of intent to contract for its FY 2001-02 EMSA, AND contract back HSA and/or PSA/UA.

(CHECK WHERE APPLICABLE)

_____ The County will contract with the Department to administer the monies available to the County from the EMSA HSA.

_____ The County will contract with the Department to administer the monies available from the EMSA PSA/UA.

OPTION 3 _____ Declaration of intent NOT to contract for its FY 2001-02 EMSA. The County authorizes the Department to administer its EMSA on behalf of the County through the EMSA Contract Back Program.

This Declaration has been executed by:

Name: _____
(Authorized Representative of the County Board of Supervisors)

Title: _____

County of: _____

Signature: _____ **Date:** _____

- Please return the Declaration of Intent to OCHS -

STANDARD AGREEMENT

EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA)

FISCAL YEAR 2001-02

County of «County»

The State of California, by and through the Department of Health Services (hereinafter called the "Department"), and the County of «County» (hereinafter called "County"), do hereby agree as follows:

This Standard Agreement is entered into pursuant to the provisions set forth in Assembly Bill (AB) 430, Chapter 171, Statutes of 2001.

As a condition of receiving EMSA monies to reimburse physicians for uncompensated emergency services rendered in fiscal year (FY) 2001-02, the County agrees to all the following provisions:

I. Expenditure Requirements

A. Use the Hospital Services Account (HSA), Physician Services Account (PSA) and Unallocated Account (UA) monies only for reimbursement of uncompensated emergency services as defined in Welfare and Institutions (W&I) Code Section 16953.

B. HSA funds may be deposited into an existing or new account at the discretion of the county to reimburse physicians for uncompensated emergency services consistent with the provisions of W&I Code Section 16952.

C. Transfer PSA and UA monies to the PSA in the County's Emergency Medical Services (EMS) fund, to reimburse physicians for uncompensated emergency services consistent with the provisions of W&I Code Sections 16951 and 16952.

D. Reimburse physicians for emergency services rendered during FY 2001-02.

II. Reporting Requirements

A. Submit one progress report and one final report of expenditures and physicians data in accordance with the instructions provided by the Department. In addition, counties that submit a Report of Actual Financial Data must report the EMSA monies as an expenditure and revenue in the Actual, and report indigent data in their Medically Indigent Care Reporting System (MICRS).

B. Maintain financial records of the expenditures and physicians data for at least three years after the end of FY 2001-02. These records will be subject to possible review and audit by the State.

III. General Requirements

A. These monies are only for emergency services to patients who cannot afford to pay for those services, and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal government. No physician shall be reimbursed more than 50 percent of losses.

B. The monies shall not be used to reimburse physicians employed by county hospitals and physicians who provide services in a primary care clinic that receives funds from the Tobacco Tax and Health Protection Act of 1988 (Proposition 99).

IV. EMSA Contract Back Program (Rural Health Services (RHS) Counties only)

RHS counties may have the Department administer their EMSA HSA and/or PSA/UA on their behalf.

V. Administrative Cost

Cost of administering HSA, PSA and UA funds shall not exceed ten percent (10%) of the total EMSA monies.

VI. Recoupment

EMSA monies and interest earned shall be returned to the Department if they are not encumbered or expended within the fiscal year according to this Standard Agreement and the requirements of Chapter 5 (commencing with Sections 16930 and 16940) of Part 4.7 of Division 9 of the W&I Code. (W&I Code Sections 16930 and 16940).

THIS AGREEMENT FOR FUNDING HAS BEEN APPROVED BY THE BOARD OF SUPERVISORS AND IS HEREBY EXECUTED.

State of California	**County**
Signature: _____	Signature: _____
Name: George B. (Peter) Abbott, M.D., M.P.H.	Name: _____ (Please print or type)
Title: Chief, Office of County Health Services	Title: _____
Date: _____	Date: _____

EXPENDITURES AND PHYSICIANS DATA REPORT

Emergency Medical Services Appropriation (EMSA)

Chapter 171, Statutes of 2001
Assembly Bill (AB) 430

FISCAL YEAR 2001-02

EXPENDITURES AND PHYSICIANS DATA REPORT
EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA)
FISCAL YEAR 2001-02
(JULY 1, 2001 THROUGH JUNE 30, 2002)

COUNTY OF _____

Please check one:

☐ Progress Report - due November 15, 2002
(As of October 15, 2002)

☐ Final Report - due April 15, 2003
(As of March 15, 2003)

I. FINANCIAL STATEMENT	HSA	PSA/UA
A. INCOME		
1. MONIES RECEIVED PURSUANT TO AB 430 SECTION 58 (c) AND (d).	_____	_____
2. INTEREST EARNINGS	_____	_____
3. TOTAL INCOME	_____	_____
B. EXPENDITURES		
1. EXPENDITURES FOR EMSA*	_____	_____
2. EXPENDITURES FOR ADMINISTRATIVE COSTS	_____	_____
3. TOTAL EXPENDITURES	_____	_____
C. MONIES RECOVERED AND NOT EXPENDED	_____	_____
D. ENDING BALANCE (A3-B3+C)	_____	_____
E. AMOUNT RETURNED TO THE STATE	_____	_____

II. CERTIFICATION

I HEREBY CERTIFY THE ACCURACY OF THE EXPENDITURES AND PHYSICIANS DATA REPORT AND THAT SUPPORTING DOCUMENTATION IS AVAILABLE FOR STATE REVIEW.

AUDITOR CONTROLLER SIGNATURE: _____

DATE: _____ TELEPHONE NUMBER: _____

*** Only emergency services are reimbursable. Nonemergency OB/GYN and pediatric services are excluded.**

This report is only required of those counties administering EMSA.

Expenditures must equal the total amount paid as reported in the Expenditures and Physicians Data Report.

- See instructions on reverse -

Please use the following instructions when completing the financial statement of the Expenditures and Physicians Data Report.

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1. Indicate the county's name in the heading of the report.

2. Indicate by check if the report is a Progress Report or Final Report.

3. FINANCIAL STATEMENT

   A. INCOME

      1. MONIES RECEIVED PURSUANT TO AB 430 SECTION 58 (c) and (d). The total EMSA monies received from the Hospital Services Account (HSA) and the Physician Services Account/Unallocated Account (PSA/UA) for FY 2001-02.

      2. INTEREST EARNED. Amount of interest earned for HSA and PSA/UA.

      3. TOTAL INCOME. The sum of A1 and A2 for HSA and PSA/UA.

   B. EXPENDITURES

      1. EXPENDITURES FOR EMSA. Expenditures for services provided from July 1, 2001 through June 30, 2002 for HSA and PSA/UA.

      2. EXPENDITURES FOR ADMINISTRATIVE COSTS. County administrative costs attributable to the administration of EMSA for FY 2001-02 shall not exceed ten percent (10%) of HSA and PSA/UA.

      3. TOTAL EXPENDITURES. The sum of B1 and B2 for HSA and PSA/UA.

   C. MONIES RECOVERED AND NOT EXPENDED. FY 2001-02 funds previously expended and subsequently recovered by the County for HSA and/or PSA/UA.

   D. ENDING BALANCE. Subtract Total Expenditures from Income and add Recovered Monies (A3-B3+C) for HSA and/or PSA/UA.

   E. AMOUNT RETURNED TO STATE. EMSA monies including interest earned not expended by the County and returned to the State for HSA and/or PSA/UA.

4. CERTIFICATION

The Report requires signature by the county auditor controller certifying the Report's accuracy. Supporting documentation shall be available for State review.

EXPENDITURES AND PHYSICIANS DATA REPORT
EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA)
FISCAL YEAR 2001-02
(JULY 1, 2001 THROUGH JUNE 30, 2002)

COUNTY OF _____

Please check one:

☐ Progress Report - due November 15, 2002
(As of October 15, 2002)

☐ Final Report - due April 15, 2003
(As of March 15, 2003)

HSA EMSA	# of Claims Received	Amount Billed	# of Claims Paid	Amount Paid
		$		$

PSA/UA EMSA	# of Claims Received	Amount Billed	# of Claims Paid	Amount Paid
		$		$

Please use the following instructions to complete the Expenditures and Physicians Data Report.

1. Indicate the county's name in the heading of the report.
2. Indicate by check if the Progress Report is the 1st or Final.
3. For each column indicate the # of claims received, amount billed, # of claims paid, and the total amount paid for HSA and PSA/UA.