

COLORADO CITY FIRE DISTRICT

P.O. BOX 248 40 SOUTH PIONEER STREET COLORADO CITY, AZ 86021 PHONE: 928-875-2400 FAX: 928-875-2056

January 27, 2014

Todd Jaramillo
Bureau of EMS and Trauma Systems
150 N 18th Avenue, Suite 540
Phoenix, AZ 85007

RE: Annual Ambulance Revenue and Cost Report

Todd,

Enclosed is our 2012-2013 Annual Ambulance Revenue and Cost Report as well as our audited Financial Statement for the same year. If you have any questions, you can contact myself or Kevin Barlow.

Thank you,



Edwin Barlow,
Business Manager

Colorado City Fire Department
40 S Pioneer St #248
Colorado City, AZ 86021
edb@hccfd.org
(928) 875-2400, Ext. 101

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

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

**Colorado City Fire District
Reporting Ambulance Service**

Address: 40 South Pioneer Street

City: Colorado City Zip: 86021

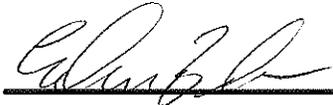
Report Fiscal Year

From: July 01 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 17, 2014

Print Name and Title: Edwin Barlow, Business Manager

Phone: (928) 875-2400

Mail to:

Department of Health Services
Bureau of Emergency Medical Services
Certificate of Necessity and Rates Section
150 North 18th Avenue, Suite 540
Phoenix, AZ 85007-3248
Telephone: (602) 364-3150
Fax: (602) 364-3567

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AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

Colorado City Fire District

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:	385			385
2	Number of BLS Billable Transports:	744			744
3	Number of Loaded Billable Miles:	35,665			35,665
4	Waiting Time (Hr. & Min.):	-			0
5	Canceled (Non-Billable) Runs:				0

AMBULANCE SERVICE ROUTINE OPERATING REVENUE

6	ALS Base Rate Revenue				\$ 165,509
7	BLS Base Rate Revenue				301,010
8	Mileage Charge Revenue				211,276
9	Waiting Charge Revenue				-
10	Medical Supplies Charge Revenue				10,912
11	Nurses Charge Revenue				-
12	Standby Charge Revenue (Attach Schedule)				-
13	TOTAL AMBULANCE SERVICE ROUTINE OPERATING REVENUE			(Post to Page 3, Line 1)	\$ 688,707

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SALARY AND WAGE EXPENSE DETAIL

GROSS WAGES:

Line No.	DESCRIPTION	\$	** No. of FTE's
14	Management	71,472	2.0
15	Paramedics and IEMTs	10,268	0.1
16	Emergency Medical Technician (EMT)	10,136	0.2
17	Other Personnel	184,727	4.7
18	Payroll Taxes and Fringe Benefits - All Personnel	96,476	-
19	Total Wages, Taxes & Benefits (Sum Lines 14 through 18; Post to Page 3, Line 10)	373,080	7

* 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: Colorado City Fire District

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)	\$ <u>688,707</u>
Settlement Amounts:		
2	AHCCCS	<u>250,667</u>
3	Medicare	<u>28,366</u>
4	Subscription Service	<u>-</u>
5	Contractual	<u>-</u>
6	Other Utah Medicaid, Private Insurance.....	<u>104,237</u>
7	Total (Sum of Lines 2 through 6)	<u>383,270</u>
8	Total Operating Revenue (Line 1 minus Line 7)	\$ <u>305,437</u>
Operating Expenses:		
9	Bad Debt	\$ <u>-</u>
10	Total Salaries, Wages, and Employee-Related Expenses (From: Page 2, Line 19)	<u>373,080</u>
11	Professional Services	<u>44,054</u>
12	Travel and Entertainment	<u>17,004</u>
13	Other General Administrative	<u>15,589</u>
14	Depreciation	<u>57,775</u>
15	Rent / Leasing	<u>90,986</u>
16	Building / Station	<u>36,529</u>
17	Vehicle Expense	<u>35,683</u>
18	Other Operating Expense	<u>174,747</u>
19	Cost of Medical Supplies Charged to Patier.....	<u>4,227</u>
20	Interest	<u>10,289</u>
21	Subscription Service Sales Exp	<u>-</u>
22	Total Operating Expense (Sum of Lines 9 through 21)	<u>859,962</u>
23	Total Operating Income or (Loss) (Line 8 minus Line 22)	\$ <u>(554,525)</u>
24	Subscription Contract Sales	<u>213,036</u>
25	Other Operating Revenue ... Fire District Levy 50% of \$423,384	<u>213,036</u>
26	Local Supportive Funding	<u> </u>
27	Other Non-Operating Income (Attach S.....	<u> </u>
28	Other Non-Operating Expense (Attach S.....	<u> </u>
29	NET INCOME or (LOSS) Before Income Taxes (Sum of Lines 23 through 27, minus Line 28)	\$ <u>(341,489)</u>
Provision for Income Taxes:		
30	Federal Income Tax	<u> </u>
31	State Income Tax	<u> </u>
32	Total Income Tax	<u> </u> (Line 30, plus Line 31)
33	Ambulance Service Net Income (Los (Line 29, minus Line 32)	<u>(341,489)</u>

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AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: Colorado City Fire District

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

BALANCE SHEET See Attached Audited 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			\$ _____

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			\$ _____

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 Val		_____	
26	Contributed Capital		_____	
27	Retained Earnings		_____	
28	_____		_____	
29	_____		_____	
30	Fund Balance		_____	
31	TOTAL EQUITY			_____

32 TOTAL LIABILITIES & EQUITY \$ _____

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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Colorado City Fire District

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

STATEMENT OF CASH FLOWS See Attached Audited 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	\$	_____

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