RESOLUTION NO. 2025-62

Resolution of the Board of Supervisors acting as the Board of Directors of the Inland Counties Emergency Medical Agency, to approve regulatory fees for the emergency medical services systems of San Bernardino, Inyo, and Mono Counties.

On Tuesday, March 25, 2025, on motion by Supervisor Hagman, duly seconded by Supervisor Baca, Jr., and carried, the following resolution is adopted:

WHEREAS, the Inland Counties Emergency Medical Agency (ICEMA), is a joint powers authority and the regulatory agency overseeing the delivery of emergency medical services (EMS) within San Bernardino, Inyo and Mono Counties, and is the local EMS agency (LEMSA) for those counties, pursuant to California Health and Safety Code section 1797.200; and

WHEREAS, the Board of Supervisors of San Bernardino County serves as the Board of Directors of ICEMA; and

WHEREAS, the delivery of EMS is a matter affecting the public health concerning each of the counties which comprise ICEMA; and

WHEREAS, pursuant to the Emergency Medical Care Services System and the Prehospital Emergency Medical Care Act (Health and Safety Code section 1797, et seq.), ICEMA has been designated as the LEMSA for San Bernardino, Inyo, and Mono Counties; and

WHEREAS, ICEMA is required to establish, and oversee an EMS system, which provides for the personnel, facilities, and equipment necessary for the effective and coordinated delivery of EMS in San Bernardino, Inyo, and Mono Counties; and

WHEREAS, providing oversight and enforcing healthcare laws within the EMS system for San Bernardino, Inyo, and Mono Counties imposes certain readily identifiable costs on ICEMA; and

WHEREAS, it is ICEMA's desire to recover its overhead costs for providing oversight to the EMS System within San Bernardino, Inyo, and Mono Counties by establishing fees; and

WHEREAS, ICEMA is authorized under Health and Safety Code sections 1797.212, 1797.220, 1797.213, 1798.164, and 101325, California Code of Regulation, Title 22, Division 9, and Government Code section 6502 to recover its expenses in providing oversight of ICEMA's EMS System and enforcing healthcare laws; and

WHEREAS, ICEMA is authorized under California Code of Regulations, Title 22, Division 9, Chapter 7 - Prehospital EMS Aircraft Regulations, to establish minimum standards for the integration of EMS Aircraft and personnel into the local EMS prehospital patient transport system as a specialized resource for the transport and care of emergency medical patients; and

WHEREAS, ICEMA is authorized under of the California Code of Regulations, Title 22, Division 9, section 100167 to integrate aircraft into its prehospital patient transport system and develop a program which classifies EMS Aircraft, establishes policies, and charges fees to cover the costs directly associated with the classification, authorization, inspection, and provision of medical control of EMS Aircraft; and

WHEREAS, it is ICEMA's desire to recover costs for providing medical control to EMS Aircraft providers operating within ICEMA's region by establishing a revenue neutral medical control fee; and

WHEREAS, it is ICEMA's further desire that such medical control fee for EMS Aircraft providers be determined annually by using a pro-rata apportionment of ICEMA's costs derived from annual data directly associated with EMS Aircraft;

NOW THEREFORE, be it resolved that:

Commencing July 1, 2025, the fees for the Inland Counties Emergency Medical Agency, State of California, shall be as follows:

- 1. Non-Air Medical Control:
 - A. Provision of Medical Control (annual)\$2,500.00

1		B.	Medi	cal Control Compliance	\$500.00/unit	
2	2.	EMS Aircraft Medical Control:				
3		A.	Provi	sion of Medical Control Permit/Authorization (anr	nual for fiscal	
4			year)	Actual Cost-Pro Rata Share	e Per Provider	
5		B.		Aircraft Medical Control Compliance		
6	3.	EMS	EMS Credentialing Fees (every 2 years):			
7		A.	Mobil	e Intensive Care Nurse (MICN)		
8			(Administrative, Base Hospital, Critical Care Transport, Flight			
9			Nurse):			
10			1.	Authorization	\$170.00	
11			2.	Re-authorization	\$170.00	
12			3.	Challenge	\$300.00	
13		B.	Emer	gency Medical Technician - Paramedic (EMT-P)	:	
14			1.	Accreditation	\$170.00	
15			2.	Re-verification	\$125.00	
16		C.	Emer	gency Medical Technician (EMT)/Advanced EM	Γ (AEMT):	
17			1.	Certification	\$125.00	
18			2.	Re-certification	\$125.00	
19		D.	EMT-	P Accreditation Re-test	\$125.00	
20		E.	EMT/	AEMT Credential Replacement	\$35.00	
21		F.	EMS	Credential Name Change	\$35.00	
22	4.	Train	Training Program Approval Fees (every 4 years):			
23		A.	MICN	l	\$400.00	
24		B.	EMT/	AEMT	\$1,500.00	
25		C.	EMT-	P	\$1,500.00	
26		D.	Conti	nuing Education Provider	\$650.00	
27	5.	Hosp	Hospitals:			
28		A.	Spec	ialty Designation (Neurovascular Stroke [Stroke]	, ST Elevation	

		Myocardial Infarction [STEMI], Trauma, Pediatric, Base)
		Application	\$5,000.00
	B.	Base Hospital Designation (annual)	\$5,000.00
6. EMS Temporary Special Events:			
	A.	Minor Event Application	\$125.00
	B.	Major Event Application	\$375.00
7.	Proto	ocol Manual:	\$40.00
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- 8. Waive/Refund/Deferral of Fees:
- A. In the event of a disaster, or other good cause shown to serve a public purpose the Emergency Medical Services Administrator may defer payment of, waive, or refund any fee set forth in this chapter provided all of the following conditions are met:
 - 1. Exigent conditions exist whereby obtaining Board approval of the fee waiver/refund/deferral would not be immediately feasible; and
 - 2. The Emergency Medical Services Administrator receives concurrence from the County Chief Executive Officer.

1	PASSED AND ADOPTED by the Board of Supervisors of San Bernardino							
2	County, State of California, acting as the Board of Directors of Inland Counties							
3	Emergency Medical Agency, by the following vote:							
4	AYES: Directors: Col. Paul Cook (Ret.), Jesse Armendarez, Dawn Rowe,							
5	Curt Hagman, Joe Baca, Jr.							
6	NOES: Directors: None							
7	ABSTAIN: Directors: None							
8	STATE OF CALIFORNIA)							
9	COUNTY OF SAN BERNARDINO)							
10								
11	I, LYNNA MONELL, Secretary of the Board of Directors of Inland Counties Emergency Medical Agency, State of California, hereby certify the foregoing to be a full,							
12	true and correct copy of the record of the action taken by said Board of Directors, by vote of the members present, as the same appears in the Official Minutes of said Board							
13	at its meeting of March 25, 2025, Item #80.							
14	LYNNA MONELL							
15	Secretary of the Board of Directors of Inland Counties Emergency Medical Agency							
16								
17	By Deputy							
18	APPROVED AS TO FORM:							
19								
20	TOM BUNTON County Counsel							
21								
22	BY:							
23	JOLENA E. GRIDER							
24	Deputy County Counsel							
25	Data							
26	Date:							
27								