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Maddy Emergency Medical Services (EMS) Fund Report Fiscal Year 2016/17 (July 1, 2016 – June 30, 2017)

I	Administering Agency	County Department	County Contact (Name and T	County Contact (Name and Title)				
		Address (Number and Street)	Phone Number	Phone Number				
		City or Post Office, State, and ZIP Code	Email Address					
II	Establishment of Fund			☐ Yes ☐ No				
		b Date fund established.						
		c Fund balance on July 1, 2016.						
		d If the Maddy EMS Fund beginning bala state reason(s):	nnce on July 1, 2016, differs from ending bala	nnce on June 30, 2016,				
		2a Has the agency established the Maddy F	Has the agency established the Maddy EMS Fund (Supplemental Assessment)?					
		b Date fund established.	Date fund established.					
		c Fund balance on July 1, 2016.	Fund balance on July 1, 2016.					
		d If the Maddy EMS Fund beginning bala state reason(s):	ance on July 1, 2016, differs from ending bal	ance on June 30, 2016,				
Ш	Collections of Penalty Assessments	Fines, penalties, and forfeitures collecte statute.	d under each Statute	Collections				
		a	Government Code § 76000					
		b	Government Code § 76000.5 (Only applicable if Supplemental Assessment established. See #2a.	!				
		c	Vehicle Code § 42007					
		d	Tota	1				
		4 Responsibility for collection of fines, per	nalties, and forfeitures:					
		Entity	Contact (Name and Title)					
		Phone Number	Email Address					

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1 V	Maddy EMS	5	Total penalty assessments deposited into Maddy EMS Fund (Original Assessment).	Statute	Deposits			
	Fund	a		Government Code § 76000 (Based on GC § 76104)				
		b		Vehicle Code § 42007				
		c		Total				
		d	If no deposits into Maddy EMS Fund, state reason(s):					
		6	Total penalty assessments deposited into Maddy EMS Fund (Supplemental Assessment). (If fund not established, leave section blank and go to #7)	Statute	Deposits			
		a		Government Code § 76000.5				
		b		Vehicle Code § 42007				
		c		Total				
		d	If no deposits into Maddy EMS Fund, state reason(s):					
		7	Responsibility for deposit of penalty assessments:					
			Entity	Contact (Name and Title)				
			Phone Number	Email Address				
V	Maddy EMS							
	Fund Category Distributions	8	Maddy EMS Fund (Original Assessment)					
	2.00.10.00.10			Interest and Other Deposits				
		a	Interest earned during fiscal year, July 1, 2016-June 3	30, 2017.				
		b	Other deposits during fiscal year, July 1, 2016-June 3	0, 2017.				
		c	If other deposits were made, provide the type of depos	osits:				
		9	Total amount of funds distributed to the specified cate for the period July 1, 2016-June 30, 2017.	egories Reserve (Optional)	Category Distributions			
		a	Administration (Admin cost equal to the lesser of actuor 10%)	nal cost				
		b	Physicians/Surgeons (58%)					

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V Maddy EMS Fund Category Distributions (cont.)	c d	Hospitals (25%) Other Discretionary EMS (17%)		
(2010)	e	Т	otal	
	10	Maddy EMS Fund (Supplemental Assessment) (If fund in	not established, leave blank and	d go to #12)
				Interest and Other Deposits
	a	Interest earned during fiscal year, July 1, 2016-June 30,	2017.	
	b	Other deposits during fiscal year, July 1, 2016-June 30,	2017.	
	c	If other deposits were made, provide the type of deposit	s and the reason(s) for the	deposits:
	11	Total amount of funds distributed to the specified categories for the period July 1, 2016-June 30, 2017.	Reserve (Optional)	Category Distributions
	a	Administration (Admin cost equal to the lesser of actual cost or 10%)		
	b	Richie's Fund (15%)		
	c	Physicians/Surgeons (58%)		
	d	Hospitals (25%)		
	e	Other Discretionary EMS (17%)		
	f	<u>T</u>	otal	
	12	Responsibility for category distributions:		
		Entity	Contact (Name and Title)	
	Phone Number Email Address		Email Address	
VI Expenditures & Reimbursement	s 13	Total Administration expenditures from Maddy EMS F Assessment).	und (Original	Amount
	14	Total Administration expenditures from Maddy EMS F Assessment). (If fund not established, leave blank and go to #1	Amount	
	15	Total Richie's Fund expenditures from Maddy EMS Fu Assessment). (If fund not established, leave blank and go to #3	Amount	

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							ALIFORNI.
/I Expenditures & Reimbursemen			Allo	wable Claims		Paid	Claims
(cont.)	16a	Total Physicians/Surgeons expenditures from Maddy EMS Fund (Original Assessment).	#	\$ Amount	#	%	\$ Amount
	b	If allowable claims were not paid during fisc	al year, Ju	ly 1, 2016-June 30.	, 2017, sta	ate reason	n(s):
	c	Total reimbursements from Physicians/Surg patient/third-party, county penalties, and set		o collections from		Amou	ınt Reimbursed
	170	17a Total Physicians/Surgeons expenditures from Maddy EMS Fund (Supplemental Assessment). (If fund not established, leave blank and go to #18)	Allo	wable Claims \$ Amount	#	Paid %	Claims \$ Amount
	17a		#	\$ Amount	#	/0	5 Amount
	c	Total reimbursements from Physicians/Surg patient/third-party, county penalties, and set		collections from		Amou	ınt Reimbursed
	18 Required documentation for submission. (The below documentation is part of the be submitted concurrently) □ A description of the Physicians/Surgeons claims payment methodologie □ A statement of the policies, procedures, and regulatory action taken to						
		zation, or	or names of specific				
		☐ A description of the process used to solid payment distribution methodology.	•	•	Ö		
		An identification of the fee schedule used					
	19	Responsibility for claims payments to Physicians/Surgeons:					
		Entity	Co	ontact (Name and '	Γitle)		
		Phone Number	En	nail Address			

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Reimbursements (cont.)	20a	Indicate if Hospital claims are paid on a claims basis for the Maddy EMS Fund (Original Assessment).			☐ Yes ☐ No (If no, go to #20d)			
		_	Allo	owable Claims		Paid Claims		
			#	\$ Amount	#	%	\$ Amount	
	b	Total Hospitals expenditures.						
	c If allowable claims were not paid during fiscal year, July 1, 2016-June 30, 2017, so							
	d	Direct disbursement to Hospitals. (N/A if hospitals. Leave blank and go to #21e)		Amount				
	e	Total reimbursements from Hospitals due to county penalties, and settlements.	nts from Hospitals due to collections from patient/third-party, nd settlements.				Amount Reimbursed	
	21a	Indicate if Hospital claims are paid on a claims basis for the Maddy EMS Fund (Supplemental Assessment). (If fund not established, leave blank and go to #22)				Yes		
			Alle	owable Claims		Paid C	laims	
			#	\$ Amount	#	%	\$ Amount	
	b	Total Hospitals expenditures.						
	c	If allowable claims were not paid during fiscal year, July 1, 2016-June 30, 2017, state reason(s):						
							Amount	
	d	Direct disbursement to Hospitals. (N/A if hospitals. (N/A if hospitals.)	pital claim	s are paid on a claims	basis.			
	e	Total reimbursements from Hospitals due to collections from patient/third-party, county penalties, and settlements. Amount Reimbursed						
	22	Required documentation for submission. (To be submitted concurrently)	f the Maddy	EMS Fund	d report, and <u>must</u>			
		A description of the hospitals payment						
	23	Responsibility for claims payments to Hospi Entity		Contact (Name and	l Title)			
		Phone Number		Email Address				

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VI	Expenditures & Reimbursements (cont.)	24a	Total Other Discretionary EMS expenditures from Maddy EMS Fund (Original						
	(cont.)		133C35HCHC).	Assessment).					
		b	Description of other EMS services provided:						
		25a	Total Other Discretionary EMS expenditures from Maddy EMS Fund	Amount					
			(Supplemental Assessment). (If fund not established, leave blank)						
		b	Description of other EMS services provided:						

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Email Address

VII Fund Summary

Maddy EMS Fund (Original Assessment)

	Available Funds for Distribution			Fund Total
Balance on July 1, 2016		(1c)		
Deposits for July 1, 2016-June 30, 2017		(5c)		
Interest for July 1, 2016-June 30, 2017		(8a)		
Other Deposits for July 1, 2016-June 30, 2017		(8b)		
Distributions/Expenditures	Category Distributions	Reserve (Optional)	Available Funds for Disbursement (Category Distributions - Reserve)	Expenditures
Administration (Admin cost = to lesser of actual cost or 10%)	(9a)			(13)
Physicians/Surgeons (58%)	(9b)	(9b)		(16a
Hospitals (25%)				(20b Pd
	(9c)	(9c)		(20d
Other Discretionary EMS (17%)	(9d)	(9d)		(24a
Total	(9e)	(9e)		
Preliminary Fund Balance (Fund Total - Total Expenditures)				
Reimbursements				
Physicians/Surgeons		(16c)		
Hospitals		(20e)		
Ending Balance for Total Available Funds as of June 30, 2017				
•	Signature of Madd	y EMS Fund Adı	ministrator	Date

Printed Name & Title

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VII Fund Summary (cont.)

Maddy EMS Fund (Supplemental Assessment)

Administration (Admin cost = to lesser of actual cost or 10%) Richie's Fund (15%) Physicians/Surgeons (58%) (11c) Hospitals (25%) (11d) (11d) Other Discretionary EMS (17%)		Available Funds fo	r Distribution		Fund Total
Deposits for July 1, 2016- June 30, 2017 Interest for July 1, 2016-June 30, 2017 Other Deposits for July 1, 2016-June 30, 2017 Category Distributions/Expenditures Administration (Admin cost = to lesser of actual cost or 10%) Richie's Fund (15%) Hospitals (25%) Other Discretionary EMS (17%) Total Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017	Balance on July 1, 2016		(2c)		
Other Deposits for July 1, 2016-June 30, 2017 Category Distributions/Expenditures Category Distributions Category Distributions Category Distributions Category Distributions Category Distributions Category Distributions Reserve (Optional) Category Distributions Reserve) Expenditure Category Distributions Reserve (Optional) Category Distributions Reserve) Expenditure Category Distributions Category Distributions Reserve) Category Distributions Reserve) Category Distributions Category Distributions Reserve) Category Distributions Category Distributions Category Distributions Reserve) Category Distributions Category Distributions					
Other Deposits for July 1, 2016-June 30, 2017 Category Distributions Category Distributions Reserve (Optional) Expenditure	Interest for July 1, 2016-June 30, 2017		(10a)		
Distributions/Expenditures Category Distributions Category Distributions Administration (Admin cost = to lesser of actual cost or 10%) Richie's Fund (15%) (11a) Physicians/Surgeons (58%) (11b) Other Discretionary EMS (17%) (11d) (11d) (11d) (11d) (11d) (11d) (11d) (11d) (11d) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017					
lesser of actual cost or 10%) Richie's Fund (15%) Physicians/Surgeons (58%) (11e) Hospitals (25%) (11d) Other Discretionary EMS (17%) Total (11f) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017	Distributions/Expenditures			for Disbursement (Category Distributions -	Expenditures
Richie's Fund (15%) Physicians/Surgeons (58%) (11c) Hospitals (25%) (11d) (11d) (11d) (11d) Other Discretionary EMS (17%) (11e) Total (11f) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals Ending Balance for Total Available Funds as of June 30, 2017		(11a)			(14)
Hospitals (25%) (11d) (11d) Other Discretionary EMS (17%) Total Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017	Richie's Fund (15%)				(15)
Other Discretionary EMS (17%) Total (11e) (11e) (11e) (11f) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals Ending Balance for Total Available Funds as of June 30, 2017	Physicians/Surgeons (58%)	(11c)	(11c)		(17a)
Other Discretionary EMS (17%) Total (11e) (11e) (11e) (11f) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals Ending Balance for Total Available Funds as of June 30, 2017	Hospitals (25%)				(21b Pd)
Total Total (11e) (11e) (11f) Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017		(11d)	(11d)		(21d)
Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals Ending Balance for Total Available Funds as of June 30, 2017	Other Discretionary EMS (17%)	(11e)	(11e)		(25a)
Preliminary Fund Balance (Fund Total - Total Expenditures) Reimbursements Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017	Total	(11f)	(11f)		
Physicians/Surgeons (17c) Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017					
Hospitals (21e) Ending Balance for Total Available Funds as of June 30, 2017	Reimbursements				
Ending Balance for Total Available Funds as of June 30, 2017	Physicians/Surgeons		(17c)		
Funds as of June 30, 2017	Hospitals		(21e)		
		Signature of Maddy	EMS Fund Adı	ministrator	Date
Printed Name & Title Email Addre		Printed	Name & Title		Email Address