

ATTACHMENT F: SUMMARY OF COST RECOVERY PROPOSAL ACTIONS

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Effective FY 2024-25

Action	Number of Fees	Category	Fee Description
Increases	8	Prehospital Personnel Fees and Provider Fees	EMT/Advanced EMT Initial Certificate/Recert Paramedic Accreditation Mobile Intensive Care Nurse Authorization/Recert Ambulance Permit Application Annual Vehicle Inspection Continuing Education Approval (4 Years) Base Station Hospital Designation Trauma Center Hospital Designation
New	1	Air Ambulance	Air Ambulance Permit
Total Fees	9		