### BILLING RATES - FY 13/14

**DEPARTMENT NAME:**
CU Fire & EMS

**VICE-PRESIDENT AREA:**
Student Affairs

<table>
<thead>
<tr>
<th>DESCRIPTION OF COMMODITY OR SERVICE</th>
<th>UNIT OF BILLING</th>
<th>FY 13/14 RATE</th>
<th>CUSTOMERS BEING SERVED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personnel Billing Rates:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classified Staff - Over-time Rate</td>
<td>per hour</td>
<td>$35.00</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Student Firefighter - Straight time rate</td>
<td>per hour</td>
<td>$12.00</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Student Firefighter - Over-time rate</td>
<td>per hour</td>
<td>$14.50</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Intermittent Paramedic</td>
<td>per hour</td>
<td>$17.50</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Intermittent Intermediate-EMT</td>
<td>per hour</td>
<td>$15.00</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Intermittent Basic EMT</td>
<td>per hour</td>
<td>$14.00</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td>Intermittent Event Supervisor</td>
<td>per hour</td>
<td>$18.50</td>
<td>Campus Departments - Special Events</td>
</tr>
<tr>
<td><strong>Emergency Medical Services - EMS Billing Rates:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tx / No Transport</td>
<td>Per Call</td>
<td>$100.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>Backup EMS / Rescue</td>
<td>Per Call</td>
<td>$100.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0428 BLS Non-Emergent</td>
<td>Per Call</td>
<td>$225.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0429 BLS Emergency</td>
<td>Per Call</td>
<td>$500.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0427 ALS I Emergent</td>
<td>Per Call</td>
<td>$600.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0433 ALS II Emergent</td>
<td>Per Call</td>
<td>$800.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0425 Mileage</td>
<td>Per Mile</td>
<td>$12.00</td>
<td>Those requiring ambulance service</td>
</tr>
<tr>
<td>A0888 Non-Covered Mileage</td>
<td>Per Mile</td>
<td>$10.00</td>
<td>Those requiring ambulance service</td>
</tr>
</tbody>
</table>