

Department of Health Services
Timothy W. Lutz
Director



County of Sacramento

Divisions
Administration
Behavioral Health
Primary Health
Public Health

December 31, 2025

ProTransport-1
Matt Condie

***RE: Ground Ambulance Fee Schedule: Assembly Bill 716
Sent via Email on December 31, 2025***

Dear Mr. Condie,

This letter affirms that Sacramento County Emergency Medical Services Agency (SCEMSA) has approved the fee schedule provided by ProTransport-1, in alignment with the provisions outlined in Assembly Bill 716 (AB 716). After review, SCEMSA is confident that the proposed fee structure aligns with the stipulations set forth in the legislation and Sacramento County Board of Supervisors Resolution 2024-0123.

Sincerely,

Thomas McGinnis

Tom McGinnis, MHA, EMT-P
EMS Administrator
Sacramento County

Division of Public Health
Olivia Kasirye, MD, MS
Public Health Officer



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**County of Sacramento Emergency Medical Services Agency
Approval of ProTransport-1 Ground Ambulance Fee
Schedule
Effective 1/1/2026**

The County of Sacramento Emergency Medical Services Agency approves the ProTransport-1 Ground Ambulance Fee Schedule, Effective January 1, 2026. The Fees are listed below.

- Basic Life Support Ground Ambulance Transport, Non-Emergency - \$3,111.00
- Basic Life Support Ground Ambulance Transport, Emergency - \$4,692.00

- Advanced Life Support Ground Ambulance Transport, Non-Emergency - \$5,151.00
- Advanced Life Support Ground Ambulance Transport, Emergency - \$5,650.80

- Specialty Care Ground Ambulance Transport** - \$14,790.00

- Ground Ambulance Mileage, Per Mile, all levels of service, \$79.56. Mileage is reported in tenths of a mile and is billed at the next mile up. (Example: 4.2 miles would be billed as 5.0 miles).

- Ancillary charges such as oxygen, nighttime, and wait time are not billed separately.

** - Note that Specialty Care Ground Ambulance Transport may include adult specialty care transport (sometimes called Critical Care Transport), Pediatric Intensive Care Transport, or Neonatal Intensive Care Transport.

Approved By EMS Agency:

Printed Name

Signature

Title

Date Signed