EMERGENCY MEDICAL SERVICES

ALS FIRST RESPONDER AGREEMENT

AMENDMENT NO. 1

CITY OF SOUTH PASADENA

2025

PINELLAS COUNTY
EMERGENCY MEDICAL SERVICES AUTHORITY
12490 Ulmerton Road
Largo, Florida 33774

ALS FIRST RESPONDER AGREEMENT
AMENDMENT NO. 1

THIS FIRST AMENDMENT amending the Emergency Medical Services ALS First Responder Agreement, made this ___18th___ day of ___November___ 2025, between the CITY OF SOUTH PASADENA, a Florida municipal corporation ("Contractor"), and the PINELLAS COUNTY EMERGENCY MEDICAL SERVICES AUTHORITY, a special district ("Authority").

In consideration of the mutual benefits set forth below, the parties agree as follows:

1. Contractor currently contracts with the Authority to provide Advanced Life Support (ALS) First Responder Services. The Contractor and the Authority are currently parties to the Emergency Medical Services ALS First Responder Agreement, dated October 1, 2024, which contract is referred to herein as the "Agreement".

2. Section 701(h) of the Agreement provides for an extraordinary budget increase which must be negotiated and approved prior to the beginning of the next fiscal year in the event any proposed budget submitted by the Contractor should exceed three (3%) percent of the prior Fiscal Year's budget. The Contractor's funding for FY24-25 totaled $1,281,532 and a budget request of $1,333,065 for FY25-26 has been submitted, resulting in an increase of 4.0% or $51,533.

3. The Authority hereby agrees to and has funded and authorized the Contractor's budget request of $1,333,065 for FY25-26, which change is reflected on Appendix A hereto.

4. Vehicle maintenance for Authority funded ALS Engines, Squads, and Ladder Trucks are allowable costs may be included in budgets submitted in accordance with Section 701(b) less 20% for non-EMS activity. Vehicle maintenance for Authority funded Medic Units and

Rescue Units are allowable costs may be included in budgets submitted in accordance with Section 701(b) at 100%.

5. Authority and Contractor agree to update Appendix E as amended.

6. Contractor and Authority agree to amend Section 801 by updating the initial expiration date to September 30, 2029.

7. Except as is otherwise set out herein, the Contractor and the Authority agree that upon approval by the respective Boards of the Contractor and the Authority and upon signing this Amendment, all terms of the Agreement will remain in full force and effect.

8. Contractor and Authority agree that the effective date is October 1, 2025.

[Signature Page to Follow]

IN WITNESS WHEREOF the parties hereto, by and through their undersigned authorized officers have caused this Agreement to be executed on this ___18th___ day of _____November_____, 2025.

ATTEST:
KENNETH BURKE, CLERK

PINELLAS COUNTY EMERGENCY
MEDICAL SERVICES AUTHORITY
By and through its Board of County
Commissioners

by: _____
Deputy Clerk

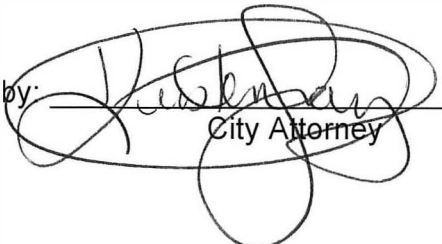by: _____
Chairman

APPROVED AS TO FORM
By: _Patrick H. Allman IV_____
Office of the County Attorney

SEAL

Countersigned:

CITY OF SOUTH PASADENA, FLORIDA

by: _____
Mayor

Approved as to form:

by: _____
City Attorney

Attest:

by: _____
City Clerk

Appendix A

ALS First Responder Profile

Fiscal Year 2025-2026

Contractor	South Pasadena
EMS District(s)	South Pasadena EMS District
Authority Funded Units	Rescue 20
Contractor Funded Units	Engine 20 or Truck 20
EMS Coordination	EMS Coordinator – 75% FTE (Pasadena 200)
FY25-26 Annual Compensation	$1,333,065
Projected Capital	FY25-26 None FY26-27 None FY27-28 Rescue 20 FY28-29 Pasadena 200 (75%) FY29-30 None
Contractor Reviewed: Initials _____ Date 9-15-2025	**County Reviewed:** Initials _____ Date _____

Appendix E

Personnel Reimbursement Process and Forms

702(b) CME Instructors

Follow the then current Authority provided process as outlined below.

Authority staff may update the process and/or forms.

702(c) Public Education

Submit the then current Authority provided reimbursement form.

Authority staff may update the process and/or forms.

702(d) Countywide Quality Improvement Committees

Submit the then current Authority provided reimbursement form.

Authority staff may update the process and/or forms.

702(e) Advanced Practice Paramed Training

Submit the then current Authority provided reimbursement form.

Authority staff may update the process and/or forms.

Processing CME Instructor Reimbursement Invoices

The following are the instructions for a Contractor to submit for Instructor reimbursement.

1. Open a new Excel "EMS Instructor Reimbursement Form."
   a. Choose from one of the two tabs, 1-25 or 1-75 entries.
2. Open the Aladtec program.
   a. In the "Reports" menu, select "Scheduled Time Report."
   b. In the filter, choose your department.
   c. Select the time frame you are seeking reimbursement
      i. Make sure the start time is 00:00 and the end time is 23:45
   d. Click the "Export CSV" button
   e. Open the CSV file and copy the data from line 3 down (do not include the headers)
   f. Paste this information into the open Excel file
3. Enter your information in the form.
   a. The first entry is the type of reimbursement:
      i. Straight Time (ST) is when the instructor is paid straight time.
      ii. Overtime (OT) is when the instructor is paid overtime.
      iii. Backfill (BF) is when someone other than the instructor is paid while the instructor is teaching.
      iv. No Reimbursement (NR) is when the Contractor is not seeking reimbursement for the instructor's hours.
   b. "Backfill Name" is the member providing the backfill for the instructor.
   c. "Hourly Rate w/benefits" is the rate at which the contractor seeks reimbursable hours ($75 per hour cap). If the time type is backfill, the rate is that of the member providing the backfill. If no reimbursement is being sought, then this is left blank.
   d. The total cost is automatically calculated and totaled at the bottom.
4. Save the form as a PDF and sign at the bottom.
5. Return to the "scheduled Time Report" in Aladtec and click the "print" button in the upper right corner. Save(Print) this report as a PDF.
6. Combine your invoice, the "EMS Instructor Reimbursement Form," and the Aladtec report into one PDF.
7. Send the signed PDF to EMSInstructorlogistics@co.pinellas.fl.us within 20 days following the last day of each month.