

**INITIAL / RENEWAL APPLICATION FOR
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
NASSAU COUNTY, FLORIDA**

This initial/renewal application is for a Certificate of Public Convenience and Necessity ("COPCN") to provide emergency medical care and/or transportation or nonemergency transportation within Nassau County, Florida. Nassau County, Florida reserves the right to request additional information from the applicant once this application is submitted.

Application Type:

Initial

☐

Renewal

☒

1. Name of business Med-Trans Corporation DBA Trauma One
2. Address 96175 Cessna Ct.
City Yulee State FL Zip Code 32097

P.O. Box _____
City _____ State _____ Zip Code _____
3. Phone number(s) 904-491-1278
(Include area codes) _____ Business Office _____
Pager Number _____ Cell Phone Number _____
4. List names, addresses and day time phone numbers of (all) owner, partners, operator and/or board of directors of corporation.
Rob Hamilton - President
Kim Montgomery - COO
Mike LaMee - DO
all can be reached at MTC headquarters 940-591-5800
5. State the experience of everyone listed in Paragraph 4.
Rob Hamilton, 28 years in the health care industry, 16 years of experience in leadership roles in Air Medical.
Kim Montgomery - Over 19 years in Air Medical, previously served as President of Seven Bar Aviation
Mike LaMee - Joined MTC 17 years ago after a 20 year career in the US Air Force and Army.
6. Indicate the level applicant wishes to provide: (No 9-1-1 calls for service in Nassau County except as requested by Nassau County Fire Rescue)

☐ Type B – Basic Life Support Non-Transport (BLS Non-Transport)
☐ Type C – Basic Life Support Transport (BLS Transport)
☐ Type D – Advanced Life Support Non-Transport (ALS Non-Transport)
☐ Type E – Advanced Life Support Transport (ALS Transport)
☒ Type F – Prehospital Air Ambulance Service
☐ Type G – ALS Interfacility Transport Service
☐ Type H – BLS Interfacility Transport Service

- Nassau, Duval, St.Johns, Putnam, Clay, Baker, Bradford, Union, Alachua.

- Need exists for air transport due to the lengthy transport times to a level 1 trauma center, stroke center, and high acuity tertiary inpatient facilities. ALS resources to remain in county for calls.

- Infusion pumps, hemodynamic monitoring systems, ventilatory support devices, ultrasound, fluid warmers, blood transfusion systems.

Location Address	Description	Hours of operation	Staffing	Phone number
96175 Cessna Ct.	Rotor base	24/7/365	Nurse/Medic	904-491-1278

- When helicopter is out of service, we attempt to locate a spare aircraft in the Med-Trans system and dispatch it to the base to cover the primary aircraft. Sometimes a spare is not readily available or cannot be moved due to weather.

16. Will your service pick up from other counties? yes then return to Nassau County? no

17. Type of service which will be provided (check appropriate blank):

Land ☐ Water ☐ Air ☒

18. Rate schedule – Provide a listing of all rates/charges for your service to provide the level applied for.

19. If a COPCN is issued to applicant, applicant agrees to the following:

- a. To indemnify Nassau County for any claims or losses arising out of applicant's operations;
- b. Applicant will comply with all state and county laws and regulations;
- c. Provide continuous and uninterrupted service to the extent and for the area authorized by the COPCN;
- d. Provide service to adjacent areas or routes within Nassau County, when requested to do so by public safety agencies, in an emergency situation or in accordance with established agreements;
- e. Keep posted at all the principal business locations in Nassau County a copy of the COPCN and any rate or fee schedule;
- f. Provide proof of insurance in amounts required by the Board of County Commissioner through the Risk Management Department;
- g. Keep such records as may be required by Nassau County Fire Rescue Department or Nassau County Board of County Commissioners, and
- h. Operate in conformance with state law and all rules and regulation hereunder.

To the best of my knowledge, all statements on this application are true and correct and the applicant agrees to the terms contained herein.

[Signature]
Signature of Applicant

Program Manager
Title

10/27/2020
Date

STATE OF FLORIDA
COUNTY OF Duval

This foregoing instrument was acknowledged before me
this 27th day of October, 2020, by

Tony Hayes
as TraumaOne Flight Services Program Manager (title)
for Med-Trans Corporation DBA TraumaOne who provided a Florida
driver's license as identification. ^(Company Name) and

[Signature]
Notary Signature
Sarah E. Hodge

NOTARY SEAL/STAMP

Personally Known ☐ OR Produced Identification ☒
Type of Identification produced:
Florida Driver's license



Sarah E. Hodge
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG346659
Expires 8/27/2023

Mail completed application and supporting documents to:
Nassau County Fire Rescue
Attn: Greg Roland, Assistant Chief
96160 Nassau Place
Yulee, FL 32097

For all questions or additional information please contact:
Greg Roland, Assistant Chief
groland@nassaucountyfl.com
904-530-6602



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL OVERSIGHT**

AIR AMBULANCE SERVICE LICENSE

This is to certify that: MED-TRANS CORPORATION D/B/A TRAUMAONE Provider Number # 1613
Name of Provider

655 West 8th Street JACKSONVILLE, FLORIDA 32209
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Air Ambulance Service subject to any and all limitations specified in the applicable Certificate(s) of Public Convenience and Necessity and/or Mutual Aid Agreements for the County(s) listed below:

COLUMBIA, NASSAU, ST. JOHN
County(s)

A handwritten signature in black ink, appearing to read "Steve A. McCoy", is written over a horizontal line.

Steve A. McCoy
Emergency Medical Services Administrator
Florida Department of Health

THIS CERTIFICATE EXPIRES ON: 01/02/2021

This certificate shall be posted in the above mentioned establishment



10/27/2020

Greg Roland
Assistant Chief
Nassau County, Florida

Chief Roland,

As per the request for renewal of the COPCN, listed below is the current Florida rate schedule.

Base Rate	Miles 0 - 49	Miles 50 - 79	Miles 80 - 99	Miles 100 +
29,940	319	265	187	180

Sincerely,

A handwritten signature in blue ink, appearing to read "Gary Boullion".

Gary Boullion
Regional Business Director
Gary.boullion@med-trans.net
770-377-9048



October 26, 2020

Greg Roland
Assistant Fire Chief
Nassau County, Florida

Chief Roland,

Thank you for the opportunity to renew our COPCN to base and operate an air medical helicopter in Nassau County.

Med-Trans Corporation has enjoyed our almost 8 year relationship with Shands Jacksonville Medical Center d/b/a UF Health Jacksonville to provide helicopter service for their well-established TraumaOne Flight Program. Med-Trans began providing service to TraumaOne on January 3rd, 2013. Med-Trans and TraumaOne would like to continue to base one of our aircraft in Yulee, Nassau County. This base of operations provides North east Florida and South east Georgia an option for rapid safe, high quality care and transportation to definitive care when ground transport may not be advantageous due to time and distance. Med-Trans provides the aircraft, pilots, billing services, and maintenance technicians, while contracting with TraumaOne to provide the Medical Staff and program branding.

Since our founding in 1982, Med-Trans has always made a commitment to our safety culture, exceptional customer service and sound business model principles. This foundation and the exceptional support of our parent company, Air Medical Group Holdings, uniquely positions Med-Trans to offer unparalleled support for the development and enhancement of the TraumaOne program. Med-Trans will continue to provide a Bell 407 EMS helicopter with the most state of the art avionics and safety tools available. The aircraft is equipped with night vision goggles, terrain avoidance systems, and anti-collision devices. Our aviation training program, maintenance and dedication to safety is second to none in the industry.

Your primary contact throughout this process will be myself, by phone or email with the information below. Of course, your current contacts at TraumaOne will also be available. We at Med-Trans look forward to the opportunity to continue to work with you and your staff along with the TraumaOne team in the NE Florida EMS community.

Sincerely,

A handwritten signature in blue ink, appearing to read "Gary Boullion".

Gary Boullion
Regional Business Director
Gary.boullion@med-trans.net
770-377-9048