



## Interoffice Memorandum

## AGENDA ITEM

January 4, 2023

TO: Mayor Jerry L. Demings  
-AND-  
County Commissioners

THRU: Raul Pino, MD, MPH, Director  
Health Services Department

FROM: Christian C. Zuver, M.D., Medical Director  
EMS Office of the Medical Director  
**Contact: (407) 836-7611**

SUBJECT: Certificate of Public Convenience and Necessity  
Renewal for Greater Orlando Aviation Authority  
**Consent Agenda – January 24, 2023**

The EMS Office of the Medical Director ("EMS") requests the approval of the application to renew the Certificate of Public Convenience and Necessity ("COPCN" or "Certificate") for the Greater Orlando Aviation Authority ("GOAA") to provide Advanced Life Support ("ALS") transport services. GOAA has submitted the attached application requesting the renewal of its COPCN which has been in effect since 2005.

In accordance with the Orange County Code of Ordinances, EMS has reviewed GOAA's renewal application. EMS has not received any substantial and material complaints against GOAA, and the status of GOAA has not substantially and materially changed. Accordingly, EMS recommends that the Orange County Board of County Commissioners renew GOAA's Certificate.

**ACTION REQUESTED:** Approval and execution of the renewal Certificate of Public Convenience and Necessity for Greater Orlando Aviation Authority to provide Advanced Life Support transport services in Orange County, Florida. The term of this certificate is from May 1, 2023, through April 30, 2025. There is no cost to the County.  
**(EMS Office of the Medical Director)**

CZ/jj

Attachments

BCC Mtg. Date: January 24, 2023

**ORANGE COUNTY, FLORIDA**  
**CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY**  
*for*  
**GREATER ORLANDO AVIATION AUTHORITY**

**WHEREAS**, Section 401.25, Florida Statutes, governs the licensure of entities providing prehospital and interfacility advanced life support ("ALS") services and basic life support ("BLS") transportation services and requires applicants for licensure to obtain a certificate of public convenience and necessity from each county in which the applicant will operate; and

**WHEREAS**, Section 401.25, Florida Statutes, authorizes the governing body of each county to adopt ordinances that provide reasonable standards for certificates of public convenience and necessity; and

**WHEREAS**, Chapter 20, Article III, Orange County Code (the "Code"), governs the application for a certificate of public convenience and necessity in Orange County, Florida ("COPCN" or "Certificate") and provides reasonable standards; and

**WHEREAS**, on November 21, 2022, Greater Orlando Aviation Authority ("GOAA" or "Applicant") submitted its renewal application for a COPCN to Orange County's Office of the Medical Director/EMS Division ("EMS") to provide ALS transport services ("Application"); and

**WHEREAS**, pursuant to Section 20-99 of the Code, EMS reviewed the Application and has not received any substantial and material complaints against the Applicant, and the status of the Applicant has not substantially and materially changed. Accordingly, EMS recommends that the Orange County Board of County Commissioners ("Board" or "BCC") renew the Applicant's certificate; and

**WHEREAS**, the Board has considered the Application, EMS's recommendation, and all applicable recommendations from municipalities within Orange County, Florida (the "County"). The Board has determined that the Applicant's proposed service, to the extent authorized by this Certificate, is or will be required by the present or future public convenience or necessity. The Board has determined that the Applicant is financially and otherwise able to provide adequate and uninterrupted service as required.

NOW THEREFORE, BE IT RESOLVED BY THE ORANGE COUNTY BOARD OF COUNTY COMMISSIONERS:

**Section 1. Recitals.** The above recitals are hereby incorporated into this Certificate.

**Section 2. Application and Certificate.** The Board hereby grants GOAA's Application to renew its COPCN and authorizes GOAA to provide **Level 5 ALS transport services in Orange County, Florida** in accordance with the terms, conditions, and limitations of this Certificate. The Board hereby issues this Certificate to **Greater Orlando Aviation Authority**. The Board certifies that the Applicant's proposed services are for the benefit of the population of the County or the benefit of the population of some geographic area of the County.

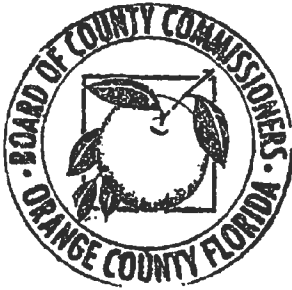
**Section 3. Term.** The "Term" of this Certificate is the period of time during which this Certificate is valid and effective. This Certificate's Term shall be for a two-year period beginning

on **May 1, 2023, and expiring on April 30, 2025.** Notwithstanding the foregoing, the Term may expire earlier if this Certificate is suspended or revoked pursuant to Orange County Code.

**Section 4. Indemnification.** In consideration of this Certificate, which permits GOAA to provide ALS transport services in Orange County, pursuant to Section 20-96, Orange County Code, and to the fullest extent permitted by law, GOAA agrees to defend, indemnify, and hold harmless the County, its officials, agents, and employees from and against any and all claims, suits, judgments, demands, liabilities, damages, costs and expenses (including attorney's fees) of any kind or nature whatsoever arising directly or indirectly out of or caused in whole or in part by any act or omission of Greater Orlando Aviation Authority or its subcontractors (if any), anyone directly or indirectly employed by them, or anyone for whose acts any of them may be liable; excepting those acts or omissions arising out of the sole negligence of the County.

**Section 5. Compliance with Laws.** By accepting this Certificate or providing ALS transport services in Orange County pursuant to this Certificate, GOAA agrees to comply with all applicable state and local laws and regulations.

ADOPTED THIS 24th DAY OF January, 2023.



ORANGE COUNTY, FLORIDA  
By: Board of County Commissioners

By: *Jerry L. Demings*  
for Jerry L. Demings  
Orange County Mayor

ATTEST: Phil Diamond, CPA, County Comptroller  
As Clerk of the Board of County Commissioners

By: *Phil Diamond*  
Deputy Clerk



REC-11  
11/21/22

ORANGE COUNTY, FLORIDA  
EMS OFFICE OF THE MEDICAL DIRECTOR  
RENEWAL APPLICATION  
FOR  
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

Level of Service

- ☐ BLS Non Transport      ☐ ALS Non Transport      ☐ Prehospital Air Ambulance  
☐ BLS Transport      ☒ ALS Transport      ☐ Prehospital Interfacility Air Ambulance  
☐ BLS Interfacility Transport      ☐ ALS Interfacility Transport

EXPIRATION DATE 04/30/2023

SUBMISSION DATE 11/21/2022

1. NAME OF SERVICE Greater Orlando Aviation Authority
2. BUSINESS ADDRESS (STREET) One Jeff Fuqua Blvd. CITY Orlando  
COUNTY Orange STATE FL ZIP CODE 32827
3. PHONE NUMBER 407-825-3038 FAX 407-825-3080 24 Hour Number 407-825-3042  
E-Mail address matthew.dailey@goaa.org  
Manager's Name Brenda Bishop Title Interim Fire Chief

**NOTE:** (IF THERE ARE ANY CHANGES TO BE MADE TO YOUR PREVIOUS APPLICATION, PLEASE LIST BY NUMBER IN THE SPACE PROVIDED BELOW. (Use separate sheet if necessary). COMPLETE PERSONNEL AND VEHICLE ROSTER ATTACHMENTS, IF THERE ARE ANY CHANGES). If None State "None".

Vehicle and Personnel Roster Changes

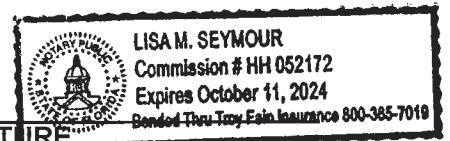
TO THE BEST OF MY KNOWLEDGE, ALL STATEMENTS ON THIS APPLICATION ARE TRUE  
AND CORRECT AND THERE ARE NO OTHER CHANGES TO BE MADE TO THE ORIGINAL  
APPLICATION.

Maud Jaily  
SIGNATURE

11-21-22  
DATE:

NOTARY SEAL

NOTARY SIGNATURE



Lisa M Seymour



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
BUREAU OF EMERGENCY MEDICAL OVERSIGHT

ADVANCED LIFE SUPPORT SERVICE LICENSE

This is to certify that: GREATER ORLANDO AVIATION AUTHORITY Provider Number #: 4805  
Name of Provider

1 JEFF FUQUA BOULEVARD, ORLANDO, FLORIDA 32827  
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Advanced Life Support 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:

ORANGE  
County(s)

A handwritten signature in black ink, appearing to read "Steve A. McCoy".

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

**THIS CERTIFICATE EXPIRES ON: 06/05/2023**

This certificate shall be posted in the above mentioned establishment



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/29/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Arthur J. Gallagher Risk Management Services, Inc. 1140 N. Town Center Drive Suite 200 Las Vegas NV 89144		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 702-647-2333 FAX (A/C, No): 702-647-5433 E-MAIL ADDRESS:	
<b>INSURED</b> Greater Orlando Aviation Authority Attention: Risk Management 5855 Cargo Rd. Orlando FL 32827		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : ACE Property & Casualty Insurance Co INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	
GREAOA-04		NAIC # 20699	

**COVERAGES**
**CERTIFICATE NUMBER:** 1242240341

**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Airport Liab. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: None	Y	AAP N16736387 002	5/1/2021	5/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 1,500 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Per AAP 208 (11-04), certificate holder included as additional insured

**CERTIFICATE HOLDER**
**CANCELLATION**

Orange County, FL  
 Risk Management Division  
 109 E Church St, Suite 200  
 Orlando FL 32801

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE**

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