



**County of Contra Costa
EMERGENCY MEDICAL SERVICES
Memorandum**

DATE: June 10, 2019

TO: FINANCE COMMITTEE
Supervisor Karen Mitchoff, District IV, Chair
Supervisor John Gioia, District I, Vice Chair

FROM: Patricia Frost, Director, Emergency Medical Services

SUBJECT: **Contra Costa EMS System Funding Report**

Information:

Referral History:

On March 19, 2017, the EMS Agency submitted a follow-up report on Community Service Area EM-1 (Measure H) and EMS System funding gaps. The report included two key recommendations to assure continuity of technology operations supporting programs (e.g. Trauma, Cardiac Arrest, STEMI, Stroke and EMS for Children) known to produce life-saving outcomes.

Recommendation #1: Establish an interim annual EMS System Program enhancement contribution/investment of up to \$750,000 ¹from available Board designated revenue sources until such time a new benefit assessment or other revenue source with a COLA could be established to support and enhance the Countywide EMS System.

Committee Response: The Finance committee reviewed the items for gap-funding from the general fund reserves to total \$550,000. This funding was reaffirmed at the July 23, 2018. Recommended to the Board of Supervisors at the December 3, 2019 finance committee and approved for distribution as needed at the January 22, 2019 Board of Supervisors Meeting.

Committee Update: At the March finance committee the EMS Director reported on the following significant changes impacting the Local EMS Agency budget.

1. Board of Supervisor approved Local 21 Salary Increases for Prehospital Care Coordinator (PHCC) Position: The agency has 8 Prehospital Care Coordinators to

¹ In 2014 the Contra Costa EMS System Modernization Study identified the need for an additional \$750,000 to sustain Countywide EMS System of Care programs.

support unfunded statutory mandates supporting operations and medical oversight of the EMS System. The positions were permanently linked to the CNA RN salaries and steps in the previous 2015-16 contract. With the retroactive increases associated with the CNA contract EMS personnel budget has > 10 % beginning in December 2018.

2. WebEOC Emergency Management Dashboard Project: EMS is the project coordinator for the SHSGP (Homeland Security) grant that may be cut. The project is more than 2/3rd complete and if the grant is cut the cost would be \$180,000.
3. The Hospital Preparedness Program Grant is being redesigned and the EMS Agency will no longer receive the grant under the new program design as Public Health will be assuming all management of this program by the end of 2019. This is a loss of over \$350,000 of grant dollars.
4. Maddy Funds (SB12) support the EMS Agency administrative funds and continue to shrink under state programs that are reducing fees for traffic citations. Maddy Funds in 2017-18 funded were \$458,205.
5. Professional Standards Program Costs: This program represents the EMS Agency public safety and certification action and disciplinary regulatory function. Internally the program is supported with 2.5 FTE (program staff, director and medical director time). The EMS Agency has been working with County Counsel over the last year with over 470 hours as of February 1, 2019 and FY costs of \$58,789 for that same period as the EMT's involved are bringing legal representation to the table. These cases involve substance abuse, fraud in the procurement of an EMT certificate, unprofessional conduct and violating prehospital regulations. These cases involve approximately 3% of all workforce (approximately 30-35 cases per year)

These unanticipated budget issues and the turnover of several EMS staff have resulted in the EMS Agency delaying filling staff vacancies due to lack of budget.

As a result, ambulance permits now require up to 60 days of time to complete due to staff shortages. Previously the EMS Agency was able to process these permits within 30 days.

Current statutory requirements and subsequent investigatory mandates for DOJ (Department of Justice) clearances, audits of required continuing education certificates (each EMT is required to complete and OIG (Office of Inspector General), DHCS (Department of Health Care Services), DMV (Department of Motor Vehicles) and NPDB (National Practitioner Data Bank) reporting has led to periodic delays in processing EMT-Paramedic certifications. The EMS Agency now require up to 60 days to approve up from 30 days due to budget impacts associated with staffing.

The Health Services Director and CEO have been advised that without an addition \$ 750,000 dollars of funding to make up the decreases in Maddy funds and CDPH and Homeland Security Grant Awards the EMS Agency statutory obligations will continue to be adversely impacted.

Recommendation #2: Preserve and enhance the Fire First Responder funding by an additional 2 million dollars by moving forward by exploring a long-term funding measure.

Committee Response: The Finance committee discussed long term EMS System funding needs and recommended on-going referral to Finance to begin working on the two-year process to put a Special Tax on the June 2020 ballot.

Committee Update: Extensive efforts have been taken by the EMS Director to solicit the engagement of stakeholders in this effort:

1. Initially Chief Carman and EMS Director Frost were directed to submit an updated funding report by the end of 2018 in collaboration with County Fire Chiefs. This required the assistance of Lisa Driscoll work with parties to set up the meeting.
2. During the August 27, 2018 the meeting on EMS funding, Chief Lance Maples and Chief Paige Meyer informed parties that the fire districts of the Rodeo Hercules, Pinole and East County had no interest in participating in a county wide EMS ballot measure due to their need to support their own ballot measure. The fire chiefs advised that the fire districts were “cost adverse” and unwilling to take on any program to “enhance the EMS System” such as bi-directional health information exchange regardless of state mandates unless the county provided sustainable funding. Chief Maples has subsequently retired along other district fire chiefs for Pinole, Crockett Carquinez and Rodeo Hercules. In 1:1 discussion between the EMS Director and new Fire Chiefs all agree the system requires sustainable funding to continue to advance and provide services that support integration and tangible solutions to support continuity of operations.
3. One area of interest explored was a ballot measure focused on intra-operable public safety emergency communications. Examples include EBRCS, First Net, WebEOC, Tablet Command, dispatch and numerous data system upgrades critical to public safety operations. A ballot measure benefiting Fire, EMS, Ambulance and Public Safety emergency and disaster technology to assure continuity of operations may be worthwhile to develop and explore.
4. In April the EMS Director Frost discussed additional strategies to engage stakeholders with Supervisor Gioia and was advised that further work at the Supervisor level was required to proceed.
5. In the interim EMS Director Frost has provided educational updates on the status of EMS System funding required to further optimize EMS System services using bi-directional exchange, Prehospital EMS education and training to create opportunities to participate in future community paramedicine programs have been reported to the Emergency Medical Services Committee over the last year. On June 12, 2019 the EMCC will be asked to provide a letter of support for additional EMS System funding to the BOS.
6. In April, EMS Director Frost was invited to provide an educational presentation to the Contra Costa Fire Commissioner Association. The session was attended by Supervisor Burris and Mitchoff staff, Fire Chiefs from East Contra Costa Fire, Pinole Fire and Fire Commissioners from Moraga Orinda Fire including Fire union representatives Vincie Wells. Discussion of the need for further funding was met with further interest.

Summary:

Gaps in Emergency Medical Services funding threaten to degrade Contra Costa EMS System Services within the next 5 years with adverse impacts to all fire and ambulance stakeholders. Reimbursement for ambulance services continue to decline while new

reimbursement pilot programs recently released by Centers of Medicare and Medicaid Services (CMS) called ET3 (Emergency Triage, Transfer and Transport) has been announced. Participation in future enhanced reimbursement pilots requires bi-directional exchange. The EMS Agency has recently lost out on a substantial reward secondary to Fire Agency funding concerns and cannot participate these grant opportunities without the cooperation of Fire leadership throughout the county.

Strategically Contra Costa EMS System is well positioned to substantially benefit from the health care system integration that bi-directional exchange provides. Several million dollar grant awards were provided to San Mateo, Alameda, Napa and Sacramento. Without bi-directional exchange the Contra Costa EMS System will rapidly fall behind in our ability to further enhance operations and patient care.

The EMS Director recommends that the BOS support and advise Contra Costa Fire and AMR to partner with the EMS Agency in the next round of bi-directional grant opportunities as required by the Alliance ambulance agreement and to assure the County EMS System can comply with the state mandate.

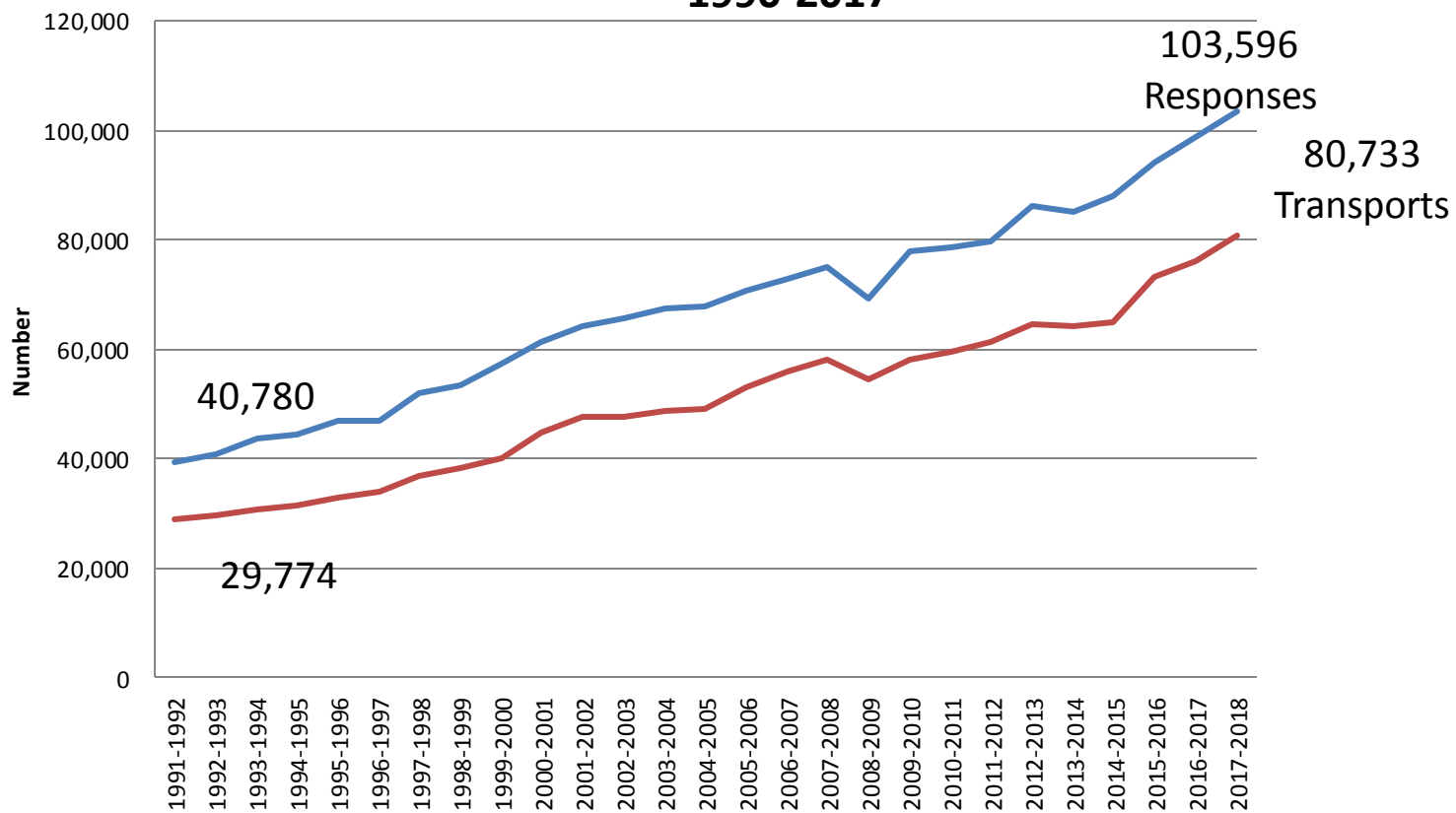
Measure H funding is known to be inadequate to provide for continuity of EMS System program operations, upgrades in technology infrastructure, and meet statutory requirements for EMT and paramedic oversight. The EMS System requires an additional 5-6 million dollars a year to continue to respond to the demands of the community. Over the last 5 years increases in population growth have driven increased EMS service utilization. Expanded emergency and disaster operations have been tested and it is in the best interest of the county to have an EMS System disaster contingency fund to assure sustainable funding streams.

In response to fiscal challenges the EMS Agency has limited ability to participate in cost recovery other than to raise fees, delay recruitment of staff and redesign internal operations to improve efficiency using technology. Unlike many LEMSAs, the Contra Costa EMS Agency does not collect franchise or first responder fees and has a legacy of directing all ambulance contract performance penalties to support Fire-EMS stakeholders and system improvement.

We again thank the finance committee leadership for this year's general fund allocation so that our LEMSA can continue to support Fire EMS and Medical health system partners in their regulatory compliance that allows for a highly reliable, competent and accountable EMS System work force.

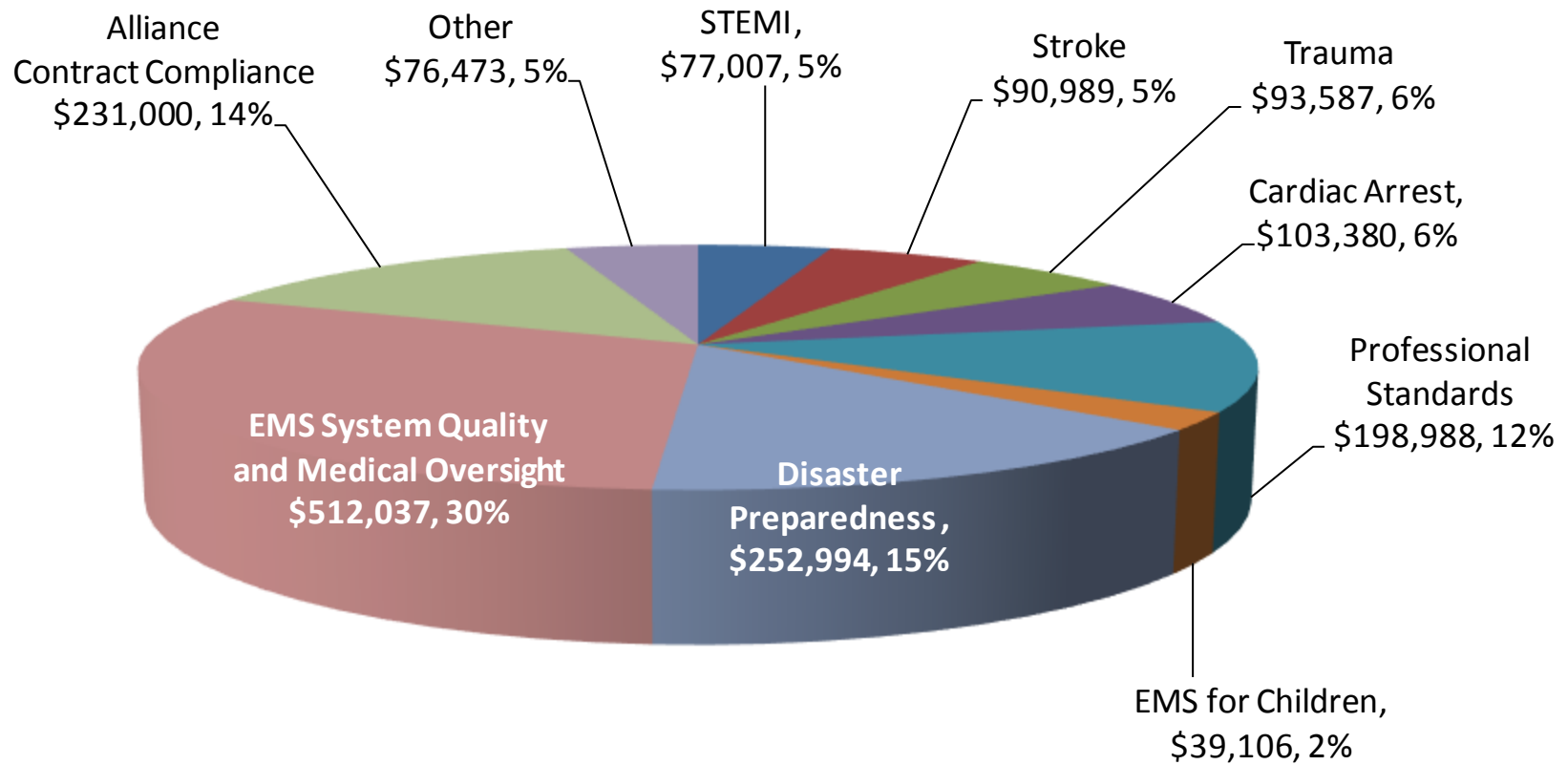


Contra Costa Emergency Medical Services EMS System Response and Transport Volume 1990-2017



Local EMS Agency cost of compliance with local, state and grant requirements for EMS Systems and Programs

**Contra Costa Emergency Medical Services
EMS System of Care and Paramedic Program Support*
FY 2017-2018 total \$1,675,560**



Local EMS Agency cost of compliance with local, state and grant requirements for EMS Systems and Programs