



Emergency Medical Services EOA Development Project Meeting Minutes

December 16, 2019 – 10:00 am -11:30 am
Sonoma County Water Agency
Redwood Conference Rooms B and C
404 Aviation Blvd.
Santa Rosa, CA 95403

MEETING OBJECTIVE

The purpose of the meeting is to receive input from interested stakeholders on the proposed structure of the Department's Request of Proposal.

Stakeholder input received today will inform the Department's development of the Request for Proposal for advanced life support and emergency services with the Sonoma County Exclusive Operating Area.

Introductions

Nancy Lapolla (EndPoint EMS Consulting) opened the meeting with introductions around the room and from those on the phone as well.

Barbie Robinson, Department Director, Sonoma County Department of Health Services (DHS) provided opening comments welcoming the group and thanking all for collaboration on the EMS ordinance. Barbie stressed that the relationships we made in the Ordinance process are important to set the table for this phase of gathering stakeholder input for the Exclusive Operating Area (EOA) Request for Proposal (RFP) process.

Rod Stroud (Sonoma County Department of Health Services) provided an overview of the RFP development process timeline. It will consist of six phases, beginning with the input phase, targeted to conclude about April of this year. Following input, development by DHS of the draft RFP is set for completion in September 2020, with state and BOS review and approval occurring about December 2020. The final RFP should be released thereafter with proposals from bidders due in June of 2021. Following the evaluation of submitted proposals, a contract will be negotiated and delivered to the Sonoma County Board of Supervisors in October 2021. The intent of the long timeframes in the process is to provide as much time as possible for entities interested in bidding to prepare proposals and also to allow time to prepare for agency to go into contract. New contract would be in effect in a July of 2022.

Barbie Robinson pointed out the Sonoma County Board of Supervisors remains connected to the RFP process through the EMS Ad Hoc Committee.

Review of Notes from Last Meeting

Nancy Lapolla asked the group to review the meeting agenda and meeting notes from the previous meeting. There were no comments or changes requested by the group. EndPoint shared the content of the EMS System Pre-Review Questionnaire and Data Request that EndPoint made to DHS and Coastal Valleys EMS Agency staff to assist in their review of the current Sonoma County system and provide recommendations. EndPoint agreed to share their data request with stakeholders via the project website.

Steve Suter (Santa Rosa Fire Department) expressed interest in ensuring the documents were available on the project website. Kurt Henke (AP Triton, Cal Chiefs, Sonoma County Fire Chiefs) asked about financial information and evaluation. Kurt asked if EndPoint had expertise on staff to understand ambulance service fiscal data and documents. EndPoint shared that their CPA is knowledgeable in this area with previous experience auditing ambulance services provider organizations. Kurt asked if the analysis will be made available to stakeholders and EndPoint indicated they will share the results. Kurt maintained the group needs to see the fiscal analysis before we can move forward. Decisions to be made are dependent how much funding is in the system.

All Risks EMS Responder Topic for Input

Today – Steve Herzberg (Bodega Bay Fire Protection District, EMCC 5th District) brought forward the topic of “all-risk” EMS responders, then deferring to Kurt Henke for recommendations on integration of single and dual-role responders within a system design process. A 1997 white paper from the International Association of Firefighters was provided along with a cover letter from Steve H. for distribution and posting to the project website. Discussion followed regarding the rural nature of parts of Sonoma County and the suggested utilization of dual role personnel to make both medical care and technical rescue, cliff rescue skill sets available from the same ambulance crew. Kurt and Steve felt a full level of service including dual role and fire fighter rescue/and EMT or paramedic would represent the best enhancement. An RFP process should address how to provide dual role staff in rural areas. Revenue is available in the EOA. The main provider of ambulance transport needs to be able to reinvest those resources into the county to enhance patient outcomes. Creating a system where revenue is spread throughout the county to make the whole county strong in this way represents looking at the EOA-RFP more broadly than a contract for an ambulance provider; a paradigm shift.

When asked how he saw this concept working in the current process, Kurt Henke said the County should grade RFP responses higher if the bidder could offer dual-role responders instead of single-role ambulance staff. Adding value to the system for better patient outcomes. Rural areas need dual role staff on the ambulances in addition to engine-based responders. Not a proposal for 201 areas, but considered as desirable in the rural parts of the EOA zone. When asked about the way the 201 entities would address such requirements, Kurt said a 201 provider would be responsible for whatever requirements were in place within the EOA RFP if a successful bidder in that process. The 201 areas themselves would

remain under medical control and retain service currently provided within their boundaries. The fire providers suggested the opportunity to share revenue generated within the EOA to fire districts and other rural providers outside the EOA.

David Caley (Coast Life Support District) pointed out his agency serves a very rural, bi-county response area. David is not opposed to dual role, but currently response times are 30 minutes for his crews in some parts of his zone. Enhancing fire departments to better respond to patients is good in his opinion.

Kurt Henke mentioned in a coastal community with 30-60 minutes response times a rural ALS system enhancement can be realized by sending an EOA ambulance from closer to the central part of the county to rendezvous and take over the transport. The rural ambulance can then get back into their zone faster.

Mark Heine (Sonoma County Fire District) asked the group to consider if there is an opportunity to look at a paradigm shift, is there a better delivery system? Is it possible for the EOA or that area to help pay for service delivered outside the EOA to other (non-EOA) areas? A bidder would have to provide service outside of scope of service, and may already have rights in the non-EOA area through 201 status.

Bill Bullard (Graton Fire Protection District) mentioned as an RFP is developed as much ability to find the best and most EMS calls for best way to save the most lives and improve patient outcomes.

Dr. Omar Ferrari (Santa Rosa Memorial Hospital) stated hospitals are facing crisis due to the overwhelming impact of mental health and substance abuse issues on emergency departments, including those prevalent within the EOA zone. Kurt Henke stated the opportunity to maximize revenues and invest back into system to improve mental health & substance abuse issues.

A comment was made that can we figure out a mechanism to make the revenue spread across the entire system; not just EOA. Alternate destinations can help with changes such as sobering centers and other community clinics.

Bruce Lee (American Medical Response) stated AMR is looking to change as well, and at the fiscal sustainability of the system. Bruce envisioned a larger scope EOA, and could consider ideas to include service outside the EOA. Bruce felt broader scope could have more financial risk and stressed the need to gain efficiencies, nail down the fiscal realities and understand the scope of service.

Patrick McAlpin (Kaiser Santa Rosa) asked Kurt Henke how he saw revenue going back into the system, and how does the revenue create community programs if it is going to be spread to non-EOA EMS provider agencies. Kurt felt additional revenue of 4.5 to 5 million dollars annually via additional federal reimbursement (IGT, GEMT) might be realized via a public sector billing for transport services, but cautioned not to build your system on the reimbursement.

Dr. Mark Luoto (CVEMSA) Mentioned responses into the EOA from outside and from inside the EOA out to rural areas needs to be identified to understand system issues better. Mark added that in his experience Federal funding reimbursement has changed over the years during his career. Dr. Luoto cautioned against building systems based on the stability of these funding sources.

Topics for Next Meeting

Next up community paramedicine on January 21, 2020 at 10 AM, 1450 Neotomas in Santa Rosa. Nancy requested stakeholders submit information to share on community paramedicine programs or other innovative programs that propose to enhance patient care. Now is the opportunity to provide input on what you would like to see in the next RFP.

Mark Heine asked for the EOA boundary discussion to move up in the order of discussion. Mark is concerned about a potential legal challenge to 201 rights that would impact LAFCo process underway at a critical time. Barbie Robinson clarified neither DHS nor the County are intent upon a legal challenge, but the respective County Counsel staff have been asked to study the relationship between LEMSA and LAFCo relative to EMS issues. They have been asked to generate a legal opinion regarding scope of authority and overlap of authority.

It was mentioned that the revision to the county ordinance clarified that district boundaries and ambulance response zones are actually different. Boundary topic add to agenda for 1/21, with the clarification that what will be reported on 1/21 will be the decision on if the boundary discussion can move, based on the timeframe for the County Counsel opinion. Kurt Henke mentioned the need for the RFP to have language of transparency and report out on revenue audited financials. The successful bidder must provide all records without reserving those as proprietary up to unit/hour cost.

Meeting adjourned. Next meeting will be held at County of Sonoma Department of Health Services Administration 1450 Neotomas Blvd, Santa Rosa in the Santa Rosa Conference Room on January 21st 2020 from 10:00-11:30 AM