



**Sierra – Sacramento Valley EMS Agency
Joint Powers Agency (JPA) Governing Board Meeting**



MEETING MINUTES

Meeting Date
<ul style="list-style-type: none"> Friday, January 12, 2024

MEETING ATTENDANCE

BOARD MEMBERS			
MEMBER	REPRESENTING	PRESENT	ABSENT
Bill Connelly	Butte County		X
Merced Corona	Colusa County	X	
Grant Carmon/Monica Rossman	Glenn County	X/X	
Susan Hoek	Nevada County	X	
Jim Holmes (Chairperson)	Placer County	X	
Tim Garman/Mary Rickert	Shasta County	X/X	
Brandon Criss	Siskiyou County	X	
Nick Micheli	Sutter County		X
Matt Hansen/Pati Nolen	Tehama County	X/X	
Don Blaser	Yuba County	X	
EX-OFFICIO MEMBER			
MEMBER	REPRESENTING	PRESENT	ABSENT
John Poland	S-SV EMS Agency	X	
LEGAL COUNSEL			
ATTENDEE	REPRESENTING	PRESENT	ABSENT
Clayton Cook	S-SV EMS Agency/Placer County	X	
CLERK OF THE BOARD			
ATTENDEE	REPRESENTING	PRESENT	ABSENT
Amy Boryczko	S-SV EMS Agency	X	

MEETING ATTENDANCE (CONTINUED)

OTHER ATTENDEES	
ATTENDEE	REPRESENTING
Patrick Comstock	S-SV EMS Agency
Gabe Cruz	AMR
Jennifer Jensen	S-SV EMS Agency

MEETING MINUTES

A. CALL TO ORDER AND PLEDGE OF ALLEGIANCE

Supervisor Holmes called the meeting to order at 1:02 p.m. and led attendees in the Pledge of Allegiance.

B. WELCOME AND INTRODUCTIONS

All in-person and remote attendees introduced themselves.

C. BOARD MEMBER ANNOUNCEMENTS

There were no JPA Board member announcements.

D. ACTION TO APPROVE AGENDA

There were no requested changes to the agenda. Supervisor Corona motioned to approve the agenda as written. Supervisor Blaser seconded. A roll call of votes was called: Ayes=8 (Placer, Nevada, Yuba, Colusa, Shasta, Glenn, Siskiyou, and Tehama Counties). Noes=0. Absent=2 (Butte and Sutter Counties). Motion approved.

E. ACTION TO APPROVE CONSENT AGENDA ITEMS

Supervisor Blaser motioned to approve the consent agenda. Supervisor Hoek seconded. A roll call of votes was called: Ayes=8 (Placer, Nevada, Yuba, Colusa, Shasta, Glenn, Siskiyou, and Tehama Counties). Noes=0. Absent=2 (Butte and Sutter Counties). Motion approved.

F. PUBLIC COMMENT:

None was forthcoming.

G. INFORMATION UPDATE – Oral Update by John Poland:

1. Ambulance Response Times

- Updated response time information was included in the JPA Board packet.
- Mr. Poland noted that there is nothing concerning for any of the counties.

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- Previously the Corning response times had fallen below the mark, but those numbers have improved and are expected to continue to do so.
- Per the recent Sierra Nevada Ambulance EOA Agreement renewal, the Nevada City/ Grass Valley zone, currently in a 9-minute zone will increase to a 10-minute zone.
- Any questions or concerns regarding ambulance response times should be directed to Mr. Poland or Ms. Harlan, S-SV EMS Contracts Compliance Manager.

2. Rural Ground Ambulance Provider Coverage Status: Butte Valley Ambulance – Siskiyou County, Chester Fire Department – Plumas County, Southern Cascades Ambulance – Modoc County – verbal update

- Butte Valley Ambulance (Siskiyou County)
 - This provider temporarily ceased providing 911 ground services due to staffing and other operational issues.
 - Their 911 patient transport volume is approx. 100 calls/year.
 - Providers in southern Oregon and other areas of Siskiyou County (specifically Mt. Shasta Ambulance) will be covering this area temporarily on a mutual aid basis.
- Chester Fire Department (Plumas County)
 - This provider ceased ambulance operations as of 1/1/2024 due to on-going financial issues.
 - This may have some impact on Butte and Tehama County ambulance providers.
- Southern Cascades (Modoc County)
 - This provider recently ceased ambulance operations due to staffing issues.
 - Meyers Memorial Hospital Ambulance has been covering this area.

3. California EMS Authority Report – Annual Data Trends – California EMS Personnel Certification and Licensure

- Mr. Poland summarized/highlighted this report for the JPA Board and answered JPA Board member questions.

Supervisor Hansen arrived at 1:20 pm.

4. California EMS Authority Report – Criminal History Impact on EMT Certification - 2022

- Mr. Poland summarized/highlighted this report for the JPA Board and answered JPA Board member questions.

5. California EMS Authority Report to the California EMS Commission Ambulance Patient Offload Delays

- Mr. Poland summarized/highlighted this report for the JPA Board and answered JPA Board member questions.

6. Mid-Year Financial Summary Revenue/Expenditure Report

- Agency revenues are about 50% ytd. The State is the slowest to pay invoiced revenue.
- On the expenditure side, the Agency is at about 42% of the total operating expenses.
- There is nothing concerning.
- The Governor's budget came out yesterday. Public Health functions were touched the least. Nothing significant has been removed. At this point, there are no anticipated State General Fund cuts in funding to the Agency.

7. 2023 S-SV EMS Agency EMS Plan – verbal update

- The Agency is required to submit an EMS plan to the State EMS Authority annually.
- The 2023 Agency EMS plan is 95% done at this point and will be finished soon. This is due at the end of February but will most likely be submitted by the end of January.

H. NEW BUSINESS

1. S-SV EMS Ground Ambulance Provider Rates – *for approval*

- Most ground ambulance providers get the majority of their revenue from fee for service.
- 20%-25% of ground ambulance requests end up being ‘dry-runs’ (cancellations). This occurs when the ambulance responds and provides EMS care but does not transport the patient. Most providers do not bill for or collect revenue for these calls because most insurance companies will only pay if the patient is transported.
- The S-SV EMS regional average ground ambulance payer mix (which fluctuates from area to area based on multiple factors) is:
 - Medi-Cal: 27% of ground ambulance patient transports (approx. 1/3 of the California population is covered by Medi-Cal).
 - Medicare: 53% of ground ambulance patient transports.
 - Commercial Insurance: 12% of ground ambulance patient transports (includes health insurance and auto insurance - where applicable).
 - Self-Pay (no insurance): 7% of ground ambulance patient transports.
 - Other: 1% of ground ambulance patient transports (facility contracts, etc.).
- In 2019, California extended Medi-Cal coverage to all eligible undocumented adult immigrants under the age of 26. In July 2021, AB133 was signed into law which further extended Medi-Cal coverage to 235,000 Californians 50 years of age or older regardless of citizenship/immigration status. The California budget, after 2022, includes an expansion of Medi-Cal coverage of all income eligible Californians aged 26-49.
- The current Medi-Cal reimbursement for private providers is about \$200-300/transport.
 - The base rate for a Medi-Cal transport is \$118. There is a private provider add-on reimbursement of \$220, but to get that providers have to pay \$34 for every single transport (regardless of payer) into a fund which has some federal matching.
 - Public Providers can collect an est. \$900-\$1000 per Medi-Cal transport. They receive the same \$118 base rate, but their inter-governmental transport program add-on (PP-GEMT IGT), which became effective January 1, 2023, is an extra \$947. Some of the public providers have already dropped out of this program – concerned they won’t recover the fees they must pay into the program to receive matching funding.
- Medicare Reimbursement: Public and private providers collect about \$600/transport.
- The S-SV EMS region average ground ambulance collection rate is approximately 20%, meaning that ground ambulance providers collect approx. .20 cents for every \$1 billed.
- AB 716 (Boerner) was recently passed by the California Legislature and approved by the Governor on October 8, 2023. Among other provisions, this new law includes the following requirements:
 - Requires the California EMS Authority, on or before March 1, 2024, and on or before each January 1 thereafter, to annually report the allowable maximum rates for

- ground ambulance transportation services in each county, including trending the rates by county.
- A health care service plan contract issued, amended, or renewed on or after January 1, 2024, shall require an enrollee who receives covered services from a noncontracting ground ambulance provider to pay no more than the same cost-sharing amount that an enrollee would pay for the same covered services received from a contracting ground ambulance provider (“in-network cost-sharing amount”). An enrollee shall not owe the noncontracting ground ambulance provider more than the in-network cost sharing amount for covered services. A noncontracting ground ambulance provider shall only advance to collections the in-network cost-sharing amount that an enrollee individual failed to pay.
 - Unless otherwise agreed to by the noncontracting ground ambulance provider and the health care service plan, the plan shall directly reimburse a noncontracting ground ambulance provider for ground ambulance services the difference between the in-network cost-sharing amount and the amount described as follows:
 - If there is a rate established or approved by a local government (LEMSA), at the rate established or approved by the governing body of the local government having jurisdiction for that area or subarea, including an exclusive operating area pursuant to Section 1797.85 of the California Health and Safety Code.
 - If the local government (LEMSA) having jurisdiction where the service was provided does not have an established or approved rate for that service, the reasonable and customary value for the services rendered, based upon statistically credible information that is updated at least annually and takes into consideration all of the following:
 - The ambulance provider's training, qualifications, and length of time in practice.
 - The nature of the services provided.
 - The fees usually charged by the provider.
 - Prevailing ground ambulance provider rates charged in the general geographic area in which the services were rendered.
 - Other aspects of the economics of the ambulance provider's practice that are relevant.
 - Any unusual circumstances in the case.
 - A ground ambulance provider shall not require an uninsured patient or self-pay patient to pay an amount more than the established payment by Medi-Cal or Medicare fee-for-service amount, whichever is greater. A ground ambulance provider shall only advance to collections the Medicare or Medi-Cal payment amount, that an uninsured or self-pay patient failed to pay.
 - Contracting between ground ambulance providers and individual healthcare plans is not currently an industry standard, for multiple reasons, and this is not expected to change at this time. Ground ambulance providers throughout the S-SV EMS regions and most other areas of California will continue to be considered a ‘noncontracting ground ambulance provider’ in almost all circumstances where these services are provided.
 - While a small number of the S-SV EMS Agency exclusive operating area (EOA) agreements have established/approved ground ambulance rates, the majority of ground

ambulance provider rates have not been historically established/approved by the S-SV EMS Agency. Several other California LEMSA's currently establish/approve rates for all ground ambulance providers operating within their jurisdiction.

- Without LEMSA established/approved ground ambulance provider rates, it is anticipated that the reimbursement received for these vital services, pursuant to the 'reasonable and customary value for the services rendered' provision described in the applicable statute, will be significantly lower than the current ground ambulance reimbursement rates. This is likely to create additional financial sustainability issues with several S-SV EMS Agency approved ground ambulance providers.
- Most ground ambulance providers in the S-SV EMS region agree it costs about \$600-\$800 to transport a patient. The providers are losing money on many of their patient transports.
- In order to ensure the continued financial sustainability of the ground ambulance providers throughout the S-SV EMS region, Mr. Poland requested the JPA Board approve the current list of ground ambulance rates listed in the Board report included with the JPA Board packet materials for this meeting.

Supervisor Garman motioned to approve the ambulance rates. Supervisor Blaser seconded. A roll call of votes was called: Ayes=8 (Placer, Nevada, Yuba, Colusa, Shasta, Glenn, Siskiyou, and Tehama Counties). Noes=0. Absent=2 (Butte and Sutter Counties). Motion approved.

2. Request for Proposal (RFP) #2023-2 – Emergency Ambulance Service. Advanced Life Support (ALS) Transport and EMS System Performance Specifications for Colusa County, California – Recommendation of selected proposer and request for authorization to conduct contract negotiations – *for approval.*

- The Agency recently conducted an RFP process to establish an emergency ground ambulance Exclusive Operating Area (EOA) in Colusa County.
- The goal was to increase the current ALS ground ambulance deployment in Colusa County from one (1) to two (2) ambulances 24 hrs/day, 7 days/week, 365 days/year. A sales tax measure was passed in Colusa County last year, with the additional revenue dedicated to improving ground ambulance services in the County. The additional sales tax revenue will be paid as a subsidy to the EOA provider to ensure financial sustainability.
- American Medical Response (AMR) was the only provider to submit a proposal in response to the RFP. The proposal was submitted. The Agency convened an unbiased review panel of three (3) EMS professionals from outside the S-SV EMS region who reviewed the AMR proposal. The AMR proposal was determined to be fully compliant with the RFP and received 446 out of a possible 500 points. No reason was identified by the panel, or Mr. Poland, to not recommend the AMR proposal.
- Mr. Poland presented an update to the Colusa Board of Supervisors last week and answered questions from the BOS. There were no issues/concerns raised by the Colusa County BOS regarding this matter and the recommendation to award the EOA to AMR.
- Based on JPA Board approval, AMR is anticipated to assume emergency ground ambulance services in Colusa County under a new EOA Agreement on 4/1/24. The current provider, Enloe EMS, will continue to provide service until that time.

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- Mr. Poland requested JPA Board approval to conduct EOA Agreement negotiations with AMR with the intention of bringing the final EOA agreement back to the JPA Board for final approval/execution during the March JPA meeting.
- Supervisor Corona stated that originally a 5-year contract was proposed but the Colusa Board felt a 3-year contract was more appropriate to monitor and evaluate. An additional 2-year extension possibility will be included in the EOA Agreement.

Supervisor Corona motioned to approve the agreement. Supervisor Hoek seconded. A roll call of votes was called: Ayes=8 (Placer, Nevada, Yuba, Colusa, Shasta, Glenn, Siskiyou, and Tehama Counties). Noes=0. Absent=2 (Butte and Sutter Counties). Motion approved.

I. OLD BUSINESS

There was no old business.

J. LEGISLATION

- SB 402 Emergency Medical Services limiting Police Response - this is a 2-year bill that was re-introduced and would require 911 or other service center calls related to mental health, or homelessness, to be dispatched to: fire districts or department personnel, EMS personnel, mental health personnel, non-sworn unarmed police personnel and not police officers.
- This is expected to be a quieter legislative session because the State EMS Authority is currently working on a new Chapter of regulations ('Chapter 13'), meant to address many of the EMS issues that have been introduced as new legislation over the past 2 years. Mr. Poland will update the JPA Board on the status of this regulatory process as appropriate.

K. MEDICAL DIRECTOR'S REPORT

- Dr. Falck was not present.

L. NEXT JPA GOVERNING BOARD MEETING

The next JPA Board meeting is scheduled for Friday, March 8, 2024, 1:00 p.m. – 3:00 p.m., 535 Menlo Drive, Suite A, Rocklin, CA or via videoconference at 1255 East St., Suite 201, Redding, CA.


M. ADJOURNMENT

The meeting was adjourned at 2:04 p.m.

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Respectfully submitted,



Amy Boryczko, Clerk to the Board

3-8-24
Date



Jim Holmes, Chairperson

03/08/2024
Date