

Emergency Medical Services (EMS) Division Proviso Response P2:

Criteria, protocols and procedures for BLS Core Services funding

PROVISO RESPONSE OVERVIEW

A total of \$1.5 million is budgeted in 2015 and 2016 for a new program called the Basic Life Support (BLS) Core Services, which provides access to limited funding for unplanned and unanticipated events or circumstances affecting BLS. The King County Council included a proviso requiring that criteria, protocols and procedure for accessing the funding be developed and forwarded to the Council by June 30, 2015.

The EMS Division organized and convened a BLS Working Group, consisting of the broadest possible range of regional providers, to develop the attached Plan that addresses how funding can be used, and the process and requirements for requesting, approving and receiving funds. Access to funding is based on pre-defined criteria, usage policies and distribution methodology that are structured on equity and fairness. The EMS Advisory Committee Financial Subcommittee and the full EMS Advisory Committee reviewed and endorsed the Plan in March, 2015.

Proviso P2 of SECTION 75: EMERGENCY MEDICAL SERVICES in the King County 2015/2016 Biennial Budget provides that:

“Of this appropriation, \$1,500,000 shall not be expended or encumbered until the executive transmits a plan for establishing criteria, protocols and procedures to allocate the basic life support (“BLS”) core services reserve funding and a motion that approves the plan and the motion is passed by the council. The motion shall reference the subject matter, the proviso’s ordinance, ordinance section and proviso number in both the title and body of the motion.

The plan shall include, but not be limited to:

- A. The process that should be used by a BLS service provider to request funding from BLS core services reserve;
- B. A standardized form to be used to request BLS core services reserve funding;
- C. Identification of limits or requirements for matching funds or amounts necessary for the BLS service provider to render;
- D. Approved purposes for allocating the core services reserve funding;
- E. The process and timelines for review and disposition of the request, including communication of decisions to the requesting providers;
- F. Standards for ensuring equitable allocation of the funding by BLS services providers;
- G. The party or parties responsible for approving a request to allocate BLS core services reserve funding; and
- H. Options for addressing requests that exceed BLS core services reserve funding levels.

The executive must file a plan and motion requested by this proviso by June 30, 2015, in the form of a paper original and an electronic copy with the clerk of the council, who shall retain the original and provide an electronic copy to all councilmembers, council chief of staff, the lead staff for the budget and fiscal management committee or its successor.”

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Medic One/EMS System Overview

Medic One/EMS System of King County

Any time you call 9-1-1 for a medical emergency, you are using the Medic One/EMS system. This internationally-renowned regional system provides service to the residents of Seattle and King County, responding to an area of 2,134 square miles and serving a population of two million.

The Medic One/EMS system in King County is distinctive from other systems in that it is a regional, medically based and tiered out-of-hospital response system. Its successful outcomes depend equally upon citizen involvement as well as extensively trained firefighter/EMTs and highly specialized paramedics. The system is managed by the King County Emergency Medical Services (EMS) Division and relies on complex partnerships with fire departments, paramedic agencies, EMS dispatch centers, and hospitals to make the program seamless and successful.

Since 1980, emergency medical services in King County have been primarily funded through a voter-approved, six-year countywide EMS levy, as authorized in RCW 84.52.069. The current levy span runs from 2014-2019. Per an agreement with King County, and in place since the creation of the countywide EMS levy, Seattle receives all Medic One/EMS levy funds raised within the city limits. County funds are placed in the KC EMS fund and managed regionally by the EMS Division, based on Public Health system and financial policies, Strategic Plan guidelines, and recommendations from the EMS Advisory Committee.

King County EMS Funds are comprised of five main areas:

- Advanced Life Support (ALS, or Paramedics): ALS is the priority of the EMS levy and covers all eligible costs. Approximately 60% of total King County EMS 2014-2019 levy funding is planned for ALS;
- Basic Life Support (BLS, or first responders/EMTs): BLS receives an annual distribution of levy revenue to help offset the costs of providing EMS services. The remainder of the costs is covered by individual agencies and departments. Approximately 23% of total King County EMS 2014-2019 levy funding is planned for BLS;
- Regional Support Services: Regional programs are critical in the delivery of consistently excellent training, high-level medical quality assurance and uniform medical care across jurisdictions. Approximately 12% of total King County EMS 2014-2019 levy funding is planned for Regional Support Services;
- Strategic Initiatives: Initiatives are pilot programs that focus on improving the quality of Medic One/EMS services and managing the growth, use and costs of the system. Approximately 2% of total King County EMS 2014-2019 levy funding is planned for Strategic Initiatives; and
- Reserves: Some EMS levy funds are set aside for unanticipated/one-time costs that might arise in ALS and Regional Support Services program areas. EMS reserves align with financial policies throughout King County government, and are governed by strict access and use policies. Approximately 3% of total King County EMS 2014-2019 levy funding is planned for Reserves.

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Basic Life Support (BLS) Overview

Basic Life Support (BLS) Services

BLS personnel are the “first responders” to an incident. They arrive, on average, in under five minutes to provide immediate basic life support medical care (first aid, CPR, defibrillation) and stabilize the patient. BLS is provided by 28 municipal fire departments, fire districts and regional fire authorities throughout King County, not including Seattle, and calls for BLS comprise approximately 70 percent of fire agencies’ call volume.¹

The BLS response tier handles 100% of the service requests and contributes significantly to the success of the Medic One/EMS system.

BLS Funding

BLS agencies receive an annual distribution of levy revenue to help offset the costs of providing EMS services. Individual agency funding levels are determined via a formula where the annual increase is allotted based ½ on Assessed Valuation and ½ on call volume, and added to the base funding received in the previous year. Local jurisdictions, not the EMS levy, cover the majority of BLS costs, which is one of the reasons that King County has been able to fund the system at a lower levy rate than other regions. In total, BLS receives about 23% of the King County EMS levy. This covers approximately eight percent of the overall King County BLS system costs.²

Request for the BLS Core Services Program/Reserve

Planning for EMS levies occurs at least two years prior to the current levy’s expiration. In 2011 and 2012, when regional partners convened to develop the 2014-2019 EMS levy, the revenue forecast was extremely tight. Although there was a desire to provide more general support funding through the BLS allocation, the revenue forecast meant that there was little funding available. As a result, the BLS allocation was kept at a status quo level (from the previous levy) and a recommendation was added to the Strategic Plan to “Support programs that specifically reduce impacts on BLS Agencies.”³

As actual revenue came in higher than planned in the first year of the levy, EMS partners proposed making funding available specifically for BLS agencies to help cover costs of unanticipated system changes and demands. Agencies reported instances where new or vulnerable populations were increasing system use above projected levels, and needing to absorb unreimbursed expenses related to disasters or emergent needs, like Ebola planning.

BLS is the foundation of all medical responses of the King County EMS system. When BLS agencies experience service gaps, it threatens the entire EMS system. Regional partners agreed that funding should be set aside to help fire agencies respond to situations and events challenging their resources.

¹ King County Auditor’s Office – Financial Review & Compliance Audit of 2011 Emergency Medical Services Levy, page 8.

² King County Auditor’s Office – Financial Review & Compliance Audit of 2011 Emergency Medical Services Levy, page 9.

³ Medic One/Emergency Medical Services 2014-2019 Strategic Plan, page 34.

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BLS Core Services criteria, protocols & procedures

BLS Core Services

Provides access to limited funding to address unanticipated expenses experienced by BLS agencies as a result of revenue reductions, added costs and/or increased system demand (use) outside BLS agencies' scope of control.

Recommendation	Explanation
Who is eligible to access	<p>Any King County-based BLS agency that:</p> <ul style="list-style-type: none"> a. Receives funding from the BLS funding formula via a current BLS contract for services; and b. Meets eligibility requirements.
Eligible uses	<p>Funding will mitigate expenses incurred by BLS providers for situations when:</p> <ol style="list-style-type: none"> 1. Expenditures are higher than those anticipated at the time of budget preparation; 2. Service demands exceed forecasted levels (the opening of a mountain bike park or the siting of an adult family home could both result in increased calls for EMS service); and/or 3. Adjustments are made to EMS protocols that affect BLS response and add operational costs (changing dispatch criteria or staffing model). <p>Usage is restricted to expenditures related to operations, capacity and/or equipment incurred outside standard or planned operations.⁴ Funds are intended for expenditures exclusively within the boundaries of King County, and must comply with eligibility requirements, per 84.52.069 RCW.</p>
Application process	<p>Agencies will submit requests to the EMS Division.</p> <p>EMS Division will review requests for compliance with criteria and work with submitting agencies to finalize the request, if necessary.</p> <p>Applications will be forwarded to the EMS Advisory Committee (EMSAC) Financial Subcommittee and EMS Advisory Committee (EMSAC) for review.</p>
Timing	<p>Requests are accepted on an ongoing basis, with approval on a quarterly basis.⁵</p> <p>No applications will be accepted after August 1 of the second year of each biennial budget through the end of the current levy period.</p>

⁴ Routine/planned labor for established units, or the maintenance of existing vehicles (excepted if related to AV/revenue decreases) are examples of activities not eligible for Core Services funding.

⁵ EMSAC and the EMSAC Financial Subcommittee meet on a quarterly basis. Requests must be received by the EMS Division no later than one month prior to the next regularly scheduled quarterly EMSAC Financial Subcommittee meeting in order for consideration at that next meeting.

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Matching	Not applicable. Requests for BLS Core Services funding are for unintended expenditures that BLS agencies cannot manage within their budget. They have already provided funds to support their service.
Standardized format	<p>Requests must specify</p> <ul style="list-style-type: none"> Funding level requested; Rationale for request; Proposed use of funding; and How the request meets eligibility criteria. <p>Each agency receiving funding must submit a complete and accurate expenditure invoice.</p>
Parties approving requests (in order of review)	<p><u>EMS Division</u>: The EMS Division will implement the recommendations, and oversee all aspects of the program, including the annual review of fund levels, access and agency use.</p> <p><u>EMS Advisory Committee (EMSAC) Financial Subcommittee</u>: As a working group of EMSAC, the EMSAC Financial Subcommittee includes financial analysts from EMS agencies that advise the larger group on fiscal and budget issues. Among other issues, the subcommittee reviews economic forecasts, proposed financial plans, requests for reserves, and policies/procedures. The Financial Subcommittee will review all proposals for access to, and use of, BLS Core Services funding, and forward its recommendations on all proposals to EMSAC. The Subcommittee will review BLS Core Services requests for use at its regularly scheduled quarterly meetings (March, June, September and December).</p> <p><u>EMS Advisory Committee (EMSAC)</u>: The EMS Advisory Committee monitors the uniformity and consistency of the entire EMS system. Since its formation in December 1997, EMSAC has provided key counsel to the EMS Division on regional Medic One/EMS policies and practices, major governance and consolidation issues, strategic plan implementation, and other proposals. EMSAC will review the recommendations forwarded from the Financial Subcommittee on all proposals for access to, and use of, the BLS Core Services funding. EMSAC recommendations for funding will then be forwarded to the EMS Division.</p>
Review process	<p>Initial screening by EMS Division and forwarded to EMSAC Financial Subcommittee.</p> <p>EMS Division forwards funding requests recommended by the EMSAC Financial Subcommittee to EMSAC for placement on its next regularly scheduled quarterly meeting agenda.</p> <p>EMSAC reviews funding requests and makes recommendations.</p>

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BLS Core Services criteria, protocols & procedures

Notification process	<p>BLS agencies will be notified by the EMS Division at each of the following points and timelines:</p> <ol style="list-style-type: none"> 1) Within three business days of receiving a valid and properly submitted request; 2) Within three business days following the EMSAC Financial Subcommittee of the recommendation being forwarded; and 3) Within three business days following the quarterly EMSAC meeting of the recommendation being forwarded by the Division.
Allocation–methodology and equity	<p>Each eligible BLS agency may seek BLS Core Services compensation up to the equivalent of the proportion of its current year BLS allocation methodology. Funding maximums will be based on the agency’s proportion of the BLS allocation. As an example, if an agency receives 5% of the BLS allocation, it can request and apply for up to 5% of the BLS Core Services Program budget.</p> <p>Any unobligated BLS Core Services funding at the end of the biennium will return to undesignated fund balance.</p> <p>BLS Core Services funding is segregated from the BLS funding formula, provided for and described elsewhere within the Strategic and Financial plans, and not included in the following year’s starting allocation for BLS contract funding levels.</p> <p>A regional review of the current BLS allocation methodology is scheduled for 2016, as recommended by the King County Auditor’s 2012 review of EMS Division activities. Should changes to the methodology be proposed, the region could elect to revisit the allotment and distribution formula for BLS Core Services funding.</p>
Requests exceeding BLS Core Services funding levels	<p>The 2014-2019 Strategic Plan outlines Regional Services and Strategic Initiatives that support direct service activities and key elements of the regional system. Agencies experiencing needs exceeding their BLS Core Services funding allotment are encouraged to approach the EMS Division to review participating in other EMS programs and initiatives. They may also consider asking that the issue be brought to the next EMSAC Financial Subcommittee meeting for discussion.</p>

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BLS Core Services criteria, protocols & procedures

BLS Core Services Request for Funding

	<u>YEAR</u>	<u>YEAR</u>
	<u>Amount Requested</u>	<u>Amount Requested</u>
Operations		
Dispatch/Communications		
EMS Student Training		
Operational Supplies		
Other unplanned expenses		
Subtotal Operations	\$0	\$0
Capacity		
Facilities		
Call Volumes/Utilization		
Expanded capacity to meet added demand		
Unplanned event		
Aid car hours		
Consumable supplies		
Other		
Subtotal Capacity	\$0	\$0
Equipment		
Vehicle		
Communications		
Medical & Other		
Stretchers		
Other		
Subtotal Equipment	\$0	\$0
TOTAL REQUEST	\$0	\$0
Total Biennial Request	████████████████████	\$0

