EMERGENCY MEDICAL SERVICES AUTHORITY – A Public Trust
Board of Trustees Meeting
Wednesday, September 28, 2011
EMSA Corporate Offices
1111 Classen Dr., OKC, OK 73103
1417 N. Lansing Ave., Tulsa, OK 74106

NOTICE AND REVISED AGENDA for the meeting of the Board of Trustees of the Emergency Medical Services Authority, a Public Trust, was posted September 27, 2011 in the offices of the City Clerk of Oklahoma City at 8:41 am, and with the City Clerk of the City of Tulsa on September 27, 2011 at 8:36 am, more than 24 hours prior to the time set for the meeting.

A quorum was present. The meeting was called to order at 1:00 p.m. by Dr. Jim Griffin.

TRUSTEES PRESENT

Mr. Gary Marrs
Dr. Jim Griffin
Mr. Larry Stevens
Mr. Clay Bird
Ms. Lillian Perryman
Dr. Jim Rodgers
Dr. Ed Shadid
Dr. Jeffrey Goodloe

OTHERS PRESENT

Steve Williamson, EMSA
Kent Torrence, EMSA
Angie Lehman, EMSA
Ann Laur, EMSA
Frank Gresh, EMSA
Kelli Bruer, EMSA
Tracy Johnson, EMSA
Stephen Dean, Paramedics Plus
Lara O'Leary, Paramedics Plus
Doug Dowler, City of Oklahoma City

TRUSTEES ABSENT

Mr. Joe Hodges, Mr. Phil Morgans, Dr. Tyree Seals

CONSENT AGENDA

1. Approval of Regular Board Minutes of June 22, 2011

Upon motion made by Dr. Rodgers and seconded by Mr. Marrs, the Board of Trustees voted to approve the Consent Agenda as presented.

AYE: Mr. Gary Marrs, Mr. Larry Stevens, Dr. Jim Griffin, Dr. Jim Rodgers, Ms. Lillian Perryman

NAY: None

ABSTENTION: None

ABSENT: Mr. Joe Hodges, Dr. Ed Shadid, Mr. Phil Morgans, Dr. Tyree Seals, Mr. Clay Bird

REGULAR AGENDA

1. Chairman's Report

None.

2. Chief Financial Officer's Report

Mr. Kent Torrence presented an overview of the financial statements for the month ending July 31, 2011. The Eastern Division had a YTD net loss of $180 thousand compared to a budgeted profit of $17 thousand. The Western Division had a YTD net loss of $536 thousand compared to a budgeted net loss of $608 thousand. The YTD collection rate for the Eastern Division was 44.0% compared to a budgeted collection rate of 60.0%. The YTD collection rate for the Western Division was 44.0% compared to a budgeted collection rate of 60.0%. The Eastern Division had 210 more emergency transports than budgeted YTD, and 51 less non-emergency transports than budgeted. The Western Division had 287 more emergency transports than budgeted YTD, and 109 less non-emergency transports than budgeted.

3. Approval of Interlocal Subsidy Agreement between the City of Edmond and EMSA

The annual Interlocal Subsidy Agreement designates the amount of subsidy for fiscal year 2011/2012 to be paid by the City of Edmond for services provided by EMSA's Western Division. The subsidy for fiscal year 2011/2012 is $996,445.00. EMSA requests approval by the Board for execution of the agreement with the City of Edmond.

Upon motion made by Mr. Marrs and seconded by Ms. Perryman, the Board of Trustees voted to approve the Interlocal Subsidy Agreement between the City of Edmond and EMSA.

AYE: Ms. Lillian Perryman, Dr. Jim Griffin, Dr. Jim Rodgers, Mr. Clay Bird, Mr. Gary Marrs

NAY: None

ABSTENTION: Mr. Larry Stevens

ABSENT: Dr. Tyree Seals, Dr. Ed Shadid, Mr. Joe Hodges, Mr. Phillip Morgans

4. President's Report

Mr. Williamson reviewed the compliance reports for the months of June, July and August, 2011. Response times for both the eastern and western divisions were compliant in all categories for each month reviewed. There were no areas of discrimination in either division. Mr. Williamson is very pleased with the performance and diligence Paramedics Plus has shown throughout their contract.

Mr. Williamson announced that on September 19, Tulsa Mayor Dewey Bartlett notified him of the decision to renew the EMSA Trust Agreement in the Eastern Division. Mr. Williamson is pleased and gratified to continue to have the support of the residents and leadership of the City of Tulsa.

Mr. Williamson recently met with Oklahoma City officials regarding the Window of Opportunity in the Western Division. A presentation to the OKC Council is scheduled for October 11, with a vote to be held two to three weeks following the presentation.

After the Window of Opportunity, Mr. Williamson anticipates implementing modifications to improve the system and possibly saving money in both divisions.

Mr. Williamson has already started work on the RFP for EMSA's subcontractor. It will go into effect November 1, 2013. Most ambulance services pay 100-200K to have an RFP prepared, but EMSA will prepare its own. A calendar of events will be presented at the next board meeting to apprise the Board of progress so far and the milestones involved.

On September 21, Mr. Williamson testified for the American Ambulance Association before the United States House of Representatives Committee on Ways and Means. He appeared before the Subcommitttee on Health, along with representatives from the American Medical Association and the American Heart Association, to provide testimony regarding expiring Medicare provider payment provisions. Mr. Williamson feels Congress will take action by January and is hopeful the current ambulance Medicare payments will be extended.

EMSA has partnered with Tulsa's Youth Services in the Safe Place program. While the program is in place across the country, EMSA is the first in the nation to use ambulances as Safe Place sites, meaning if any child has a problem or any type of emergency, they can go to one of EMSA's ambulances and our trained personnel will ensure they get to the Youth Services facility where they can get help. We are also working to get the program set up in Oklahoma City.

The NFPA (National Fire Protection Association) has announced the new specifications for ambulances that will go into effect by 2013. The changes will be costly. Mr. Williamson is looking at using the new specifications for EMSA ambulances to be purchased in July, 2012.

EMSA will host a meeting in two weeks for Dr. Doug Cox (an Oklahoma State Senator). Senator Cox is working with EMSA and the Oklahoma Ambulance Association (OKAMA) regarding funding for EMS on a state level (rural EMS).

Mr. Williamson expressed concern regarding Stretcher Aid Van companies in the western division. The number of aid van transports in the west is dramatically more than in the east, indicating that patients who need to be transported by ambulance are instead being transported by Stretcher Aid Vans that do not have the equipment clinically needed to transport them. Mr. Williamson will be working with Dr. Goodloe and EMSA's attorney to send a letter to the State Health Department to clarify the need for investigation to rectify this situation.

EMSA's annual audit is now complete and will be presented at the next meeting. The audit was performed by McGladrey & Pullen, LLC, the same audit firm that audits the City of Tulsa. Mr. Williamson is pleased with the outcome of the audit.

Mr. Williamson informed the Board of a Medicare Audit recently performed at EMSA by the State Office of the Inspector General. EMSA was the very first ambulance service to be audited by the Office of the Inspector General, and though we have not yet received a formal letter from the OIG, Mr. Williamson expects a good outcome.

Mr. Williamson anticipates HIPAA audits to become more commonplace, as the federal government has finally decided on a firm to perform the audits. EMSA is making an effort to become familiar with recent new rules and plans to stay knowledgeable as HIPAA becomes a larger issue nationwide.

5. Medical Director's Report

Dr. Goodloe reviewed the divert reports for the months of June, July and August. He reported EMSA's divert numbers are far better than almost any other major metropolitan area. If at all possible, patients who have established physicians are taken to a hospital where their physician is on staff. There is, of course, a need to ensure clinical stability, as well. Dr. Goodloe assured the board medical oversight is provided regarding hospital-requested ambulance diversion requests.

Dr. Goodloe then reviewed the Clinical Quality Improvement summary reports for June, July and August for the Board.

The Medical Control Board promulgated several new standards of care at its September meeting. As a result, a the formulary for the protocols is now completely revised and updated. The Oklahoma State Department of Health recently approached the University of Oklahoma Department of Emergency Medicine to inquire about using the Medical Control Board protocols as a reference point to develop protocols for the entire state. Dr. Goodloe supplied the Oklahoma State Department of Health's administrative director the recommended table of contents for a 2013 State of Oklahoma protocol set. The protocols were last updated in 2002, and Dr. Goodloe is very pleased to be leading a development team to bring the quality standards in this system and others across the nation to the entire state.

Dr. Goodloe then discussed survival rates for patients in cardiac arrest in EMSA's response areas. Our EMS system continues to have very good performance in this area. The outcomes for patients with a witnessed arrest and rapid access to 911, bystander cpr (aided by instructions by trained EMSA dispatchers), and found in a shockable rhythm, are some of the best in the nation. The survival rate for those patients is approximately 40%, compared to nationwide survival rate of 6.4%.

Dr. Goodloe and the Office of the Medical Director have started an intensely focused effort to improve the neurologically intact cardiac arrest survival rate to 50% in cases where the arrest is witnessed, bystander CPR is provided, and the patient is found in a shockable heart rhythm. It will be difficult to move from a 40% survival rate to one of 50%, but due to the excellent field professionals throughout the EMS system, confidence in this ability is high. There are 3,200 determined field professionals committed to this task. Dr. Goodloe is personally doing some of the training and the staff of the Office of the Medical Director is doing the balance. Training is now being held in the field every day at the fire stations. The Office of the Medical Director is scrutinizing what is being done second by second during resuscitation in order to achieve the goal of 50%.

Dr. Goodloe recently heard from the National Association of EMS Physicians. Two of the research projects he placed for consideration for presentation at next year's Annual Meeting and Scientific Assembly were accepted. The first is regarding Usage Patterns of Dextrose, and the second project involves looking at Barriers to Implementation of Therapeutic Hypothermia Post Cardiac Arrest.

6. New Business

Dr. Griffin was present at the Reno Air Races when the horrible crash occurred and observed firsthand an amazing emergency medical response to the scene. He briefly detailed the response for the board, indicating just how impressed he was with the various emergency response teams.

Mr. Williamson reported that October, 2011 will be the 33rd anniversary of EMSA's inception.

Mr. Williamson then introduced and welcomed Dr. Ed Shadid, a member of the OKC City Council. Dr. Shadid was appointed by Mayor Cornett, and replaces Councilman Larry McAtee.

Dr. Shadid asked two questions of Mr. Williamson. The first was for an update on the new Cad to Cad interface. Mr. Williamson detailed the schedule and remaining issues for the installation and startup of the Cad to Cad for Dr. Shadid and the rest of the Board.

Dr. Shadid then asked if EMSA tracks the times of Level Zero status. In response, Mr. Williamson explained and summarized EMSA's current exemption reporting from the subcontractor as applied to the RFP.

7. Trustees' Reports

None.

8. Next Regular Meeting

The next meeting of the EMSA Board of Trustees will be on Wednesday, October 26, 2011 at 1:00 pm via video conference at the EMSA Administrative Offices, 1111 Classen Drive, Oklahoma City (Western Division) and 1417 N. Lansing Ave., Tulsa, OK (Eastern Division).

9. Adjourn

The meeting was adjourned at 2:25 pm.

_____ _____

Ann C. Laur, Secretary Date: