

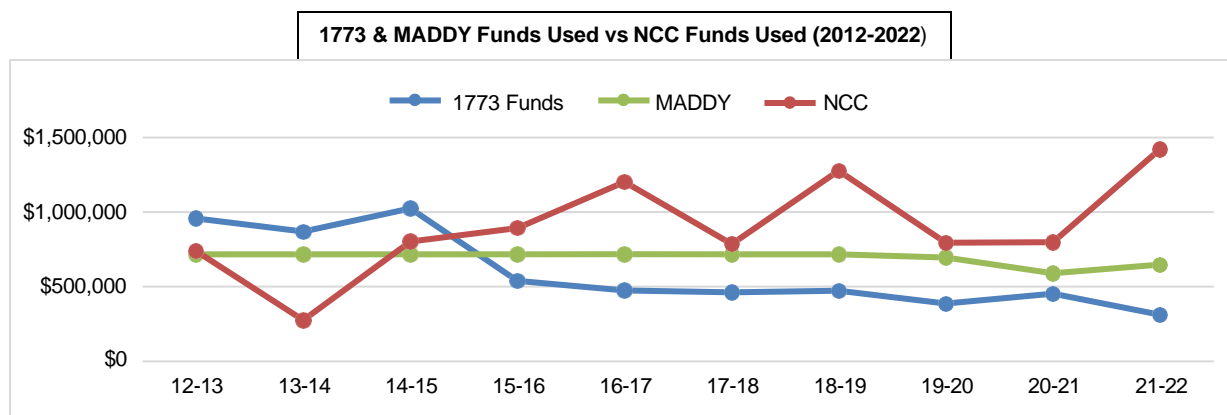
2023 EMS Fee Study Executive Summary

In 1982, the Board of Supervisors designated the Health Care Agency (HCA) as the County Emergency Medical Services (EMS) Agency, pursuant to California Health and Safety Code Section 1797.200. The Code mandates EMS system responsibilities & also permits counties to offset or recover all or a portion of their costs. The concept of fully recovering costs is outlined within the County Accounting Manual. As such, each county agency is responsible for the management of its revenue and attaining full cost recovery by updating existing revenue rates with assistance of the Auditor Controller (A/C).

The fee study analyzed the services provided by the EMS Division to determine their specific cost. EMS staff workloads based on the type of service and number of hours spent per activity was calculated. The total EMS Division cost was divided by direct hours (fee related & non-fee related) to determine a comprehensive hourly rate for the Division. The use of this method assumes that indirect costs are proportionately rolled into the fees. This hourly rate was then applied to the time value for each individual fee category, to arrive at full cost recovery fees. Additionally, two positions dedicated to county designations of hospitals were added with all costs covered by the hospital industry. This decision was based on a 2019 American College of Surgeons (ACS) report of the Trauma/EMS system that recommended the County include more positions to support the oversight & development of data systems to complement injury prevention initiatives.

The last fee study, approved by the Board, in 2017 included two directives, first, to “streamline base hospital costs” so that base hospital oversight costs would be borne by the system. As a result, these costs were incorporated into the hourly rate and therefore spread across all fees. Secondly, the Board directed that the A/C conduct a cost recovery analysis in three years & HCA return on or about 1/1/20 to the Board for consideration of the recommended fee schedule. In September 2021 A/C completed a fee study but HCA held for Board consideration due to the pandemic. In December 2022, A/C completed a multi-year fee study to calculate full cost recovery fees.

A fee adjustment is necessary for two main reasons 1) Recover County subsidies (operational costs for Emergency, Cardiac, Children’s, Stroke & Trauma Center monitoring & oversight to improve 9-1-1 patient care) that have been ongoing but for which there are no fees 2) Diminishing EMS Funds derived from “tack-on” penalties from penal code violations) to support the program.



A multi-year fee update is proposed that includes an annual adjustment based on changes to CPI not to exceed actual cost. Further, a survey of similar local EMS agencies to compare fee structure was conducted (see table on page 2 for sampling). As a result, there are four new hospital fees recommended for those subsidies that have been ongoing but for which there have been no oversight fees. All of the proposed fees, scheduled to go into effect July 1, 2024, will be presented to the Emergency Medical Care Committee (EMCC) on April 14, 2023. OCEMS will present the proposal to EMCC on April 13, 2023, & request endorsement to forward proposal to the Board of Supervisors for final approval

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Proposed EMS Fees

Title	Current Fee	Frequency	Implement Proposed Fees (FY)		
			2024	2025	2026
Ambulance Company License	\$2,234	Annual	\$4,263	\$4,367	\$4,485
Ambulance Company Unit Inspection/per vehicle	\$160		\$241	\$247	\$253
Ambulance Company Unit Re-Inspection/vehicle	\$109		\$142	\$145	\$149
Customized Data Report	\$109	Hourly	\$142	\$145	\$149
EMT Accreditation	\$85	Annual	\$142	\$145	\$149
EMT Certification ¹	\$125	Biennial	\$125	\$125	\$125
Card Replacement	\$25	Variable	\$25	\$25	\$25
Paramedic Accreditation	\$73		\$75	\$77	\$79
Mobile Intensive Care Nurse Application	\$108	Biennial	\$146	\$150	\$154
Trauma Receiving Center Designation ²	\$9,185	Annual	\$ 66,610	\$ 68,238	\$ 70,086
Continuing Education Provider	\$325	4 years	\$465	\$476	\$ 489
EMT Training Program	\$923		\$1,234	\$1,264	\$1,298
Paramedic Training Program	\$932		\$1,097	\$1,124	\$1,154
Interfacility Transport Service Provider	\$1,525		\$1,984	\$2,033	\$2,088
Emergency Receiving Center Designation ²		Annual	\$15,986	\$ 16,886	\$ 17,299
Children's Receiving Center Designation ²			\$15,986	\$ 16,886	\$ 17,299
Cardiac Receiving Center Designation ²			\$15,795	\$ 16,684	\$ 17,092
Stroke/Neuro Receiving Center Designation ²			\$17,538	\$ 18,525	\$ 18,978

¹ Does not include State pass-through fee(s) (\$75 initial: \$37 recertification)

² Update/New Fee for ongoing subsidies for which there have not been service fees

7-LEMSA Comparison of Hospital Fees

Type of Designation	2024 OC Proposed	Contra Costa	Inland Counties	Kern	Riverside	San Diego	San Joaquin	Santa Clara
Trauma Center	\$64,235	\$350k	\$25k	\$140k	\$49k	\$47k	\$217k	\$110k
Mobile Intensive Nurse	\$140	\$90	\$120-235	\$100	\$75	\$126	\$125	\$20
Emergency Center	\$16,215	No Fee	\$5,000	No Fee	\$8,271	\$24,888	No Fee	\$11,025
Children's Center	\$16,215	\$7,500	No Fee	\$19,318	No Fee	No Fee	No Fee	\$11,025
Cardiac Center	\$16,021	\$7,500	\$17,445	\$19,318	\$33,084	No Fee	\$25,000	\$11,025
Stroke Center	\$17,789	\$7,500	\$19,045	\$19,318	\$20,677	No Fee	\$25,000	\$11,025

Base Hospital Fee

Hospital / Public / County Benefits from New Hospital Fees

Trauma Receiving Center - Updated to recover the costs associated with a Trauma Nurse & Research Analyst position dedicated to conduct ongoing development, implementation and evaluation of Trauma and EMS data systems; conducting a trauma center site visit with the American College of Surgeons (ACS) Verification Team; and ongoing oversight and monitoring of trauma system to ensure medical accountability. This has been an ongoing activity of the EMS Division since 1980.

Community and Hospital Benefits

- Assurance that trauma center has trained personnel, adequate facilities, & ancillary services
- Authorized to receive Trauma designated patients.
- Regional higher level of care resource: accept out-of-county transfers; Increased hospital revenue
- Best practice model for improved care, safety & clinical outcomes for severely injured patients
- Surveys validate compliance w/ designation process & American College of Surgeons

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Emergency Receiving Center Designation - Recovers costs associated with a new Data Analyst & EMS Coordinator positions dedicated to providing overall management of EMS/Trauma data and costs associated with the designation process & ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. This has been an ongoing activity of the EMS Division since 1982 for which there has not been a fee.

Community and Hospital Benefits

- Assurance that all hospital personnel who provide direct patient care in EDs are appropriately trained
- Authorized to receive EMS transported patients (catchment), **Increased hospital revenue**
- Prehospital system collaboration, including the development of on/offline medical control
- Triennial surveys of the ERCs to verify compliance w/ OCEMS P&P
- Protection of the public when accessing 9-1-1; patients will be taken to appropriate hospital

Children's Emergency Receiving Center Designation Recovers costs associated with a new Data Analyst & EMS Coordinator positions dedicated to providing overall management of EMS/Trauma data and costs associated with the designation process & ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. **This designation indicates an enhanced level of pediatric emergency service & has been an ongoing activity of the EMS Division since 2013 for which there has not been a fee.**

Community and Hospital Benefits

- Authorized to receive pediatric designated patients(catchment), **Increased hospital revenue**
- Designation protects the healthcare facilities investment in pediatric emergency & critical care
- Ensures staff skill development and serves as recruitment and retention tool for staff
- Best practice model for improved care, safety & clinical outcomes for critically ill children
- Protection of the public in accessing 9-1-1; patients will be taken to appropriate Children's Center

Cardiac Receiving Center Designation - Recovers costs associated with a new Data Analyst & EMS Coordinator positions dedicated to providing overall management of EMS/Trauma data and costs associated with the designation process & ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. **The designation indicates an enhanced level of cardiovascular emergency service (especially in the early stages of heart attack & diagnosis) & has been an ongoing activity of the EMS Division since 2015 for which there has not been a fee.**

Community and Hospital Benefits

- Allow for early diagnostics and selective triage to CVRC for intervention for acute MI patients.
- Authorized to receive CVRC designated EMS patients (catchment), **Increased hospital revenue**
- Designation protects investment in cardiovascular programs to treat acute cardiac patients
- Improve clinical outcomes with geographically comparable facilities to benchmark performance
- Protection of the public in accessing 9-1-1; patients will be taken to appropriate Cardiac Center

Stroke/Neurology Receiving Center Designation Recovers costs associated with a new Data Analyst & EMS Coordinator positions dedicated to providing overall management of EMS/Trauma data and costs associated with the designation process & ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. **The designation indicates an enhanced level of stroke neurology emergency service & as a result an improved outcome for patients & has been an ongoing activity of the EMS Division since 2009 for which there has not been a fee.**

Community and Hospital Benefits

- Authorized to receive SNRC designated EMS patients (catchment), **Increased hospital revenue**
- Designation protects hospitals investment in comprehensive stroke care for acute stroke victims
- Improve clinical outcomes with geographically comparable facilities to benchmark performance
- Best practice for cerebrovascular diseases to care for acute stroke victims
- Protection of the public in accessing 9-1-1; patients will be taken to appropriate Stroke Center

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Current County Subsidy r/t Hospital Designation Oversight

Hospital Fees	2022 (CURRENT)		2024/2025		County Subsidy if Left at Current Fee (2023 Rev – 2022 Rev)
	Fee	Revenue	Full Cost Recovery	Revenue	
Trauma Designation	\$9,185	\$9,185	\$66,610	\$266,440	\$257,255
Mobile Intensive Care Nurse	\$108	\$8,640	\$146	\$11,680	\$3,040
Emergency Designation	\$0	\$0	\$16,886	\$422,150	\$422,150
Children’s Designation	\$0	\$0	\$16,886	\$33,772	\$33,772
Cardiac Designation	\$0	\$0	\$16,684	\$216,892	\$216,892
Stroke/Neuro Designation	\$0	\$0	\$18,525	\$166,725	\$166,725
Total		\$17,825		\$1,117,659	\$1,099,834

Trauma Center Funding - EMSF Program (FY 21/22)

- ❖ Trauma Centers receive \$125,000/year base payment per Indigent Trauma Care (ITC) Agreement
- ❖ Additional funds from SB12/612 “Maddy” paid per patient & SB1773 “Richey” paid per pediatric patient

Trauma Center	ITC	Maddy	Richey
CHOC	\$125,000	\$160,684	\$246,188
Mission Hospital	\$125,000	\$311,329	\$399,666
UCI	\$125,000	\$247,435	\$195,831
OC Global	\$125,000	\$207,507	\$125,986
TOTALS	\$500,000	\$926,955	\$967,671

Proposed Designation Fees/Hospital

Facility	Emergency	Trauma	Cardiac	Stroke	Children’s	FY24/25	FY25/26	FY26/27
Anaheim Global Medical Center	X					\$16,886	\$17,092	\$17,554
Anaheim Regional Medical Center	X		X			\$33,570	\$34,184	\$35,108
Chapman Global Medical Center	X					\$16,886	\$17,092	\$17,554
Children’s Hospital Orange County	Peds only	X			X	\$83,496	\$85,537	\$87,853
Foothill Regional Medical Center	X					\$16,886	\$17,092	\$17,554
Fountain Valley Regional Hospital	X		X	X		\$52,095	\$53,162	\$54,606
Garden Grove Hospital	X					\$16,886	\$17,092	\$17,554
Hoag Hospital Newport Beach	X		X	X		\$52,095	\$53,162	\$54,606
Hoag Hospital Irvine	X		X			\$33,570	\$34,184	\$35,108
Huntington Beach Hospital	X					\$16,886	\$17,092	\$17,554
Kaiser Permanente, Anaheim	X					\$16,886	\$17,092	\$17,554
Kaiser Permanente, Irvine	X					\$16,886	\$17,092	\$17,554
La Palma Intercommunity Hospital	X					\$16,886	\$17,092	\$17,554
Los Alamitos Medical Center	X		X	X		\$52,095	\$53,162	\$54,606
Mission Hospital, Mission Viejo	X	X	X	X	X	\$135,591	\$138,699	\$142,459
Mission Hospital Laguna Beach	X					\$16,886	\$17,092	\$17,554
Orange Coast Mem Med Center	X		X			\$33,570	\$34,184	\$35,108
OC Global Medical Center	X	X	X	X		\$118,705	\$121,400	\$124,692
Placentia Linda Hospital	X					\$16,886	\$16,886	\$16,886
Saddleback Memorial Med Center	X		X	X		\$52,095	\$54,606	\$54,606
South Coast Global Med Center	X					\$16,886	\$16,886	\$16,886
St. Joseph Hospital, Orange	X		X	X		\$52,095	\$54,606	\$54,606
St. Jude Medical Center	X		X	X		\$52,095	\$54,606	\$54,606
UCI Medical Center	X	X	X	X		\$118,705	\$121,400	\$124,692
West Anaheim Medical Center	X		X			\$33,570	\$34,184	\$35,108