

"How Much Funding Do You Need?"

Estimating Your Costs, & Other Considerations for Public Funding



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Thanks to Our Partners!



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The image shows two side-by-side instructions. On the left, the Facebook 'f' logo is at the top. Below it is a blue thumbs-up icon with a red heart icon at its base. To the right of the thumbs-up is a blue speech bubble with three white dots. Below this is the text: 'Like (or ♥) the stream!' and 'Ask questions in the comments.' On the right, the Zoom logo is at the top. Below it is a blue speech bubble with three white dots, and below that is a dark blue speech bubble. Below this is the text: 'Submit questions through the Q&A function.'

Like (or ♥) the stream!
Ask questions in the comments.

Submit questions through the
Q&A function.

3

**THIS SESSION IS BEING
RECORDED.**



The image shows a clear CD jewel case with a CD inside. A black ribbon is tied around the case. The case is tilted and has a rainbow-like reflection on its surface.

The archive will be emailed to all registrants tomorrow.

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About AIMHI



ORGANIZATIONS WITH HIGH PERFORMANCE DESIGN FEATURES

- Sole provider
- Externally accountable
- Full cost accounting
- Control center operations
- Revenue maximization
- Flexible production strategy
- Dynamic Resource Management

VISION

To improve patient health and experience of care by promoting excellence in mobile healthcare system effectiveness and efficiency.

FORMERLY

Coalition of Advanced Emergency Medical Systems (CAEMS)

National Association of Public Utility Models

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CURRENT AIMHI MEMBERS

Emergency Health Service
Halifax, NS

Emergency Medical Services Authority
Tulsa & Oklahoma City, OK

Mecklenburg EMS Agency
Charlotte, NC

Medic Ambulance
Vallejo, CA

MEDIC Emergency Medical Services
Davenport, IA

MedStar Mobile Healthcare
Fort Worth, TX

Metropolitan Emergency Medical Services
Little Rock, AR

New Hanover EMS
Wilmington, NC

Niagara Emergency Medical Services
Niagara-On-The-Lake, ON

Northwell Health Center for EMS
Syosset, NY

Pinellas County EMS Authority/Sunstar Paramedics
Largo, FL

Pro EMS
Cambridge, MA

Regional EMS Authority
Reno, NV

Richmond Ambulance Authority
Richmond, VA

Three Rivers Ambulance Authority
Fort Wayne, IN

Learn more about membership at www.aimhi.mobi!

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EMS services sound the alarm over financial crisis as demand for care increases

by CBS 21 News
Monday, June 6th 2022



Lawmakers hear of 'silent crisis' impacting EMS

By [Mike Nolting](#)
May 22, 2022



'We're way past crippling': EMS officials tell of funding, staffing woes to area county commissioners

By Sean P. Ray
May 17, 2022



HSHS to close Decatur Ambulance Service on Sept. 1

Brenden Moore
6/27/22



What if you call 911 and no one comes?

Inside the collapse of America's emergency medical services.

By Erika Edwards
Oct. 22 2019



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2 new Ind. laws change how insurers, Medicaid pay EMS agencies

Private insurers will have to negotiate prices directly with ambulance service providers, and Medicaid reimbursement rates will go up

April 6, 2022



Pa. House to consider bill to raise EMS reimbursement rates

Medicaid ALS reimbursement would increase from \$300 to \$400 per trip, and BLS would increase from \$180 to \$325 per trip

May 31, 2022



More funding announced for emergency medical service programs throughout Maryland

The funding will offset costs from emergency medical services that delivered emergency medical care and transportation services to Medicaid participants between Oct. 1, 2020, through June 30, 2021.

June 8th, 2022



W.Va. allocates \$10M to bolster EMS staffing

The initiative includes a recruiting campaign, no-cost trainings and giving current providers equipment and supplies

June 15, 2022



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How Are Governments Using ARPA Funds? So Far, Very Slowly

Congress responded to the COVID crisis by allocating unprecedented sums to help cities and states recover. Early data about how they are using the money suggests that big spends can have complications.

Carl Smith

June 21, 2022

How are governments using the \$350 billion in the Coronavirus State and Local Fiscal Recovery Funds program (SLFRF)? So far, they haven't used most of it for anything, according to an analysis from the University of Illinois Chicago's Government Finance Research Center (GFRC).

Data released this month by the Treasury Department encompasses spending by almost 1,800 states, territories and large cities and counties as of the end of December 2021. GFRC found by that time they had obligated just 28 percent of \$208 billion in the first tranche of SLFRF aid made available to them.

"This is a historic, once-in-a-generation scale of investment," he says. The question is how quickly governments not accustomed to this level of funding can respond to the opportunity, and how well they can use it to stand up programs to respond to needs they have not been able to address successfully in the past," says Amanda Kass, associate director of the GFRC.



<https://www.governing.com/finance/how-are-governments-using-arpa-funds-so-far-very-slowly>



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Key Considerations



Image Credit: Pixabay



Image Credit: Earl's Plumbing

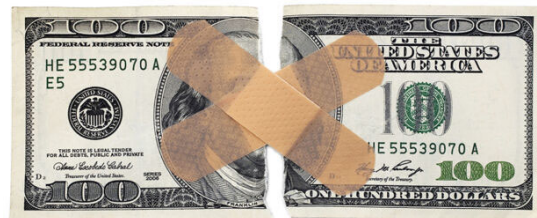


Image Credit: The Daily Reckoning



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Sources of Funding

- Short-Term
 - Grants
 - Capital Purchase
 - Fundraisers
 - One-Time Allocations
- Long-Term
 - FFS **Reimbursement** Increases (more than just **rate** increases)
 - Medicare/Medicaid
 - Commercial Insurers
 - Tax Subsidy
 - Property
 - Sales



Image Credit: Rand.org



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<p style="text-align: center;">LAW WITHOUT GOVERNOR'S SIGNATURE</p> <p style="text-align: center;">JULY 15, 2021</p> <p style="text-align: center;">STATE OF MAINE</p> <p style="text-align: center;">—</p> <p style="text-align: center;">IN THE YEAR OF OUR LORD</p> <p style="text-align: center;">TWO THOUSAND TWENTY-ONE</p> <p style="text-align: center;">—</p> <p style="text-align: center;">H.P. 1085 - L.D. 1469</p> <p>Resolve, To Provide Add-on Payments for Ambulance Services Reimbursed by the MaineCare Program and To Increase Reimbursement Rates for Physical Therapy under the MaineCare Program</p> <p>Sec. 1. Department of Health and Human Services to apply Medicare add-on to MaineCare rates for ambulance services. Resolved: That, no later than October 1, 2021, the Department of Health and Human Services shall amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Section 5, Ambulance Services, to provide additional add-on supplements for ambulance services that are equivalent to payments required under Medicare ambulance services under 42 United States Code, Section 1395m(l). The department shall use the same geographic zip codes applicable for rural, urban and super rural payments as established by 42 United States Code, Section 1395m(l) and related federal rules. Rules adopted pursuant to this section are routine technical rules as defined in the Maine Revised Statutes, Title 5, chapter 375, subchapter 2-A.</p> <p>Sec. 2. Cost-based reimbursement work group for ambulance services. Resolved: That the Department of Health and Human Services shall convene a work group to consider the feasibility and cost of implementing cost-based reimbursement for ambulance services provided to MaineCare members. The work group must include representatives of the Emergency Medical Services' Board within the Department of Public Safety, the Maine Ambulance Association and ambulance providers. The department shall submit a report, with recommendations, to the Joint Standing Committee on Health and Human Services no later than January 15, 2022. The committee is authorized to report out legislation related to the recommendations.</p> <p>Sec. 3. Department of Health and Human Services to increase MaineCare reimbursement rates for physical therapy. Resolved: That, no later than October 1, 2021, the Department of Health and Human Services shall amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Section 85, Physical Therapy Services, to increase reimbursement rates for physical therapy services to no less than 57% of the Federal Medicare reimbursement rate for these services as long as the rate is no lower than the rate reimbursed as of January 1, 2021. Rules adopted pursuant to this section are routine</p>	<p>CHAPTER</p> <p>118</p> <p>RESOLVES</p>	<p>Sec. 1. Department of Health and Human Services to apply Medicare add-ons to MaineCare rates for ambulance services. Resolved: That, no later than October 1, 2021, the Department of Health and Human Services shall amend its rules in Chapter 101: MaineCare Benefits Manual, Chapter III, Section 5, Ambulance Services, to provide additional add-on supplements for ambulance services that are equivalent to payments required under Medicare ambulance services under 42 United States Code, Section 1395m(l). The department shall use the same geographic zip codes applicable for rural, urban and super rural payments as established by 42 United States Code, Section 1395m(l) and related federal rules. Rules adopted pursuant to this section are routine technical rules as defined in the Maine Revised Statutes, Title 5, chapter 375, subchapter 2-A.</p> <p>Sec. 2. Cost-based reimbursement work group for ambulance services. Resolved: That the Department of Health and Human Services shall convene a work group to consider the feasibility and cost of implementing cost-based reimbursement for ambulance services provided to MaineCare members. The work group must include representatives of the Emergency Medical Services' Board within the Department of Public Safety, the Maine Ambulance Association and ambulance providers. The department shall submit a report, with recommendations, to the Joint Standing Committee on Health and Human Services no later than January 15, 2022. The committee is authorized to report out legislation related to the recommendations.</p>
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Expense Analysis - Basic

Agency: Anytown, USA

= User Entered Fields

= Auto-Calculated/Protected Fields

Notes:		
Population	40,000	Total population served
Annual Ambulance Unit Hours	8,760	Total Ambulance on-duty hours/yr (i.e.: 1 Ambulance 24/7 is 24 * 365 = 8,760)
EMS Calls/Yr	2,000	Annual EMS responses in which an ambulance was dispatched
EMS Transports/Yr	1,401	Annual ambulance transports
UH/U	0.160	Annual ambulance transports divided by annual unit hours



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Expense Analysis - Basic

Per Ambulance

FTEs	7	Number of FTEs required to be hired to staff the ambulance(s)
Cost/FTE	\$ 80,000	All costs, pay, benefits, uniform, personal equipment, pension costs, etc.
Personnel cost	\$ 560,000	FTEs * Personnel cost
Ambulance	\$ 250,000	Cost of the ambulance, delivered
Equipment	\$ 65,000	Cot, monitor, etc.
Cost	\$ 315,000	Total costs
Useful Life/Years	5	Depreciation expense
Number of Ambulances	1	Count of ambulances in the fleet
Ambulance Cost	\$ 63,000	Annual cost of each ambulance
Other		
Maintenance	\$ 20,000	Annual allocated or actual cost of maintenance
Fuel	\$ 25,000	Annual cost of fuel
Supplies	\$ 21,750	Annual cost of disposable supplies and drugs
Total Annual	\$ 689,750	
Cost/UH	\$ 78.74	Total costs divided by annual <u>unit hours</u>
Cost/Response	\$ 229.92	Total costs divided by annual <u>responses</u>
Cost/Transport	\$ 328.45	Total costs divided by annual <u>transports</u>



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Revenue Analysis - Basic

Revenue Analysis

Anytown, USA

= User Entered Fields

= Auto-Calculated/Protected Fields

Commercial Payer Example

Month	Payer Name	Claim Count	Patient Count	Billed Charges	Charge per Transport	Contractual Adjustments	Net Charges	Paid	Collected per Transport	Collection Rate
Jan-22	ABCD1	470	457	\$ 300,022	\$ 638.34	\$ 2,700	\$ 297,322	\$ 290,810	\$ 618.74	96.9%
Jan-22	ABCD2	30	30	\$ 33,013	\$ 1,100.42	\$ 6	\$ 33,006	\$ 33,006	\$ 1,100.21	100.0%
Jan-22	ABCD3	12	12	\$ 12,879	\$ 1,073.21	\$ 9,512	\$ 3,367	\$ 6,662	\$ 555.18	51.7%
Jan-22	ABCD4	3	3	\$ 1,281	\$ 426.99	\$ -	\$ 1,281	\$ 1,281	\$ 426.99	100.0%
Total		515	502	\$ 347,194	\$ 674.16	\$ 12,218	\$ 334,976	\$ 331,759	\$ 644.19	95.6%

Medicare Example

Month	Payer Name	Claim Count	Patient Count	Billed Charges	Charge per Transport	Contractual Adjustments	Net Charges	Paid	Collected per Transport	Collection Rate
Jan-22	M'Care	470	457	\$ 300,022	\$ 638.34	\$ 102,620	\$ 197,402	\$ 197,400	\$ 420.00	65.8%
Total		470	457	\$ 300,022	\$ 638.34	\$ 102,620	\$ 197,402	\$ 197,400	\$ 420.00	65.8%



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Revenue Analysis - Basic

\$1,500 Average Charge	Services	Billed	% of Billed	Collected	% of Collected	Payer Collection Rate
Commercial Insurance	298	\$447,620	21.3%	\$313,334	50.2%	70.0%
Medicare	324	\$485,447	23.1%	\$121,362	19.4%	25.0%
Medicaid	115	\$172,323	8.2%	\$34,465	5.5%	20.0%
Facility	62	\$92,466	4.4%	\$64,726	10.4%	70.0%
Private Pay	604	\$905,747	43.1%	\$90,575	14.5%	10.0%
Total	1,402	\$2,103,602	100.0%	\$624,461	100.0%	29.7%



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Economic Analysis - Basic

Agency Name: Anytown, USA

Total Annual Costs \$689,750
 Total Annual Revenue \$624,461
 Net Retained Earnings **(\$65,289)**



Responses 2,000
 Cost per Response \$344.88
 Revenue per Response \$312.23
 Net Retained Earnings **(\$32.64)**

Transports 1,401
 Cost per Transport \$492.33
 Revenue per Transport \$445.73
 Net Retained Earnings **(\$46.60)**

Unit Hours 8,760
 Cost per Unit Hour \$78.74
 Revenue per Unit Hour \$71.29
 Net Retained Earnings **(\$7.45)**



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Revenue Analysis – Reimbursement Increase

\$1,500 Average Charge	Services	Billed	% of Billed	Collected	% of Collected	Payer Collection Rate
Commercial Insurance	298	\$447,620	21.3%	\$313,334	50.2%	70.0%
Medicare	324	\$485,447	23.1%	\$121,362	19.4%	25.0%
Medicaid	115	\$172,323	8.2%	\$34,465	5.5%	20.0%
Facility	62	\$92,466	4.4%	\$64,726	10.4%	70.0%
Private Pay	604	\$905,747	43.1%	\$90,575	14.5%	10.0%
Total	1,402	\$2,103,602	100.0%	\$624,461	100.0%	29.7%

Reimbursement Increase	Services	Billed	% of Billed	Collected	% of Collected	Payer Collection Rate
Commercial Insurance	298	\$238,730	11.3%	\$214,857	34.4%	90.0%
Medicare	324	\$485,447	23.1%	\$242,723	38.9%	50.0%
Medicaid	115	\$172,323	8.2%	\$86,162	13.8%	50.0%
Facility	62	\$92,466	4.4%	\$64,726	10.4%	70.0%
Private Pay	604	\$905,747	43.1%	\$90,575	14.5%	10.0%
Total	1,402	\$1,894,712	90.1%	\$699,043	111.9%	36.9%



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Economic Analysis - Reimbursement Increase

Agency Name: Anytown, USA

		Reimbursement Increase	
Total Annual Costs	\$689,750	Total Annual Costs	\$689,750
Total Annual Revenue	\$624,461	Total Annual Revenue	\$699,043
Net Retained Earnings	(\$65,289)	Net Retained Earnings	\$9,293
Responses		Responses	
Cost per Response	2,000	Cost per Response	2,000
Revenue per Response	\$344.88	Revenue per Response	\$344.88
Net Retained Earnings	\$312.23	Net Retained Earnings	\$349.52
	(\$32.64)		\$4.65
Transports		Transports	
Cost per Transport	1,401	Cost per Transport	1,401
Revenue per Transport	\$492.33	Revenue per Transport	\$492.33
Net Retained Earnings	\$445.73	Net Retained Earnings	\$498.96
	(\$46.60)		\$6.63
Unit Hours		Unit Hours	
Cost per Unit Hour	8,760	Cost per Unit Hour	8,760
Revenue per Unit Hour	\$78.74	Revenue per Unit Hour	\$78.74
Net Retained Earnings	\$71.29	Net Retained Earnings	\$79.80
	(\$7.45)		\$1.06



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Expense Analysis – 25% Pay Increase

Per Ambulance

FTEs	7	Number of FTEs required to be hired to staff the ambulance(s)
Cost/FTE	\$100,000	All costs, pay, benefits, uniform, personal equipment, pension costs, etc.
Personnel cost	\$700,000	FTEs * Personnel cost
Ambulance	\$250,000	Cost of the ambulance, delivered
Equipment	\$65,000	Cot, monitor, etc.
Cost	\$315,000	Total costs
Useful Life/Years	5	Depreciation expense
Number of Ambulances	1	Count of ambulances in the fleet
Ambulance Cost	\$63,000	Annual cost of each ambulance
Other		
Maintenance	\$20,000	Annual allocated or actual cost of maintenance
Fuel	\$25,000	Annual cost of fuel
Supplies	\$21,750	Annual cost of disposable supplies and drugs
Total Annual	\$829,750	
Cost/UH	\$94.72	Total costs divided by annual <u>unit hours</u>
Cost/Response	\$414.88	Total costs divided by annual <u>responses</u>
Cost/Transport	\$592.26	Total costs divided by annual <u>transports</u>



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Economic Analysis – 25% Pay Increase

		Reimbursement Increase	
Total Annual Costs	\$829,750	Total Annual Costs	\$829,750
Total Annual Revenue	\$624,461	Total Annual Revenue	\$699,043
Net Retained Earnings	(\$205,289)	Net Retained Earnings	(\$130,707)
Responses		Responses	
Responses	2,000	Responses	2,000
Cost per Response	\$414.88	Cost per Response	\$414.88
Revenue per Response	\$312.23	Revenue per Response	\$349.52
Net Retained Earnings	(\$102.64)	Net Retained Earnings	(\$65.35)
Transports		Transports	
Transports	1,401	Transports	1,401
Cost per Transport	\$592.26	Cost per Transport	\$592.26
Revenue per Transport	\$445.73	Revenue per Transport	\$498.96
Net Retained Earnings	(\$146.53)	Net Retained Earnings	(\$93.30)
Unit Hours		Unit Hours	
Unit Hours	8,760	Unit Hours	8,760
Cost per Unit Hour	\$94.72	Cost per Unit Hour	\$94.72
Revenue per Unit Hour	\$71.29	Revenue per Unit Hour	\$79.80
Net Retained Earnings	(\$23.43)	Net Retained Earnings	(\$14.92)



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Costs Based on Level of Service Delivery

Response Time: 7 minutes @ 90%, 5 minutes @ average; All ALS

Station	Unit Type	Staffed Unit Hours	Total Runs	Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
1	ALS Ambulance	8,760	1,471	0.168	\$171.98	\$1,506,545
2	ALS Ambulance	8,760	1,127	0.129	\$171.98	\$1,506,545
3	ALS Ambulance	8,760	904	0.103	\$171.98	\$1,506,545
4	ALS Ambulance	8,760	1,267	0.145	\$171.98	\$1,506,545
Total		35,040	4,769	0.136	\$171.98	\$6,026,179
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$4,237,804)

Response Time: 9 minutes @ 90%, 7 minutes @ average; All ALS

Station	Unit Type	Staffed Unit Hours	Total Runs	Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
1	ALS Ambulance	8,760	1,671	0.191	\$171.98	\$1,506,545
2	ALS Ambulance	8,760	1,580	0.180	\$171.98	\$1,506,545
3	ALS Ambulance	8,760	1,518	0.173	\$171.98	\$1,506,545
Total		26,280	4,769	0.181	\$171.98	\$4,519,634
Savings						\$1,506,545
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$2,731,259)



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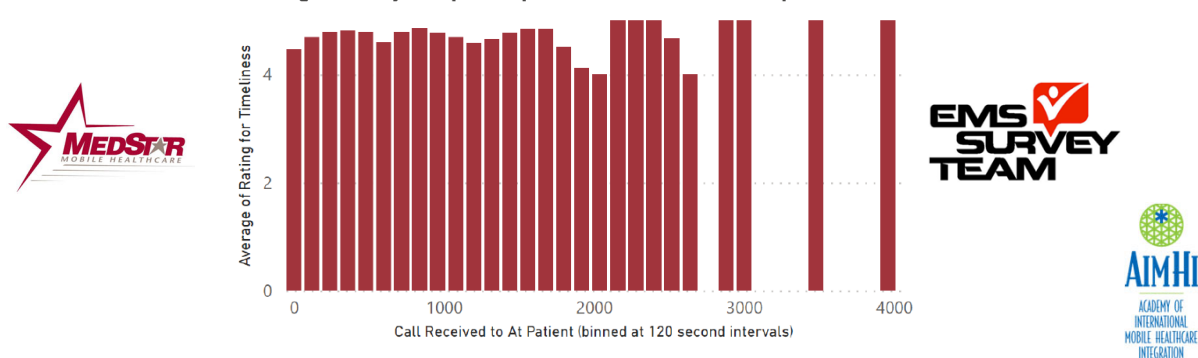
“Public Expectation!” ????

Analysis of EMS Survey Team “Ambulance Arrived in a Timely Manner” Rating and Ambulance Response Time for Priority 3 (non-lights and siren) Response Times

MedStar’s Business & Data Analytics Manager, Whitney Morgan, merged data between the response times for Priority 3 (non-lights and siren) responses and our EMS Survey Team customer experience survey data.

The charts and graphs below provide a summary of the data analysis:

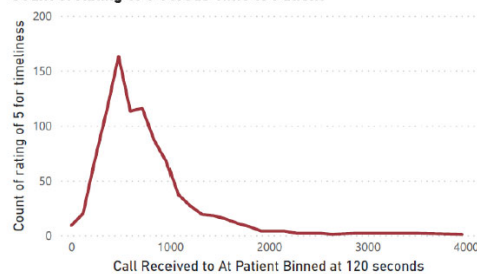
Average Survey Response per 2-minute binned response time



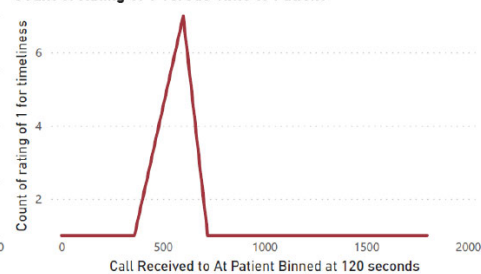
23

“Public Expectation!” ????

Count of Rating of 5 versus Time to Patient



Count of Rating of 1 versus Time to Patient



Coefficient: 0.0174607

No correlation between time response and survey score.

Coefficient: -0.01038471

No correlation between time response and rating on ambulance arriving in a timely manner:



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Costs Based on Level of Service Delivery

Response Time: 7 minutes @ 90%, 5 minutes @ average; All ALS

Station	Unit Type	Staffed Unit		Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
		Hours	Total Runs			
1	ALS Ambulance	8,760	1,471	0.168	\$171.98	\$1,506,545
2	ALS Ambulance	8,760	1,127	0.129	\$171.98	\$1,506,545
3	ALS Ambulance	8,760	904	0.103	\$171.98	\$1,506,545
4	ALS Ambulance	8,760	1,267	0.145	\$171.98	\$1,506,545
Total		35,040	4,769	0.136	\$171.98	\$6,026,179
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$4,237,804)

Response Time: 7 minutes @ 90%, 5 minutes @ average; Tiered Response

Station	Unit Type	Staffed Unit		Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
		Hours	Total Runs			
1	ALS Ambulance	8,760	1,471	0.168	\$171.98	\$1,506,545
2	BLS Ambulance	8,760	1,127	0.129	\$135.21	\$1,184,440
3	ALS Ambulance	8,760	904	0.103	\$171.98	\$1,506,545
4	BLS Ambulance	8,760	1,267	0.145	\$135.21	\$1,184,440
Total		35,040	4,769	0.136	\$171.98	\$5,381,969
Savings						\$644,210
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$3,593,594)



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Costs Based on Level of Service Delivery

Response Time: 7 minutes @ 90%, 5 minutes @ average; All ALS

Station	Unit Type	Staffed Unit		Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
		Hours	Total Runs			
1	ALS Ambulance	8,760	1,471	0.168	\$171.98	\$1,506,545
2	ALS Ambulance	8,760	1,127	0.129	\$171.98	\$1,506,545
3	ALS Ambulance	8,760	904	0.103	\$171.98	\$1,506,545
4	ALS Ambulance	8,760	1,267	0.145	\$171.98	\$1,506,545
Total		35,040	4,769	0.136	\$171.98	\$6,026,179
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$4,237,804)

Response Time: 9 minutes @ 90%, 7 minutes @ average; Tiered Response

Station	Unit Type	Staffed Unit		Unit Hour Utilization	Unit Hour Expense	Annual Unit Expense
		Hours	Total Runs			
1	ALS Ambulance	8,760	1,671	0.191	\$171.98	\$1,506,545
2	BLS Ambulance	8,760	1,580	0.180	\$135.21	\$1,184,440
3	ALS Ambulance	8,760	1,518	0.173	\$171.98	\$1,506,545
Total		26,280	4,769	0.181	\$171.98	\$4,197,529
Savings						\$1,828,650
Revenue @ \$500/Transport						\$1,788,375
Retained Earnings						(\$2,409,154)



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Other Sources of Funding

- Property Tax
 - Millage based on governing body approval
 - Based on the \$ EMS agency needs for sustainability
 - Increasing property values help!
 - Beware property tax 'caps'
 - Public backlash on property values & related tax use
- Sales Tax
 - Millage based on governing body approval
 - Based on the \$ EMS agency needs for sustainability
 - Increasing based on population & spending
 - Used by some for a "Crime Control Prevention District" (CCPD)



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Other Sources of Funding

- GEMT
 - Through Medicaid office
 - Cost reporting to determine **costs** vs. Medicaid reimbursement
 - Recent changes to **ACR** vs. Medicaid reimbursement
 - Typically only available to 'public' agencies
- Provider Assessment
 - Fee collected from providers for all transports
 - Revenue used to draw down federal matching funds
 - Portion of the match for supplemental payment to providers for Medicaid transports
 - Beware donor vs. benefactor issues
 - May be hard to pass in fiscally conservative states
 - Beware the supplemental payment issuer!



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"How Much Funding Do You Need?"


Estimating Your Costs, & Other Considerations for Public Funding




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THANK YOU!

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