EMS Stakeholders Conference Call July 27, 2009

45 participants (see attached list)

Introduction, Welcome and History by Ben Hinson and Dr. Dennis Ashley

Review of funding for 2009 – Ben (see attached full detail)

Trauma Center Allocation	Amount	% of Total		
Trauma Center Readiness Costs	\$ 17,888,539	30.4%		
Competitive Capital Grants for LI & LII Trauma Centers	\$ 4,148,602	7.0%		
Level IV Trauma Center Costs (2)	\$ 200,000	0.3%		
Uncompensated Care Costs \$ 17,888,539				
Total Trauma Center Allocation	\$ 40,125,680	68.1%		
Trauma Physician Allocation				
25% of Trauma Center Readiness Costs	\$ 5,962,846	10.1%		
25% of Trauma Center Uncompensated care	\$ 5,962,846	10.1%		
Total Physician Allocation	\$ 11,925,693	20.2%		
EMS/Pre-Hospital Allocation				
EMS Competitive Grant Program	\$ 4,000,000	6.8%		
EMS Uncompensated Care	\$ 1,479,945	2.5%		
GPS & Automatic Vehicle Locater System	\$ 996,452	1.7%		
Total EMS/Prehospital Allocation	\$ 6,476,397	11.0%		
Oversight & System Development				
Trauma Commission/System Plan & Dev	\$ 375,000	0.6%		
Fotal Oversight/Development Allocation	\$ 375,000	0.6%		
TOTAL 2008-09 GEORGIA TRAUMA FUND	\$ 58,902,769	100.0%		

Uncompensated Care: No questions

Ambulance Grants: No Questions

GPS based AVL Tracking System – answer to questions are below:

- o 911 Zone Providers only eligible for participation
- o 350 units will be available for Ambulances in first year of program
- No limit per Ambulance service- factor to consider: service would need unit in every Ambulance that responds to 911 calls.
- Application and conditions/requirements for services to participate are being developed.
- Ben meeting this week with GTRI to continue planning
- o Wireless Vendor– has not been selected.
 - State would probably have one Wireless Vendor
 - Would work to have flexibility if EMS Director desires other vendor
- o Software vendor
 - Has not been selected. GTRI will assist in RFP development after survey to determine systems that are compatible
- o If State-wide Disaster occurs all units would be made visible at a central operational center.
 - Trauma Commission to develop criteria for "State-wide Disaster" function of AVL system.
 - This will be determined by GTCNC as an operational protocol.
 - EMS stakeholders will have input
 - Each Ambulance Service will dispatch their own units in a Statewide Disaster or follow current emergency preparedness and response protocols developed outside the Trauma Commission.
- o GTRI will work to interface with existing and currently operational EMS providers' AVL systems around the state.
- No start up cost for EMS providers— all included for 1st 3 years cost for wireless and maintenance.
- Service will have to provide adequate Computer for GTVC visualization software to run on in their dispatch/911 Center for local visualization.
- Training will be included.
- Ben encouraged everyone to complete the survey they received from Jim Pettyjohn re: Vehicle Tracking System, who has them.

Starting point Proposal from GTCNC EMS Subcommittee for FY 2010 (July 09 – June 10) – 4 million

- Draft ideas from EMS Trauma Subcommittee presented
 - o \$1,125,000 Ambulance Grants for 15 Ambulances
 - \$2,000,000 To DCH Medicaid which would be generate a match of \$5,942,811 by Federal program thus raising EMS payments from Medicaid by \$7,942,811
 - \$676,900 Dynamic Mutual Aid Develop system where mutual aid would occur when County is uncovered. Get money to Ambulance Service when they provide coverage.

See Below for additional questions and answers:

- \$1,125,000 is not enough for this round of Ambulance Vehicle grants. Include more money for Ambulance Grants rotate Counties so each County receives a unit every 3 years.
- Dynamic Mutual Aid
 - o How would we track this?
 - System needs to be developed. Some Ambulance Services are tracking as regular calls as no transport.
 - Current agreements are in place with the State to provide mutual aid to Counties. How would this affect the current Mutual Aid agreements?
 - May do an addendum to this contract, again need to develop the system.
 - If program is developed and does not work out, will money come back to EMS?
 - Yes, would come back to EMS thru the Trauma Commission.
- Regional Personnel Alert System
 - o AVL is separate from 2 way system.
- Additional equipment for trauma patients
 - On list from 1st stakeholder meeting May 26th 2009
 - On list to consider
- Training for 1st Responders
 - On list to consider, also working for Grants from other sources, will report back other grant sources
- More AVL units does not think 350 will be enough for the State.
 - o GEMA Grants should furnish enough units in the out years

- Medicaid Matching concerns with this program, that money would not come back to EMS, who would hold the key to lock box?
 - Working on system.
 - o Concern over paying into this two times (license fees).
 - GTCNC hears and is cognizant of these concerns.
- Uncompensated Care any money for this.
 - Medicaid Match would benefit the same patient population.
 Communities with a high uninsured population, thus uncompensated Trauma care have a high Medicaid population %.
 Thus, increased Medicaid payment would benefit providers with high uncompensated Trauma care.
- Communications technology improvement grants to each Region.
 - o Possible GEMA grant money for this.
- Quality Assurance patient follow up reports on patients that are transported outside of the County.
 - This is being addressed by the Trauma Transfer Center as part of QA/QI. Kelli Vaughn, Trauma Coordinator at John D Archbold Memorial Hospital, Trauma Commission representative said anyone could contact her regarding this.
- Where do we go next, what information will be reported to the Trauma Commission?
 - Trauma Commission meeting is scheduled for this Thursday,
 7/30/09. Information will be shared at the meeting. Notes from this Conference Call will be typed and distributed by e-mail.

Updated Draft ideas – based on EMS Stakeholder Group Conference call July 27, 2009

- \$1,125,000 Ambulance Grants for 15 Ambulances @
 \$75,000 each.
- \$2,000,000 To DCH Medicaid which would be generate a match of \$5,942,811 by Federal program thus raising EMS payments from Medicaid by \$7,942,811
- \$426,900 Dynamic Mutual Aid Develop system. Mutual aid would occur when County is uncovered not simply when the next call is received. Goal would also include getting money to Ambulance Service when they provide coverage.
- \$250,000 Support for first responders specifically for Trauma Care
 - Competitive grants
 - Geared specifically for Rural EMS Systems who use Primarily Volunteer first responders for Trauma events
 - Eligible Uses

- Training for First Responders
 - **o** Updated Trauma Care
 - Local courses to improve interaction between agencies
 - What and where equipment is on local EMS units
- Equipment
 - Extrication equipment etc. needed by Rescue organizations
- Improved communications for local First Responding Agencies
- Other uses as determine before program is launched

Conference Participant Report: Georgia EMS Stakeholders Conf. Date: 7/27/2009 Conf. Time: 10:00 a.m et Leader: Ben Hinson Conference ID: 21877021

Start Time	End Time	Name	Represent
10:08.48	11:21.37	SPK BEN HINSON	
10:06.35	11:21.31	ANN LAMB	MITCHELL COUNTY EMS
10:06.47	10:42.50	BENNY ATKINS	NATIONAL EMERGENCY SERVICES
10:07.12	11:21.45	BILLY KUNKLE	HENRY COUNTY FIRE DP
10:05.20	11:21.32	BLAKE THOMPSON	WILKES EMS
10:08.35	11:21.31	BRAD JOHNSON	HENRY COUNTY
10:06.37	11:21.27	CHAD BLACK	HALL COUNTY FIRE SERVICES AND AIR MEDICAL CORPORATION
10:04.04	11:21.46	CHUCK ALMOND	ELBERT COUNTY EMERGENCY SERVICES
10:06.20	11:21.33	COURTNEY TERWILLIGER	THE GEORGIA ASSOCIATION OF EMS
10:08.04	11:21.32	CRAIG NORTON	AMBUCARE EMS
10:03.41	11:17.37	CRAIG STUBBS	THE GEORGIA STATE OFFICE OF EMS & TRAMA
10:20.54	10:45.03	DANNY SMITH	LINCOLN COUNTY EMS
10:04.36	11:21.30	DAVID BORGHELLI	HOUSTON HEALTHCARE EMS
9:59.19	11:21.29	DAVID EDWARDS	CRISP COUNTY EMS
10:11.18	11:08.05	DENNIS ASHLEY	CHAIRMAN OF TRAUMA COMMISSION
10:05.43	11:21.36	ED WESTBROOK	JASPER COUNTY EMS
10:13.15	11:21.35	ERIC KAPHINGST	IMAGETREND
9:59.44	11:21.33	GARY PINARD	SCREVEN COUNTY
10:07.40	11:21.31	HT DOWNS	WASHINGTON & JOHNSON COUNTY EMS
10:21.41	11:21.33	JAMES MATHEWS	OGLETHORPE COUNTY EMS
10:33.00	11:21.33	JASON LEWIS	OGLETHORPE COUNTY EMS
10:11.25	11:21.34	JEFF SMITH	GEORGIA ASSOCIATION OF EMS
10:04.31	11:21.28	JIM PETTYJOHN	GTCNC
10:03.57	11:21.34	JP CHEEK	HEARTLAND EMS
10:03.10	11:21.35	KEITH HESTER	MONROE COUNTY EMERGENCY SERVICES
10:19.04	11:21.37	KEITH WAGES	GAEMS
10:11.47	11:21.25	KELLI VAUGHN	ARCHBOLD HOSPITAL
10:09.41	11:21.31	KELLY JOINER	MEDICAL CENTER EMS
10:04.11	11:24.59	KIM RANSOM	DOUGLAS COUNTY FIRE DEPARTMENT
10:01.21	11:21.50	LANA DUFF	ANGEL EMERGENCY MEDICAL SERVICES
10:08.45	11:22.25	LANCE HARRISON	TROUP COUNTY EMS
10:03.55	11:24.59	LEE OLIVER	MEDICAL CENTER OF CENTRAL GEORGIA
10:04.57	11:21.32	MARK CHAPMAN	CHILDRENS HEALTH CARE OF ATLANTA
11:03.55	11:21.31	MATT JACKSON	FORREST PARK FIRE
10:08.50	11:21.28	MIKE JERNIGAN	METRO ATLANTA
10:03.31	11:16.50	RAY BRITT	TAYLOR REGIONAL HOSPITAL
10:39.03	11:21.34	RICHARD LEE	UPSON REGIONAL MEDICAL CENTER EMS
10:10.20	11:21.32	RICHARD ROBERTS	DOUGHERTY COUNTY EMS
10:08.52	11:23.52	RICK COBB	WHITFIELD EMS
10:03.05	11:21.31	ROD DAWSON	GWINNETT COUNTY FIRE AND EMERGENCY SERVICES
9:59.58	11:18.07	SCOTT BLUE	HEARD COUNTY
10:03.21	11:21.32	STEVE NICHOLS	JACKSON COUNTY EMS
10:10.07	10:59.29	STEVEN FOLDEN	FAYETTE COUNTY
10:13.40	11:21.31	TOM MORRIS	THE CITY OF HAPEVILLE
10:13.40	11:21.34	TOMMY WOLFE	WARREN COUNTY EMS & EMERGENCY SERVICES
10.00.01	11.21.04	TOWNSTI WOLI L	WHITE GOOD I LINE & LIVE TO LIVE TO LIVE TO LET VIOLO