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WHATCOM COUNTY COUNCIL
Special County Council

March 22, 2005

Council Chair Laurie Caskey-Schreiber called the meeting to order at 11:30 a.m. in the Council Chambers, 311 Grand Avenue, Bellingham, Washington.

Present:

Barbara Brenner
Seth Fleetwood
Sharon Roy
L. Ward Nelson
Dan McShane

Absent:

Sam Crawford

1. DISCUSSION REGARDING EMERGENCY MEDICAL SERVICES

Dewey Desler, Deputy Administrator, presented a power point presentation (*on file*). The administration will ask the Council to consider a resolution regarding emergency medical services (EMS). The administration has been working since last summer with people on the future of EMS in the community. He read the list of the EMS Working Group members and the group's principles and objectives, the realignment timeline, and the Medic One countywide call volume projections.

Call volumes for Medic One would rise at six percent per year under the current service. That's been the case for the past 20 years. It's a level that's difficult to sustain.

The proposal is to drop the level below 11,000 by the year 2010 using a two tier system. Medic One's paramedics would respond to the most critical advanced life support (ALS) calls throughout the county. Fire districts would transport and respond to basic life support (BLS) calls. The system would create a rise in BLS transports provided by fire districts and fire departments and a drop in ALS response.

When the levy went before the voters in 2003, the plan was to provide ALS response to all calls. In this case, they are talking about a different method for response. Train paramedics who will respond to ALS calls, and districts will respond to the BLS calls.

Brenner asked who makes the decisions on whether a call is ALS or BLS. Desler stated calls come into 911. The dispatchers will ask a series of key questions to determine whether the caller needs basic life support (BLS) or advanced life support (ALS). If there is a question, ALS unit will be dispatched.

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1 Roy asked how they know that one-third of the calls now could be handled by
2 BLS. Desler stated they have the evidence to support that assumption. The
3 working group went through all calls that occurred over the last several years in
4 every community.
5

6 Roy stated her concern is not the volume of calls. She asked if there is
7 information on when Medic One was sent out when a lesser service would have
8 sufficed. She asked how they know that reducing this service by one-third is
9 realistic, based on the kinds of calls, not the number of calls. Desler stated the
10 National Academy of EMS has a protocol in which all the dispatchers have been
11 trained to respond. If an emergency medical technician (EMT) shows up at BLS call
12 and determines the situation as more serious, the EMT would immediately dispatch
13 an ALS unit.
14

15 Bill Boyd, Bellingham Fire Department Chief, stated they have been doing
16 this call triage for past two years. They've been sending the same response since
17 they implement the program because they wanted to make sure the current system
18 is effective and works. They did not want to send a lesser response to a situation
19 that requires a paramedic. When they send out a BLS response, they are finding
20 that most situations don't require a paramedic and can be handled by a BLS unit.
21 They are now prepared to take next step and send only BLS units to those calls.
22 They have to find the resource to send out the BLS units alone. They have to build
23 the BLS transport capacity in the county. The system is starting with a few select
24 fire districts in the county. The Bellingham Fire Department will be ready in about a
25 month. The new system will delay the need to add an additional Medic One unit.
26 He is highly confident they can triage BLS calls effectively.
27

28 Brenner asked for an example of a situation when BLS is adequate. She
29 asked who decides between no response, BLS, and ALS. Boyd stated one example
30 is that they respond often to the Northwest soccer field to attend to soccer injuries.
31 A fractured ankle or leg would receive a paramedic response. Under the new
32 system, those injuries will receive a BLS response, with just a Ferndale Fire District
33 BLS unit to split and transport that patient. Certain types of fractures would get a
34 paramedic level of response, such as a femur fracture. Keep in mind that the first
35 responders can upgrade a call at any time.
36

37 Nelson stated the triage system includes a team of responders. Even if a
38 BLS unit responds, it doesn't mean the continuum of care won't start so that
39 damage is prevented. A paramedic may be called, but care begins when the BLS
40 unit arrives. Boyd stated that is correct. It goes both ways. If a paramedic arrives
41 and its determined as not necessary, the paramedic will tell the fire district to do
42 the transport and put the medic unit back in service.
43

44 Caskey-Schreiber asked if there are areas in the county where the fire
45 districts aren't able to meet the BLS demand. Boyd stated few east county fire
46 districts can do BLS transport. Medic One will have to do BLS transport in those
47 areas. The small fire districts don't have the volunteer capacity.

1
2 Caskey-Schreiber asked if Medic One will have a BLS unit for those weaker
3 areas of support. Desler stated the projection represents the BLS calls provided by
4 Medic One. Some service would still be provided for BLS level of support from
5 Medic One.
6

7 Brenner stated there are many people now living in the eastern part of the
8 county. The projection doesn't rise at all. She asked if the projection is realistic.
9

10 Caskey-Schreiber asked if the projections would be thrown off as the County
11 considers allowing 500 homes to Kendall. She asked if they need to keep those
12 things in mind while making planning decisions. Desler stated the projection is
13 based on all the information they have to-date, including potential growth in that
14 area.
15

16 Desler continued the presentation on the average age of patients, the change
17 in age of the population served, and the fee-for-service revenue.
18

19 Caskey-Schreiber asked if the capped amounts for Medicaid and Medicare
20 meet the cost. Desler stated they do not. Medicaid pays about \$.33 on the dollar
21 for the cost of service. Medicare pays about \$.75 on the dollar for the service. The
22 private pay/uninsured folks pay about \$.29 on the dollar for the service. They have
23 to figure out where to cover the cost. In the past few years, they have used
24 general fund money from the County and City.
25

26 Caskey-Schreiber stated a criticism is that the City and County are not living
27 within their budgets. This is a situation that shows they can't because of the rising
28 costs due to population growth.
29

30 Desler stated Congress requires that this service be provided to those with
31 Medicare and Medicaid, with a cap in reimbursement. That reimbursement
32 continues to drop, and is scheduled to continue to drop. He continued the
33 presentation on paramedic training requirements and costs of a county-only
34 system.
35

36 Brenner asked the cost of time and training for BLS support. Desler stated
37 EMT training is three months.
38

39 Boyd stated there are about 500 EMT first responders in the county. Almost
40 all are volunteers. The cost of employees is different by about 14 to 15 percent.
41 The majority of BLS responders now are volunteers. In those districts that are
42 doing the transports now, the majority of the response is done with volunteers, who
43 are struggling. They're getting tired.
44

45 Brenner asked if the working group considered training other fire districts to
46 respond to BLS calls in the east county, and pay them a certain amount for going to
47 the east county. Desler stated they are working with all districts that want to begin

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1 an BLS transport service. A group is working with private ambulance service to
2 help districts develop a primary or secondary capacity to provide BLS transports.
3

4 Desler continued the presentation on a county-only service with one and a
5 half units, without a subsidy. The working group rejected the options. It would
6 leave many people stranded who need the service and care.
7

8 Desler continued the presentation on a unified system with all jurisdictions.
9 The resulting demand for ALS services can be met through 2009. Then, the intent
10 is to hire, train, and deploy District 7, the largest fire district, to provide the
11 service.
12

13 Caskey-Schreiber asked about excluding the City of Lynden. Desler stated
14 part of the unification is to use the same system for processing insurance
15 payments. Lynden is the only district that said it wants to process payments on its
16 own. This model reflects the revenue and expense for a portion of BLS running
17 through the budget.
18

19 Caskey-Schreiber asked the ramifications to calls from Lynden. Desler stated
20 there is no change in service. Lynden's finance and expense will not be run through
21 this system.
22

23 Desler continued the presentation on the EMS community information and
24 education and the Emergency Medical and Ambulance Advisory Board. A series of
25 people need to be involved in and informed of EMS. He proposes to reactivate this
26 advisory board and focus on certain needs. The City unanimously supports
27 reactivating the board. The fire districts are forming themselves into regions. One
28 idea was for one commissioner from each region to serve on the board. Additional
29 members could be advisory, including the private ambulance service. Focus the
30 membership of the board on the leadership of the county.
31

32 Brenner asked about the type of service the private ambulance carrier would
33 provide. Desler stated the private ambulance service handles a lot of frail people
34 and transports the elderly from one nursing home to another. Because they have
35 EMT's on staff, the private service could provide assistance to some districts for BLS
36 transport delivery. The working group is currently working with the one private
37 ambulance company in the community. The owner of that service has participated
38 in some of these working group meetings.
39

40 Boyd stated the owner of the private ambulance service has offered his
41 service to all small fire districts that don't have the capacity to do BLS transport.
42

43 Brenner asked if first responders in those areas would be either the fire
44 district or the private service, before the ALS service. Boyd stated that would have
45 to be worked out. He assumes the first responders would still go from the local fire
46 district because there must still be a timely response. The east county area has the

1 lowest call volume and the lowest population. A unit placed in the east county will
2 be seldom used compared to the Interstate 5 corridor area.

3
4 Brenner stated that if the small fire districts did a deal with the private
5 ambulance service, the ALS wouldn't need to come out right away. Boyd stated
6 that is correct.

7
8 Desler stated a committee is meeting with the private ambulance service to
9 figure out how the private service can be involved as a primary or secondary
10 service.

11
12 Desler continued the presentation on EMS funding options. There is no
13 recommendation yet. Most interest has been on the last two items, regarding a
14 sales tax or an EMS levy, similar to what went before the voters in the past. One
15 idea is for a citizen commission to look at funding issues from the perspective of the
16 citizens. There would need to be a long-term interlocal agreement among all the
17 jurisdictions to make sure the revenue is focused and delivered on EMS. An EMS
18 levy proposal would require the approval of and an agreement with the City of
19 Bellingham. Thus far, the discussion is about putting forward a measure to the
20 voters in 2006.

21
22 Caskey-Schreiber asked about the City Council voting to extend the three-
23 month agreement. She asked how that would work out if they wait until 2006 to
24 solve this. Desler stated to retain the four existing units, the plan was to retract
25 the Grandview Station back into Bellingham. The staff from the station that is
26 being retracted will fill positions that are filled now by firemen who will retire soon.
27 In the meantime, the City has to figure out how to pay overtime for existing
28 personnel to cover the shifts.

29
30 *(Clerk's Note: End of tape one, side A.)*

31
32 Desler stated the proposal is to maintain a Medic One four-unit system
33 throughout the county under the current budget, with all money the County has
34 allocated. There will still be a deficit. The proposal is to use the fund balance,
35 which is owned 50 percent by the County, to cover the deficit in 2005. There is
36 about \$980,000 in that fund balance now. At the same time, the working group is
37 currently discussing how to meet the fund balance requirements in 2006.

38
39 Caskey-Schreiber stated that the County will have to take action if the levy
40 fails. Desler stated they will have to find another approach. The working group is
41 grappling with those options.

42
43 Brenner asked how they'd increase insurance and fee revenue. Desler stated
44 that item was listed on the presentation for discussion purposes. However, it's not
45 really an option. There aren't a lot of choices.

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1 Roy stated increasing insurance revenue isn't possible, but they can charge
2 more from the user.

3
4 Caskey-Schreiber stated it may come down to that. The County will have to
5 figure out what to do with people who can't afford the service. Desler stated that
6 to receive Medicare revenue, the federal government said, by law, the service will
7 only receive what the government pays, and the service will not bill the user for the
8 difference. The amount the federal government pays is declining. The same thing
9 applies with Medicaid. For that 65 percent of the population with Medicare and
10 Medicaid, the service is not able to collect any more fee. The uninsured amounts
11 are billed, but get written off, even though they have a successful billing service.

12
13 Desler continued the presentation on the key outcomes of realignment, the
14 new EMS Working Group charge, and next steps in progress.

15
16 People have asked how the County Council feels on this. He drafted a
17 proposed resolution for the Council to consider to give support for this direction (*on*
18 *file, AB2005-155*). It would start to generate a lot more enthusiasm.

19
20 McShane stated he would support the resolution.

21
22 Nelson stated he supports the resolution, although he won't be at the next
23 Council meeting.

24
25 Brenner stated it would be an amazing feat if they can all work together to
26 hold this together.

27
28 Roy stated she supports the resolution.

29
30
31 **OTHER BUSINESS**

32
33 Dewey Desler, Deputy Administrator, asked if the councilmembers want the
34 Washington Community Economic Revitalization Team (WA-CERT) application
35 presentations before the Council.

36
37 Caskey-Schreiber stated they do. She would like presentations after the
38 councilmembers receive the rating sheets.

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41 **ADJOURN**

42
43 The meeting adjourned at 12:34 p.m.

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Jill Nixon, Minutes Transcription

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The Council approved these minutes on April 12, 2005.

ATTEST:

WHATCOM COUNTY COUNCIL
WHATCOM COUNTY, WASHINGTON

Dana Brown-Davis, Council Clerk

Laurie Caskey-Schreiber, Council Chair