



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

DATE: December 13, 2022

TO: Board of Supervisors

SUBJECT

EVALUATING A NEW MODEL FOR EMERGENCY AMBULANCE TRANSPORTATION SERVICES IN OUR RURAL COMMUNITIES (DISTRICTS: 1, 2, AND 5)

OVERVIEW

The emergency medical system in San Diego County (County) is a national leader of patient care and health outcomes. This system includes initial assessment and care by first responders, transportation to an emergency department, and medical treatment by healthcare providers. The time it takes firefighters and paramedics to make patient contact and provide transportation, along with the level and quality of care, has a substantial impact on the risk of death or long-term health complications. For our more rural areas, the Board of Supervisors has significantly enhanced the level of care with advanced life support (ALS) service by providing paramedics on engines and bolstering ambulance service through a single, County managed ambulance contractor in an area known as the Unified Service Area (USA).

On October 4, 2021, the State of California enacted Assembly Bill (AB) 389. One of the provisions of the legislation included an ambulance subcontracting method known as the Alliance Model. This authorized the Board of Supervisors of a county to designate a fire agency as the lead ambulance transportation agency and included the authority to subcontract to public or private partners. The Alliance Model represents a unique opportunity for San Diego County to enhance equitable service delivery to rural communities. A unique element of the Alliance Model is for the fire agency to determine where public or private ambulances should be deployed in a way that reduces costs for taxpayers, improves patient care, and increases the presence of firefighters in our most fire-risk communities.

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The current USA contract expires in September 2025, which gives the Board a sufficient window to evaluate if the Alliance Model, or modifications to our current ambulance contracting method, would best serve our rural communities. Today's actions include directing the Chief Administrative Officer to contract for a consultant to evaluate our service delivery model, health outcomes and financial data in the USA and recommend if the Alliance Model should be adopted in our County. Upon completion, County staff shall return to the Board to provide an update on the consultant's research and recommendations for next steps. Please join us in promoting equity and reducing health disparities in our unincorporated communities.

RECOMMENDATION(S)

CHAIR NATHAN FLETCHER AND SUPERVISOR JOEL ANDERSON

Direct the Chief Administrative Officer to procure consultant services to evaluate the optimal emergency ambulance transportation service delivery model in the USA by evaluating financial, operational, and patient care metrics and returning to the Board with an update and any recommendations. The recommendations will include consideration of the long-term needs within independent fire protection districts receiving ambulance transportation services in the USA.

EQUITY IMPACT STATEMENT

The consultant's scope will include recommending operational practices and staffing patterns that reduce health disparities in our rural communities. Residents in rural communities are more likely to be older, geographically isolated from medical services, and impacted by chronic health conditions. Enhancing ambulance transportation services increases the likelihood of positive patient outcomes from a 911 call.

SUSTAINABILITY IMPACT STATEMENT

The proposed action to contract for a consultant supports the County of San Diego's goals to provide equitable services to all residents. Including input from independent fire protection districts in the USA contributes to the County's regional leadership efforts of working collaboratively with partner agencies.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year 2022-23 Operational Plan for San Diego County Fire. If approved, this request will result in estimated costs and revenue of \$200,000 in Fiscal Year 2022-23. The funding source is existing General Purpose Revenue. There will be no change in net General Fund costs and no additional staff years. There may be impacts related to future recommendations in which staff will return to the board for consideration and approval.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

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BACKGROUND

The San Diego County (County) Strategic Plan has placed a priority on promoting equity for all residents in our region. This includes reducing health disparities that impact the quality of living for individuals and increases costs for local government. San Diego County has long been a national leader in emergency medical services. However, rural communities are often behind cities in access to life saving services. The County has invested tens of millions of dollars over the past decade to address this inequity by adding around-the-clock paramedic staffing in the unincorporated area.

On December 5, 2017 (5), the Board of Supervisors approved an updated approach to ambulance transportation services in the unincorporated communities. Previously, San Diego County Emergency Medical Services Office, acting as the Local Emergency Medical Services Agency (LEMSA), was responsible for three Exclusive Operating Area (EOA) ambulance transportation contracts and seven undesignated or non-exclusive areas that comprised nearly 50 percent of the county's landmass. This model proved partially ineffective as the least populated communities did not always have a nearby ambulance to transport patients to the hospital during a medical emergency. Extended wait times can result in negative health outcomes and exacerbate health disparities. From a financial perspective, the areas with the lowest population density did not provide an adequate payer mix for a private provider to station an ambulance nearby for optimal service delivery. In response, County staff proposed a "Unified Service Area" (USA) of the three EOAs and undesignated/non-exclusive areas as a single contract. On April 1, 2020, a new five-year contract was executed.

On October 4, 2021, the State of California enacted Assembly Bill (AB) 389. One of the provisions of the legislation includes an ambulance subcontracting method known as the Alliance Model. This authorizes the Board of Supervisors of a county to designate a fire agency as the lead ambulance transportation agency and includes the authority to subcontract to public and/or private partners. The change in State law allows fire agencies to maximize service delivery while reducing overall cost. In San Diego County, it represents an opportunity to reduce health disparities in rural communities and reduce overall cost to taxpayers. Traditional ambulance transportation services have been either all private or all public. The Alliance Model authorizes a fire agency to determine if a combination of publicly and privately staffed ambulances offer the highest quality of service at the most efficient price. The price determination is made by the fire agency, which is responsible for billing rather than the ambulance provider itself.

The County's USA contract expires in September 2025. To support equitable services in the region, we are proposing the Chief Administrative Officer hire a consultant with experience in ambulance transportation services and familiarity with the Alliance Model to evaluate the future of the USA. The consultant may recommend changes to the existing model or that the County, through its San Diego County Fire Protection District (SDCFPD), is designated the ambulance transportation authority for the USA. The consultant will be responsible for evaluating the USA's current insurance payer mix (which determines profitability), medical best practices, deployment of public and private ambulance resources, and maximizing State and Federal funding sources to

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make a recommendation for the County regarding a recommended operating model. Under the Alliance Model, any revenue collected after costs would be reinvested into County Fire's long-term operational needs to enhance services. In addition, the consultant will support County staff in developing a future Request for Proposals (RFP) for ambulance services in the USA and conducting industry outreach.

The USA's large landmass exceeds the size of the SDCFPD and includes the independent Deer Springs, Valley Center, and Alpine Fire Protection Districts. The Board values collaboration with all first responder public agencies. County staff will include the needs within the impacted fire protection districts in the consultant's overall evaluation and recommendation(s). The SDCFPD is now the second largest fire protection and emergency medical services agency in our region. The changes in State law afford the Board a unique opportunity to align taxpayer resources with the priorities in the County's Strategic Plan. Today's request is to direct the Chief Administrative Officer to hire a consultant to evaluate ambulance transportation services in the USA, recommend a model that provides the highest quality of patient care at the lowest cost, and return to the Board to seek policy direction for the next ambulance transportation contract in the USA.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Equity and Sustainability Initiatives in the County of San Diego's 2022-2027 Strategic Plan. The hiring of a consultant to evaluate ambulance transportation services in the Unified Area will support a reduction in health disparities in our rural communities while seeking to reduce taxpayer costs.

Respectfully submitted,



CHAIR NATHAN FLETCHER
Supervisor, District 4



JOEL ANDERSON
Supervisor, District 2

ATTACHMENT(S)

N/A