



Emergency Transportation Services in the Town of Queen Creek

Introduction

- Queen Creek currently contracts with a private contractor American Medical Response (AMR) under a performance contract for Emergency Transport Services (ETS).
- Because of changes in the way other municipalities in the East Valley are delivering ETS services and issues with AMR, the levels of service have declined.
- Because of legal and regulatory limitations, the Town's options to address the problems are very restricted:
 - Continue current contract with AMR;
 - Terminate existing contract, AMR would operate under State regulated standards; or
 - Establish a Queen Creek ETS program.





What Does This Discussion Include?

1. Emergency Transportation Services (ETS) or ambulance services
2. Legal and contractual requirements/limitations
3. Regional changes
4. Level of service from current contractor
5. Community expectations
6. Options

Queen Creek ETS History

- Regional Emergency Transportation Service (RETS) Agreement between Mesa, Gilbert QC, AJ and SWA. (Ended in 2015)
- RETS Dissolved and replaced with Regional Agreement between Gilbert, Queen Creek and AMR. (2015-2021)
- TOQC obtained CON in 2016.
- Gilbert withdrew from agreement leaving only QC and AMR in contract for ETS. (July 2021)



ETS Service Changes

- Municipal assumptions of service delivery
- TOQC is the only East Valley entity still exclusively contracted with private provider
- Reduction in service levels
- Contractor facing staffing shortages



AMR Comments on Service Changes

CON Hearing Documents:

2017-EMS-0104-DHS

EMS Number 0283

Initial witness and exhibit list of AMR-Rural/Metro CON Holder Interveners

The following comments were made by AMR, as a matter of court record, to contest an Applicant who applied for a CON in an area that would be in competition with AMR-Rural/Metro CON



CON Hearing Documents

“Maintaining the improvements that the AMR organization has brought to Maricopa County requires significant volume, both from the immediate / 911 and non-immediate / 911 systems”.



CON Hearing Documents

“The Applicant’s proposed operations will also negatively impact the AMR organization’s ability to provide support for disaster/mass casualty responses (both as a backup provider and as the front line provider).

It will negatively impact the AMR organization’s ability to quickly step in and help when other CON holders fail, withdraw or simply find themselves unable to provide services.

Communities such as Queen Creek, Gilbert, and at least the northern portion of Pinal County will also feel the negative impact due to the AMR CON Holders having to modify their operations.”



Current Issues

- Reduction in number of units available for coverage – from over 30 units to 2.5 units
- Challenges with staffing and retention
- Resultant overall reduction in service delivery



Current Issues (cont.)

- Periods of time when there are no AMR ambulances available in Queen Creek. Increasing response times
- Experience levels of staff have trended downward
- Staff being brought in from other areas who are unfamiliar with the 911 system.





Regulatory/Legal Limitations

- Cannot contract with another municipality for full-time service
- Only provider with Certificate of Necessity (CON) to cover all of QC other than QCFM is AMR
- CON response time requirements vs Contract
- AMR not required to enter into contract

Performance Contract Required Response Times

Code 3 = 911 call with lights and siren

Code 2 = 911 call without lights and siren

Measured = Monthly **Area** = Queen Creek

7. Response Time
 - a. Response Time: Minimum compliance is achieved when 90% or more of responses for Code 3 and Code 2 calls combined meet the specified Cumulative Response Time requirement. For calls in which the response code changes during response, the 90% requirement applies, as defined in Section 7i. For the avoidance of doubt, each Response Zone, will be evaluated for Response Time compliance as set forth in this Agreement.



Performance Contract Required Response Times (cont.)



- b. To be in compliance for **Code 3** calls, the Contractor must be able to place an Ambulance on the scene of each presumptively life-threatening emergency **within 8 minutes 59 seconds (Cumulative Response Time) for not less than 90% of the time**. For clarity, 9 minutes 00 seconds is late.

- c. To be in compliance for **Code 2** calls, the Contractor must be able to place an Ambulance on the scene of each non-life-threatening emergency **within 14 minutes 59 seconds (Cumulative Response Time) for not less than 90% of the time**. For clarity, 15 minutes 00 seconds is late.

AMR CON Required Response Times

(Response times as regulated by AZDHS)

Measured = **Yearly**

Area = **All of Maricopa County**

3. Response Times:

I. *The Cities and Towns in the certificated service area in which CON holder is the primary provider of 9-1-1 ambulance service:*

- A. **10 minutes on 80%** of all ambulance calls
- B. **15 minutes on 90%** of all ambulance calls
- C. **20 minutes on 97%** of all ambulance calls

II. *Otherwise: [applies if no performance contract with AMR]*

- A. **10 minutes on 50%** of all ambulance calls
- B. **15 minutes on 75%** of all ambulance calls
- C. **20 minutes on 90%** of ambulance calls
- D. **30 minutes on 97%** of all ambulance calls



Renegotiation or Termination of AMR Contract

- Queen Creek have very little leverage to renegotiate the AMR contract as noted above.
- Individuals, not Queen Creek pays AMR under the Contract.
- Queen Creek (and AMR) have the ability to terminate the contract upon 90 days notice.
- Queen Creek can terminate the Contract for default on 30 days notice.
- **If the contract is terminated without a replacement ETS, AMR would continue to provide ETS under its CON and its lower levels of service.**



ETS Delivery Options

1. Continue under AMR performance contract
2. Terminate AMR contract and AMR provides service under State regulated CON
3. Establish Emergency Medical Transportation Service program delivered by QCFM



Potential QCFM ETS Program

- 24/7 coverage with flexible deployment potential
- Staffed with civilian employees of QCFM
- Program will help offset its cost but will not pay for itself



Ambulance Apparatus

- Four Units required for coverage
- Reserve units required to provide flexible deployment and assure coverage for maintenance or other downtimes.
- 2 to 1 ratio considered appropriate for front line to spare apparatus



Ambulance Deployment

- Four Units in service 24 hours
7 days a week (minimum coverage)
- Fifth unit available for deployment on
30 minutes notice
- Sixth unit in reserve status for
maintenance and other downtime
needs



New Expenses



Personnel (26 FTEs) <ul style="list-style-type: none">• 12 Paramedics• 12 Emergency Care Technicians• 1 Compliance Office• 1 Billing Technician	\$2.5M
All Other Operating (Supplies, Fuel, etc.)	<u>\$0.2M</u>
Subtotal - Operating	\$2.7M
Apparatus and Related Equipment (5 Ambulances)	\$1.9M

Annual Financial Performance



Reimbursement*		
Billings	\$3.0M	
Less Settlements and Bad Debts	<u>(\$0.8M)</u>	\$2.2M
Expenses		
Direct	\$2.7M	
Depreciation	<u>\$0.2M</u>	<u>\$2.9M</u>
Net		(\$0.7M)

- Collection of payment for services varies by type of patient and nature of the incident. Ambulance transports are highly related to population. We are estimating 2,000 transports annually.

Implementation Timeline

- **March/April 2022.** Order ambulances
- **January 2023.** Hiring process for administrative staff
- **April 2023.** Hiring Process for field personnel
- **June 2023.** Personnel Training and orientation
- **July 2023.** Begin operations (pending arrival and up-fitting of ambulances)



Recommended Motion

- Move to purchase five (5) ambulance units along with related equipment including; gurney and patient loading system, mobile and portable radios, and mobile computer terminal (MCT) in an amount not to exceed \$1,975,527 through Cooperative Purchase Contract vendors and to authorize the Town Manager to finalize and execute the necessary contracts.





Questions?