

# **ALS Subcommittee**

## **Medic One/EMS Levy Planning**

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Tuesday, May 8, 2018

1:00 PM – 3:00 PM

2100 24<sup>th</sup> Avenue S, Community Room A  
Seattle, WA 98144

Chair: Keith Scully, Councilmember, City of Shoreline

### **Agenda**

- **Opening Remarks & Introductions** 1:00-1:15 (15 min.)
  - **Recap of Subcommittees** 1:15 -1:25 (10 min.)
  - **Review of ALS Costs** 1:25 -2:45 (80 min.)
    - 2017 Actual Costs
    - Proposed ALS Costs – Operating, Equipment, Reserves, and Contingencies
    - Preliminary ALS 2020-2025 Financial Plan
  - **Review of ALS Subcommittee Report to Taskforce** 2:45-2:55 (10 min.)
  - **Next Steps** 2:55-3:00 (5 min.)
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### **Future Advanced Life Support (ALS) Subcommittee Meeting Schedule**

Tuesdays, 1:00 p.m. – 3:00 p.m.

June 12, 2018	2100 24 <sup>th</sup> Ave. S (Community Room A) Seattle, WA 98144
July 10, 2018	2100 24 <sup>th</sup> Ave. S (Community Room A) Seattle, WA 98144
August 14, 2018	2100 24 <sup>th</sup> Ave. S (Community Room A) Seattle, WA 98144
September 11, 2018	2100 24 <sup>th</sup> Ave. S (Community Room A) Seattle, WA 98144
October 9, 2018	2100 24 <sup>th</sup> Ave. S (Community Room A) Seattle, WA 98144*

\*Meeting location – tentative

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## **EMS STAKEHOLDER PRINCIPLES**

As regional EMS Stakeholders, we are committed to these fundamental principles:

**1. REGIONAL SYSTEM**

The Medic One/EMS system is based on partnerships that are built on regional, collaborative, cross-jurisdictional coordination. This seamless cohesion allows the system to excel in pre-hospital emergency care.

**2. TIERED MEDICAL MODEL**

The medical model, with its tiered system and intensive dispatch, EMT and paramedic training and protocols, has led to our success in providing high quality patient care throughout the region.

**3. PROGRAMS & INNOVATIVE STRATEGIES**

State of the art science-based strategies and programmatic leadership have allowed us to meet the needs and expectations of our residents and our system.

**4. FOCUS ON COST EFFECTIVENESS AND EFFICIENCIES**

The Medic One/EMS system has maintained financial viability and stability due to the region's focus on operational and financial efficiencies, effectiveness and cost savings.

**5. MAINTAINING AN EMS LEVY AS FUNDING SOURCE**

The EMS levy is a reliable and secure source of funding our world-renowned system.

## **ALS SUBCOMMITTEE GUIDING PRINCIPLES**

As members of the ALS Subcommittee, we remain committed to these fundamental principles:

**1. Maintain ALS as the funding priority.**

ALS will remain the primary recipient of the Medic One/EMS Levy and the first commitment for funding within the Medic One/EMS system.

**2. ALS' primary focus is patient-centric.**

Decisions regarding ALS services will be with a view to patient outcomes.

**3. Full unit funding will be made available.**

Full reimbursement for all eligible ALS costs.

**4. Resources will be used efficiently.**

ALS will maintain high-quality services in our communities, be responsive to emergent needs and do so with reasonable costs evaluated through system-wide analysis.

**5. Use data and sound practices in evaluating service needs.**

Conduct analysis in alignment with sound practices.

# MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

## Future Meetings

### EMS Advisory Task Force:

✓ Thursday, January 18, 2018	1pm – 3 pm	Tukwila Community Center
<b>Wednesday, May 30, 2018</b>	<b>1 pm – 3 pm</b>	<b>Tukwila Community Center</b>
Tuesday, July 31, 2018	1 pm – 3 pm	2100 Building Community Room B
Tuesday, October 16, 2018	1 pm – 3 pm	Tukwila Community Center

### SUBCOMMITTEES:

#### **Advanced Life Support (ALS)** - Tuesdays from 1:00 – 3:00, South Seattle location

✓ February 15, 2018		Renton Fire Station 14
✓ March 15, 2018 (1:30 – 3:30)		2100 Building Community Room B
✓ April 10, 2018		2100 Building, Community Room A
➔ May 8, 2018		2100 Building, Community Room A
June 12, 2018		2100 Building, Community Room A
July 10, 2018		2100 Building, Community Room A
August 14, 2018		2100 Building, Community Room A
September 11, 2018		2100 Building, Community Room A
October 9, 2018		TENTATIVE - 2100 Building

#### **Basic Life Support (BLS)** - Thursdays from 1:00 – 3:00, various Renton sites

✓ February 8, 2018		Renton Fire Station 14
✓ March 8, 2018		Renton Fire Station 14
✓ April 5, 2018		Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
✓ May 3, 2018		Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
June 7, 2018		Renton Fire Station 14
July 12, 2018		Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
August 9, 2018		Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
September 6, 2018		Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
October 4, 2018		TBD

#### **Regional Services (RS)** - Tuesdays from 1:00 – 3:00, Renton location

✓ February 20, 2018		City of Seattle Joint Training Facility
✓ March 20, 2018		Renton Highlands Library conference room
✓ April 17, 2018		Renton Highlands Library conference room
May 15, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
June 19, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
July 17, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
August 21, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
September 18, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>

#### **Finance** - Tuesdays or Thursdays 1:00 – 3:00, Kirkland location

✓ February 1, 2018 (Thursday)		Renton Fire Station 14 (1900 Lind Ave SW)
<b>May 17, 2018 (Thursday)</b>	<b>12:00 – 2:00</b>	<b>Peter Kirk Room, Kirkland City Hall</b>
July 24, 2018 (Tuesday)		Peter Kirk Room, Kirkland City Hall
September 25, 2018 (Tuesday)		Peter Kirk Room, Kirkland City Hall

**Bold = recently revised**

## **LOCATIONS:**

Renton Fire Station 14  
1900 Lind Ave SW, Renton

Phone: (425) 430-7000

City of Seattle Joint Training Facility  
9401 Myers Way South, Seattle

Phone: (206) 386-1600

The 2100 Building  
2100 24th Ave S, Seattle

Phone: (206) 407-2100

Renton City Hall  
1055 South Grady Way, Renton

Phone: (425) 430-6400

Kirkland City Hall  
123 5<sup>th</sup> Ave, Kirkland, WA

Phone: (425) 587-3000

Renton Highland Library Conference Room  
2801 NE 10<sup>th</sup> Street, Renton

Phone: (425) 277-1831

Tukwila Community Center  
12424 42<sup>nd</sup> Ave South, Tukwila

Phone: (206) 768-2822

**EMS Advisory Task Force**  
**Medic One/EMS Levy Reauthorization Calendar**

**2018**

**JANUARY**

S	M	T	W	Th	F	S
	H1	2	3	4	5	6
7	8	9	0	11	12	13
14	H15	16	17	IF 18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**FEBRUARY**

S	M	T	W	Th	F	S
				FIN 1	2	3
4	5	6	7	BLS 8	9	10
11	12	ALS 13	14	15	16	17
18	19	RS 20	21	22	23	24
25	26	27	28			

**MARCH**

S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	BLS 8	9	10
11	12	13	14	ALS 15	16	17
18	19	RS 20	21	22	23	24
25	26	27	28	29	30	31

ALS - revised

**APRIL**

S	M	T	W	Th	F	S
1	2	3	4	BLS 5	6	7
8	9	ALS 10	11	12	13	14
15	16	RS 17	18	19	20	21
22	23	24	25	26	27	28
29	30					

**MAY**

S	M	T	W	Th	F	S
		1	2	BLS 3	4	5
6	7	ALS 8	9	10	11	12
13	14	RS 15	16	FIN 17	18	19
20	21	22	23	24	25	26
27	H28	29	TF 30	31		

Finance and Task Force meetings - revised

**JUNE**

S	M	T	W	Th	F	S
					1	2
3	4	5	6	BLS 7	8	9
10	11	ALS 12	13	14	15	16
17	18	RS 19	20	21	22	23
24	25	26	27	28	29	30

**JULY**

S	M	T	W	Th	F	S
1	2	3	H4	5	6	7
8	9	ALS 10	11	BLS 12	13	14
15	16	RS 17	18	19	20	21
22	23	FIN 24	25	26	27	28
29	30	TF 31				

**AUGUST**

S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	BLS 9	10	11
12	13	ALS 14	15	16	17	18
19	20	RS 21	22	23	24	25
26	27	28	29	30	31	

**SEPTEMBER**

S	M	T	W	Th	F	S
						1
2	H3	4	5	BLS 6	7	8
9	10	ALS 11	12	13	14	15
16	17	RS 18	19	20	21	22
23	24	FIN 25	26	27	28	29
30						

**OCTOBER**

S	M	T	W	Th	F	S
	1	2	3	BLS 4	5	6
7	H8	ALS 9	10	11	12	13
14	15	TF 16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**NOVEMBER**

S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	H12	13	14	15	16	17
18	19	20	21	H22	H23	24
25	26	27	28	29	30	

**DECEMBER**

S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	H25	26	27	28	29
30	31					

Econ forecasts: 3/7-3/14; 7/18-7/27; 8/17-8/27

3/30/2018

## ALS Operating allocation -- new proposed structure

DRAFT Presentation of amounts in new structure

5/5/18

DRAFT

### 2017 Actual Costs

<i>Units</i>	<b>4</b>	<b>9</b>	<b>3</b>	<b>3</b>	<b>19</b>	<b>7</b>	<b>26</b>
<b>SUMMARY</b>	Bellevue	KCM1/VIFR	Shoreline	Redmond	<b>SUB-TOTAL</b>	Seattle*	<b>TOTAL</b>
Unit Costs	\$ 7,330,133	\$ 16,169,602	\$ 5,295,286	\$ 5,207,525	\$ <b>34,002,546</b>	\$ 12,850,998	\$ <b>46,853,544</b>
Program/Supv	\$ 1,223,016	\$ 3,309,772	\$ 1,437,243	\$ 1,129,123	\$ <b>7,099,154</b>	\$ 1,476,263	\$ <b>8,575,417</b>
System	\$ 509,428	\$ 959,772	\$ 140,826	\$ 340,734	\$ <b>1,950,760</b>	\$ 2,421,437	\$ <b>4,372,197</b>
<b>TOTAL</b>	<b>\$ 9,062,577</b>	<b>\$ 20,439,146</b>	<b>\$ 6,873,355</b>	<b>\$ 6,677,383</b>	<b>\$ 43,052,461</b>	<b>\$ 16,748,698</b>	<b>\$ 59,801,159</b>
2017 Allocation	\$ 9,262,500	\$ 20,840,625	\$ 6,946,875	\$ 6,946,875	\$ <b>43,996,875</b>	\$ 16,209,375	\$ <b>60,206,250</b>
Difference	\$ (199,923)	\$ 401,479	\$ 73,520	\$ 269,492	\$ <b>944,414</b>	\$ (539,323)	\$ <b>405,091</b>
Percent Difference	-2.2%	-1.9%	-1.1%	-3.9%	<b>-2.1%</b>	3.3%	<b>-0.7%</b>
<b>Per Unit Costs</b>	<b>\$ 2,265,644</b>	<b>\$ 2,271,016</b>	<b>\$ 2,291,118</b>	<b>\$ 2,225,794</b>	<b>\$ 2,265,919</b>	<b>\$ 2,392,671</b>	<b>\$ 2,300,045</b>
<b>Per Unit Variance \$</b>	<b>\$ (34,400)</b>	<b>\$ (29,028)</b>	<b>\$ (8,926)</b>	<b>\$ (74,250)</b>	<b>\$ (34,126)</b>	<b>\$ 92,627</b>	
Variance from total	-1.5%	-1.3%	-0.4%	-3.2%	<b>-1.5%</b>	4.0%	

#### Unit variance for King County Agencies

High	\$ 2,291,118
Low	\$ 2,225,794
Variance	\$ 65,324

\*Seattle comparison to allocation for comparative purposes only. Seattle units, on average, have more calls.

# Advanced Life Support Services

## 2014-2019 Levy ALS Funding Allocations

- How** Funding for ALS allocation currently based on a per unit allocation. Each agency's funding is a set amount multiplied by the # of unit they provide.
- Why** This was established as a way to be fair and allow each agency to manage the funds based on their particular cost structure and needs. Some agencies have higher or lower costs in different areas and it was believed that a unit allocation would smooth these out when all costs were taken into consideration.
- Types** **Operating Allocation** -- ordinary yearly costs of providing services divided into three areas: labor costs, supplies and services, indirect and overhead costs  
**Equipment Allocation** -- vehicles, equipment, smaller capital improvements
- What** Fully fund all eligible ALS costs. *Eligible costs* include costs required to operate ALS units (does not include ALS support of non-ALS costs).

ALS Operating Allocation	2017 Allocation	Inflator
<b>Labor Costs:</b> Includes salaries and overtime for paramedic, Medical Services Officers (MSOs/Field Supervisors), Paramedic Students, Office MSOs, ALS Chief and support staff. Includes medical direction.	\$ 1,939,132	CPI-W + 1%
<b>Other Costs:</b> Includes pharmaceuticals, medical supplies, uniforms, dispatch, communications/radio, vehicle maintenance & fuel, facility costs, training, informational technology, and administrative expenses.	\$ 203,715	various [add some level of detail]
<b>Indirect/Overhead Costs:</b> Includes human resources, payroll, legal, risk and other indirect expenses	\$ 164,298	CPI-W + 1%
<b>TOTAL OPERATING ALLOCATION PER UNIT (2017)</b>	<b>\$ 2,307,145</b>	Compound

ALS Equipment Allocation	2017 Allocation	Inflator
<b>Equipment costs including medic, MSO &amp; staff vehicles, defibrillators, stretchers, radios, etc.</b>	\$ 90,825	Vehicle PPI

<b>TOTAL ALLOCATION PER UNIT</b>	<b>\$ 2,397,970</b>
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## Advanced Life Support Services

2020-2025 Levy Initial Proposed ALS Allocation

## PROPOSED ALLOCATION

### Programs outside of ALS Allocation:

- Funding for ALS support and work on non-ALS service areas including BLS agencies and other EMS programs.
- System wide initiatives such as wellness and vulnerable population initiatives that support ALS Providers and
- Additional support for performance measures and support of ALS providers use of ESO related to ALS calls.

### Allocation:

- Distribute Unit, Program/Supervisory, and Equipment portion of allocation on a per unit basis
- Include system costs in ALS contracts and reimburse based on actual expenditures

ALS Operating Allocation	Costs in 2017\$	Inflator
<b>Unit Cost Allocation</b> -- costs related to direct paramedic services (paramedics, medical supplies, pharmaceuticals, vehicle and facility operating and maintenance costs, communications and other costs associated with direct paramedic services).	\$1,816,862	Mixed Primarily CPI-W +1%*
<b>ALS Program Administration Allocation</b> -- costs associated with management, administration, and supervision of direct paramedic services.	\$448,702	Mixed Primarily CPI-W +1%*
<b>Total Unit &amp; Admin/Supv Costs</b>	<b>\$2,265,564</b>	
<b>ALS System Cost Allocation</b> -- system wide allocation to cover highly variable costs such as paramedic students, dispatch; also included medical direction; could, but does not include costs associated with retirements and transition costs for EMTs becoming paramedics in other agencies. Expressed in a per unit #.	\$199,989	Mixed Primarily CPI-W +1%*
<b>Total Cost per Unit (in 2017\$)</b>	<b>\$2,465,552</b>	Mixed

*\*Proposing simplifying inflators as appropriate. Medical Supplies/Pharmaceuticals: due to variance from indicator selected and dollar value relative to unit allocation, propose simplifying and using CPI.*

ALS Equipment Allocation	Inflator
<b>Equipment costs</b> including medic, MSO & staff vehicles, defibrillators, stretchers, radios, etc. Added \$5,221 for power load systems.	Vehicle PPI
	\$96,773

<b>TOTAL ALLOCATION PER UNIT</b>	<b>\$ 2,562,325</b>
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## Advanced Life Support Services

### 2020-2025 Proposed ALS Contingencies and Reserves

## PROPOSED CONTINGENCIES/ RESERVES

HISTORIC ALS USE OF RESERVES	2008-2013	2014-2019 Est
<b>ALS Operating</b> (increased costs, excess PTO, paramedic student costs and increased operating costs including mid levy adjustment of the ALS allocation) <sup>1</sup>	\$1,731,306	\$1,200,234
<b>ALS Equipment</b> (load systems for power costs & vehicle costs)	\$932,046	\$797,885
<b>ALS Capacity Reserves</b> (facility upgrades and enhanced ALS capacity)	\$465,707	\$360,000
<b>ALS Risk Abatement Reserve</b> (retirement liability and FLSA settlements) <sup>2</sup>	\$3,308,454	\$1,020,136
<b>TOTAL</b>	<b>\$4,706,207</b>	<b>\$2,178,021</b>
<sup>1</sup> Funding for paramedic students and the mid-levy increase were included in the ALS allocation and are not shown in this chart. Total estimated including increases in allocation is \$11,296,906.		
<sup>2</sup> Risk abatement reserve now included as part of King County required Rainy Day Reserve funded at 90-days operating expenses.		

### Proposed Contingencies and Reserves -- 2020 to 2025 Levy

ALS Operating Contingencies	2020-2025 Amount	Level of Approval
<b>Contingencies</b> -- funds set aside to cover the most usual costs exceeding allocations including paid time off over amount allocated, excess retirement.		EMS Director to x % above allocation;
<i>Proposed change in approval process: use of contingency funds under x% of agencies allocation can be approved by Division Director and reported to EMSAC Financial and EMSAC.</i>	<b>\$200,000</b>	report to EMSAC

ALS Reserves - reviewed and approved by EMSAC	2020-2025 Amount	Level of Approval
<b>ALS Equipment Reserve</b> -- covers unplanned costs related to equipment including new equipment added (such as the power load systems, decreased lifespans or early replacement of equipment, or increased costs from manufacturers).	<b>\$1,000,000</b>	KC Council Appropriation & EMSAC
<b>ALS Capacity Reserve</b> -- Includes costs for facility renovations to support moving units rather than adding new units, ability to add temporary unit to address specific conditions (such as bridge closures), and potential new units.		KC Council Appropriation & EMSAC
- Renovations and temporary capacity increases	<b>\$1,200,000</b>	
- Place holder for new units	<b>\$11,467,915</b>	
<b>TOTAL:</b>	<b>\$13,667,915</b>	

## Advanced Life Support Services

5/6/2018

Modeling "Placeholder" for Potential New Units during 2020-2025 Levy

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Year of Levy # of Units	1	2	3	4	5	6	
		0.165	0.500	0.500	0.665	1.000	
	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>	<b>2020-2025</b>
Unit Cost		\$ 353,709	\$ 1,112,897	\$ 1,155,521	\$ 1,593,859	\$ 2,483,784	\$ 6,699,770
Program Cost		\$ 87,354	\$ 274,847	\$ 285,373	\$ 393,628	\$ 613,408	\$ 1,654,609
New Students	\$ 272,465	\$ 660,736		\$ 305,279	\$ 738,745		\$ 1,977,225
Equipment (first year)		\$ 669,800					\$ 669,800
Equipment allocation			\$ 112,338	\$ 115,270	\$ 118,117	\$ 120,786	\$ 466,511
<b>TOTAL</b>	<b>\$ 272,465</b>	<b>\$ 1,771,599</b>	<b>\$ 1,500,081</b>	<b>\$ 1,861,443</b>	<b>\$ 2,844,349</b>	<b>\$ 3,217,979</b>	<b>\$ 11,467,915</b>

Assumes 12-hr unit in 2021 is new unit and 12 hour in 2024 adds 12-hours to existing unit in 2024

Based on proposed costs inflated by current economic indicators

### Capacity Reserves (Placeholder for potential new ALS units)

2014 to 2019 Levy	\$ 2,291,000	.5 unit placeholder beginning late 4th year of levy period
2020 to 2025 Levy	\$ 11,467,915	.5 unit year 2nd year of levy + .5 unit in 5th year
Change	\$ 9,176,915	

# Advanced Life Support Services

5/6/2018

ALS FUNDING -- 2014-2019 Inflated to 2020-2025 Initial Proposed

## Prelim Status Quo

## Initial Proposed

## Difference

(In Millions)

ALS Funding Categories	2014-2019	2020-2025	Difference
ALS Operating Allocation	\$258.8	\$328.2	\$69.5
ALS Equipment Allocation	\$10.2	\$11.5	\$1.4
ALS Contingencies	\$1.0	\$3.0	\$2.0
Reserves	\$3.4	\$4.7	\$1.3
<b>TOTAL</b>	<b>\$273.3</b>	<b>\$347.5</b>	<b>\$74.1</b>

2014-2019	2020-2025	Difference		Status Quo	Initial Proposed	Difference
				2020-2025	2020-2025	2020-2025
\$258.8	\$351.3	\$92.5		\$328.2	\$351.3	\$23.0
\$10.2	\$11.9	\$1.8		\$11.5	\$11.9	\$0.4
\$1.0	\$1.2	\$0.2		\$3.0	\$1.2	(\$1.8)
\$3.4	\$13.7	\$10.3		\$4.7	\$13.7	\$9.0
<b>\$273.3</b>	<b>\$378.1</b>	<b>\$104.8</b>		<b>\$347.5</b>	<b>\$378.1</b>	<b>\$30.6</b>

Reserve Components	2014-2019 <sup>1</sup>	2020-2025	Difference
Operating <sup>2</sup>	\$1.2	\$1.7	\$0.5
Equipment	\$0.8	\$1.1	\$0.3
Capacity	\$0.4	\$0.5	\$0.1
Risk (Rainy Day) <sup>3</sup>	\$1.0	\$1.4	\$0.4
Placeholder for new units			
<b>ALS Subtotal</b>	<b>\$3.4</b>	<b>\$4.7</b>	<b>\$1.3</b>

2014-2019 <sup>1</sup>	2020-2025	Difference		2020-2025	2020-2025	Difference
\$1.2	\$0.0	(\$1.2)		\$1.7	\$0.0	(\$1.7)
\$0.8	\$1.0	\$0.2		\$1.1	\$1.0	(\$0.1)
\$0.4	\$1.2	\$0.8		\$0.5	\$1.2	\$0.7
\$1.0	\$0.0	(\$1.0)		\$1.4	\$0.0	(\$1.4)
\$0.0	\$11.5	\$11.5		\$0.0	\$11.5	\$11.5
<b>\$3.4</b>	<b>\$13.7</b>	<b>\$10.3</b>		<b>\$4.7</b>	<b>\$13.7</b>	<b>\$9.0</b>

<sup>1</sup> 2014-2019 Reserve Components include estimated Use of Reserves; see below for budgeted reserves

<sup>2</sup> Initial proposed moves Operating Reserves to ALS contingencies

<sup>3</sup> Rainy Day moved to required KC Rainy Day Reserve funded at 90-days of operating costs

## Budgeted/Proposed Reserves

Reserve Components	2014-2019	2020-2025	Difference
Operating/Contingency	\$1.0	\$1.2	\$0.2
Equipment	\$0.5	\$1.0	\$0.5
Capacity	\$1.1	\$1.2	\$0.1
Placeholder for new units	\$2.3	\$11.5	\$9.2
Risk (Rainy Day)**	\$1.5	\$0.0	(\$1.5)
<b>ALS Subtotal</b>	<b>\$6.3</b>	<b>\$14.9</b>	<b>\$8.5</b>

# MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

DRAFT

## ALS Subcommittee Report to the Finance Subcommittee 5/17/18

### Accomplishments to Date:

- Members were oriented to levy planning process, milestones, roles and responsibilities of members and expectations.
- Endorsed items to be reviewed as part of the Work Plan, and ALS Subcommittee-specific principles to guide Subcommittee decision making.
- Reviewed in depth the standard medic unit allocation, including its history, main components and issues experienced; compared costs and trends across agencies.
- Analyzed EMS system trends (Seattle & King County) and ALS demand projections to anticipate future demand including:
  - Specific criteria used in assessing medic unit need
  - Growth in population in comparison to call volumes and response times
- Identified strategies to pursue to develop cost efficiencies and overall system effectiveness.

### Principles leading the ALS Subcommittee:

- Maintain ALS as the funding priority
- ALS's primary focus is patient-centric
- Full unit funding will be made available
- Resources will be used efficiently
- Use data and sound practices in evaluating service needs

### Decisions made by the Subcommittee:

1. The unit allocation remains an appropriate methodology for determining ALS costs.
2. Made small changes to the allocation to help address issues experienced by providers concerning variability of some costs and sufficient funding for program oversight and support.
3. The 2020 preliminary baseline unit allocation is proposed at \_\_\_, and will be inflated appropriately over the span of the levy. This preliminary funding level will require further refinement.
4. In order to protect the system, the Subcommittee supported setting aside funds as a "place holder" in the Financial Plan, should new units need to be added over the span of the 2020-2025 levy.
5. Identified appropriate levels of reserves and contingencies for the next levy span; fine-tuned usage and access requirements.

### Next Steps:

- Present Subcommittee update at the May 30, 2018 *EMS Advisory Task Force* meeting
- Proceed with tasks as directed by the *EMS Advisory Task Force* at May meeting
- Refine baseline unit allocation, placeholder costing scenario and reserves; incorporate into Financial Plan
- Prepare recommendations for July 31<sup>st</sup> *EMS Advisory Task Force* meeting