

Finance Subcommittee

Medic One/EMS Strategic Plan & Levy Reauthorization

September 11, 2024
1:00 PM - 3:00 PM

Bellevue City Hall, Room 1E-120
450 110th Ave NE, Bellevue

Chair: Lynne Robinson, Mayor of Bellevue

Agenda

- **Opening Remarks & Introductions** (5 minutes)
- **Updated Economic Forecast** (20 minutes)
- **Reserves Analysis - What If Scenarios** (40 minutes)
- **2026-2031 Initial Proposed Recommendations** (40 minutes)
 - Subcommittees' Programmatic Recs
 - Updated Financial Plan
- **Finance Subcommittee Recommendations** (10 minutes)
 - Programmatic Recommendations and funding
 - Reserves and contingencies funding levels
 - Updated Initial Proposed Financial Plan
- **Next Steps** (5 minutes)

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MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

ALS Subcommittee Report to the Finance Subcommittee (9/11/2024)

(Reflects decisions made at 6/12/24 ALS meeting)

Recommendations made by the Subcommittee:

1. **Continue using the ALS allocation** to determine ALS costs.
 - The allocation remains an appropriate methodology to determine ALS costs.
 - It is designed to include eligible ALS-related operating expenses to prevent cost-shifting to providers.
 - This methodology creates an even playing field and acknowledges that every agency has different cost structures and cost pressures.

2. **The 2026 proposed ALS allocation is forecast at \$4.1 million** and will be inflated appropriately over the span of the levy.
 - Annually inflate the Unit, Supervisory and System allocations at CPI-W + 1%, and the Equipment allocation by the appropriate vehicle PPI.

3. **Establish a “place holder” of approximately \$15.8 million** in the Financial Plan to potentially fund a 12-hour unit beginning the fall of 2028 and an additional 12-hours in the fall of 2030.
 - This will help protect the system should new units need to be added over the span of the 2026-2031 levy.

4. **Continue to use reserves and contingencies** to cover costs that fall outside the allocation. Simplify ALS reserves into two categories:
 - a. ALS Supplemental Capacity Reserves, which includes the unit “placeholder” and funding for paramedic facility moves and improvements; and
 - b. ALS Equipment Reserves.

5. **Continue contracting with Sky Valley Fire** (Snohomish County Fire District 26) to provide ALS services to Skykomish/KCFD 50 for the 2026-2031 levy span.

6. **Continue support for the two ALS-based programs** that support the region.
 - a. Sufficiently fund the ALS Support for BLS Activities program without supplemental BLS Training & QI monies (included in BLS budget).
 - b. Continue funding paramedics to train paramedic students at Harborview’s Paramedic Training program (included in Regional Services budget).

MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

BLS Subcommittee Report to the Finance Subcommittee (9/11/2024)

(Reflects decisions made at the 8/15/24 BLS meeting)

Recommendations made by the Subcommittee:

1. **INCREASE total BLS funding** by at least \$3 million in the first year of the levy with the opportunity to increase up to \$5 million in the first year if that can be done within a 26.5 cent levy rate.
 - a. 60% of this funding will go into the BLS Basic Allocation.
 - b. 40% of this funding will go into Mobile Integrated Healthcare (MIH).
2. **INCORPORATE** the BLS Training & QI program funding into the BLS Basic Allocation. Remove requirements that this funding must be spent on training and QI activities.
3. **DISTRIBUTE BLS funding** using a more equitable distribution methodology of 60% call volume/40% AV. Do not reset the first year of levy funding.
4. **INFLATE costs annually** at CPI-W + 1% and distribute that BLS funding increase using the 60% call volume/40% AV methodology.
5. **SUPPORT mental wellness and ERSJ/DEI efforts** proposed by the King County Fire Chiefs Association.
6. **DEVELOP exceptions for the use of MIH restricted funds** for those agencies unable to fully expend their MIH funding.

MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

Regional Services Subcommittee Report to the Finance Subcommittee (9/11/24)

(Reflects decisions made at the 6/20/24 Regional Services meeting)

Recommendations made by the Subcommittee:

1. **CONTINUE delivering programs** that provide essential support to the system.
Such programs and services focus on superior medical training, oversight and improvement, innovation and effectiveness, and strengthening community interactions and partnerships.

2. **ENHANCE programs** to meet regional needs:
 - Expand regional Initial EMT training
 - Renew Telephone Referral Program
 - Convert STRIVE into an ongoing regional service

3. **MAINTAIN AND DEVELOP Strategic Initiatives** that leverage previous investments made by the region to improve patient care and outcomes:
 - Vulnerable Populations Initiative → ECHO
 - AEIOU Quality Improvement Initiative → PRIME
 - Emergency Medical Dispatch
 - King County Fire Chiefs Association Mental Wellness & ERSJ/DEI proposals