

Sturgis Ambulance





GOAL

My goal is to show you all of the pieces of the puzzle involved in making an ambulance service available in Sturgis and Meade County.



- SKILL LEVEL
COMPARISON

SKILLS COMPARISON

Medical Profession	IV's/ IO's	Read 12 Lead & make medication decision	Pacing	Intubate	Needle Decompression	Medication selection and administer without doctor's orders	Change settings on a ventilator	Delivery of a baby	CPAP & BIPAP	Surgical Airway	Start Oxygen without an order	Pass Medication	Work in uncontrolled settings in weather outside	Average Wage at Monument and Sturgis Ambulance
CNA														\$20.56
Sturgis EMT											X	X	X	\$15.00
Registered Nurse - With no further training	X											X		\$32.29
Respiratory Technician				X			X		X	X	X			\$38.70
Doctor	X	X	X	X	X	X	X	X	X	X	X	X		101.46
Sturgis Paramedic	X	X	X	X	X	X	X	X	X	X	X	X	X	\$21.00

Sturgis McDonald's Crew Member
Average - \$15.85

Common Cents Cashier
Average - \$14.75

Walmart
Average - \$15.00

CURRENT STAFFING

- 5 - Critical Care Paramedics
- 14 - Paramedics
- 1 - EMT - I99
- 1 - EMT - I85
- 1 - Advanced EMT
- 14 - EMTs
- 0 - Drivers
- 1 - LPN
- 2- Community Paramedics
- 1 - CHWs - (2 more graduating this week)
- 3 - Certified Ambulance Billers
- 3 - Certified Compliance Officers
- 2 - Certified Privacy Officers
- 2 - Certified Ambulance Finance Officers

EMPLOYEE STATUS:

FULL TIME:

6 (EMS only)

3 (Billing/CHW/EMS)

PART TIME:

1 (Billing)

PRN: 26

SCHEDULED EMPLOYEES PER DAY:

Ambulance:

6a-6p- 2

8a-4p- 2 - Not Holidays

6p-6a- 2 (usually same as 6a crew)

CHW-1

Billing/Director- 2-3



- Our staff will be moving to Class B State Retirement on July 1st with the other First Responders within the state.
- We have moved to a new schedule of 36 hours on, 108 hours off. This change came from the amount of time our staff has to travel, as 75% do not live in Sturgis.

CHANGES WE NEED

- We are struggling to find EMTs because they must attend 6 months of class, pass a national certification and only make \$15 an hour. This wage compares to the wage at any fast-food restaurant, gas station, or other similar entity. These EMTs will experience things that can affect them for the rest of their lives, physically and mentally.
- In addition, we are losing paramedics because of the wages. They can go to nursing school make more money and not have the responsibilities and they can work in a controlled environment.

CHANGES



RESPONSE

Call numbers increases
every year

Not all responses are
reimbursable

CALLS

2021 – 2022 - 2023

	2021	2022	2023
Patient Contacts	2236	2956	701
Transports	1480	927	369
Non-Transports	734	1759	215
Standby – Unpaid	18	25	6
Standby - Paid	4	5	2
SMRT	0	120	109

- We cannot bill a patient or their insurance when we do not treat/transport them, so as you can see, we respond to numerous calls that there is not reimbursement available.
- We did start billing for lift assists at \$250.00 but numerous end up at collection agencies.
- The SMRT Program is helping with some of the refusals that we go to numerous times, depending on the reason for calling.



THE COST
NECESSARY TO
SUPPLY AN
AMBULANCE THAT
IS NOT ALWAYS
COVERED BY
REIMBURSEMENT
THROUGH
INSURANCE
COMPANIES

STURGIS EMERGENCY SERVICES



COST OF A NEW AMBULANCE

REMOUNT
\$180,000.00

NEW
\$250,000.00

Mileage on current ambulances:

- S1 2017 Ford 153,078
- S4 2021 Ford 54,075
- S5 2012 Ford 51,880
- S6 2021 Ford 50,738
- S7 2001 Ford 39,029

Our command vehicles have all been used as patrol cars, resulting in increased mileage and wear, resulting in an increase of maintenance problems.

The ATV we received a grant for has been used for numerous rescues in the City and County.

We also received on a grant for training and equipment, and we are looking at other grants to assure we continue to get the equipment we can from the state.

COST OF ITEMS WITHIN THE AMBULANCE

Stretcher	\$23,429.25
LifePak Cardiac Monitor	\$39,869.22
Lucas	\$16,412.30
Peds Bag	\$2,500
Portable Suction	\$1,100
Medications	\$5,000
Spine Immobilization Devices and Stair chair	\$5,000
Radios	\$4,000
IV/IO needles	\$1,500
Red Bag	\$4,000
Other supplies such as airway, oxygen therapy, etc.	\$5,000
Total Cost	\$107,810.77 - PER AMBULANCE



SMRT PROGRAM

-PROGRAM EXPLANATION

-STAFFING

-FUNDING

-COMMUNITY PARAMEDIC



CHWSD

Community Health Worker
Collaborative of South Dakota

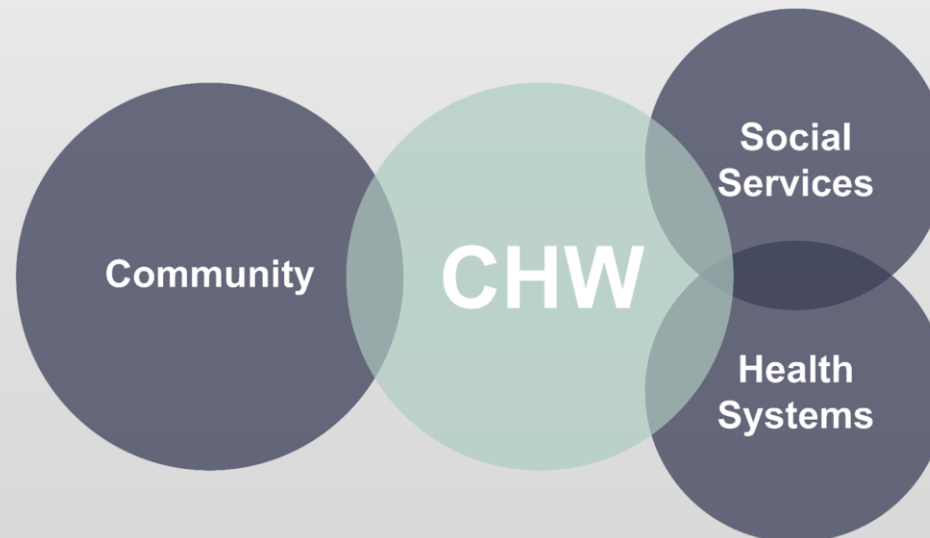
CHW Definition

A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.

This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

– *American Public Health Association, 2022*

**BRIDGING
THE GAP**



Program:

- Sturgis Mobile Response Team (SMRT)
- Established June 2022
- Have seen over 20 clients; approx. 230 patient visits

-Home safety assessments, adoptions, domestic violence help, behavioral monitoring, insurance and resource application assistance, medical condition monitoring, administration of antibiotics, lab draws/UAs, nursing home placement, wound care (SOME of what we have helped others with thus far)



Staffing:

- 1 CHW (Marissa), 2 more finishing classes now (Halli and Shawn)

Funding:

-The State of South Dakota EMS office offers an annual grant opportunity to Ambulance Services for \$50,000.00, we can reapply yearly.

- Medicaid is reimbursing claims for all Medicaid recipients in SD

- \$75.00 per one unit (16-45 min)

- \$150.00 per 2 units (46+ min)

-The State is working with Blue Cross of SD, Sanford, and Avera for reimbursement agreements for CHW programs

SMRT Program Example

SMRT Patient:

Ambulance 911 calls prior to SMRT Program:

Total of 28 from 2018-May of 2022

2022- \$4,196.40 in ambulance bills

\$1,250.00 in lift assist bills

TOTAL for Jan-May, 2022- \$5,446.40

SMRT Program started June 25, 2023

1 ambulance call since starting program to current

Patient has graduated from the program and is still doing great

Sturgis Mobile Response Team

Our Mission

Our mission as the Sturgis Mobile Response Team (SMRT) is to address social determinants of health through partnership and community health work.



Number of Clients

19 clients have been enrolled in the SMRT program since June 2022



Success Story



Our team worked with a pregnant mother who realized she could not take care of another child. **We built a trusting relationship with the client and worked with All About U Adoption Agency to place the baby with a loving family that has always wanted a child.** The adoption went through and the family is enjoying their new baby. The birth mother is fighting a drug addiction but is happy to have the baby with a loving family that she is keeping in touch with.

The Journey

Our journey begins with a referral from a patient, their family, the ambulance service, or a primary care provider (PCP). We then receive a care plan from the PCP to know what needs to be addressed and the length of time necessary.

Patient Process

Working closely with the ambulance crew and the clinic, we get referrals for patients in need of our program.

We create a SMRT care plan with the patient's provider.

We use ImageTrend for documentation.

We then meet with the patient to establish goals and set a time frame to reach the goals.

Once the goals are reached and the client no longer needs our care, we graduate them from our program.

Sustainability Plan

Our program is based under the City of Sturgis - Sturgis Ambulance Service. We apply for local grants, submit claims to Medicaid, do drug testing within our community, and collaborate with the ambulance doing fundraisers.



COMMUNITY PARAMEDIC

2023 South Dakota Legislature House Bill 1059

HOUSE HEALTH AND HUMAN SERVICES ENGROSSED

- Contacted by the State Medicaid and EMS Office to help with reimbursement
- We have 2- Certified Community Paramedics that attended school and have a certificate

Benefits of Community Paramedicine for Rural Community Health

Communities have started to examine the best ways to use their emergency medical services (EMS) resources efficiently. Community paramedicine programs are one innovation that can particularly benefit rural populations because many people in rural communities have limited access to other types of healthcare. These programs are designed to supplement existing primary care, the public health infrastructure, and [fill existing service gaps](#).

Community paramedicine services can help their communities by:

Reducing the burden on other providers. By treating patients in their homes or other locations outside the clinic, community paramedics reduce the number of patients in hospital beds, nursing homes, or emergency rooms.

Reducing unnecessary transports. In some situations, community paramedics can provide the appropriate level of care to individuals who call for help with non-emergent issues. For example, a community paramedic could assess and treat a patient who had a minor fall in their home and determine whether or not additional care and transportation to the hospital are needed.

Increasing access to primary care. Through home visits, community paramedics can provide traditional primary care services to patients. These can include routine vaccinations; wound care; or checkups for patients with high blood pressure, diabetes, or other chronic conditions. Programs may also help fill the needs of uninsured or underinsured patients who are otherwise unable to access services from home health agencies.

Improving quality of life. Through increased access to care, community paramedics provide individuals with services like home modifications that will improve patient quality of life and potentially allow them to stay independent in their own home for longer.

Supporting mobile integrated healthcare. Because community paramedics have already established relationships with healthcare providers outside of EMS, their role can bridge gaps between existing services and bring those services out into the community. (ruralhealthinfo.org)



OTHER INCOME
NECESSARY TO
HELP SUSTAIN THE
AMBULANCE
SERVICE

WHY?

NO CHOICE

- We contract to ensure that the Sturgis Ambulance has the supplies and employees necessary and to continue offering the care that the Sturgis Community deserves.
- I believe we are one of the only departments within the City of Sturgis who has to fundraising and take contracts from outside of the department to be sustainable.

MONUMENT HEALTH - RESPIRATORY STANDBY

- Respiratory therapy is only in-hospital Monday through Friday and on occasional weekends. Sturgis Ambulance covers respiratory therapy for the hospital over 3,000 hours annually. This includes things such as RSI, BIPAP, conscious sedation, and intubation.

MEADE COUNTY JAIL - MEDICAL

- The ambulance responds to the Jail for medical emergencies and knowing the medical history and the care the inmates receive helps us to properly care for the patient the best that we can. This has been of benefit to the Ambulance and the Meade County Jail.

WHY WE DO THESE

OTHER INCOME SOURCES

MONUMENT HEALTH
\$31,500 Annually

MEADE COUNTY JAIL
\$87,000 Annually

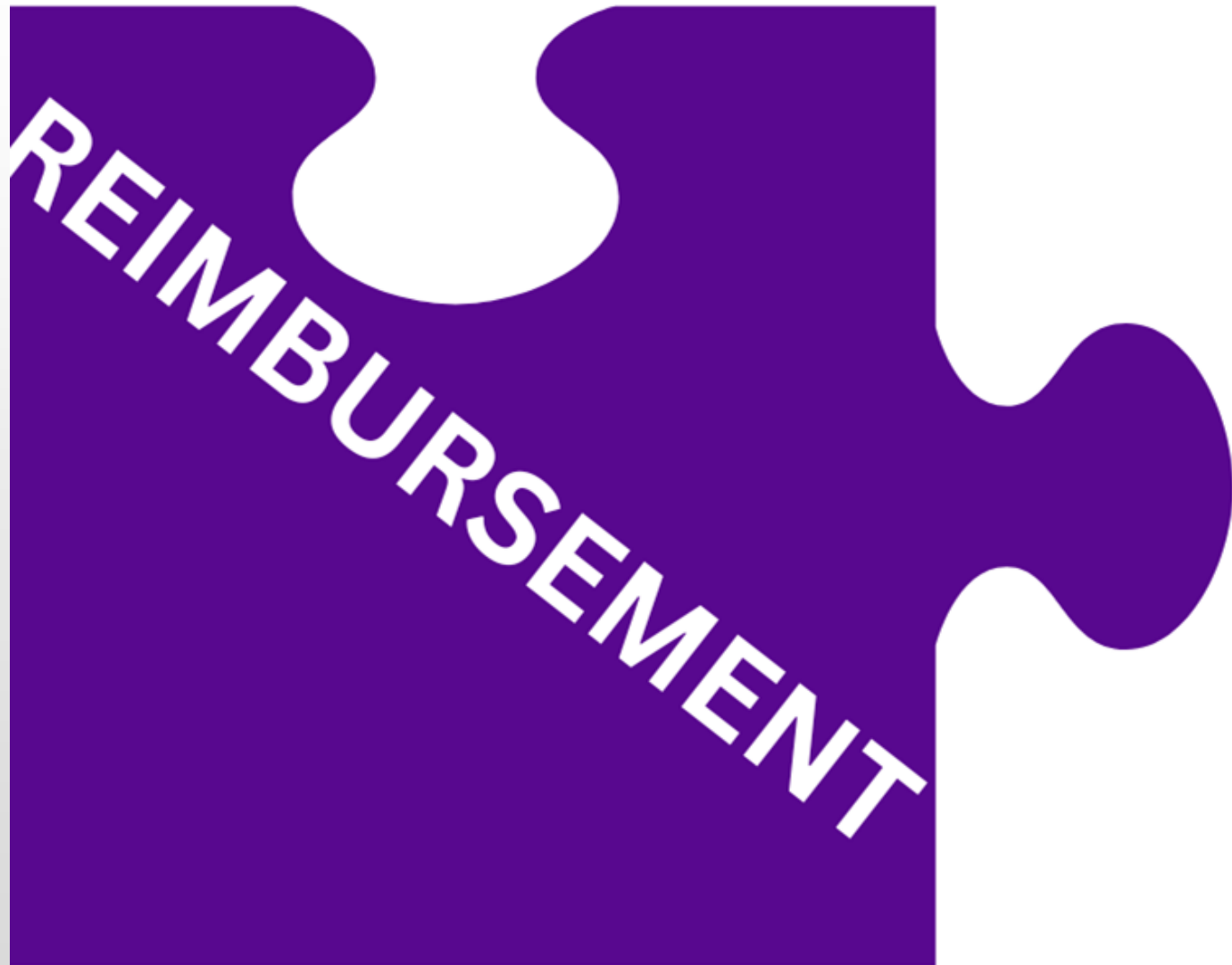
CHASE THE ACE FUNDRAISER \$20,000

FUNDRAISING (other)
\$20,000

MEADE COUNTY RURAL TAX DISTRICT \$64,575.00

LAWRENCE COUNTY RESPONSE AGREEMENT \$1,208.00

DRUG TESTING FOR CITY OF STURGIS
\$1,500.00



AMBULANCE REIMBURSEMENT IS CAUSING AMBULANCES TO CLOSE NATIONWIDE

- Medicare
- Medicaid
- VA – Change in Reimbursement
- Sanford

		BILLED	ALLOWED	DEDUCT	COINS	GRP CD	RC-AMT	PROV PD
02/17/23	A0426:NH	<u>950.00</u>						315.47
02/17/23	A0425:NH	<u>18.00</u>						10.35

61 Minutes on the call for two crew members
 Supplies used:
 Oxygen
 IV Started
 Blood Sugar Checked

Charged: \$968.00
 Medicare Paid \$325.82
 Medicaid \$83.12
 Wrote Off: \$559.06

		BILLED	ALLOWED	DEDUCT	COINS	GRP CD	RC-AMT	PROV PD
10/04/22	AO426	<u>950.00</u>						290.22
10/04/22	31.5	AO425	<u>567.00</u>					
	254.02							

120 Minutes on the call for three crew members
 Active Heart Attack
 Patient had Heparin running
 Gave Morphine and Zofran enroute
 12 Lead was obtained and interpreted

Charged: \$1,517.00
 Medicare Paid \$544.24
 Mutual of Omaha \$138.84
 Wrote Off \$822.82

MEDICARE

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MEDICARE COST REPORTING

Goal of the system

The collected information will be analyzed by the Medicare Payment Advisory Commission (MedPAC) in order to submit a report to Congress on the:

- Information you submit through the data collection system
- The adequacy of payments for ground ambulance services and geographic variations in the cost of furnishing such services
- Analysis of any burden on you associated with the data collection system
- Recommendation as to whether information should continue to be submitted through the data collection system or if changes are needed

Sturgis Ambulance was selected for year 3 which will start reporting in January of 2024. We should be collecting all the information this year.

MEDICAID

Charged

Paid

January 2023

A0426 \$950.00 - ALS Non-Emergency
A0425 \$54.00 - Mileage for 3 miles

\$189.94
\$13.02

TOTAL BILL: \$1004.00

Paid: \$202.96

Write Off: \$801.04

90 minutes of crew time for 2 crew - Oxygen - Total Miles on the ambulance 34.6 miles

January 2023

A0428 \$800.00 - BLS Non-Emergency
A0425 \$558.00 - Mileage for 31 miles

\$154.01
\$134.01

TOTAL BILL: \$1,358.00

Paid: \$288.55

Write Off: \$1,069.45

150 minutes of crew time for 2 crew members - Oxygen - Total Miles on the ambulance 62.1 miles

MEDICAID SUPPLEMENTAL PAYMENT PROGRAM

Supplemental payments are Medicaid payments to providers that are separate from and in addition to the payments for services rendered to Medicaid enrollees. Often, providers receive supplemental payments in a lump sum, and these supplemental payments are not tied to services provided to Medicaid enrollees. This is already in place for all other medical entities in South Dakota but once again ambulance was left out when the legislation went through.

The SD Ambulance Association has signed a contract with PCG to work on getting this in place. I am currently the lead person on this and was in contact with Medicaid last week to set the second meeting.

When PCG ran preliminary numbers for our service with the number of Medicaid transports we had 2021 we would have received over \$150,000 in a supplemental payment.

CHANGE FORTH COMING IN VA PAYMENTS

88 FR 10032 - Change in Rates VA Pays for Special Modes of Transportation

The Department of Veterans Affairs (VA) amends its beneficiary travel regulations to establish a new payment methodology for special modes of transportation. The new payment methodology will apply in the absence of a contract between VA and a vendor of the special mode of transportation. For transport by ambulance, VA will pay the lesser of the actual charge or the amount determined by the Medicare Part B Ambulance Fee Schedule established by the Centers for Medicare and Medicaid Services. For travel by modes other than ambulance, VA will establish a payment methodology based on States' posted rates or the actual charge.

(B) The term “posted rate” refers to the applicable Medicaid rate for the special mode transport in the State or States where the vendor is domiciled or where transport occurred (“involved States”). In the absence of a posted rate for an involved State, VA will pay the lowest among the available posted rates or the vendor's actual charge.

Aetna

Group Name: FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM (FEHBP)

Product: Aetna HealthFund® Open Choice® PPO Network ID: 00000

Aetna Life Insurance Company Network Status: Out-of-Network

DATES	CODE	SVCS CHARGES	ALLOWED	WRITE OFF	PT RESP	PAID
02/04/23	A0426	950.00	317.03	632.97 1	63.41	253.62
02/04/23	A0425	12.60	8.50	4.10	1.70	6.80

TOTAL BILL\$962.60

PAID:\$260.42

WRITE OFF:\$702.18

58 minutes of 2 crew members - oxygen and IV started - 2.8 Miles on the ambulance

Sanford

DATES	CODE	SVCS CHARGES	ALLOWED	WRITE OFF	PT RESP	PAID
Jan 23	A0427	\$1060.00	\$1060.00	0	\$8.22	\$1051.78
Jan 23	A0425	\$18.00	\$18.00	0	\$0.18	\$17.82

TOTAL BILL \$1,078.00

PAID: \$1,078.00

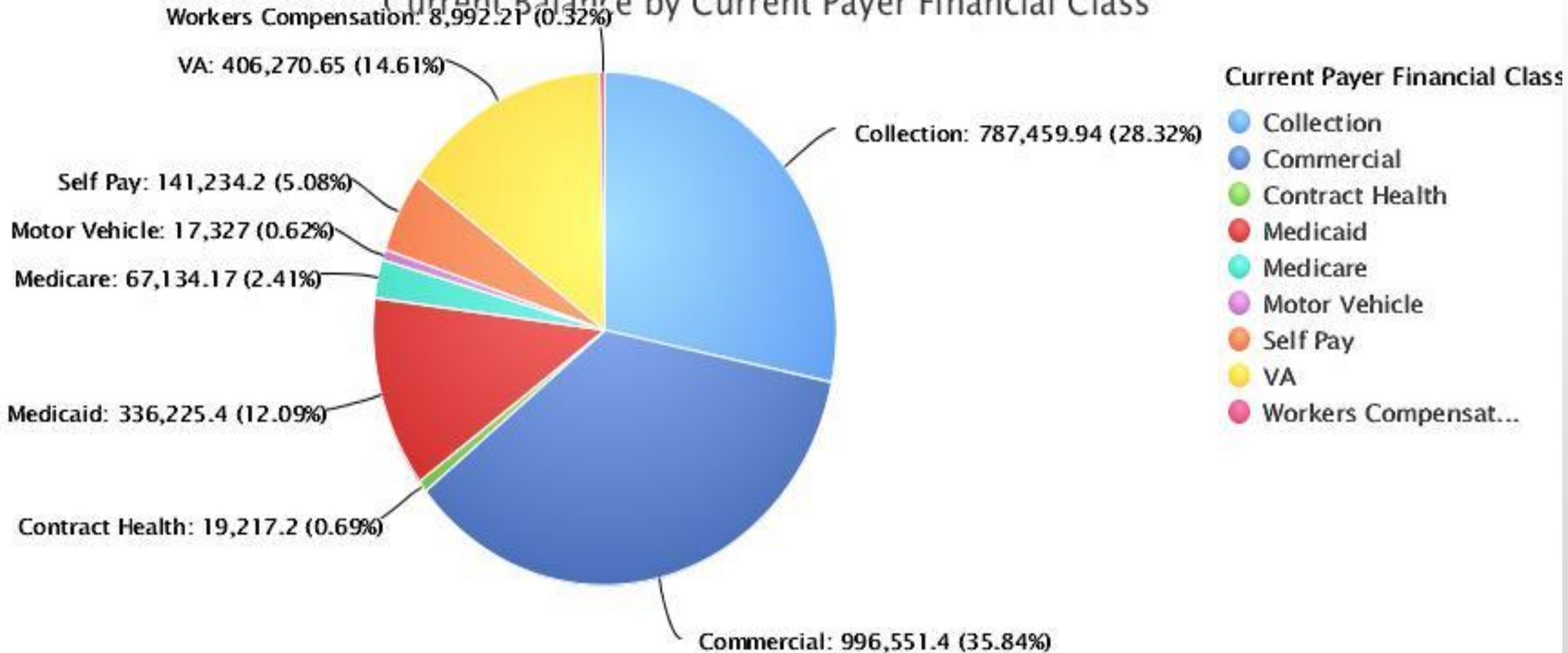
WRITE OFF: \$-0-

45 minutes of 2 crew members - Read 12 Lead- IV started - Medication given - 3 Miles on the ambulance

This is the insurance that pays the best outside of auto insurance. We base our rates off of theirs to ensure we do not leave money on the table.

ACCOUNT RECEIVABLE

Current Balance by Current Payer Financial Class



Current Payer Financial Class

- Collection
- Commercial
- Contract Health
- Medicaid
- Medicare
- Motor Vehicle
- Self Pay
- VA
- Workers Compensat...



THE
PROCESS
WE DO
FOR
BILLING

THE PROCESS OF HOW A REPORT IS BILLED

Responder writes the report

Report goes through QA
(quality assurance program)

- If changes need done it is returned to the author

Halli goes into ImageTrend
and moves the report to ready
for billing

Shawn then sends claims
electronically and Nellie
sends paper claims

Once it is moved into the
billing system. Nellie bills it
with the correct ICD-10 codes.

When completed with QA, it goes
to Halli who then prints a sheet
from EPIC for insurance and
demographic verification

Payments or denials are
received.
EDI payments from Medicare
Shawn downloads into Billing
Bridge

Halli manually enters all other
payments in Billing Bridge and
sends out Co-pay bills or files
with secondary insurance

OTHER DUTIES:

- Refiles when insurance has not paid
- Appeals when insurance denies
- Filing of all files as we must keep for 10 years
- Audit of files on regular basis



- ACTIVITIES
- SPONSORSHIP
- T-SHIRT ORDERS
- PROCLAMATION



EMS WEEK

Where **Emergency Care** Begins

May 21-27, 2023

2023 STURGIS EMS WEEK

Monday 5/22

Battle of the Badges

Blood Drive 10 AM - 5:15 PM

Sanford Heart Screening
11AM-7PM

Open House 3-6pm

Sturgis Ambulance Station
1901 Ballpark Rd

Wednesday 5/24

Songs and Sirens
Presented by
Loud American

Harley Davidson
Square

Food trucks, jumping castles,
roping dummy,
face painting, balloon art

Wear your 2023 EMS
week shirt in support
on Wednesday!

Tuesday 5/23

Cardboard Boat Races
6pm

Sturgis Community Center



HE SAID SHE SAID

For more information
Hallis@sturgisambulance.net
Shawnf@sturgisgov.com

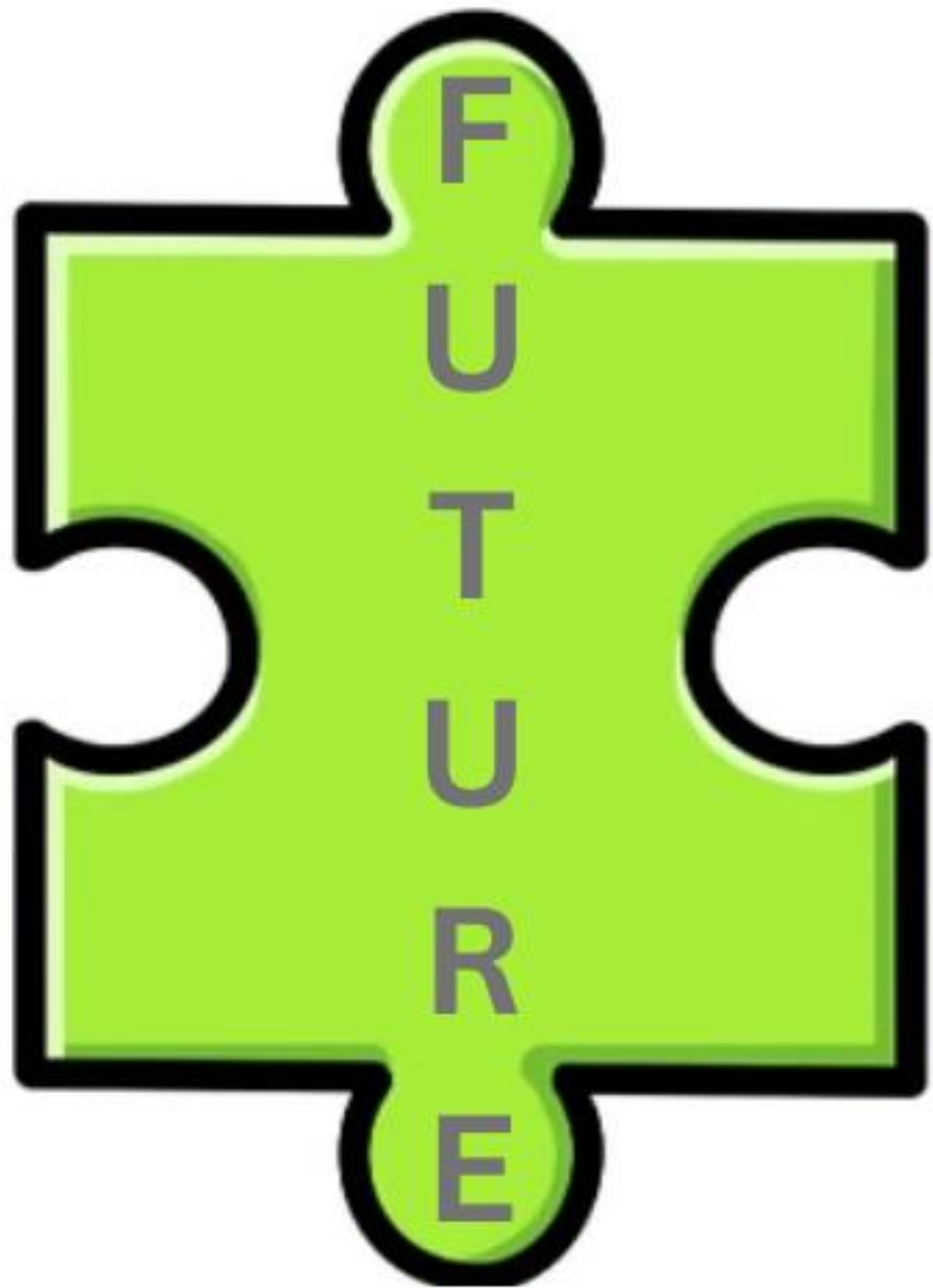
Facebook Page: Sturgis
Ambulance EMS Week 2023

605-347-5801

YOUR PERSONAL INVITE FOR ALL EVENTS

THE POWER OF A PERSONAL INVITE





**AMBULANCE
SERVICES
*ARE NOT
ESSENTIAL***

THERE IS NO WHERE IN THE STATE OF
SD THAT STATES EACH CITY OR
COUNTY HAS TO HAVE ONE.
THUS NO ONE THINKS ABOUT AN
AMBULANCE SERVICE UNTIL THEY
NEED ONE.

Regional Services Designation | Initial Observations

Initial Observations

- Ambulance agencies vary significantly statewide
- Most agencies have moved from volunteers to paid-on-call model
- Interfacility transports harder to staff than 9-1-1 transports
- Lack of partnerships with air providers to use ground ambulances when weather impact
- Communities with local college EMS courses have less staffing issues

South Dakota vs. Nation

- National shortage of paramedics affecting everyone
- Decreasing volunteerism is everywhere
- South Dakota Planning Grant Opportunity

Regional Services Designation | Key Assumptions + Metrics

1. Number of ambulance providers is decreasing as agencies close.
2. Number of volunteers is decreasing.
3. Interfacility transports (IFT) are delayed.
4. No guarantee that an ambulance will be available in an emergency.
5. Assess and trend response times statewide.
6. Review clinical standards for EMRs, EMTs, and paramedics.
7. Identify trends of medical personnel (numbers, recruiting, retention, and engagement).
8. Determine appropriate staffing models for ambulance services.
9. Research 9-1-1 dispatch opportunities to support ambulance system.
10. Ensure proper use of air ambulance services.

**TO KEEP THE LIGHT ON
EMS IN STURGIS AND STATE WIDE WILL
NEED TO SEE CHANGES!**

**THE FIRST CHANGE IS THE IMPORTANCE
OF EMS NEEDS TO BE RECOGNIZED**



**WE HAVE TO START MAKING
CHANGES NOW**

**STURGIS
AMBULANCE
NEEDS TO START
MAKING THESE
CHANGES BUT WE
CAN NOT DO THAT
WITHOUT YOU AS
A COUNCIL AND
THE COMMUNITY
OF STURGIS!**



**THE COMPLETED
PUZZLE THAT MAKES
STURGIS
AMBULANCE**

If one piece is missing
we are not complete





QUESTIONS

SHAWN FISCHER
STURGIS AMBULANCE DIRECTOR
shawnf@sturgisgov.com
shawnf@sturgisambulance.net
605-347-5801 Office
605-863-2268 City Cell
605-499-8852 Personal Cell