



**Metropolitan Area EMS Authority (MAEMSA)**

**d.b.a. MedStar Mobile Healthcare**

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**Board of Directors**

**February 27, 2019**

**METROPOLITAN AREA EMS AUTHORITY  
D/B/A MEDSTAR MOBILE HEALTHCARE  
BOARD OF DIRECTORS MEETING**

**Meeting Location: MedStar Mobile Healthcare, 2900 Alta Mere Dr., Fort Worth, TX 76116**  
**Meeting Date and Time: February 27, 2019 10:00 a.m.**

- |             |                                   |  |                          |
|-------------|-----------------------------------|--|--------------------------|
| <b>I.</b>   | <b>CALL TO ORDER</b>              |  | Dr. Brian Byrd           |
| <b>II.</b>  | <b>INTRODUCTION<br/>OF GUESTS</b> |  | Dr. Brian Byrd           |
| <b>III.</b> | <b>CONSENT<br/>AGENDA</b>         | Items on the consent agenda are of a routine nature. To expedite the flow of business, these items may be acted upon as a group. Any board member or citizen may request an item be removed from the consent agenda and considered separately. The consent agenda consists of the following: |                          |
|             | <b>BC – 1383</b>                  | Approval of board minutes January 16, 2019 meeting.  | Dr. Brian Byrd<br>Pg. 4  |
|             | <b>BC – 1384</b>                  | Approval of Board minutes for work session, audit report January 16, 2019.   | Dr. Brian Byrd<br>Pg. 8  |
|             | <b>BC – 1385</b>                  | Approval of Check History January 2019.  | Dr. Brian Byrd<br>Pg. 10 |
| <b>IV.</b>  | <b>OLD BUSINESS</b>               | There is no old business.  |                          |
| <b>V.</b>   | <b>NEW BUSINESS</b>               |  |                          |
|             | <b>BC – 1386</b>                  | Approval to declare certain assets surplus   | Douglas Hooten<br>Pg. 12 |
|             | <b>BC – 1387</b>                  | Discuss proposed amendment to the MAEMSA bylaws, Article 2, Sec. 2.5; regarding the frequency of regular meetings.   | Dr. Brian Byrd<br>Pg. 14 |
|             | <b>IR – 208</b>                   | Certification of election results for Suburban Cities Representative.  | Dr. Brian Byrd<br>Pg. 15 |
| <b>VI.</b>  | <b>MONTHLY REPORTS</b>            |  |                          |
|             | <b>A.</b>                         | Chief Executive Officer’s Report   | Douglas Hooten           |
|             | <b>B.</b>                         | Chief Strategic Integration Officer  | Matt Zavadsky            |

<b>C.</b>	Office of the Medical Director Report	Dwayne Howerton Dr. Veer Vithalani
<b>D.</b>	Compliance / Legal Reports	Chad Carr Kristofer Schleicher
<b>E.</b>	First Responders Advisory Board (FRAB)	Fire Chief Jim Davis Fire Chief Kirt Mays
<b>F.</b>	Chief, Finance Officer	Joan Jordan
<b>G.</b>	Human Recourses Report	Tina Smith
<b>H.</b>	Chief, Operations Report	Ken Simpson

**VII. OTHER DISCUSSIONS**

- |           |                                  |                |
|-----------|----------------------------------|----------------|
| <b>A.</b> | Requests for future agenda items | Dr. Brian Byrd |
|-----------|----------------------------------|----------------|

**VIII. CLOSED SESSION**

The Board of Directors may conduct a closed meeting in order to discuss matters permitted by any of the following sections of Chapter 551 of the Texas Government Code:

1. Section 551.071: To seek the advice of its attorney(s) concerning pending or contemplated litigation or a settlement offer, or on any matter in which the duty of the attorney to the Board and the Authority to maintain confidentiality under the Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act, including without limitation, consultation regarding legal issues related to matters on this Agenda;
2. Section 551.072: To deliberate the purchase, exchange, lease, or value of real property if deliberation in an open meeting would have a detrimental effect on the position of the Authority in negotiations with a third person;
3. Section 551.074: To (1) deliberate the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of an Authority officer or employee; or (2) to hear a complaint or charge against an officer or employee; or
4. Section 551.074: To deliberate the deployment, or specific occasions for implementation, of security personnel or devices or a security audit.

**IX. RECONVENE FROM CLOSED SESSION**

The Board may act on any agenda item discussed during the Closed Session.

**X. ADJOURNMENT**



## MINUTES

### METROPOLITAN AREA EMS AUTHORITY D/B/A MEDSTAR MOBILE HEALTHCARE BOARD OF DIRECTORS MEETING

2900 Alta Mere Dr., Fort Worth, TX 76116

January 16, 2019

The Metropolitan Area EMS Authority Board of Directors met on January 16, 2019 at MedStar Mobile Healthcare offices.

#### I. CALL TO ORDER

Chairman Brian Byrd called the meeting to order at 10:05 a.m.

MedStar Board members present: Dr. Brian Byrd, Chairman, Paul Harral, Dr. Rajesh Gandhi, Stephen Tatum; Douglas Hooten (Ex-officio), Fire Chief Jim Davis (Ex-officio), Dr. Veer Vithalani (Ex-officio) and Kristofer Schleicher, General Counsel for MAEMSA d/b/a MedStar Mobile Healthcare. Not present: Dr. John Geesbreght, Dr. Janice Knebl and Fire Chief Kirt Mays (Ex-officio).

Others present were Fire Chief Michael Christensen, Fire Chief Doug Spears, Jeremy Bishop of IAFF Local 440 Board, and Fire Chief Casey Davis. Tina Smith, Chad Carr, Ken Simpson, Joan Jordan, Matt Zavadsky, Dwayne Howerton, Susan Swagerty, Chris Cunningham, Shaun Curtis, Pete Rizzo, Desi Partain, Dale Rose, Macara Trusty, Richard Brooks, Stacy Harrison, Kerby Johnson, Buck Gleason Marianne Schmidt, and Dr. Brian Miller, all with MedStar, were also present.

#### II. INTRODUCTION OF GUESTS

Sam Anta, MD –UTSW Fellow working with OMD for six months.

#### III. CONSENT AGENDA

- BC – 1378 Approval of minutes for November 28, 2018.**
- BC – 1379 Approval of Check History for November, 2018.**
- BC – 1380 Approval of Check History for December, 2018.**

The motion to approve all items on the Consent Agenda was made by Stephen Tatum and seconded by Dr. Rajesh Gandhi. The motion carried unanimously.

#### IV. OLD BUSINESS

There was no old business.

#### V. NEW BUSINESS

##### **IR-207 Briefing by Whitley Penn on 2018 Audit.**

Auditors from Whitley Penn; Kimber DeWoody and Jenny Barnette reported on the December 2018 audit. Statements were very clean, one error was found in past audits. It was identified and corrected by 2017.

Stephen Tatum requested to consider BC-1381 and BC-1382 in one motion. All agreed.

**BC – 1381 Approval of Plans & Specifications for North Deployment Center and authorization to close on purchase.**

**BC – 1382 Approval of Phase II of Construction of North Deployment Center.**

Stephen Tatum requested to consider BC-1381 and BC-1382 in one motion. All agreed. Mr. Hooten showed a PowerPoint of the location of the new North Deployment Center and renderings of the building. The motion to approve the two board consents was made by Stephen Tatum and seconded by Dr. Rajesh Gandhi. The motion carried unanimously.

## **VI. MONTHLY REPORTS**

**A. Chief Executive Officer:** Douglas Hooten reviewed the items in Tab A. The CASS certificate has been received. As stated in the November board meeting, MedStar was had zero deficiencies. Job well done by everyone. Joan Jordan has announced that she will be retiring at the end of March. We have started the process to hire a new CFO. We will be posting the position ourselves and vet the pool through our HR department, do background checks, etc. We may update the job description for the future when we are looking at creating a position for a Chief Administration Officer. We have ordered 12-Dodge 4500 chasses and expect our first five trucks in April 2019.

**B. Chief Financial Officer:** Joan Jordan reviewed Tab B.

**C. Chief Operations Officer:** Ken Simpson reviewed Tab C. The Dispatch Center is in the reaccreditation process as an Accredited Center of Excellence (ACE) through the International Academies of Emergency Dispatch (IAED). MedStar is one of few agencies to have this and CAAS accreditation.

**D. Human Resources Report:** Tina Smith reviewed Tab D.

**E. FRAB:** Fire Chief Jim Davis: Fort Worth Fire is going through the new OMD protocols training. We have a few Firemen in the new Paramedic class that started this month. We have created a new Executive Committee for the FRAB: Chief Davis, Chief Mays, Chief Freeman, and Chief Spears.

**F. Office of the Medical Director:** Dr. Veer Vithalani and Dwayne Howerton reviewed Tab F. OMD Protocols testing this week. Attended NAEMSP the first week of January. Topics discussed validated the QA work that OMD is doing.

System ROSC rates are high, but they are not translating into neurological intact outcomes. Many factors are at play. Some of those factors we do not have control of and we will have to work with our healthcare partners to resolve. OMD will be taking a closer look at those components to survival that are within our control.

**G. Compliance / Legal Reports:** Chad Carr reviewed Tab G. Kristofer Schleicher informed the board that the nominations for a new board member closed on Friday, January 11, 2019. There are two nominees: Stephen Tatum and Matt Aiken. The ballots went out on January 15<sup>th</sup> to all the member cities and need to be returned by February 15, 2019. The

winner will be announced by Dr. Byrd during the February 27<sup>th</sup> board meeting and that person will start on March 1<sup>st</sup>.

**H. Chief Strategic Integration Officer:** Matt Zavadsky reviewed Tab H. Actively assisting Public Consulting Group (PCG) with Texas HHSC (Medicaid) on several proposals to try and keep the Ambulance Supplemental Payment Program (ASPP) going (\$3 million to MedStar). Recently held a conference call with Texas Association of Health Plans to try and coordinate efforts.

MedStar was chosen by Fort Worth Business Press as a “Healthcare Hero” and Douglas Hooten will be receiving this recognition for MedStar on February 20.

## **VII. REQUEST FOR FUTURE AGENDA ITEMS**

Dr. Byrd would like to hear more about the MedStar policies on “Whistle Blowers.”

## **VIII. CLOSED SESSION**

At 11:14 a.m., Dr. Byrd announced the Board was going into Closed Session under Section 551.071 of the Texas Government Code to seek the advice of its attorney(s) concerning pending or contemplated litigation and matters in which the duty of the General Counsel and attorney to the Board and the Authority to maintain confidentiality under the Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act.

The Board returned from Closed Session at 11:30 a.m. and took no further action.

## **IX. ADJOURNMENT**

There being no further business, Chairman Byrd adjourned the meeting at 11:30 a.m.

Respectfully submitted,

Paul Harral  
Acting Secretary





## **MINUTES**

### **METROPOLITAN AREA EMS AUTHORITY D/B/A MEDSTAR MOBILE HEALTHCARE BOARD OF DIRECTORS WORK SESSION**

**2900 Alta Mere Dr., Fort Worth, TX 76116  
January 16, 2019**

The Metropolitan Area EMS Authority Board of Directors met on January 16, 2019 at MedStar Mobile Healthcare offices.

#### **I. CALL TO ORDER**

Chairman Brian Byrd called the meeting to order at 9:22 a.m.

MedStar Board members present: Dr. Brian Byrd, Chairman, Paul Harral, Dr. Rajesh Gandhi, Stephen Tatum. Not present: Dr. John Geesbreght, Dr. Janice Knebl. Others present were Marianne Schmidt with MedStar. (Scribe)

#### **II. INTRODUCTION OF GUESTS**

Kimberly DeWoody, and Jenni Barnett of Whitley Penn, Dr. Bill Witham, and Fire Chief Casey Davis.

#### **III. WORK SESSION**

Ms. DeWoody and Ms. Barnett reviewed the Financial Statements and Supplemental Information for years ended September 30, 2018 and 2017.

#### **IV. CLOSED SESSION**

There was no closed session.

#### **V. ADJOURNMENT**

There being no further business, Chairman Byrd adjourned the meeting at 9:55 a.m.

Respectfully submitted,

Paul Harral  
Acting Secretary





**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**  
**AP Check Details Over \$5000.00**  
**For Checks Between 1/1/2019 and 1/31/2019**

Check Number	CK Date	Vendor Name	Check Amount	Description
96377	1/3/2019	AT&T	\$ 5,968.38	Internet - Acct #831-000-4996-
96390	1/3/2019	Fulcrum Group	\$ 15,084.68	Cisco Licenses
96414	1/3/2019	Zoll Medical Corporation	\$ 6,172.05	Medical Supplies - Stat Pads
96423	1/11/2019	Arrow International, Inc.	\$ 6,297.58	Medical Supplies
96427	1/11/2019	AT&T Mobility	\$ 10,949.04	Cell Phone and Aircards
96429	1/11/2019	Bound Tree Medical LLC	\$ 17,248.82	Medical Supplies
96433	1/11/2019	Continental Benefits	\$ 38,957.27	Health Premium
96435	1/11/2019	Direct Energy Business	\$ 10,104.25	Electric Service
96451	1/11/2019	Maintenance of Ft Worth, Inc.	\$ 5,440.06	Janitorial Services
96463	1/11/2019	ReCept Pharmacy	\$ 18,623.03	Medical Supplies
96467	1/11/2019	Solutions Group	\$ 35,250.06	Deductible CNI report
96474	1/11/2019	Tyler Technologies	\$ 6,577.97	ERP
96479	1/11/2019	ZirMed Inc	\$ 10,047.81	Verification, Claims, Invoices
96480	1/11/2019	Zoll Medical Corporation	\$ 8,762.15	Medical Supplies-Stat Pads
96506	1/18/2019	Innovative Developers, Inc.	\$ 44,026.75	N. Deployment Center
96508	1/18/2019	Logis Solutions	\$ 53,388.00	Maintenance/License Renewal
96509	1/18/2019	Lytix, Inc.	\$ 29,299.00	Annual Renewal
96512	1/18/2019	NRS	\$ 34,303.60	Collection Services
96525	1/18/2019	ReCept Pharmacy	\$ 11,833.78	Medical Supplies
96530	1/18/2019	TML Intergovernmental Risk Pool	\$ 27,096.46	Deductible Insurance
96555	1/24/2019	Bound Tree Medical LLC	\$ 23,065.89	Medical Supplies
96566	1/24/2019	Delta Dental Insurance Comany	\$ 19,586.31	Dental Premium - January 2019
96572	1/24/2019	Fort Worth Heat & Air	\$ 9,221.64	Jan HVAC PM
96582	1/24/2019	NRS	\$ 52,434.57	Collection Services
96598	1/24/2019	ReCept Pharmacy	\$ 10,684.98	Medical Supplies
96603	1/24/2019	Sun Life Financial	\$ 8,753.84	January Premium - Vision
96608	1/24/2019	Tyler Technologies	\$ 6,465.13	ERP
96613	1/24/2019	Whitley Penn, LLC	\$ 5,612.00	Audit Services
96615	1/24/2019	Zoll Medical Corporation	\$ 12,240.67	Medical Equipment
96659	1/31/2019	AT&T	\$ 5,959.98	Voice over IP - Acct #831-00-5
96663	1/31/2019	Care Now Corporate	\$ 5,993.00	Pre Employment & Random Drug
96671	1/31/2019	Innovative Developers, Inc.	\$ 33,742.00	N. Deployment Center
96676	1/31/2019	Mutual of Omaha	\$ 8,218.86	Accident/Critical Care - Janua
96691	1/31/2019	Solutions Group	\$ 20,789.42	SG Liability CNI Report
Wire	1/28/2019	Frost	\$ 30,067.92	Frost Loan
Wire	1/11/2019	American Express	\$ 17,001.23	CC CHARGES FOR DEC 18
Wire	1/18/2019	WEX Bank	\$ 87,201.47	Fuel
Wire	1/30/2019	Veer D. Vithalani	\$ 22,070.92	Med Dir Salary
Wire	1/30/2019	UT Southwestern Medical Center	\$ 25,666.66	Associate Med Dir Salary
			<b>\$ 800,207.23</b>	





Declare Certain Assets Surplus

November, 2018

Unit	Year	Cost	Deprec	Book Value
22	2003	\$ 100,549	\$ 100,549	\$ -
35	2003	\$ 113,500	\$ 92,447	\$ 21,053
21	2003	\$ 102,248	\$ 95,206	\$ 7,042
24	2003	\$ 98,287	\$ 81,905	\$ 16,382
20	2003	\$ 98,766	\$ 82,322	\$ 16,444
		\$ 513,350	\$ 452,429	\$ 60,921

Reason:

These ambulance units are being replaced with Demers ambulances and Dodge chasses during this fiscal year.

Approved:

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Chief Financial Officer

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Chief Executive Officer

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Chair, Board of Directors



**IR-208 Information Report 02/27/2019**

**Certification of election results for Suburban Cities Representative**

<b>Jurisdiction</b>	<b>NTCOG 2018 Pop.</b>	<b>% of Pop.</b>	<b>Votes</b>	<b>For</b>
Haltom City	42740	25.22%	252.2	Aiken
Burleson	44860	26.47%	264.7	Aiken
Saginaw	21730	12.82%	128.2	Aiken
White Settlement	17380	10.26%	102.6	Aiken
Forest Hill	12840	7.58%	75.78	Aiken
River Oaks *	7310	4.31%	43.14	N/A
Sansom Park	5050	2.98%	29.8	Aiken
Lake Worth	4730	2.79%	27.91	Aiken
Edgecliff Village	3220	1.90%	19	Aiken
Blue Mound	2390	1.41%	14.1	Tatum
Westworth Village	2620	1.55%	15.46	Tatum
Haslet	1730	1.02%	10.21	Aiken
Lakeside	2100	1.24%	12.39	Aiken
Westover Hills	748	0.44%	4.414	Tatum
<b>Total</b>	<b>169448</b>	<b>100%</b>	<b>1000</b>	

**Matthew Aiken** 922.79

**Stephen Tatum** 33.974

Total 956.764

\* Did not return ballot

# Tab A – Chief Executive Officer



# Tab B – Chief Strategic Integration Officer

# Strategic Integration Summary

February 2019



## **Alternate Payment Models**

- CMMI//CMS Announcement 2/14 on Alternate Payment Model for EMS (see attached release)
  - MedStar invited by CMMI Director to attend the announcement in DC due to our work with CMMI on possible models
- Commercial capitated model continues
  - Approaching end of the 1<sup>st</sup> year
  - Payer would like to look at other options for post-renewal
- Expanding role for TrustedCare Managed Medicare Model
  - Moving to 9-1-1 navigation of enrolled members
  - OMD very helpful with developing process for notification to PCPs about patient enrollment
- Investigating possible partnership with Amerigroup and their managed Medicaid clinic
  - Patient navigation and after hours episodic coverage
- Approached by 2 additional home care and 2 additional hospice agencies for partnership

## **Medicaid Supplemental Ambulance Payment Program – TAHP and HHSC**

- Participating as SME to Public Consulting Group (PCG) and Texas HHSC to develop potential new Medicaid supplemental payment approach
  - 3 separate meetings with Texas Medicaid so far trying to secure economic model for the program to continue
  - Offered options for continuing some type of uncompensated care offset (see attached overview)
  - Legislation being drafted if necessary

## **Dickies Arena**

- Met with the Events Manager and Safety/Security Coordinator to discuss Special Event Partnerships
  - Very productive discussions on services we can provide to the Arena
  - Had follow-up intro to our Operations and Exec. Teams, with tour of the facility

## **StarSaver Plus Pilot**

- Working with Trinity Terrace Independent Living Facility in Fort Worth on the StarSaver+Plus annual subscription program
  - All components of StarSaver, PLUS MedStar on Demand (MOD) pilot program
  - Access to select MIH program services (see attached overview)
- OMD approved protocol options, specifically related to PCP notification
- Trinity Terrace leadership has approved the program
- Conducting resident focus group on March 5<sup>th</sup> to gain feedback to the proposed program

## **Paid Consulting Activity**

- Center for Public Safety Management (division of ICMA)
  - Currently working with them on 2 projects
    - Placentia, CA – EMS and Fire RFP and selection process for fire and EMS first response services
    - San Diego County, CA – Evaluation of EMS agency performance
  - Bullard Partners/Abaris Group
    - Colorado Springs FD role in the EMS/Ambulance system

## **EMS vs. non-EMS ED Arrival Outcomes Study for ACS Patients**

- Still in IRB for approval

### **Healthcare Hero Award**

- Doug and MedStar received a Healthcare Hero award from the Fort Worth Business Press

### **Upcoming Speaking Engagements:**

<b>Event</b>	<b>Date</b>	<b>Location</b>	<b>Attendees</b>
JEMS EMS Today ( <i>Mult. MedStar Speakers</i> )	February '19	National Harbor, MD	~2,000
EMS 3.0 Transformation Summit	April '19	Washington, DC	~300
Midwest EMS Expo	April '19	Minneapolis, MN	~500
Healthcare Financial Management Assoc.	April '19	Austin, TX	~750
International Academy of Emergency Disp.	April '19	National Harbor, MD	~1,000
Medical Transportation Leadership Inst.	May '19	Charleston, WV	~150

### **Media:**

Local –

- Baby CPR Call
  - CBS 11
- Fire destroys MedStar paramedic's home
  - ABC-8, CBS-11, NBC-5, Fox 4, KRLD, WBAP/KLIF, Star-Telegram
- MedStar crew 'rescues' homeless family
  - CBS 11, NBC 5, ABC 8, Star-Telegram

## **Mobile Integrated Healthcare Report**

### **Hospice:**

Community Hospice: 4 active

- 0, 9-1-1 calls

Vitas: 20 active

- 4, 9-1-1 call

Holy Savior: 13 active

- 0, 9-1-1 encounter

### **Home Health:**

Klarus: 177 active

- 16, total 9-1-1 calls w/CCP on scene
- 3 scheduled in home requests by Klarus

Healthmasters: 18 active

- 0, 9-1-1 call w/CCP on scene

### **Readmission Avoidance Enrollments:**

- NTPS/Silverback: 2
- Baylor: 1
- THR Alliance: 1

### **High Utilizer:**

- UTSW: 1
- Internal: 1
- BCBS: 3

### **Primary Care Navigation/Trusted Care Enrollments: 70**

### **Palliative Care, Silverback:**

- 16 active

### **9-1-1 Nurse Triage:**

- 207 total calls
- 40 Lyft/cab/wheelchair transportations

## **Education and Community Programs Report**

### **Education**

- 83 on waiting list for EMT class
- 1/16 ACLS course at MedStar
- 1/22 PHTLS course at MedStar
- 2/15 BLS Refresher at MedStar
- 2/18-2/19 AMLS Initial at MedStar
- 2/19-2/20 PHTLS Initial at MedStar
- 2/22 ACLS Refresher at MedStar

### **Community Programs**

- 2/11 BLS Refresher for Hashem Orthodontics
- 2/13 CPR/First Aid/AED Cat Sanctuary
- 2/19 Byron Nelson HS State Skills (16 students)
- 2/26 Myles at Weatherford HS for OB lecture/kits
- 2/26 Broken Dreams Keller High School
- 2/28 Mock Testing at Byron Nelson HS
- Pending Online ECA/EMR for Highland Village
- Pending CPR/babysitting class for Girl Scouts
- Pending Stop the Bleed & CPR/AED Corporate Group Training Request (50 attendees)
- Pending CISD/Sycamore Elementary-hosting health resource fair, requesting CPR/First Aid Training
- Pending emergency simulation training seminar on 5/17

## **Customer Integration Report**

### **Ongoing Projects**

- Working with the Cardiac Emergency Preparedness Task Force to establish Resuscitation Guidelines for our community.
- Several facilities are reporting a raising volume in patient arriving at Emergency Departments with signs and symptoms of Chest Pain. Working to identify areas of origin to focus PSA's.
- Working with Business Intelligence to create a Customer Relations Dashboard to help show us areas of opportunity.
- Updated all Skilled Nursing & Long Term Care Facilities Non-Emergency Transportation Agreements. We used this opportunity to bring attention to several updates:
  - o New name
  - o Updated payment drawer
  - o Emergency Planning

### **HEARTsafe Community Presentation**

The Fort Worth Safe Communities Coalition's Cardiac Emergency Preparedness Task Force presented the City of Fort Worth with its HEARTsafe designation. This was accomplished through the collaboration of **all** the hospital systems in Fort Worth as well as many community partners such as the American Heart Association, American Red Cross, Fort Worth Fire and Police Departments, and MedStar.



Heart Safe Community Application

In collaboration:



### MedStar Foundation Clay Shoot

Every May, the MedStar Foundation partners with a local non-profit to fundraise and bring awareness to their cause. For 2019, the MedStar Foundation partnered with DRC Solutions which works to provide housing solutions for the homeless.

- Open to the public, contact Richard Brooks at [rbrooks@MedStar911.org](mailto:rbrooks@MedStar911.org) for any questions.
- Looking for sponsorships.



**Check-in begins at 8:30**  
**Safety briefing at 9:45**

Defender Outdoors Clay Sports Ranch  
8270 Aledo Road  
Fort Worth, Texas 76126

To register: [www.MedStar911.org/Foundation](http://www.MedStar911.org/Foundation)

Lunch will be provided

# StarSaver Membership Report:

## Membership New / Renewal Comparison

	2016	Cumulative	2017	Cumulative	% Change	2018	Cumulative	% Change	2019	Cumulative	% Change
<b>New Households</b>											
January	35	35	37	37	5.7%	38	38	2.7%	21	21	-44.7%
February	58	93	32	69	-25.8%	41	79	14.5%	21	42	2.4%
March	51	144	48	117	-18.8%	56	135	15.4%	0	42	-25.0%
April	40	184	68	185	0.5%	45	180	-2.7%	0	42	-6.7%
May	48	232	44	229	-1.3%	34	214	-6.6%	0	42	23.5%
June	24	256	40	269	5.1%	36	250	-7.1%	0	42	16.7%
July	22	278	29	298	7.2%	31	281	-5.7%	0	42	35.5%
August	36	314	22	320	1.9%	35	316	-1.3%	0	42	20.0%
September	42	356	38	358	0.6%	22	338	-5.6%	0	42	90.9%
October	53	409	38	396	-3.2%	16	354	-10.6%	0	42	162.5%
November	32	441	43	439	-0.5%	25	379	-13.7%	0	42	68.0%
December	9	450	19	458	1.8%	40	419	-8.5%	0	42	5.0%
<b>Total New Member Households</b>	<b>450</b>		<b>458</b>			<b>419</b>			<b>42</b>		
<b>Renewing Households</b>											
January	454	454	344	344	-24.2%	347	347	0.9%	216	216	-37.8%
February	306	760	117	461	-39.3%	546	893	93.7%	186	402	-55.0%
March	192	952	78	539	-43.4%	96	989	83.5%	0	402	-59.4%
April	1137	2089	788	1327	-36.5%	1293	2282	72.0%	0	402	-82.4%
May	910	2999	1493	2820	-6.0%	453	2735	-3.0%	0	402	-85.3%
June	354	3353	521	3341	-0.4%	395	3130	-6.3%	0	402	-87.2%
July	357	3710	172	3513	-5.3%	287	3417	-2.7%	0	402	-88.2%
August	335	4045	437	3950	-2.3%	335	3752	-5.0%	0	402	-89.3%
September	326	4371	163	4113	-5.9%	132	3884	-5.6%	0	402	-89.6%
October	192	4563	220	4333	-5.0%	269	4153	-4.2%	0	402	-90.3%
November	165	4728	145	4478	-5.3%	75	4228	-5.6%	0	402	-90.5%
December	126	4854	249	4727	-2.6%	292	4520	-4.4%	0	402	-91.1%
<b>Total Renewing Households</b>	<b>4854</b>		<b>4727</b>			<b>4520</b>			<b>402</b>		
<b>Total Member Households</b>	<b>5304</b>		<b>5185</b>			<b>4939</b>			<b>444</b>		



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## CMS NEWS

FOR IMMEDIATE RELEASE  
February 14, 2019

Contact: CMS Media Relations  
(202) 690-6145 | [CMS Media Inquiries](#)

**CMS launches innovative payment model with new treatment and transport options to more appropriately and effectively meet beneficiaries' emergency needs**

*Supporting new triage options for first responders aims to allow beneficiaries to receive care at the right time and place*

Today, the Centers for Medicare & Medicaid Services (CMS) Center for Medicare and Medicaid Innovation (Innovation Center), which tests innovative payment and service delivery models to lower costs and improve the quality of care, announced a new payment model for first responders that aims to allow Medicare Fee-For-Service (FFS) beneficiaries to receive the most appropriate level of care at the right time and place with the potential for lower out-of-pocket costs.

“This model will create a new set of incentives for emergency transport and care, ensuring patients get convenient, appropriate treatment in whatever setting makes sense for them,” said HHS Secretary Alex Azar. “Today’s announcement shows that we can radically rethink the incentives around care delivery even in one of the trickiest parts of our system. A value-based healthcare system will help deliver each patient the right care, at the right price, in the right setting, from the right provider.”

The new model, the Emergency Triage, Treat and Transport (ET3) Model, will make it possible for participating ambulance suppliers and providers to partner with qualified health care practitioners to deliver treatment in place (either on-the-scene or through telehealth) and with alternative destination sites (such as primary care doctors’ offices or urgent-care clinics) to provide care for Medicare beneficiaries following a medical emergency for which they have accessed 911 services. In doing so, the model seeks to engage health care providers across the care continuum to more appropriately and effectively meet beneficiaries’ needs. Additionally, the model will encourage development of medical triage lines for low-acuity 911 calls in regions where participating ambulance suppliers and providers operate. The ET3 Model will have a five-year performance period, with an anticipated start date in early 2020.



“The ET3 Model is yet another way CMS is transforming America’s healthcare system to deliver better value and results for patients through innovation,” said CMS Administrator Seema Verma. “This model will help make how we pay for care more patient-centric by supporting care in more appropriate settings while saving emergency medical services providers precious time and resources to respond to more serious cases.”

Currently, Medicare primarily pays for unscheduled, emergency ground ambulance services when beneficiaries are transported to a hospital emergency department (ED), creating an incentive to transport all beneficiaries to the hospital even when an alternative treatment option may be more appropriate. To counter this incentive, the ET3 Model will test two new ambulance payments, while continuing to pay for emergency transport for a Medicare beneficiary to a hospital ED or other destination covered under current regulations:

- payment for treatment in place with a qualified health care practitioner, either on-the-scene or connected using telehealth; and
- payment for unscheduled, emergency transport of Medicare beneficiaries to alternative destinations (such as 24-hour care clinics) other than destinations covered under current regulations (such as hospital EDs).

The ET3 Model encourages high-quality provision of care by enabling participating ambulance suppliers and providers to earn up to a 5 percent payment adjustment in later years of the model based on their achievement of key quality measures. The quality measurement strategy will aim to avoid adding more burden to participants, including minimizing any new reporting requirements. Qualified health care practitioners or alternative destination sites that partner with participating ambulance suppliers and providers would receive payment as usual under Medicare for any services rendered.

The model will use a phased approach through multiple application rounds to maximize participation in regions across the country. In an effort to ensure access to model interventions across all individuals in a region, CMS will encourage ET3 Model participants to partner with other payers, including state Medicaid agencies.

CMS anticipates releasing a Request for Applications in Summer 2019 to solicit Medicare-enrolled ambulance suppliers and providers. In Fall 2019, to implement the triage lines for low-acuity 911 calls, CMS anticipates issuing a Notice of Funding Opportunity for a limited number of two-year cooperative agreements, available to local governments, their designees, or other entities that operate or have authority over one or more 911 dispatches in geographic locations where ambulance suppliers and providers have been selected to participate.

For a fact sheet on the ET3 Model, please visit: <https://www.cms.gov/newsroom/fact-sheets/emergency-triage-treat-and-transport-et3-model>.

For more information on the ET3 Model, please visit: <https://innovation.cms.gov/initiatives/et3/>.

###

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**Ambulance care teams**

- On scene**  
(with a qualified health practitioner in person or via telehealth)
- Alternative Location**  
(like a doctor's office)
- Hospital**  
(or any other currently allowed destination)

**CMS**  
Centers for Medicare & Medicaid Services



# EMS Medicaid Supplemental Payment Opportunity

Meeting with Texas Health & Human  
Services Commission

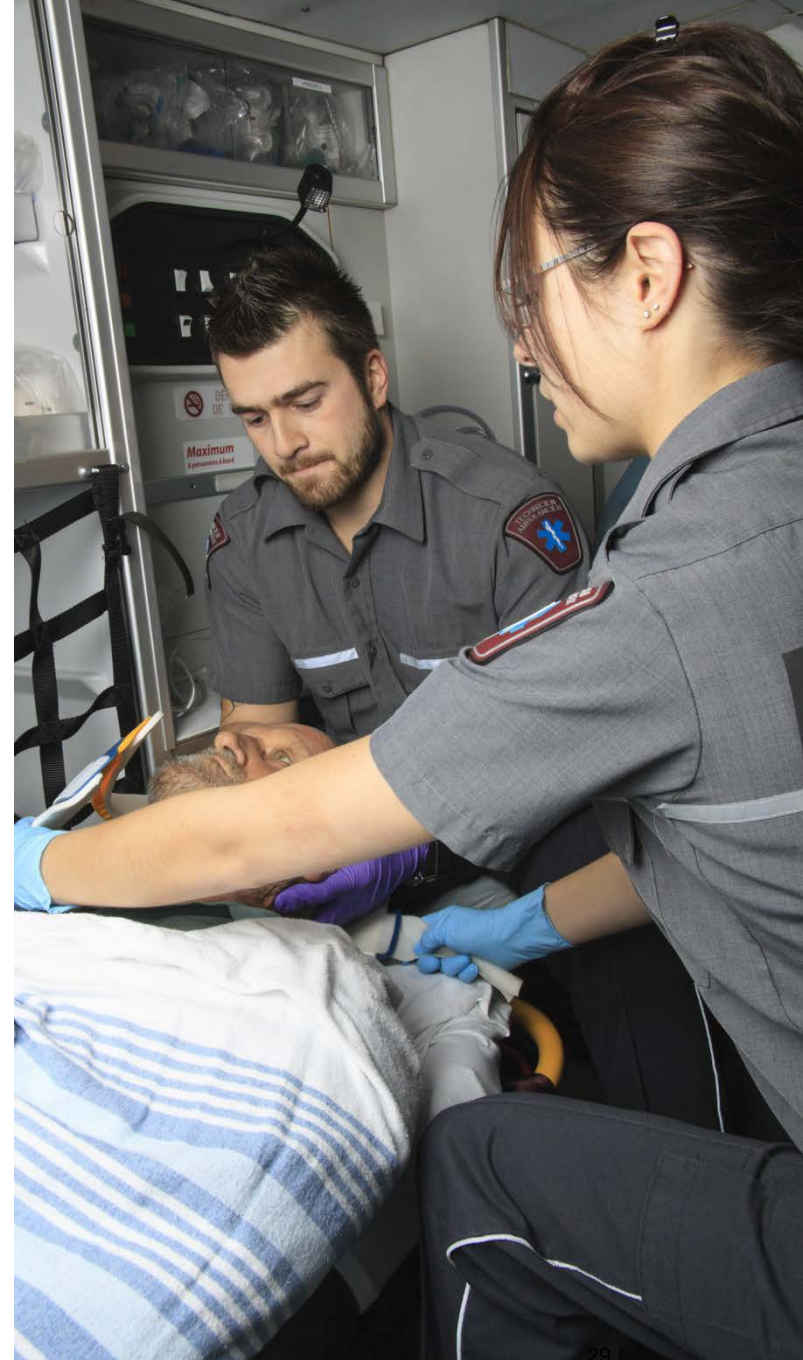
August 24, 2018

## **Meeting Objective:**

Discuss strategies and obtain HHSC's support to continue to secure Medicaid Supplemental Payments for Texas Publicly Owned Ambulance service providers (ASP) given the changes to the Uncompensated Care Pool authorized under the 1115 Waiver Renewal.

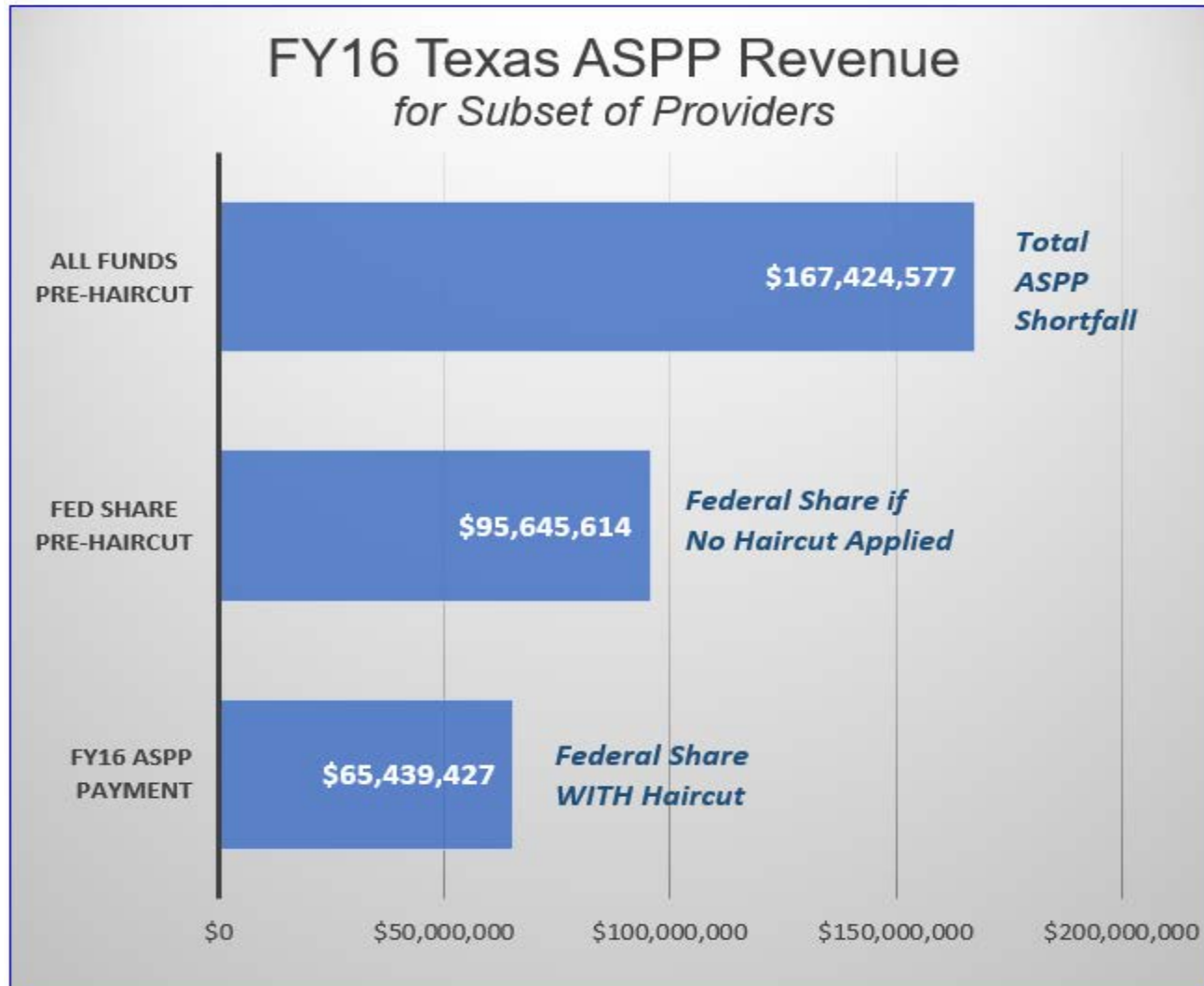
# Agenda

- Importance of the Medicaid Supplemental Payment Funding
- History of Texas' Authority to Make Ambulance Supplemental Payments
- Impact of 1115 Waiver Renewal on ASP Community
- Medicaid Supplemental Payment Strategies
- Next Steps
- Questions/Contact Information



# **Importance of the Current Medicaid Supplemental Payment Funding**

# FY16 ASPP Revenue



## FY16 ASPP Revenue (subset of providers)

Subset of Public EMS Providers in TX	All Funds Shortfall Pre-Haircut	Federal Share Pre-Haircut	FY16 UC Payment	% of Total
<b>Subtotal</b>	<b>\$167,424,577</b>	<b>\$95,645,614</b>	<b>\$65,439,427</b>	<b>100%</b>
Dallas	\$56,866,718	\$32,487,956	\$22,227,817	34%
Georgetown	\$426,052	\$239,356	\$163,764	0%
Houston	\$74,079,390	\$42,321,556	\$28,955,832	44%
MedStar	\$9,097,819	\$5,197,584	\$3,556,116	5%
Texas City	\$978,200	\$558,846	\$382,355	1%
All Other	\$25,976,397	\$14,840,316	\$10,153,542	16%



# **History of Texas' Authority to Make Ambulance Supplemental Payments**

# Historical Overview of the Texas Ambulance Supplemental Payment Program (ASPP)

- Medicaid State Plan initially authorized first supplemental payment program for public ASP providers exclusively for the Medicaid FFS program.
- ASP supplemental payments redesigned and reauthorized as part of the creation of an UC pool under the 1115 waiver and expanded claiming.
- Medicaid shortfall supplemental payments removed from UC pool effective for fiscal year 2020, as well as redefined UC costs as charity costs.

Waiver Demon Year	Fiscal Year	State Authorization	Supplemental Payment Model	Medicaid FFS Shortfall	Medicaid MCO Shortfall	Uninsured Shortfall	Charity Care Charges
n/a	2007 to 2011	SPA	Upper Payment Limit (UPL)	✓			
DY 1-8	2012 to 2019	1115 Waiver	UC Program	✓	✓	✓	
DY 9-11	2020 to 2022	1115 Waiver Renewal	UC Program (re-sized for Charity Care only)				✓

# **Impact of 1115 Waiver Renewal on ASP Community**

# Impact of 1115 Waiver Renewal Changes

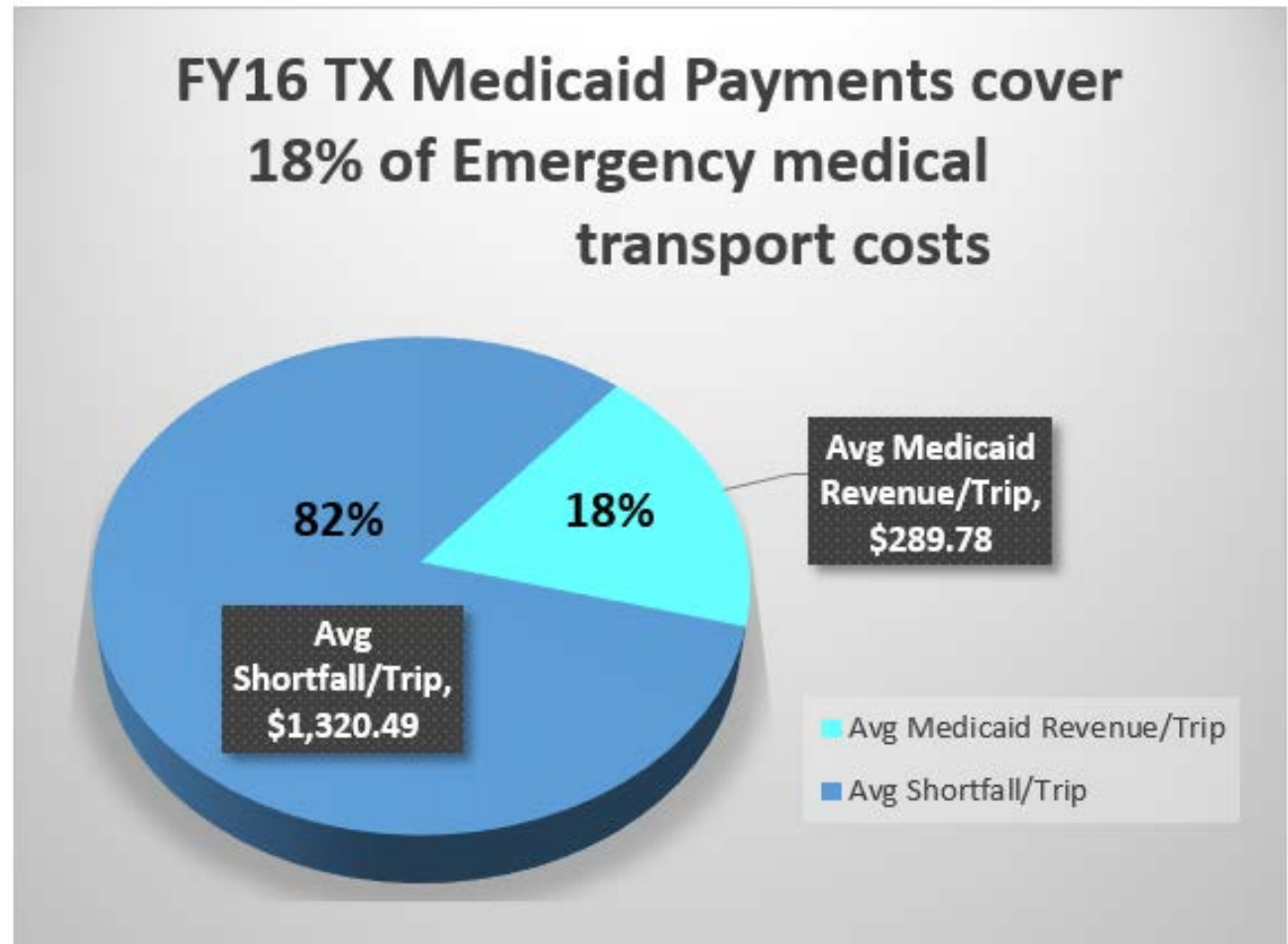
- Financial information is very difficult to obtain during an EMS transport.
- Charity care policies do not exist in many instances today.
- Collection processes need to be revised and revamped.

***These challenges may potentially reduce historical uninsured claiming levels, as the program transitions to a charity care supplemental funding stream.***

# Medicaid Reimbursement for Texas EMS providers

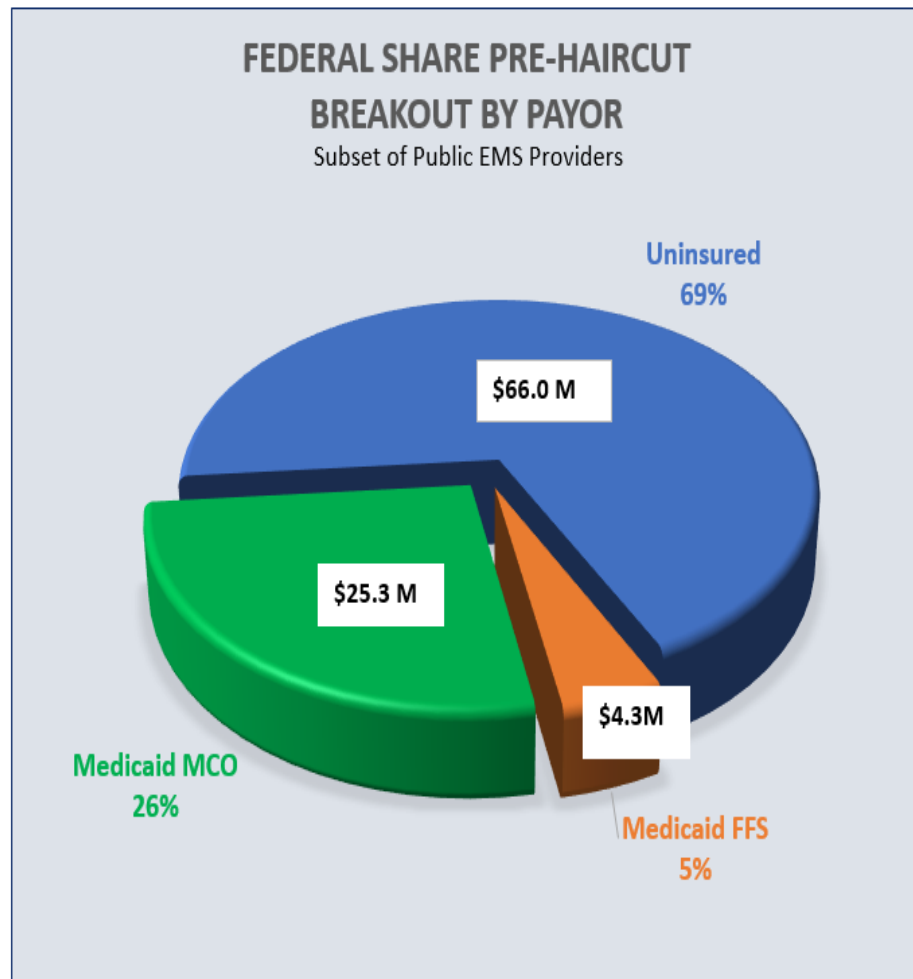
## Medicaid Shortfall Impact

- For Texas EMS providers, the average cost per trip is **\$1,610.27** and average Medicaid payment is **\$289.78** per trip (**18 percent** of the costs of **emergency medical transports**).



***Current Medicaid reimbursement levels demonstrate the need to establish new strategies to maintain Medicaid supplemental payment funding to ensure adequate funding.***

# FY16 TX ASPP Shortfall by *Payor* Category



# TX ASPP Federal Share Pre-Haircut by Payor

Subset of Public EMS Providers in TX	Medicaid FFS	% of Total	Medicaid MCO	% of Total	Total Medicaid Federal Share Pre-Haircut
<b>Subtotal</b>	<b>\$4,313,465</b>	<b>15%</b>	<b>\$25,325,399</b>	<b>85%</b>	<b>\$29,638,865</b>
Dallas	\$1,465,155		\$8,602,281		\$10,067,436
Georgetown	\$10,795		\$63,378		\$74,172
Houston	\$1,908,635		\$11,206,058		\$13,114,693
MedStar	\$234,403		\$1,376,236		\$1,610,638
Texas City	\$25,203		\$147,973		\$173,176
All Other	\$669,275		\$3,929,474		\$4,598,748

# Medicaid Supplemental Payment Strategies



# Medicaid Supplemental Payment Strategies

## Medicaid FFS Program

- Medicaid FFS still represents on average **15%** of ASP's Medicaid utilization and therefore establishing a program would have a meaningful fiscal impact.
- Resubmit Medicaid State Plan Amendment (SPA) to re-establish Medicaid FFS supplemental payment program effective for State fiscal year 2020 or Sep 1, 2019.
  - CMS review process not as cumbersome as in the past – MO, OR, WA SPA's all approved within the last year.
  - CO and OK submitting in the immediate future.
  - Does authorization still exist under original SPA or did prior SPA authority sunset?
- Medicaid supplemental payments would be financed through a certification of public expenditures (CPE) process - ***No State General Revenue Required.***
- Methodology can leverage the existing UC cost reporting form with slight modifications – the infrastructure is already in place to support this claiming.
- Enhancement opportunity exists to remove lower of cost to charge provision, therefore the historical revenues could be increased.

## Medicaid Managed Care Program: Option 1, Enhanced Medicaid Managed Care Fee Schedule

- Incremental funding can be established by enhancing Medicaid MCO capitation rates and directing the MCOs to pay nearly 100 percent of the increased capitation payments to EMS providers
  - New Medicaid managed care regulations permit Medicaid agencies to mandate minimum fee schedules
  - Enhanced funding can take the form of increased rates or alternatively the development of a flat payment per trip add on to current fee schedules
  - The increased payment could potentially be provider specific or an average increase based upon various provider classes (Urban vs. Rural and/or Fire & EMS vs. EMS only)
  - MCOs would be contractually required to distribute all funds; EMS providers would need to contract with MCOs.
- State share funded through IGT with government entities, not with provider on record - ***No State General Revenue Required.***
- This program would be consistent with UHRIP program recently approved by CMS.

# Medicaid Supplemental Payment Strategies

## The Path Forward

- HHSC would seek authorization through the submission of the 42 CFR 438.6(c) Preprint Form to provide the ASP community with regional rate increases to offset the **Medicaid MCO** shortfall.
- HHSC would have to modify existing MCO contracts to establish enhanced Medicaid payment schedules.
- MCOs would pay out monthly lump sum payments based upon the number of transports by provider class > alternatively claims would pay with rate increase per transport.
- State share could be collected in advance of implementation of rate increases.
- Provider community can assist with modeling to determine optimal payment distribution model, as well as drafting the preprint form.

## Medicaid Managed Care Program: Option 2, Medicaid Managed Care carve out of EMS services

- Medicaid managed care coverage of ambulance services would be removed from the contracts of the current Medicaid MCOs.
- Services would convert to fee for service coverage.
- CPE supplemental payments would increase as Medicaid managed care utilization converts to Medicaid fee for service post carve-out.
- Potential push back from the Medicaid MCOs, as a carve-out represents a reduction to their payment stream.

### The Path Forward

- Remove EMS benefit from MCO service package.
- Revise MCO contracts and capitation rates.

# Discussion on Next Steps

# Next Steps

- Determine authority needed by HHSC to move these strategies forward.
  - Texas Administrative Code (TAC) changes?
  - Preprint form per 42 CFR 438.6(c)?
- Establish workgroup to collaborate with HHSC and EMS stakeholders to design the most comprehensive and beneficial Medicaid supplemental payment program available
- Work with HHSC to gain CMS approval and implement statewide program
- Administer EMS supplemental payment program for participating providers

# Contact Information

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**Matt Zavadsky** - MedStar

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**Captain Wendell Wiley** – Texas City Fire Department

Email: [wwiley@texas-city-tx.org](mailto:wwiley@texas-city-tx.org)

# Tab C – OMD



## Medical Director's Report

### Discussion

Updated protocols are live for MedStar

OMD Annual Report at March meeting

### MEDS Committee

- Discussed evaluations of CPAP device trial
- Currently only 1 medication on shortage/backorder

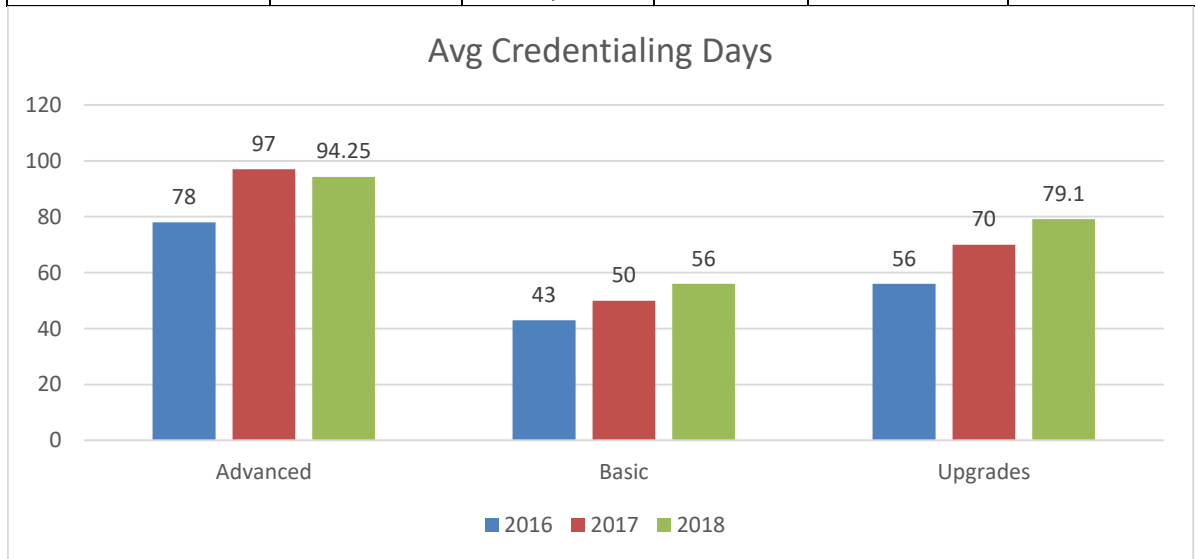
### Education and Training

- Education
  - o March Skills Fair
- Training
  - o FRO protocol update training in process

### Credentialing

- FRO testing to be completed in May

	Candidates	Credentialed	Pulled	Separated	In-training
Advanced	19	12	3	-	4
Adv Upgrade	16	10	4	1	1
Basic	53	45	1	-	7
Paramedic Students	10	9	-	-	1



QA

Case Acuity			
	December 2018	January 2019	February 2019
High	4 (5.9%)	11 (12.9%)	6 (27.3%)
Moderate	18 (26.5%)	26 (30.6%)	6 (27.3%)
Low	37 (54.4%)	35 (41.2%)	8 (36.4%)
Non QA/QI	9 (13.2%)	13 (15.3%)	2 (9.1%)
Grand Total	68 (100.0%)	85 (100.0%)	22 (100.0%)

Case Disposition			
	December 2018	January 2019	February 2019
Clinically Appropriate		1 (1.2%)	1 (4.5%)
Needs Improvement	26 (38.2%)	27 (31.8%)	4 (18.2%)
Clinically Inappropria..	1 (1.5%)	3 (3.5%)	5 (22.7%)
Forwarded	18 (26.5%)	14 (16.5%)	1 (4.5%)
No Fault	21 (30.9%)	29 (34.1%)	8 (36.4%)
Pending	2 (2.9%)	11 (12.9%)	3 (13.6%)
Grand Total	68 (100.0%)	85 (100.0%)	22 (100.0%)

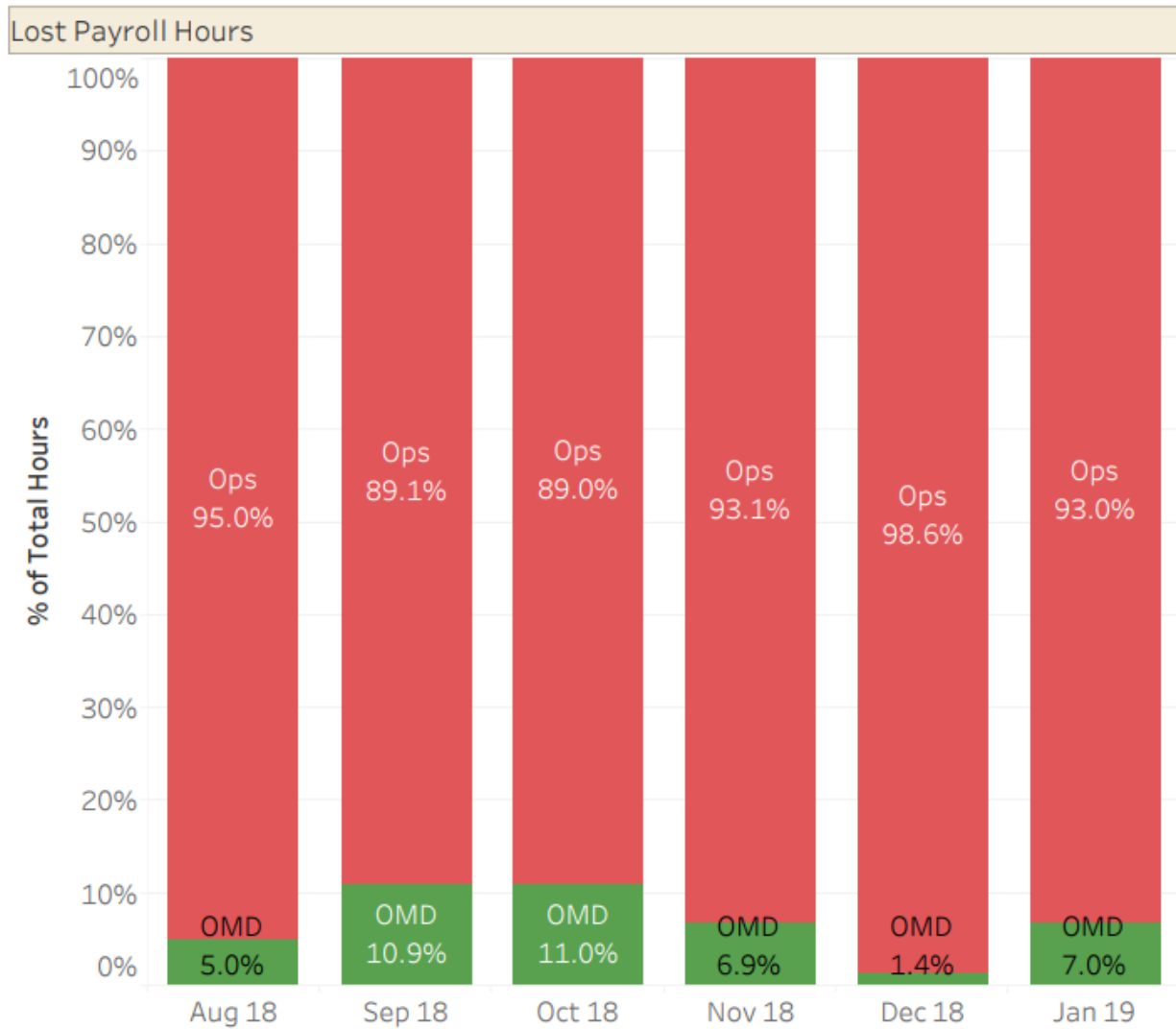
Case Metrics (Time to MD Review, Time to Closure)			
Acuity	Avg. Created-Review Days	Avg. Review-Closure Days	Avg. Created-Closure Days
High	1.8 days	2.4 days	4.4 days
Moderate	4.0 days	8.2 days	12.8 days
Low	4.6 days	0.4 days	5.3 days
Non QA/QI	3.5 days	0.8 days	4.6 days
Grand To..	3.9 days	2.3 days	6.6 days

Case Origin		
Self Report 63 36.0%	OMD 25 14.3%	Ops 15 8.6%
	CPR QA 10 5.7%	FRO 9
Airway QA 35 20.0%		Facility 9

System Clinical Issues			
	Dec..	Janu..	Febr..
;;#Inadequately Treated ..	1		
;;#No EtCO2 w/ PPV;#			3
;;#Unrecognized Failed A..		1	
Equipment Issues	2	4	1
Inadequately Treated U..	1	6	2
Unrecognized Failed Air..	2	2	
Untreated Lethal Arrhyth..			1

Case Status			
	Decemb..	January ..	February..
Closed	60 (88.2%)	67 (78.8%)	16 (72.7%)
Open	8 (11.8%)	17 (20.0%)	5 (22.7%)
Open CIP		1 (1.2%)	1 (4.5%)
Grand Total	68 (100.0%)	85 (100.0%)	22 (100.0%)

Clinical Restriction Impact on Lost Unit Hours



<b>Reason</b>	<b>Month</b>
<span style="color: red;">■</span> Ops <span style="color: green;">■</span> OMD	8/1/2018 to 2/28/2019

Lost Payroll Hours (Totals)

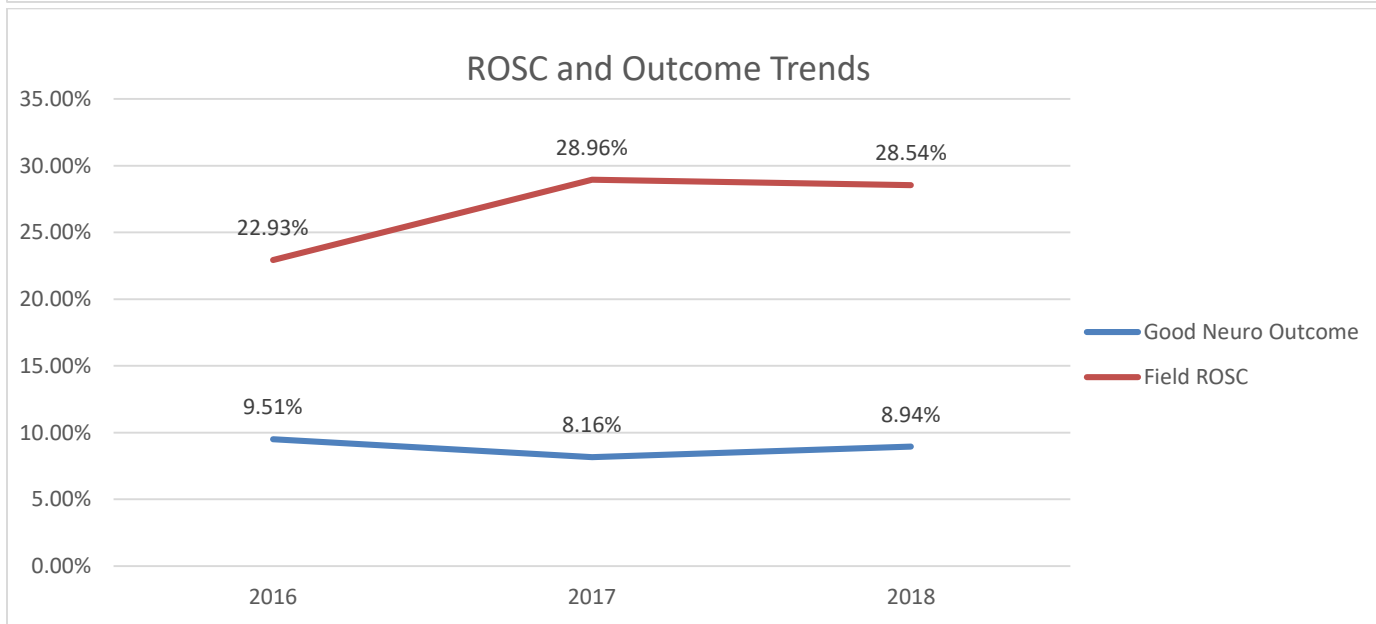
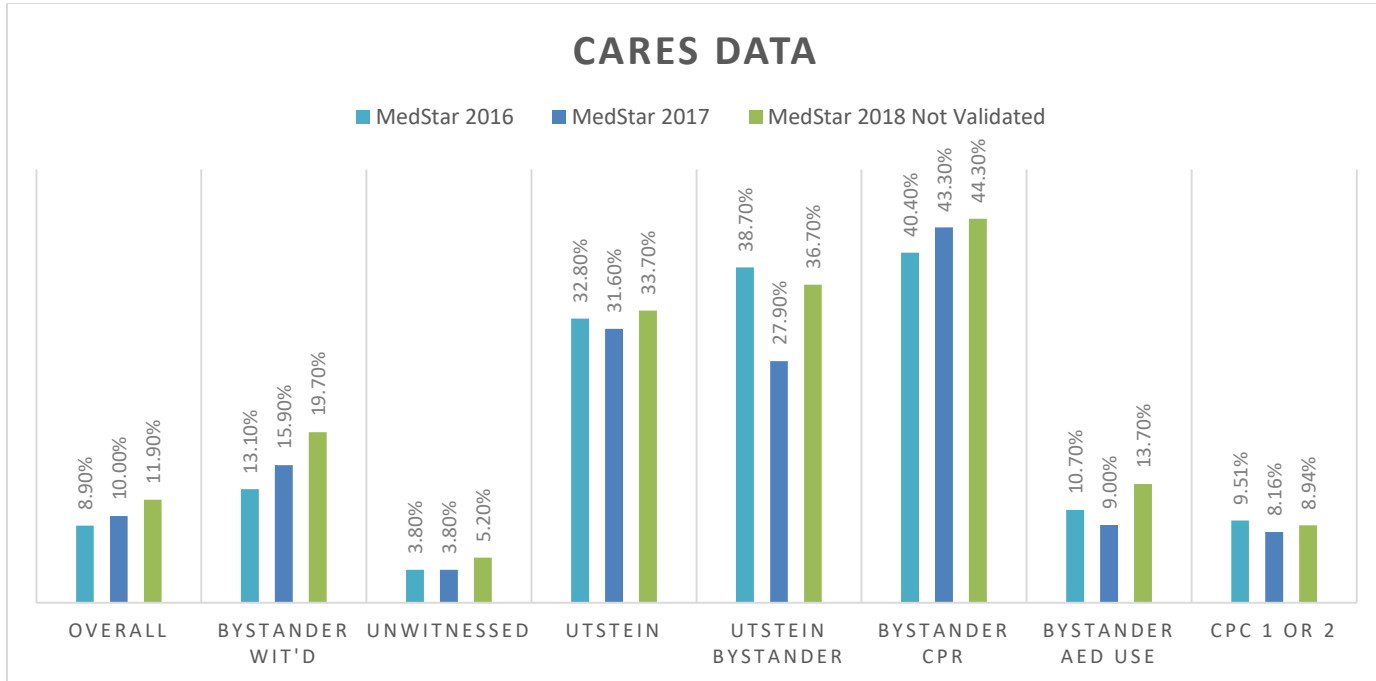
	Aug 18	Sep 18	Oct 18	Nov 18	Dec 18	Jan 19
Ops	485.6	492	520.2	466	620	508.1
OMD	25.5	60.3	64	34.5	9	38
<b>Grand Total</b>	<b>511.1</b>	<b>552.3</b>	<b>584.2</b>	<b>500.5</b>	<b>629</b>	<b>546.1</b>

## System Diagnostics

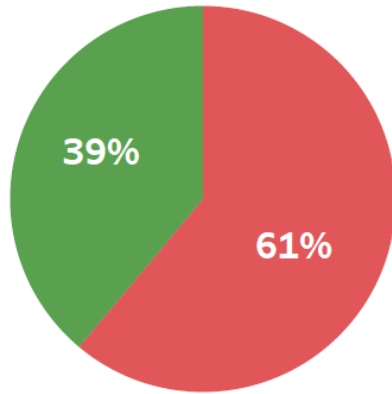
- Clinical Bundles Report
  - o Coming in March

- Resuscitation

10 cases with missing outcome data from various hospitals

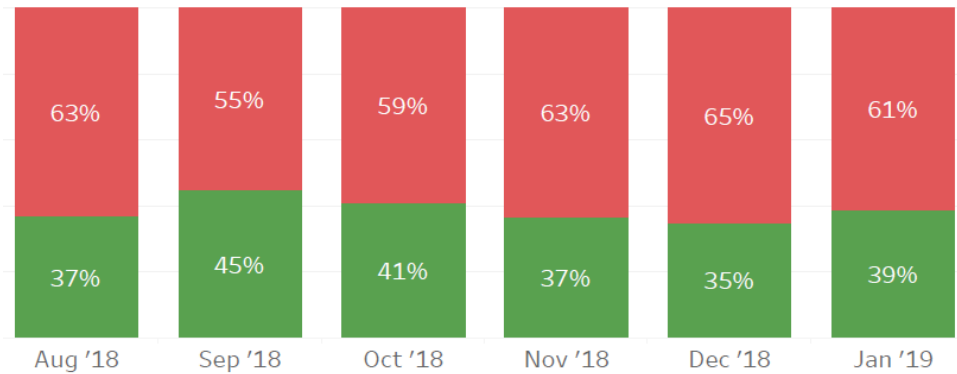


### January 2019

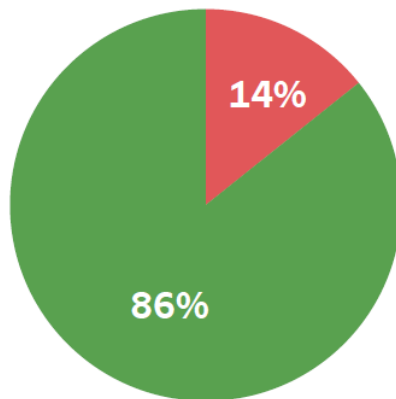


#### ROSC

- No
- Yes



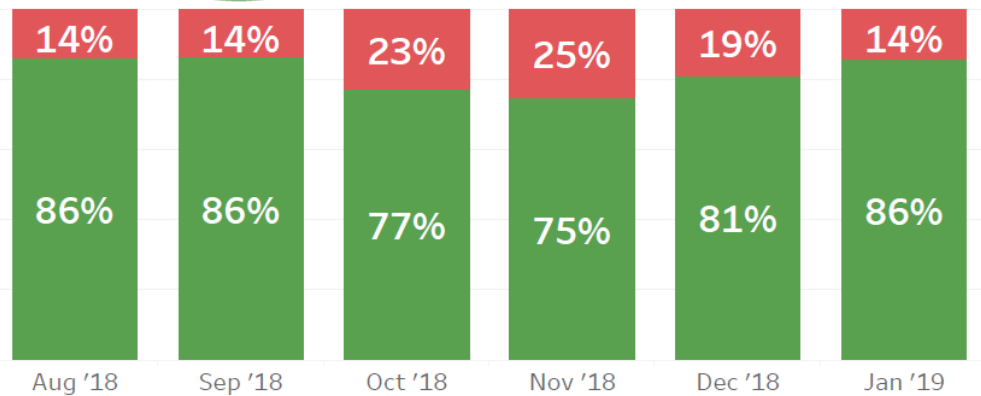
### January 2019



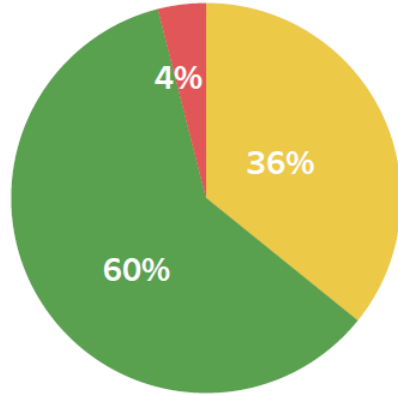
#### Chest Compression Fraction

- < 90%
- ≥ 90%

Chest compressions should be performed at least 90% of the time during a cardiac arrest



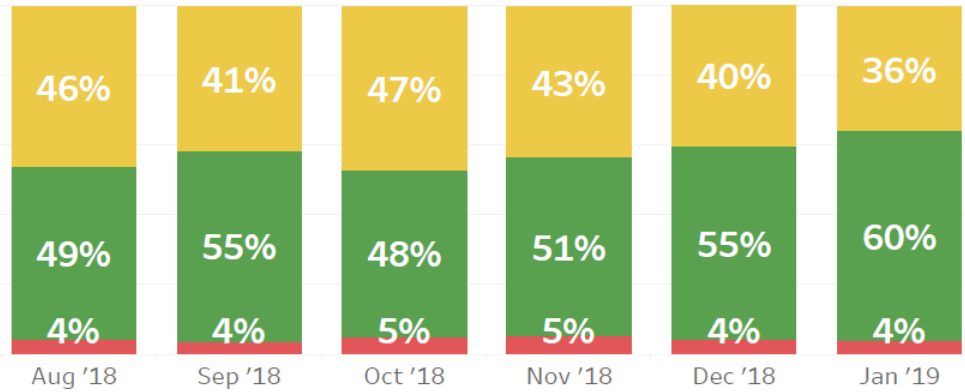
## January 2019



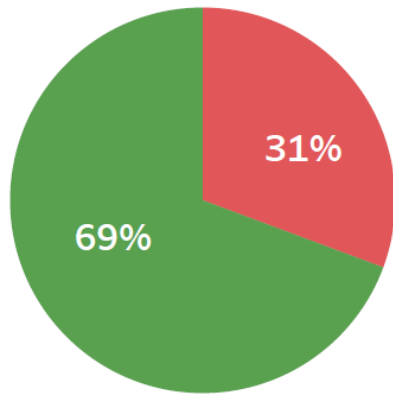
### Rate

- Too Fast
- Correct Rate
- Too Slow

Chest compression should be performed at a rate of 100-120 compressions per minute



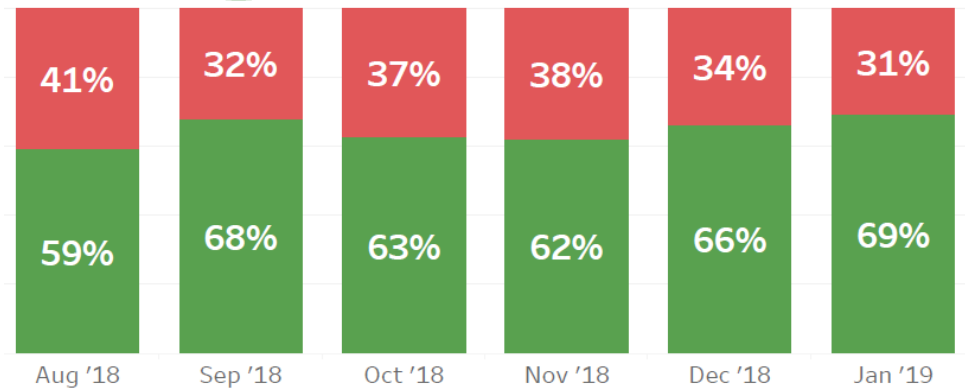
## January 2019

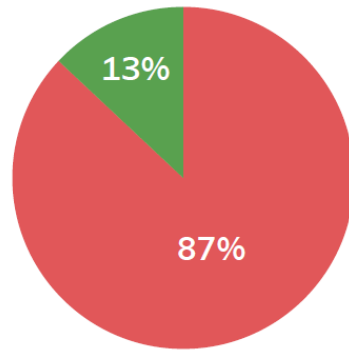


### Depth

- Too Shallow
- Correct Depth

Chest compressions should meet a minimum depth of 2 inches



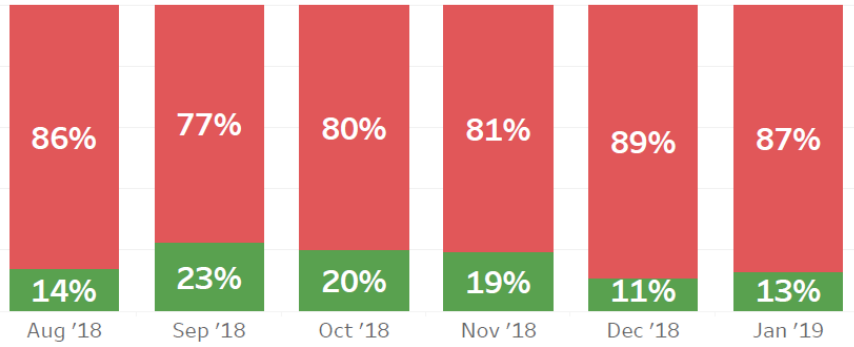


January 2019

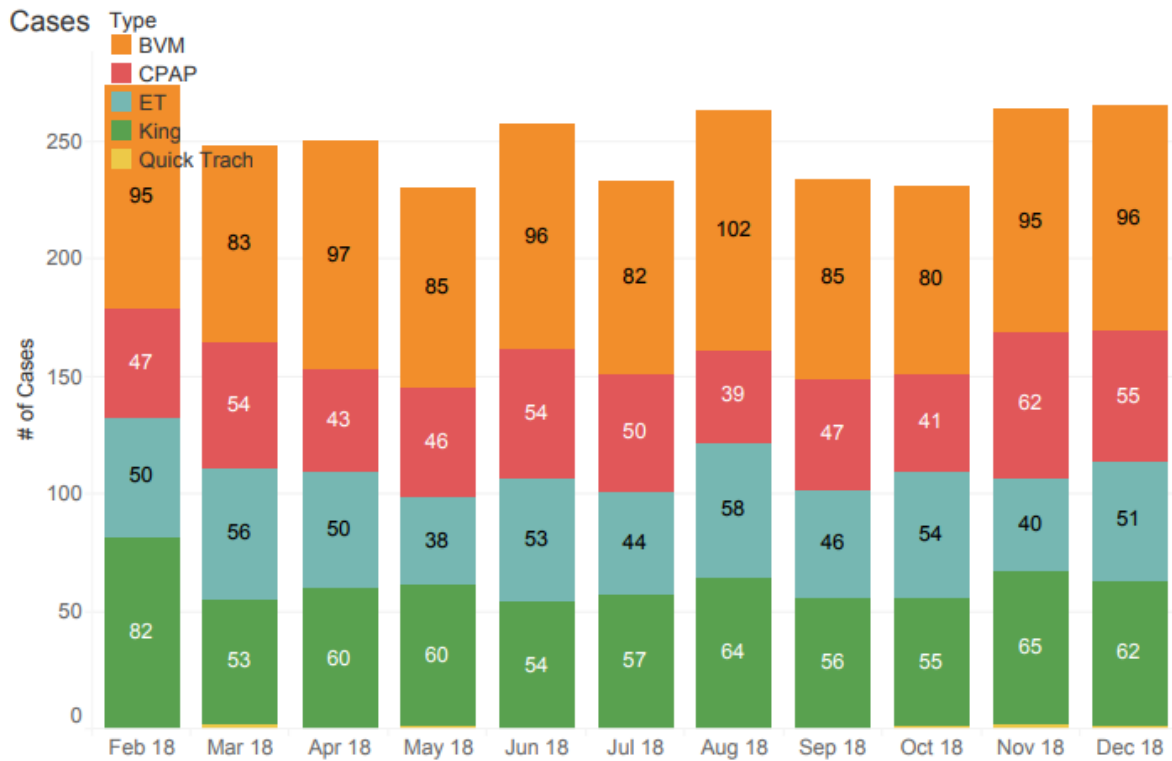
Release Velocity

- Inadequate Release
- Adequate Release

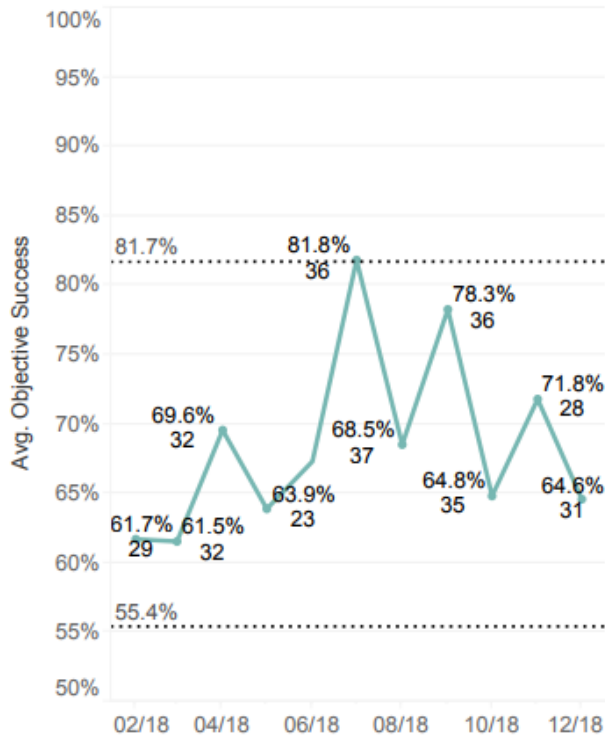
You should allow full chest recoil at a speed of at least 400 mm/s



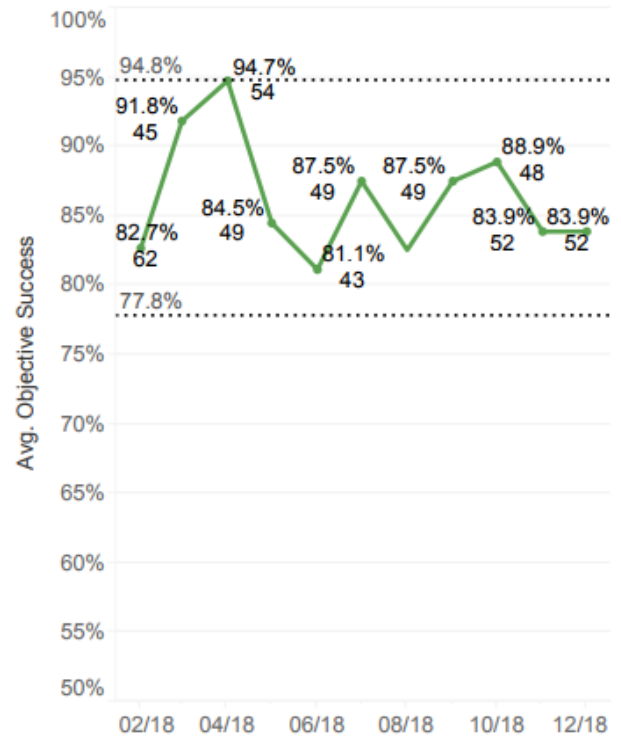
- Airway Report



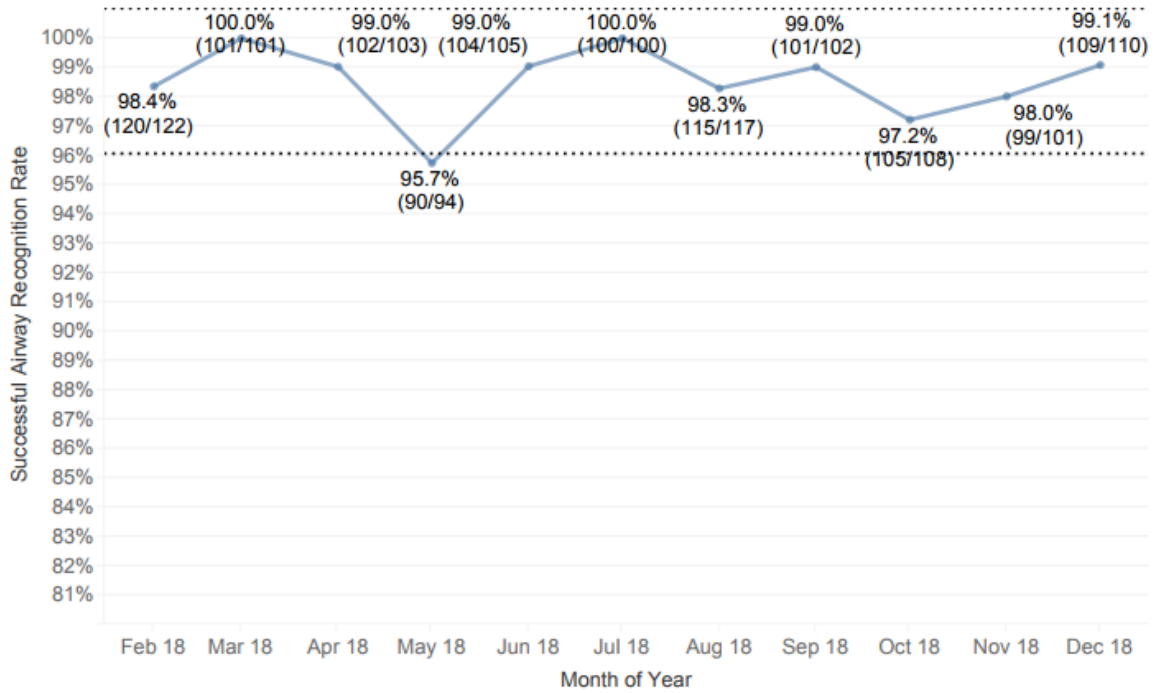
Advanced Airways Success - ET



Advanced Airways Success - King

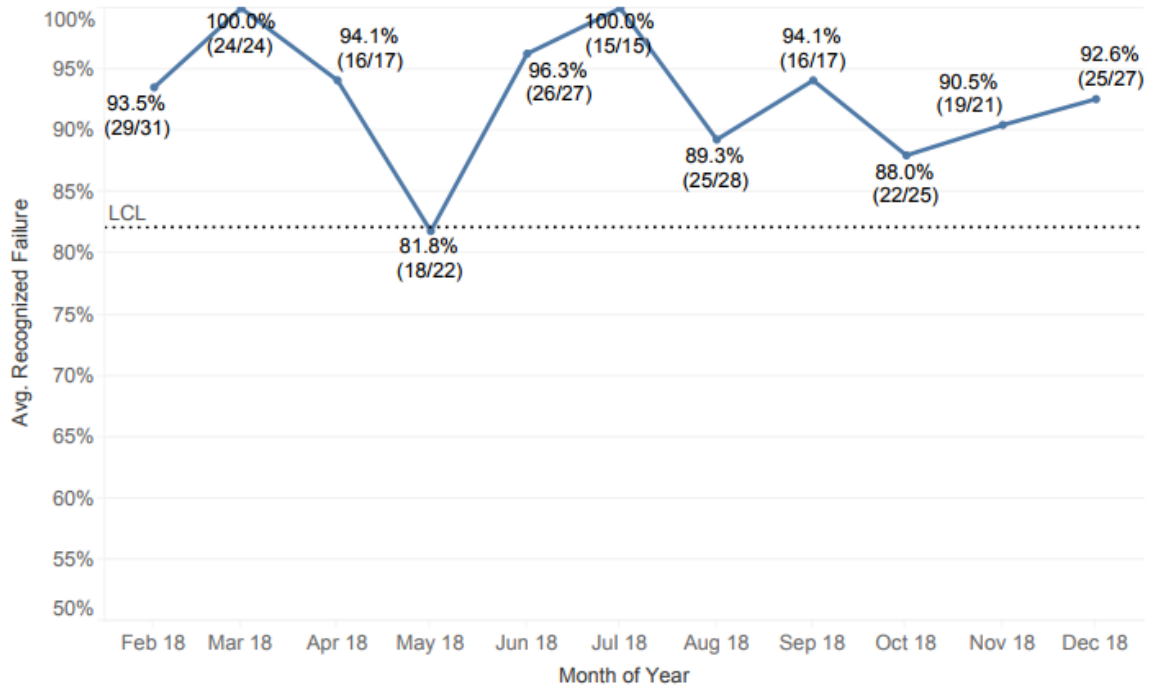


Recognition of Successful Advanced Airways





### Recognition of Failed Advanced Airways



# Tab D – Chief Compliance Officer/Legal



**Tuesday, February 19, 2019**  
**Compliance Officer's Report**  
**January 8<sup>th</sup>, 2019 to February 18, 2019**

**Compliance Officer Duties**

- Several investigations conducted for compliance, and employee relation matters
- Submitted all employee provider roster changes to the DSHS as required
- Two narcotic anomalies processed:
  1. A Primary Paramedics inadvertently took a narcotics pouch home at the end of shift. Upon discover they returned them to MedStar and submitted a drug screen sample.
  2. During the check-in process a Logistics Tech discovered a Fentanyl vial was broken. Upon discover they returned them to MedStar and submitted a drug screen sample.

All anomaly procedures were followed, employees drug tested as warranted, and no foul play was suspected.

**Paralegal Duties**

- 22 DFPS reports made for suspected abuse, neglect, or exploitation
- 3 Pre-trial meetings held with the District Attorney's office
- 2 Criminal court witness appearances
- 4 Law Enforcement agency interviews
- 5 Subpoena(s) for witness appearance processed and served
- Created, reviewed, and processed multiple contractual agreements with GC as needed

A handwritten signature in black ink, appearing to read "Chad Carr", is written over a horizontal line.

Chad Carr  
Compliance Officer  
Paralegal – Office of General Counsel  
CACO, CAPO, CRC, EMT-P

# Tab E – FRAB

# Tab F – Finance

Metropolitan Area EMS Authority dba MedStar Mobile Healthcare  
Finance Report – February 27, 2019

The following summarizes significant items in the January, 2019 Financial Reports:

Statement of Revenues and Expenses:

Net retained earnings for the month of January, 2019 is a loss of \$38,539 as compared to budgeted gain of \$314,996 for a negative variance of \$353,536.

- Billed transports were approximately 400 less than budgeted transports, which caused a lower than planned revenue total.
- In January, MAEMSA became aware that Continental Benefits was holding health insurance claims due to a website issue they were having. The issue has been corrected, however, approximately \$200,000 in claims for October-December 2018 were paid and recorded in January, 2019.

The 4 months ended January, 2019 shows a loss of \$27,699 as compared to a budgeted loss of \$17,967, for a negative variance of \$9,732.

- Several unbudgeted items were reported during this period which caused a lower than expected net earnings. They were:

Legal Services	\$	31,135
FWFD Grant	\$	56,818
Med Director payout	\$	70,000
		<hr/>
	\$	157,953
		<hr/>

Without these unbudgeted expenditures, January, 2019 would show a net earnings of \$130,254, compared to a budgeted loss of \$17,967, for a positive variance of \$148,221.

Key Financial Indicators:

- Current Ratio – MedStar has \$11.62 in current assets (Cash, receivables) for every dollar in debt. (Goal: a score of \$1.00 would mean sufficient current assets to pay debts.)
- Cash as % of Annual Expenditures – The Restated Interlocal Cooperative Agreement, Sec 5.5.2, mandates 3 months of operating capital. As of January 31, there is slightly less than 6 months in cash.
- Accounts Receivable Turnover – This statistic indicates MedStar’s effectiveness in extending credit and collecting debts by indicating the average age of the receivables. MedStar’s goal is a ratio greater than 3.0 times; current turnover is 5.01 times.

- Return on Net Assets – This ratio determines whether the agency is financially better off than in previous years by measuring total economic return. An improving trend indicates increasing net assets and the ability to set aside financial resources to strengthen future flexibility. Management has budgeted a return of 7.04% on assets. Through January, the return is estimated to be 7.15%.

#### Billing Trends:

- 38397 encounters have been billed through January 2019 at a cost of \$662,433 for a cost per claim of \$17.25, or 4.51% of collections. This is below the industry average of 6% of collections.



Metropolitan Area EMS Authority dba MedStar Mobile Healthcare

Balance Sheet

January 31, 2019 and 2018

<b>Assets</b>	<b>Jan-19</b>	<b>Jan-18</b>
Cash	\$20,702,663.21	\$22,047,100.91
Accounts Receivable	\$10,607,473.70	\$17,540,387.75
Inventory	\$299,899.39	\$299,899.39
Prepaid Expenses	\$1,168,924.48	\$1,081,999.57
Property Plant & Equipment	\$48,945,396.37	\$49,332,052.56
Accumulated Depreciation	(\$18,192,972.26)	(\$18,883,600.11)
<b>Total Assets</b>	<b>\$63,531,384.89</b>	<b>\$71,417,840.07</b>
<b>Liabilities</b>		
Accounts Payable	\$446,705.00	\$515,270.35
Other Current Liabilities	\$1,402,567.29	\$2,256,014.46
Accrued Interest	\$7,781.31	\$3,859.98
Payroll Withholding	\$16,089.35	\$9,438.53
Long Term Debt	\$4,475,800.00	\$4,878,195.13
Other Long Term Liabilities	\$110,140.19	\$130,675.51
<b>Total Liabilities</b>	<b>\$6,459,083.53</b>	<b>\$7,793,453.96</b>
<b>Equity</b>		
Retained Earnings	\$57,100,000.66	\$62,071,010.00
Current Year Earnings (loss)	(\$27,699.30)	\$1,553,376.21
<b>Total Equity</b>	<b>\$57,072,301.36</b>	<b>\$63,624,386.21</b>
	<b>\$0.00</b>	<b>\$0.00</b>
<b>Total Liabilities and</b>	<b>\$63,531,384.89</b>	<b>\$71,417,840.07</b>





**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**  
**Statement of Revenue and Expenditures**  
 For the Period Ending January 31, 2019  
 [Actual compared with Budget]

	Current Month Actual	Current Month Budget	Current Month Variance	Year to Date Actual	Year to Date Budget	Year to Date Variance
<b>Revenue</b>						
Transport Fees	\$14,402,259.51	\$14,867,615.00	(\$465,355.49)	\$57,210,108.68	\$56,620,871.00	\$589,237.68
Contractual Allow	(\$5,989,461.91)	(\$4,055,694.00)	(\$1,933,767.91)	(\$23,357,873.64)	(\$15,450,389.00)	(\$7,907,484.64)
Provision for Uncoll	(\$4,380,740.94)	(\$6,624,808.00)	\$2,244,067.06	(\$17,804,787.51)	(\$25,219,270.00)	\$7,414,482.49
Education Income	\$299.46	\$32,000.00	(\$31,700.54)	\$28,594.25	\$33,850.00	(\$5,255.75)
MIH Program Income	\$23,814.22	\$57,612.61	(\$33,798.39)	\$106,286.91	\$228,950.44	(\$122,663.53)
Standby/Subscription	\$59,683.61	\$66,326.00	(\$6,642.39)	\$287,529.45	\$316,956.00	(\$29,426.55)
Pop Health PMPM	\$46,138.54	\$55,385.16	(\$9,246.62)	\$191,677.38	\$221,540.64	(\$29,863.26)
Interest on Investment	\$6,178.32	\$0.00	\$6,178.32	\$45,906.38	\$0.00	\$45,906.38
Gain(Loss) on Disposit	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Revenue</b>	<b>\$4,168,170.81</b>	<b>\$4,398,436.77</b>	<b>(\$230,265.96)</b>	<b>\$16,707,441.90</b>	<b>\$16,752,509.08</b>	<b>(\$45,067.18)</b>
<b>Expenditures</b>						
Salaries	\$2,431,078.47	\$2,421,217.22	\$9,861.25	\$10,332,434.95	\$10,616,969.88	(\$284,534.93)
Benefits and Taxes	\$587,861.52	\$395,361.67	\$192,499.85	\$1,805,252.16	\$1,614,092.64	\$191,159.52
Interest	\$10,107.72	\$6,744.49	\$3,363.23	\$35,683.87	\$22,143.77	\$13,540.10
Fuel	\$94,596.03	\$95,015.67	(\$419.64)	\$404,349.83	\$380,062.68	\$24,287.15
Medical Supp/Oxygen	\$184,534.13	\$196,249.00	(\$11,714.87)	\$689,969.01	\$730,050.00	(\$40,080.99)
Other Veh & Eq	\$34,178.25	\$34,800.09	(\$621.84)	\$172,169.18	\$139,200.36	\$32,968.82
Rent and Utilities	\$47,663.44	\$43,734.33	\$3,929.11	\$113,494.95	\$174,937.32	(\$61,442.37)
Facility & Eq Mtc	\$83,122.46	\$46,351.17	\$36,771.29	\$193,708.49	\$178,794.68	\$14,913.81
Postage & Shipping	\$4,481.51	\$7,379.69	(\$2,898.18)	\$10,342.11	\$29,518.76	(\$19,176.65)
Station	\$35,319.59	\$44,256.86	(\$8,937.27)	\$144,523.72	\$140,221.44	\$4,302.28
Comp Maintenance	\$110,440.66	\$110,605.00	(\$164.34)	\$463,618.02	\$442,420.00	\$21,198.02
Insurance	\$54,385.41	\$30,991.42	\$23,393.99	\$93,281.47	\$123,965.68	(\$30,684.21)
Advertising & PR	\$907.62	\$16,411.01	(\$15,503.39)	\$8,868.06	\$25,944.04	(\$17,075.98)
Printing	\$5,989.61	\$5,813.96	\$175.65	\$16,531.02	\$23,255.84	(\$6,724.82)
Travel & Entertain	\$5,059.69	\$22,913.00	(\$17,853.31)	\$22,477.66	\$50,105.00	(\$27,627.34)
Dues & Subs	\$5,917.71	\$24,192.00	(\$18,274.29)	\$46,403.04	\$54,027.00	(\$7,623.96)
Continuing Educ Ex	\$4,264.00	\$34,925.00	(\$30,661.00)	\$18,545.49	\$78,865.00	(\$60,319.51)
Professional Fees	\$201,250.10	\$231,254.26	(\$30,004.16)	\$795,222.73	\$769,217.04	\$26,005.69
Education Expenses	\$6,185.26	\$16,470.00	(\$10,284.74)	\$47,559.17	\$54,555.00	(\$6,995.83)
Miscellaneous	\$0.00	\$168.00	(\$168.00)	\$66,646.46	\$672.00	\$65,974.46
Depreciation	\$299,366.79	\$298,586.00	\$780.79	\$1,254,059.81	\$1,121,458.00	\$132,601.81
<b>Total Expenditures</b>	<b>\$4,206,709.97</b>	<b>\$4,083,439.84</b>	<b>\$123,270.13</b>	<b>\$16,735,141.20</b>	<b>\$16,770,476.13</b>	<b>(\$35,334.93)</b>
<b>Net Rev in Excess of Expend</b>	<b>(\$38,539.16)</b>	<b>\$314,996.93</b>	<b>(\$353,536.09)</b>	<b>(\$27,699.30)</b>	<b>(\$17,967.05)</b>	<b>(\$9,732.25)</b>

**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare  
Key Financial Indicators  
January 31, 2019**

	Goal	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
<b>Current Ratio</b>	<b>&gt; 1</b>	<b>8.88</b>	<b>7.19</b>	<b>8.97</b>	<b>9.49</b>	<b>11.62</b>

Indicates the total short term resources available to service each dollar of debt. Ratio should be greater than 1, so that assets are available to retire debt when due.

<b>Cash as % of Annual Expenditures</b>	<b>&gt; 25%</b>	<b>49.02%</b>	<b>65.31%</b>	<b>55.06%</b>	<b>47.07%</b>	<b>44.50%</b>
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Indicates compliance with Ordinance which specifies 3 months cash on hand.

<b>Accounts Receivable Turnover</b>	<b>&gt;3</b>	<b>5.47</b>	<b>4.16</b>	<b>4.96</b>	<b>4.28</b>	<b>5.01</b>
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A measure of how these resources are being managed. Indicates how long accounts receivable are being aged prior to collection. Our goal is a turnover rate of greater than 3 .

<b>Return on Net Assets</b>	<b>7.04%</b>	<b>13.95%</b>	<b>11.60%</b>	<b>10.35%</b>	<b>10.11%</b>	<b>7.15%</b>
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Reveals management's effectiveness in generating profits from the assets available. Budgeted return on net assets for FY19 is 7.04%.

Billing and Collections - Key Trends

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Total
Collections	\$ 4,042,906	\$ 3,654,886	\$ 3,555,095	\$ 3,450,588									\$ 14,703,474
Billed Transports	9676	9202	9868	9651									38397
Cost to Bill and Collect	\$ 196,892	\$ 193,052	\$ 135,927	\$ 136,561									\$ 662,433
Cost per claim	\$ 20.35	\$ 20.98	\$ 13.77	\$ 14.15	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$ 17.25
Cost as % of collections	4.87%	5.28%	3.82%	3.96%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	4.51%

FY 18-19 Billed Transports = 38397



**Business Gold Rewards**

MEDSTAR/AMAA  
DOUGLAS R HOOTEN  
Closing Date 01/28/19 Next Closing Date 02/25/19

Account Ending

**New Balance** **\$14,841.06**

**Please Pay By** **02/12/19<sup>‡</sup>**

<sup>‡</sup> Payment is due upon receipt. We suggest you pay by the Please Pay By date. You may have to pay a late fee if your payment is not received by the Next Closing Date.

**Membership Rewards® Points**

Available and Pending as of 12/31/18

**900,956**

For more details about Rewards, please visit [americanexpress.com/rewardsinfo](http://americanexpress.com/rewardsinfo)

**Account Summary**

Previous Balance	\$17,001.23
Payments/Credits	-\$18,088.13
New Charges	+\$15,927.96
Fees	+\$0.00

**New Balance** **\$14,841.06**

Days in Billing Period: 31



See page 2 for important information about your account.



**Important Information:** To access the most up to date version of your Cardmember Agreement, please log in to your Account at [www.americanexpress.com](http://www.americanexpress.com).

**Customer Care**



**Pay by Computer**  
[americanexpress.com/business](http://americanexpress.com/business)

**Customer Care**  
1-800-492-3344

**Pay by Phone**  
1-800-472-9297



See page 2 for additional information.

*Douglas R Hooten 1-30-19*  
\_\_\_\_\_  
Douglas R. Hooten  
 **APPROVED**

↓ Please fold on the perforation below, detach and return with your payment ↓



**Payment Coupon**  
Do not staple or use paper clips



**Pay by Computer**  
[americanexpress.com/business](http://americanexpress.com/business)



**Pay by Phone**  
1-800-472-9297

**Account Endin**

Enter 15 digit account # on all payments.  
Make check payable to American Express.

DOUGLAS R HOOTEN  
MEDSTAR/AMAA  
2900 ALTA MERE DR  
FORT WORTH TX 76116-4115

Please Pay By  
**02/12/19**

Amount Due  
**\$14,841.06**



Check here if your address or phone number has changed. Note changes on reverse side.

AMERICAN EXPRESS  
P.O. BOX 650448  
DALLAS TX 75265-0448



0000349991382953784 001484106001484106 24 H



**Payments and Credits**

**Summary**

	<b>Total</b>
<b>Payments</b>	-\$17,001.23
<b>Credits</b>	
DOUGLAS R HOOTEN	-\$1,086.90
<b>Total Payments and Credits</b>	<b>-\$18,088.13</b>

**Detail** \*Indicates posting date

<b>Payments</b>				<b>Amount</b>
01/11/19*	DOUGLAS R HOOTEN	CHECKLESS PYMT RECEIVED-THANK YOU		-\$17,001.23
<b>Credits</b>				<b>Amount</b>
01/07/19	DOUGLAS R HOOTEN	ERGOGENESIS NAVASOTA TX 936-870-2632	Credit back	-\$75.00
01/08/19*	DOUGLAS R HOOTEN	POINTS FOR YOUR CHARGES CREDIT	Paid with Points	-\$505.95
01/08/19*	DOUGLAS R HOOTEN	POINTS FOR YOUR CHARGES CREDIT	Paid with Points	-\$505.95

**New Charges**

**Summary**

	<b>Total</b>
DOUGLAS R HOOTEN	\$15,841.87
JOAN E JORDAN	\$86.09
<b>Total New Charges</b>	<b>\$15,927.96</b>

**Detail**



**DOUGLAS R HOOTEN**  
Card Ending

				<b>Amount</b>
12/28/18	CONCUR TECHNOLOGIE 542929806820874 5888954815	BELLEVUE	WA PO 2191567	\$150.00
	Travel website			
01/01/19	DIGICERT INC 801-701-9684	LEHI	UT PO 2191070	\$642.00
	Software, yearly renewal			
01/02/19	FORT WORTH HUMAN RES 817-360-9911	FORT WORTH	TX PO 2191434	\$75.00
	January legal updates & Luncheon for HR			
01/03/19	FROSCH/GANT TRAVEL MANAGE AMERICAN AIRLINES	BLOOMINGTON	IN PO 2191523	\$270.43
	From: DALLAS/FORT WORTH	To: SAN DIEGO LINDBERG DALLAS/FORT WORTH	Carrier: AA AA	Class: S O
	Ticket Number: 00172893089832 Passenger Name: HANSEN/MATTHEW KEITH Document Type: PASSENGER TICKET			Lytx conference
01/03/19	FROSCH/GANT TRAVEL MANAGE TRAVEL AGENCY SERVICE	BLOOMINGTON	IN PO 2191523	\$5.00
	Ticket Number: 89007496700625 Passenger Name: HANSEN/MATTHEW KEITH Document Type: TRAVEL AGENCY FEE			Lytx conference

<b>Detail Continued</b>
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					<b>Amount</b>
01/03/19	FROSCH/GANT TRAVEL MANAGE TRAVEL AGENCY SERVICE Ticket Number: 89007496699763 Passenger Name: SHELTON/MICHAEL LYNN Document Type: TRAVEL AGENCY FEE	BLOOMINGTON	IN	PO 2191524	\$5.00
	<b>Lytx conference</b>				
01/03/19	FROSCH/GANT TRAVEL MANAGE AMERICAN AIRLINES From: DALLAS/FORT WORTH To: SAN DIEGO LINDBERG DALLAS/FORT WORTH Ticket Number: 00172893085750 Passenger Name: SHELTON/MICHAEL LYNN Document Type: PASSENGER TICKET	BLOOMINGTON	IN	PO 2191524	\$270.43
	<b>Lytx conference</b>				
	Carrier: AA Class: S AA O Date of Departure: 02/24				
01/03/19	CVS PHARMACY 8007467287	FORT WORTH	TX	Paid with AmEx points	\$505.95
	<b>Gift card for TL Drake</b>				
01/03/19	LYTX 0921 866-419-5861	SAN DIEGO	CA	PO 2191525	\$350.00
	<b>Lytx conf. registration Mike Shelton</b>				
01/03/19	WALGREENS 8002892273	FORT WORTH	TX	Paid with AmEx points	\$505.95
	<b>Gift card for TL Drake</b>				
01/03/19	LYTX 0921 866-419-5861	SAN DIEGO	CA	PO 2191526	\$350.00
	<b>Lytx conf. registration Matt Hansen</b>				
01/04/19	WEBSITEHOSTINGBILLCOM 4059488300	OKLAHOMA CITY	OK		\$69.00
	<b>reoccurring charge</b>				
01/05/19	NTTA AUTOCHARGE TOLLS TOLL FEES	PLANO	TX		\$120.00
	<b>Tolls</b>				
01/07/19	IN *HF CUSTOM SOLUTIONS 104953 76109	FORT WORTH	TX	PO 2191696	\$490.30
	<b>Hope Squad Lanyards</b>				
01/07/19	FORT WORTH CHAMBER OF COM 8173362491	817-3362491	TX	PO 2191564	\$3,500.00
	<b>Reg's State of the City - table</b>				
01/10/19	FROSCH/GANT TRAVEL MANAGE TRAVEL AGENCY SERVICE Ticket Number: 89007498655611 Passenger Name: ZAVADSKY/MATTHEW SCO Document Type: TRAVEL AGENCY FEE	BLOOMINGTON	IN	PO 2191754	\$5.00
	<b>TVL fee</b>				
01/10/19	FROSCH/GANT TRAVEL MANAGE AMERICAN AIRLINES From: DALLAS/FORT WORTH To: COLORADO SPRINGS P DALLAS/FORT WORTH Ticket Number: 00172895847412 Passenger Name: ZAVADSKY/MATTHEW SCO Document Type: PASSENGER TICKET	BLOOMINGTON	IN	PO 2191754	\$370.84
	<b>Air ticket for Matt Z - consulting</b>				
	Carrier: AA Class: S AA S Date of Departure: 02/06				
01/11/19	CANVA: 02201-5364293 8778877815	PALO ALTO	CA	PO 2191756	\$110.00
	<b>Postcard for Clay Shoot Invitation and registration</b>				
01/11/19	PANERA BREAD # 606050 O 6060 6060501547222551076114 FOOD/BEVERAGE	WESTWORTH VIL	TX	Req 1192580	\$311.24
	<b>Lunch for group that cleaned out room B254</b>				
01/12/19	EASYKEYSCOM INC 0541 877-839-5397	CHARLOTTE	NC	PO 2191607	\$27.80
	<b>Purchased extra keys for Business office desks</b>				
01/14/19	AMERICAN AIRLINES 45105502 AMERICAN AIRLINES Ticket Number: 0010639948025 Passenger Name: HOOTEN/DOUGLAS Document Type: ADDITIONAL COLLECTION	800-433-7300	TX	PO 2191731	\$535.00
	<b>Purchase upgrade for Gold Status for Douglas Hooten</b>				
	Date of Departure: 01/14				
01/17/19	EB *COPY OF EPRO SCHED 8014137200	SAN FRANCISCO	CA	PO 2191721	\$373.87
	<b>Diana Anderson Registration for ePro Scheduler class</b>				
01/17/19	EB *COPY OF EPRO SCHED 8014137200	SAN FRANCISCO	CA	PO 2191721	\$373.87
	<b>Anita Meadows Registration for ePro Scheduler class</b>				
01/17/19	EB *COPY OF EPRO SCHED 8014137200	SAN FRANCISCO	CA	PO 2191721	\$373.87
	<b>Robert Strickland Registration for ePro Scheduler class</b>				



**Detail Continued**

						Amount
01/22/19	FULLBARS CELL PHONE AND C.00-080311605 ELECTRONICS REPAIR <b>Repair to cell phones</b>	FORT WORTH	TX	<b>PO 2191750</b>		\$229.00
01/23/19	GG *A WISH WITH WINGS GG *A WISH WITH CHARITABLE ORG <b>Reserved a table for 10</b>	ARLINGTON	TX	<b>PO 2191757</b>		\$3,000.00
01/23/19	STAR TELEGRAM ADVERTIS 6500318 76102 <b>Advert for RFP - Janitorial service</b> NEWS DEALERS/NEWSSTANDS	FORT WORTH	TX	<b>PO 2191765</b>		\$81.66
01/24/19	PENNWELL JOBS <b>Advert of CFO job search</b> RESUMESEARCH	800-331-4463	OK	<b>PO 2191835</b>		\$275.00
01/24/19	NTTA AUTOCHARGE TOLLS TOLL FEES <b>Tolls</b>	PLANO	TX			\$120.00
01/24/19	YOUR MEMBERSHIP INC*YOUR MEMBERSHIP IN GROTON <b>Advert of CFO job search</b>	GROTON	CT	<b>PO 2191836</b>		\$265.00
01/25/19	PWW MEDIA INC 000000001 <b>Regs. Chad Carr</b> 7176910100 <b>to attend PWW Xi course</b>	MECHANICSBURG	PA	<b>Req 1192887</b>		\$400.00
01/28/19	EB *EMS EVOLUTION 2019 <b>Coding Class</b> 8014137200 <b>Sherry, Shannon, Lauren - business office personnel</b>	SAN FRANCISCO	CA	<b>PO 2191842</b>		\$641.40
01/28/19	EB *EMS EVOLUTION 2019 <b>Regs for Conference</b> 8014137200 <b>Doug, Matt and Ken</b>	SAN FRANCISCO	CA	<b>PO 2191843</b>		\$1,039.26



**JOAN E JORDAN**  
Card Ending

						Amount
01/02/19	PAYFLOW/PAYPAL 0045 888-883-9770	LAVISTA	NE			\$30.60
01/08/19	TWILIO, INC. DIRECT MKTG INTERNET	SAN FRANCISCO				\$10.45
01/26/19	TWILIO, INC. DIRECT MKTG INTERNET	SAN FRANCISCO				\$10.04
01/28/19	PANTHEON SYSTEMS INC 8559279387 <b>Reoccurring charges</b>	SAN FRANCISCO	CA	<b>PO 2191822</b>		\$35.00

**Fees**

						Amount
<b>Total Fees for this Period</b>						<b>\$0.00</b>

**2019 Fees and Interest Totals Year-to-Date**

		Amount
Total Fees in 2019		\$0.00
Total Interest in 2019		\$0.00

# Tab G – Human Resources



**FMLA Leave of Absence (FMLA Detailed Report)**  
**Fiscal Year 10/1/18 - 12/31/2018**  
**Percentages by Department/Conditions**

Conditions		Percentages by Department					
			<b>#of EEs</b>	<b># on FMLA</b>	<b>% of</b>	<b>% by FMLA</b>	<b>% by Dep</b>
Asthma	1						
Cardiology	3						
Cardiothorasic Surgery	1	Advanced	137	12	2.64%	19.67%	8.76%
Chronic Illness	3	Basics	138	16	3.52%	26.23%	11.59%
FMLA - Child	11	Business Intelligence - Deployment, QI, Scheduler	4	1	0.22%	1.64%	25.00%
FMLA - Parent	8	Business Office	29	9	1.98%	14.75%	31.03%
FMLA - Spouse	5	Communications	36	5	1.10%	8.20%	13.89%
Infectious Disease	1	Controller - Payroll, A/P, Purchasing	4	1	0.22%	1.64%	25.00%
Migraines	3	Human Resources	6	1	0.22%	1.64%	16.67%
Opthamology	1	Mobile Integrated Health	14	6	1.32%	9.84%	42.86%
Orthopedic/Knee Surgery	3	MTAC - MedStar Training Academy	13	1	0.22%	1.64%	7.69%
Pregnancy	2	Office of the Medical Director	9	1	0.22%	1.64%	11.11%
Psychological	6	Support Services - Facilities, Fleet, S.E., Logistics, S.E., Logistics	39	8	1.76%	13.11%	20.51%
		<b>Grand Totals</b>	<b>429</b>	<b>61</b>			
Rheumatoid Arthritis	1						
Gastroenterology	2	<b>Total # of Full Time Employees - September 2018</b>	<b>455</b>				
Gynecological	2	<b>% of Workforce using FMLA</b>	<b>13.41%</b>				
Orthopedic/Back	2						
Orthopedic/Shoulder	1						
ENT Surgery	2	<b>TYPE OF LEAVES UNDER FMLA</b>	<b># of Ees</b>	<b>% on Leave</b>			
Obstetrics	2	Intermittent Leave	50	81.97%			
<b>Grand Total</b>	<b>61</b>	Block of Leave	11	18.03%			
		<b>Total</b>	<b>61</b>	<b>100.00%</b>			

**LIGHT DUTY for Fiscal Year 2018-20**

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Goal
Hours/Mo	350:17	242:08	525:00	329:52	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	
FY 2018	350:17	592:28	1117:28	1447:17	1447:17	1447:17	1447:17	1447:17	1447:17	1447:17	1447:17	1447:17	3767:58
FY 2019	151:32	199:27	528:38	879:24	1220:13	1399:43	1828:44	2650:18	3214:32	3679:31	3978:13	4186:38	

GOAL: Reduce number of lost hours due to job-related injuries by

**Worker's Comp LOA for Fiscal Year 2018-20**

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Goal
Hours/Mo	5:10	0:00	16:38	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	
FY 2018	5:10	5:10	21:48	21:48	21:48	21:48	21:48	21:48	21:48	21:48	21:48	21:48	32:24
FY 2019	0:00	12:00	36:00	36:00	36:00	36:00	36:00	36:00	36:00	36:00	36:00	36:00	

GOAL: Reduce number of lost hours due to job-related injuries by

**FMLA LOA for Fiscal Year 2018-20**

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	AVG
Hours/Mo	1688:40	1494:22	1275:31	1376:48	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	583:32
FY 2018	1688:40	3183:02	4458:31	5835:28	5835:28	5835:28	5835:28	5835:28	5835:28	5835:28	5835:28	5835:28	
FY 2019	1536:38	3007:31	4463:20	6080:48	7317:29	9154:12	11121:30	13431:41	14527:50	15672:41	16489:31	17157:21	1429:00:00

**Military Leave for Fiscal Year 2018-20**

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	AVG
Hours/Mo	72:00	48:00	72:00	116:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	30:48
FY 2018	72:00	120:00	192:00	308:00	308:00	308:00	308:00	308:00	308:00	308:00	308:00	308:00	

\*Unfilled shifts only

**Total Leave Hours**

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	AVG
Hours/Mo	2116:01	1784:30	1889:11	1822:41	0:00	0:00	0:00	0:00	0:00	0:00	0:00	0:00	761:15
FY 2018	2116:01	3900:31	5789:50	7612:31	7612:31	7612:31	7612:31	7612:31	7612:31	7612:31	7612:31	7612:31	

**Summary of Fiscal Year 2018-20**

	Light Duty	Worker's Comp	FMLA	Military	Total
YTD	1447:17	21:48	5835:28	308:00	7612:31
Goal-Compare	3767:58	32:24	17157:28	1543:05	

**MedStar Mobile Health Care Separation Statistics - January 2019**

	Current Month			Year to Date			Compared to Jan '18		Headcount 19-Jan
	Vol	Invol	Total	Vol	Invol	Total	Jan '18	%inc/dec	
Full Time Separations	4	1	5	11	3	14	23	-39.1%	455
Part Time Separations	7	0	7	17	0	17	4	325.0%	64
Total Separations	11	1	12	28	3	31	27	14.8%	519

	Full Time	Part Time	Total	Full Time	Part Time	Total
Total Turnover %	1.10%	10.94%	2.31%	3.08%	26.56%	5.97%

**Separations by Department**

**Full time**

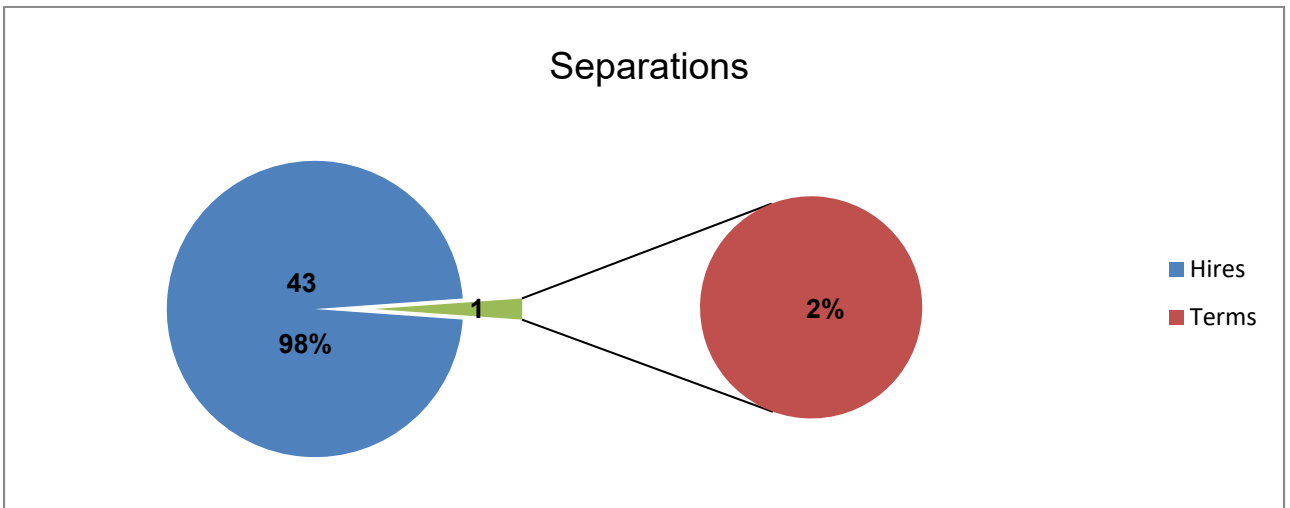
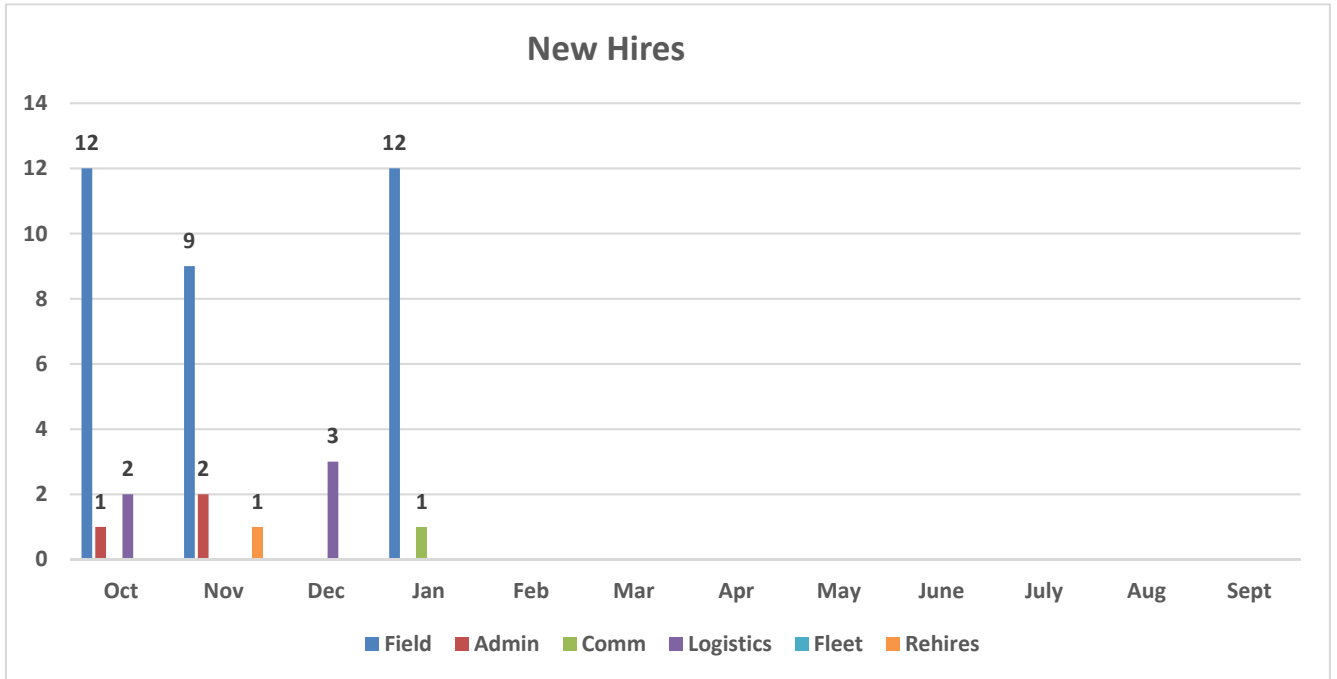
	Current Month			Year to Date			Headcount 19-Jan
	Vol	Invol	Total	Vol	Invol	Total	
Administration							1
Advanced	1	0	1	4	0	4	137
Basics	0	1	1	2	2	4	138
Business Intelligence - Deployment, QI, Scheduler							4
Business Office				1	0	1	29
Communications							36
Compliance							1
Controller - Payroll, Purchasing, A/P							4
Customer Integration							1
Executives							6
Field Manager/Supervisors - Operations							10
Human Resources	1	0	1	1	0	1	6
Information Technology	1	0	1	1	0	1	2
Medical Records							2
Mobile Integrated Health Department							14
MTAC - MedStar Training Academy							13
Office of the Medical Director	1	0	1	1	0	1	9
Risk and Safety							3
Support Services - Facilities, Fleet, S.E., Logistics				1	1	2	39
<b>Total</b>	<b>4</b>	<b>1</b>	<b>5</b>	<b>11</b>	<b>3</b>	<b>14</b>	<b>455</b>

**Part Time**

	Current Month			Year to Date			Headcount 19-Jan
	Vol	Invol	Total	Vol	Invol	Total	
Advanced	1	0	1	4	0	4	35
Basics	5	0	5	8	0	8	23
Business Intelligence - Deployment, QI, Scheduler							
Business Office							
Communications Department				1	0	1	1
Compliance							
Controller - Payroll, Purchasing, A/P							
Customer Integration							
Deployment							
Directors							
Field Manager/Supervisors							
Fleet							
Human Resources				1	0	1	0
Information Technology							
Medical Records							
Mobile Integrated Health Department	1	0	1	2	0	2	2
MTAC - MedStar Training Academy							
Office of the Medical Director							
Risk and Safety							
Support Services - Facilities, Fleet, S.E., Logistics				1	0	1	3
<b>Total</b>	<b>7</b>	<b>0</b>	<b>7</b>	<b>17</b>	<b>0</b>	<b>17</b>	<b>64</b>

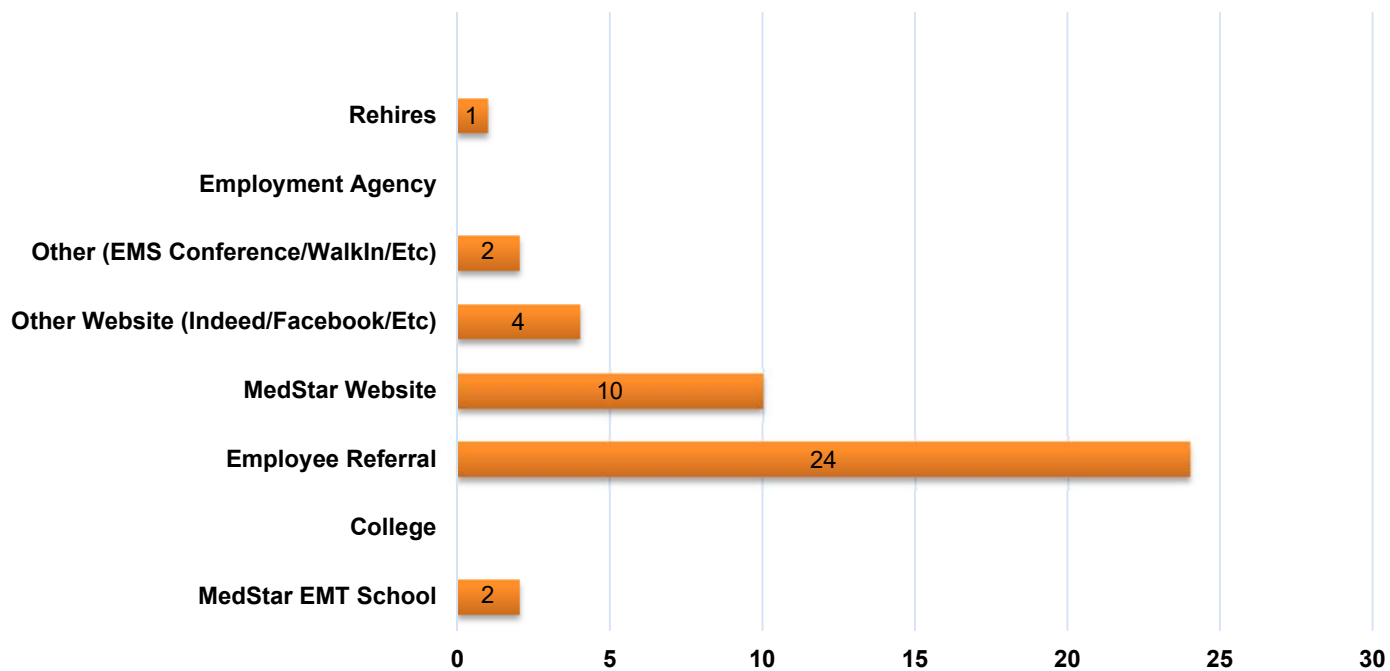
# Recruiting & Staffing Report

## Fiscal Year 2018-2019

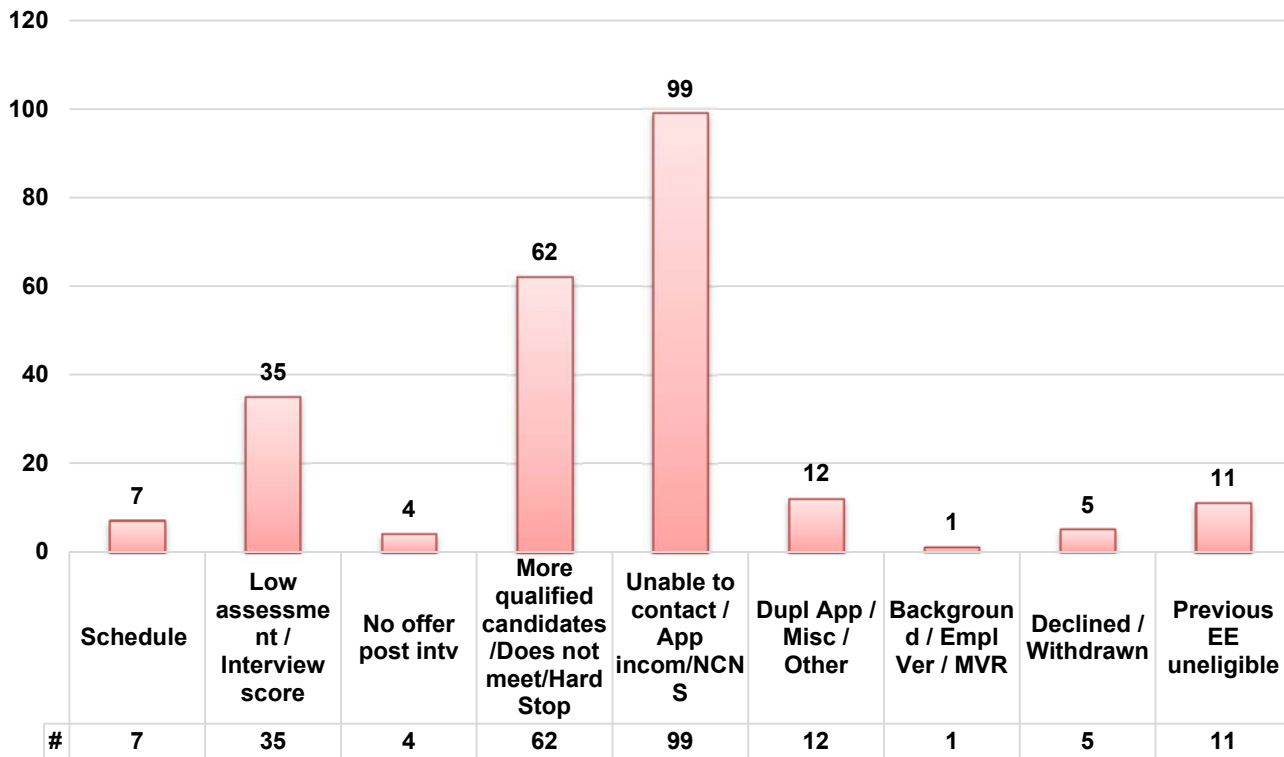


**Fiscal Year Statistics**  
 Total hires to date 43  
 Total separations from hires 1  
 Separation Reason from Hire:  
 Medical - 1

### New Hire Referral Source



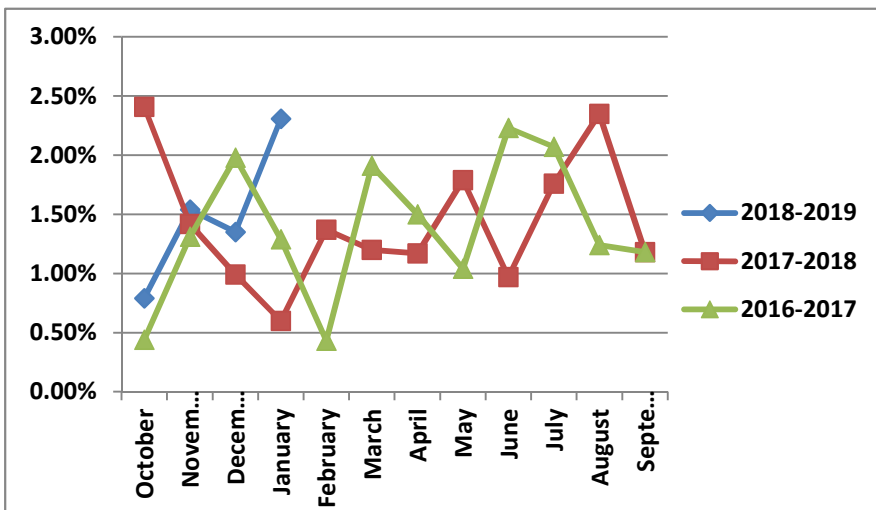
### Applicant Rejection Reasons



TOTAL APPLICATIONS REJECTED 236  
 TOTAL APPLICATIONS REVIEWED - 279

**MedStar Mobile Healthcare Turnover  
Fiscal Year 2018-2019**

	Full & Part Time Turnover			Full Time Only
	2018-2019	2017-2018	2016-2017	2018-2019
October	0.79%	2.41%	0.44%	0.46%
November	1.54%	1.42%	1.31%	0.88%
December	1.35%	0.99%	1.98%	0.66%
January	2.31%	0.60%	1.29%	1.10%
February		1.37%	0.43%	
March		1.20%	1.91%	
April		1.17%	1.50%	
May		1.79%	1.04%	
June		0.97%	2.23%	
July		1.76%	2.07%	
August		2.35%	1.24%	
September		1.18%	1.18%	
Projected	17.970%	17.210%	16.620%	9.300%



# Tab H – Chief Operations Officer



## MedStar Response Time Reliability and AVG Response Time Performance

Period: Jan 2019

Member City	Pri	Current Month						100 Response Compliance Period			
		Calls	On Scene	Avg RT	Late Responses	On Time %	Extended Responses Count	Extended Responses %	Compliance Calculated Responses	Late Responses	On Time %
Blue Mound	1	5	5	00:05:35	0	100.0%	0	0.0%	18	1	94.4%
	2	7	7	00:09:05	2	71.4%	0	0.0%	47	4	91.5%
	3	5	4	00:08:33	0	100.0%	0	0.0%	14	0	100.0%
<b>Total Blue Mound</b>		<b>17</b>	<b>16</b>								
Burleson	1	77	76	00:07:42	10	87.0%	3	3.9%	159	18	88.7%
	2	173	163	00:07:39	11	93.6%	1	0.6%	173	11	93.6%
	3	74	71	00:08:31	4	94.6%	1	1.4%	143	9	93.7%
	4	177	177	00:26:40	8	95.5%	2	1.1%	177	8	95.5%
<b>Total Burleson</b>		<b>501</b>	<b>487</b>								
Edgecliff Village	1	5	5	00:07:11	0	100.0%	0	0.0%	30	7	76.7%
	2	17	16	00:08:08	2	88.2%	0	0.0%	53	5	90.6%
	3	10	9	00:09:07	0	100.0%	0	0.0%	26	1	96.2%
<b>Total Edgecliff Village</b>		<b>32</b>	<b>30</b>								
Forest Hill	1	41	41	00:07:51	7	82.9%	0	0.0%	41	7	82.9%
	2	81	72	00:08:35	6	92.6%	0	0.0%	171	14	91.8%
	3	40	38	00:09:51	1	97.5%	0	0.0%	40	1	97.5%
<b>Total Forest Hill</b>		<b>162</b>	<b>151</b>								
Fort Worth	1	2490	2398	00:07:38	239	90.4%	23	0.9%	2490	239	90.4%
	2	4994	4552	00:07:51	301	94.0%	22	0.4%	4994	301	94.0%
	3	2593	2455	00:09:25	136	94.8%	25	1.0%	2593	136	94.8%
	4	961	960	00:23:25	35	96.4%	17	1.8%	961	35	96.4%
<b>Total Fort Worth</b>		<b>11038</b>	<b>10365</b>								
Haltom City	1	84	82	00:08:02	13	84.5%	2	2.4%	165	24	85.5%
	2	138	126	00:07:51	9	93.5%	0	0.0%	138	9	93.5%
	3	66	60	00:09:21	1	98.5%	0	0.0%	143	6	95.8%
	4	2	2	00:12:17	0	100.0%	0	0.0%	31	0	100.0%
<b>Total Haltom City</b>		<b>290</b>	<b>270</b>								
Haslet	1	3	3	00:13:18	2	33.3%	0	0.0%	32	5	84.4%
	2	9	9	00:09:19	1	88.9%	1	11.1%	9	1	88.9%
	3	3	3	00:09:52	0	100.0%	0	0.0%	17	1	94.1%





## MedStar Response Time Reliability and AVG Response Time Performance

Period: Jan 2019

Member City	Pri	Current Month						100 Response Compliance Period			
		Calls	On Scene	Avg RT	Late Responses	On Time %	Extended Responses Count	Extended Responses %	Compliance Calculated Responses	Late Responses	On Time %
	4	7	7	00:19:51	0	100.0%	0	0.0%	30	1	96.7%
<b>Total Haslet</b>		<b>22</b>	<b>22</b>								
Lake Worth	1	29	29	00:05:52	1	96.6%	0	0.0%	63	5	92.1%
	2	59	56	00:06:21	3	94.9%	0	0.0%	59	3	94.9%
	3	26	24	00:07:58	0	100.0%	0	0.0%	103	4	96.1%
	4	2	2	00:08:39	0	100.0%	0	0.0%	3	0	100.0%
<b>Total Lake Worth</b>		<b>116</b>	<b>111</b>								
Lakeside	1	2	2	00:09:48	0	100.0%	0	0.0%	5	1	80.0%
	2	4	4	00:12:03	1	75.0%	0	0.0%	20	9	55.0%
	3	1	1	00:12:23	0	100.0%	0	0.0%	10	2	80.0%
<b>Total Lakeside</b>		<b>7</b>	<b>7</b>								
River Oaks	1	16	16	00:09:12	2	87.5%	0	0.0%	83	15	81.9%
	2	26	24	00:08:27	3	88.5%	0	0.0%	122	11	91.0%
	3	19	17	00:09:59	0	100.0%	0	0.0%	92	5	94.6%
<b>Total River Oaks</b>		<b>61</b>	<b>57</b>								
Saginaw	1	29	29	00:08:16	4	86.2%	1	3.4%	88	11	87.5%
	2	59	56	00:07:30	0	100.0%	0	0.0%	121	4	96.7%
	3	29	28	00:11:16	1	96.6%	1	3.4%	29	1	96.6%
<b>Total Saginaw</b>		<b>117</b>	<b>113</b>								
Sansom Park	1	18	18	00:06:47	1	94.4%	0	0.0%	73	5	93.2%
	2	28	26	00:05:31	0	100.0%	0	0.0%	28	0	100.0%
	3	17	17	00:08:09	1	94.1%	0	0.0%	100	9	91.0%
<b>Total Sansom Park</b>		<b>63</b>	<b>61</b>								
Westworth Village	1	7	7	00:09:25	1	85.7%	0	0.0%	34	5	85.3%
	2	27	27	00:08:56	1	96.3%	0	0.0%	124	10	91.9%
	3	7	7	00:08:31	0	100.0%	0	0.0%	7	0	100.0%
	4	1	1	00:11:31	0	100.0%	0	0.0%	6	0	100.0%
<b>Total Westworth Village</b>		<b>42</b>	<b>42</b>								
White Settlement	1	62	62	00:06:23	1	98.4%	0	0.0%	125	4	96.8%
	2	97	90	00:06:23	4	95.9%	1	1.0%	97	4	95.9%



## MedStar Response Time Reliability and AVG Response Time Performance

Period: Jan 2019

Member City	Pri	Current Month						100 Response Compliance Period			
		Calls	On Scene	Avg RT	Late Responses	On Time %	Extended Responses Count	Extended Responses %	Compliance Calculated Responses	Late Responses	On Time %
White Settlement	3	62	60	00:07:17	2	96.8%	0	0.0%	62	2	96.8%
	4	12	12	00:09:17	0	100.0%	0	0.0%	107	4	96.3%
<b>Total White Settlement</b>		<b>233</b>	<b>224</b>								
System Wide	1	2868	2773	00:07:38	281	90.2%	29	1.0%	3408	347	89.8%
	2	5719	5228	00:07:48	344	94.0%	25	0.4%	6161	386	93.7%
	3	2952	2794	00:09:21	146	95.1%	27	0.9%	3384	178	94.7%
	4	1162	1161	00:23:44	43	96.3%	19	1.6%	1320	48	96.4%
<b>Total System Wide</b>		<b>12701</b>	<b>11956</b>								

# COMMONLY USED ACRONYMS

## A

**ACEP** – American College of Emergency Physicians

**ACLS** – Advanced Cardiac Life Support

**AED** – Automated External Defibrillator

**ALJ** – Administrative Law Judge

**ALS** – Advance Life Support

**ATLS** – Advanced Trauma Life Support

## B

**BLS** – Basic Life Support

**BVM** – Bag-Valve-Mask

## C

**CAAS** – Commission on Accreditation of Ambulance Services (US)

**CAD** – Computer Aided Dispatch

**CAD** – Coronary Artery Disease

**CISD** – Critical Incident Stress Debriefing

**CISM** – Critical Incident Stress Management

**CMS** – Centers for Medicare and Medicaid Services

**COG** – Council of Governments

## D

**DFPS** – Department of Family and Protective Services

**DHSH** – Department of State Health Services

**DNR** – Do Not Resuscitate

## E

**ED** – Emergency Room

**EKG** – ElectroCardioGram

**EMD** – Emergency Medical Dispatch (protocols)

**EMS** – Emergency Medical Services

**EMT** – Emergency Medical Technician

**EMTALA** – Emergency Medical Treatment and Labor Act

**EMT – I** – Intermediate

**EMT – P** – Paramedic

**ePCR** – Electronic Patient Care Record

**ER** – Emergency Room

## F

**FRAB** – First Responder Advisory Board

**FTE** – Full Time Equivalent (position)

**FTO** – Field Training Officer

**FRO** – First Responder Organization

## G

**GCS** – Glasgow Coma Scale

## H

**HIPAA** – Health Insurance Portability & Accountability Act of 1996

## I

**ICD – 9** – International Classification of Diseases, Ninth Revision

**ICD -10** – International Classification of Diseases, Tenth Revision

**ICS** – Incident Command System

## J

**JEMS** – Journal of Emergency Medical Services

## K

## L

**LMS** – Learning Management System

## M

**MCI** – Mass Casualty Incident

**MI** – Myocardial Infarction

**MICU** – Mobile Intensive Care Unit

**MIH** – Mobile Integrated Health

## N

**NAEMSP** – National Association of EMS Physicians

**NAEMT** – National Association of Emergency Medical Technicians (US)

**NEMSAC** – National EMS Advisory Council (NHTSA)

**NEMSIS** – National EMS Information System

**NFIRS** – National Fire Incident Reporting System

**NFPA** – National Fire Protection Association

**NIMS** – National Incident Management System

## O

**OMD** – Office of Medical Director

## P

**PALS** – Pediatric Advanced Life Support

**PHTLS** – Pre-Hospital Trauma Life Support

**PSAP** – Public Safety Answering Point (911)

**PUM** – Public Utility Model

## Q

## R

**RFQ** – Request for Quote

**RFP** – Request for Proposal

## S

**SSM** – System Status Management

**STEMI** – ST Elevation Myocardial Infarction

## T

## U

## V

**VFIB** – Ventricular fibrillation; an EKG rhythm

## W

## X/Y/Z