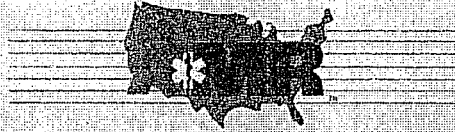


PARAMEDIC AND
NON-EMERGENCY
AMBULANCE SERVICE



#7

AMERICAN MEDICAL RESPONSE

"Our mission is to make a difference by caring for people in need"

February 13, 2012

Chandra L. Wallar
County Executive Officer
County of Santa Barbara
105 East Anapamu Street Ste. 406
Santa Barbara, Ca 93101-2065

Re: **Fire Service Deployment and Departmental Performance Audit**

Dear Ms. Wallar,

I am writing in response to information provided in the Citygate & Associates, LLC study of resources being presented to the Board of Supervisors on 2-14-12. As we have only recently had an opportunity to review the document and for the first time, we believe it would be helpful to point out a couple of inaccurate statements that are contained in the report and clarify what we understand to be correct.

On page 35 section 2.4.3 - Specialty Responses and again on page 111 section 3.5.4 - Advanced Life Support Services there are references to "inadequate coverage" and "extended response times" by American Medical Response (AMR), apparently as justification for deploying Santa Barbara County fire ambulances at stations 41 and 51. Additionally, the report indicates that Medic 51 provides Long Distance Transfers from Lompoc Hospital to Cottage and Goleta Valley Hospitals. Actually, Medic 41 and Medic 51 have historically provided service in their response zones since approximately 1952 for what was formally "Ambulance 41" and the mid 1980's for Medic 51. These response zones are duly recognized as County Fire Department service areas that have been "carved-out" of the larger service area that AMR is under exclusive contract to cover. While your County Fire department has historically served these areas and now serves the UCSB campus, AMR has made it known to County staff (both in the Fire department and Local EMS Agency) that AMR is willing to explore providing the ambulance coverage to those areas. Additionally, transfers out of Lompoc Hospital are not now and never have been a responsibility of the Santa Barbara County Fire Department nor has the fire department historically provided such transports. In fact, AMR is responsible for providing these services as we have done quite capably for more than 40 years.

Page 86 section 3.3.1 - Technology states "*LEMSA's current data program is an ambulance billing model that is not user-friendly and retrieving data for analysis is difficult because the data is administered through the local ambulance transport provider.*" AMR provides the MEDS electronic patient care reporting system to the County Fire department at no charge. AMR spent considerable time and used its own financial resources to develop a simplified, fire service version of the electronic PCR (ePCR). Our efforts came at the request of the fire services

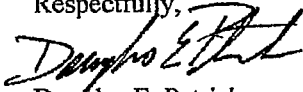
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countywide. Once operational, the fire department chose to remain on the AMR version specifically due to enhancements which allow for the collection of billing information. Additionally, the MEDS ePCR product has progressed through many upgrades and improvements specifically to enhance the capture of clinical data for the purpose of analyses and improvement of service delivery. AMR and the Local EMS Agency are able to satisfactorily retrieve clinical data to evaluate and improve patient care and the overall EMS system. Your County Fire Department has elected not to migrate to the enhanced iterations opting instead to develop their own stand-alone system.

As you know, Santa Barbara County has a well-designed EMS response configuration which in nearly every case results in an AMR Advanced Life Support (ALS) ambulance arriving with or moments behind the first responder units. Citygate report Recommendation #24 postulates that the County could develop a funding source for paramedic engine companies through revenue generated through the Santa Barbara County ambulance contract. While this may be a possible source of funding to consider, we believe the Board of Supervisors should be aware that ambulance reimbursement from government payors has been subject to serial reductions, which in turn impacts approximately 50% of the payors in the system. With declining government reimbursement, a shift in employer's providing insurance with higher deductible and co-payments, plus increased unemployment all combine to result in a higher uninsured/under-insured population. This recommendation is not feasible without introducing significantly higher ambulance rates.

We note that the Citygate report identifies significant challenges for the fire department not only this year, but expanding significantly over the course of the next 5 years. AMR is willing to explore options that may assist with mitigating financial challenges through exploring modifications to our services and response configuration. Please feel free to contact me concerning any of this information or to explore how AMR may be able to assist the County with this challenge.

Respectfully,



Douglas E. Petrick
General Manager

Cc: Nancy Lapolla, EMS Director