

**SANTA BARBARA COUNTY
BOARD AGENDA LETTER**



Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Agenda Number:

Prepared on: 12/13/02
Department: Public Health Department
Budget Unit: 041
Agenda Date: 1/14/03
Placement: Administrative
Estimate Time: N/A
Continued Item: NO
If Yes, date from:

TO: Board of Supervisors

FROM: Roger E. Heroux, Director
Public Health Department

STAFF CONTACT: Suzanne Jacobson, Fiscal Manager
681-5183

SUBJECT: Emergency Medical Services Appropriation (EMSA)

Recommendation(s):

That the Board of Supervisors:

Execute the Standard Agreement with the with the State of California for the Emergency Medical Services Appropriation (EMSA) to California Healthcare for Indigents Program (CHIP) counties for Fiscal Year 2002-2003 in amount of \$176,762.

Alignment with Board Strategic Plan:

The recommendation is primarily aligned with Goal No. 2 to ensure a safe and healthy community in which to live, work, and visit.

Executive Summary and Discussion:

Health Trailer Assembly Bill 430, Chapter 171, Statutes of 2001 provides an augmentation to the California Healthcare for the Indigent Program (CHIP) for uncompensated emergency services provided by physicians to indigent patients in the current fiscal year. Santa Barbara County will receive approximately \$176,762 in additional funding, which includes ten percent to offset administrative costs. The one-time augmentation will be disbursed using the same claims payment authorization process used to pay other CHIP uncompensated care claims for inpatient care.

The CHIP funds are tobacco sales tax revenues approved by the voters in 1988 under Proposition 99, the Tobacco Tax Initiative. The EMSA monies are specifically for uncompensated emergency services, as defined in Welfare and Institutions Code Section 16953, for physicians who provide services to patients in an emergency room, hospital, or paramedic setting and for whom payment will not be made through any other source. No physician will be reimbursed more than 50 percent of the loss on any claim.

The enabling legislation was passed because there is a documented crisis in emergency medicine in California, including the closing of hospital emergency departments and the unavailability of on-call physician specialists to backup emergency physicians in hospital emergency rooms. The monies can not be used to reimburse physicians who provide services in a primary care clinic.

Mandates and Service Levels:

The agreements will not change programs or service levels.

The County is not mandated to accept EMSA funding. The controlling statute for this allocation is Chapter 171 of the Statutes of 2001. Emergency services are defined in Welfare and Institutions Code Section 19653.

Fiscal and Facilities Impacts:

There is no General Fund contribution or facility impact of the EMSA allocation.

The County acts as fiscal intermediary for the State in the disbursement of the EMSA allocation. The Public Health Department will receive \$176,762 of EMSA allocation in FY 2001-02 as a one-time augmentation to pass-through to emergency physician medical groups. The Public Health Department is allowed and will retain a 10% administrative fee (\$17,676) to offset the costs of administering the program, thus \$159,086 will be disbursed to the emergency physicians based upon eligible claims documentation of services provided.

These funds were appropriated for in the Public Health Department's adopted FY 2002-2003 budget. They can be found on page D-170 of the County's Operating Plan in the California Healthcare for Indigents (CHIP) cost center.

Special Instructions:

Please return the two (2), signed original Standard Agreements to the Public Health Department, Attention: Suzanne Jacobson. One original will be returned to the County after it has been fully executed by the Chief of State Office of County Health Services.

Concurrence:

Auditor-Controller
County Counsel
Risk Management