

# Memorandum #05-18

Date:

July 26, 2018

To:

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH

From:

Michael D. Johnson, PhD, Director of Community Health

Joseph P. Iser, MD, DrPH, MSc, Chief Health Officer

Subject:

Proposed Fee Schedule Change for the Office of EMS & Trauma System

# I. <u>RECOMMENDATION:</u>

Staff recommends the Board of Health consider adoption of the proposed fee schedule for the Office of Emergency Medical Services & Trauma System (OEMSTS).

# II. BACKGROUND:

The Southern Nevada District Board of Health (Board) is the governing body of the Southern Nevada Health District (SNHD), and is authorized to adopt regulations to standardize the trauma system in the interest of the public health, and to protect and promote the public health and safety in the geographical area subject to the jurisdiction of the Health District and is specifically authorized to adopt regulations regarding the designation of hospitals as Centers for the Treatment of Trauma as per NRS 450B.237. Established February 20, 2015, the Trauma System Regulations provided to the OEMSTS allow it to develop and implement a procedure for accepting and processing an application from a hospital requesting initial Authorization or Renewal of Authorization as a Center for the Treatment of Trauma or Pediatric Center for the Treatment of Trauma from the Board, including applicable fees as per Trauma System Regulations 200.000 VII. Fees for New/Initial Applications and Renewal Applications were established as \$3,273.00 and \$1,011.00 respectively, based on a cost assessment of time per employee who is involved in processing a trauma center application. True costs included the addition of fringe benefits (33.80%) and indirect costs (19.82%).

# III. <u>DISCUSSION</u>:

A recent cost analysis of the services performed by the OEMSTS staff and SHND Finance Department revealed the need to increase fees to cover the related expenses for providing services for a Trauma Center's Initial and Renewal Applications. The following costs are based on an initial assessment of time on task per employee who is involved in processing trauma center applications. The OEMSTS cost analysis proposal was \$6,776.00 for Initial Applications and

\$2,508.00 for Renewal Applications. The initial OEMSTS proposal did not include SNHD Finance Department's calculations for current fringe and overhead. True costs included updated rates for fringe benefits (38.62%) and indirect costs (28.88%). Further, the calculations include updated salaries based on budget FY2018/19 and the Community Health Administration overhead. Including SNHD Finance Department's calculations resulted in a proposal for Initial Applications at \$7,702.00 and Renewal Applications at \$2,850.00.

The supporting documentation for the proposed fee schedule revisions is attached for your reference. The proposed fee schedule reflects the costs of providing the necessary services for Trauma Centers to assure the highest standards outlined by the American College of Surgeons for optimal care by a Trauma System for our residents and visitors.

Staff conducted three public workshops on June 22, June 25, and June 29, 2018, for interested persons to present their views on the proposed fee schedule.

JH:jt

#### Attachments:

- A. Notice of Public Hearing dated 6-25-2018
- B. EMSTS Proposed Fee Schedule
- C. EMSTS Cost Analysis

## NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN that a public hearing will be held before the Southern Nevada Health District's Board of Health on July 26, 2018, at 8:30 a.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, Nevada, pursuant to Nevada Revised Statutes 439.366 and 450B.130 for the purpose of considering adoption of proposed amendments to the District's Emergency Medical Services Fee Schedule for the Office of EMS & Trauma System.

The proposed amendments will affect, but are not limited to, the following Sections of Southern Nevada Health District Board of Health Trauma System Services Regulations: "Terms and Conventions"; Section 100 "Definitions"; Section 200 "Trauma System Administration"; and Section 300 "Center for the Treatment of Trauma or Pediatric Center for the Treatment of Trauma Authorization Process".

Copies of the proposed fee schedule will be available for review at the Southern Nevada Health District, Office of EMS & Trauma System, 280 S. Decatur Blvd., Las Vegas, Nevada between the hours of 8:00 a.m. to 4:30 p.m. A copy of the draft regulations may be requested during that time at a charge of one dollar per page. The same may be viewed on the Southern Nevada Health District's website (http://www.southernnevadahealthdistrict.org/ems/fees.php) or emailed upon request (ems@snhdmail.org). If there are special viewing needs, please call 702-759-1050 for assistance.

All interested persons may appear at the hearing and submit data, views or arguments regarding the proposed amendments. Written data, views and arguments may also be submitted to the District Board of Health in advance of the hearing, addressed to the Chairman of the Southern Nevada District Board of Health at P.O. Box 3902, Las Vegas, NV 89127. The District Board of Health will consider fully all written and oral submissions on the proposed amendments prior to taking action thereon. Questions may be directed to Southern Nevada Health District's Office of Emergency Medical Services & Trauma System at (702) 759-1050.

John Hammond, BS, Paramedic

EMS & Trauma System Manager

6-19-18 Date

Prior to the above public hearing at the Board of Health meeting on July 26, 2018, there will be three workshops for the public to present its views on the Proposed Fee Schedule:

- June 22, 2018, Friday, 9:00 a.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, in Red Rock Conference Room.
- 2. June 25, 2018, Monday, 9:00 a.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, in Red Rock Conference Room.
- 3. June 29, 2018, Friday, 9:00 a.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, in Red Rock Conference Room.

## SOUTHERN NEVADA HEALTH DISTRICT EMERGENCY MEDICAL SERVICES AND TRAUMA SYSTEM FEE SCHEDULE FOR JULY 1, 2018 - JUNE 30, 2019

|  | Effective July 1, 20[46]18     |  |  |
|--|--------------------------------|--|--|
| Application for Permit [for Operator] to Provid[ing]e EMT, AEMT, Paramedic         | \$1,300 + \$39/unit            |  |  |
| or Critical Care Transport Level Emergency Medical Care (Initial)                  |                                |  |  |
| Application for Permit [for Operator] to Provid[ing]e EMT, AEMT, Paramedic         | \$199 + \$39/unit              |  |  |
| or Critical Care Transport Level Emergency Medical Care (Renewal)                  | \$155 · \$55/difft             |  |  |
| Replacement Vehicle  | \$39/unit                      |  |  |
| Re-inspection of Vehicle   | \$26/unit                      |  |  |
| Application for Training Center Authorization (Initial)                            | \$1,300                        |  |  |
| Application for Training Center Authorization (Renewal)                            | \$190                          |  |  |
| Application for Trauma Center Authorization (Initial)                              | [\$3, <del>273</del> ] \$7,702 |  |  |
| Application for Trauma Center Authorization (Renewal)                              | [\$ <del>1,011</del> ] \$2,850 |  |  |
| Application for EMT, AEMT, Paramedic Certification (Initial)                       | \$37                           |  |  |
| Application for EMT, AEMT, Paramedic Certification (Renewal)                       | \$36<br>\$49                   |  |  |
| Application for Renewal of Expired Nevada Certificate                              |                                |  |  |
| Attendant License EMT, AEMT (Initial)  | \$61                           |  |  |
| Attendant License EMT, AEMT (Renewal)/Addition of Agency                           | \$15                           |  |  |
| Attendant License Paramedic (Initial)  | \$99                           |  |  |
| Attendant License Paramedic (Renewal) /Addition of Agency                          | \$15                           |  |  |
| Duplicate Certificate/License/Permit   | \$15                           |  |  |
| Application for Provisional License for [Training Out-of-State Candidates] Interns | \$61                           |  |  |
| esting for EMT, AEMT   | \$37                           |  |  |
| Festing for Paramedic, EMS RN, EMS Instructor                                      | \$37                           |  |  |

## SOUTHERN NEVADA HEALTH DISTRICT EMERGENCY MEDICAL SERVICES AND TRAUMA SYSTEM FEE SCHEDULE FOR JULY 1, 2018 - JUNE 30, 2019

|   | Effective July 1, 20[46]18           |  |  |
|---|--------------------------------------|--|--|
| <u>Application for</u> Instructor Endorsement (Initial)   | \$50                                 |  |  |
|   |                                      |  |  |
| <u>Application for</u> Instructor Endorsement (Renewal)   | \$15                                 |  |  |
| Application for CCT-Paramedic Endorsement (Initial)   | <b>\$50</b>                          |  |  |
| reprised to the arametric Endotsement (unital)  | \$50                                 |  |  |
| Application for CCT-Paramedic Endorsement (Renewal)   | \$15                                 |  |  |
|   |                                      |  |  |
| Application for EMS RN Endorsement (Initial)  | \$62                                 |  |  |
|   |                                      |  |  |
| Application for EMS RN Endorsement (Renewal)  | \$24                                 |  |  |
| Application to Administer Immunization/Dispense Med. (Initial/Renewal)  | <b>\$</b> 5                          |  |  |
| PPTOTONIC TO TELEMENTO TO THE PTOTONIC TO THE | <b>\$5</b>                           |  |  |
| Psychomotor Testing at SNHD per person  | \$125                                |  |  |
|   |                                      |  |  |
| National Registry Psychomotor Test Proctoring   | \$51.37/Hr, 2 Hr min + \$109 Adm fee |  |  |
| Fingerprint Based Background Check *  | \$71.25<br>\$51.25                   |  |  |
| Fingerprint Based Background Check w/Cards Provided *   |                                      |  |  |
| Do-Not-Resuscitate Identification   | <b>\$</b> 5                          |  |  |
| Special Event Medical Plan Approval   | \$200                                |  |  |
| Special Event Site Review   | \$51.37/Hr, 1 Hr min                 |  |  |
|   |                                      |  |  |
| Professional Staff Research   | \$65/Hr                              |  |  |
| Copy of EMS Regulations / EMS Procedure Manual  | \$25/hard copy                       |  |  |
|   | \$10/CD or DVD                       |  |  |
|   | No Charge for Internet Download      |  |  |
| Copy of Protocol Manual   | 67F/hand a                           |  |  |
|   | \$75/hard copy<br>\$10/CD or DVD     |  |  |

<sup>\*</sup> Standard fingerprint fees paid to vendor, except fee to roll them.

## Trauma Center Initial and Renewal Application Cost Analysis

The following costs are based on an internal assessment of time on task per employee who is involved in processing trauma center applications.

True costs include addition of fringe benefits and indirect costs (overhead).

The calculations include updated salaries based on budget FY2018/19 and the Community Health Administration Overhead.

|                          | Current     | OEMSTS Proposal |          | Finance Calculations |          |
|--------------------------|-------------|-----------------|----------|----------------------|----------|
| New/Initial Applications | \$ 3,273.00 | \$              | 6,776.00 | \$                   | 7,702.00 |
| Renewal Applications     | \$ 1,011.00 | \$              | 2,508.00 | \$                   | 2,850.00 |

The initial OEMSTS proposal did not include finances' calculations for current fringe and overhead.