Board of EMS Meeting

June 5, 2019

9:30 AM

de Champlain Conference Room

Minutes (Approved 8/7/19)

Members Present: Scott Susi (Chair), Joe Kellner (Chair Elect), Nathan Allen, Tim Beals, Carolyn Brouillard, Brad Chicoine, Joe Conley, Heidi Cote, Laura Downing, Amy Drinkwater, Judy Gerrish, Rich Kindelan, Brent Libby, John Martel, MD, Julie Ontengco, DNP (via phone), Dennis Russell, Matthew Sholl, MD (Medical Director, ex officio),

Staff: Commissioner Sauschuck, Janet Joyeux, Chris Azevedo, Jay Bradshaw, Jason Oko, Tim Nangle, Don Sheets, Marc Minkler, Kate Zimmerman, DO, Bob Chicoria

Office of the Attorney General: Katie Johnson, AAG,

Stakeholders – Joanne Lebrun, Ben Zetterman, Stephen Smith, Jason Frantz, Rick Petrie, Theresa Cousins, Melissa Smart, Chris Paré

1. Introductions were made. Jay introduced Chris Azevedo, MEMS Licensing Agent who started several months ago but has had scheduling conflicts with previous board meetings.
2. Disclosure of any conflicts of interest – Joe Kellner will recuse himself from the waiver request from G&H Ambulance
3. Public comments – None
4. Minutes:   
   Several corrections were noted regarding the March 6, minutes.  
     
   ***MOTION: To table the minutes of the March 6, meeting until corrections have been made and the minutes redistributed. (Kellner; second by Libby) Unanimous  
     
   MOTION: To approve the minutes of the May 1, meeting (Libby; second by Kindelan)***

Several edits were made.

***MOTION: To table the minutes of May 1, 2019, until corrections have been made and minutes redistributed. (Kellner; second by Libby) Unanimous***

Minutes of May 9, 2019  
  
***MOTION: To accept the minutes of May 9, 2019, as amended to reflect that Dr. Zimmerman is not an ex-officio member of the Board. (Kellner; second by Libby). Unanimous***

1. RFP Discussion – Bob Chicoria, DPS Grant Administrator, summarized the process used to review proposals for regional coordinators. The review group consisted of Bob Chicoria, Dennis Russell, Brent Libby, and Darrell White. There were seven proposals received with competing proposals for Aroostook EMS. However, the proposal from NMCC only provided information for one budget year and the RFP required information for two budget years. As a result, the NMCC proposal was disqualified and proposals submitted by Aroostook EMS, Atlantic Partners EMS, and Tri County EMS were accepted.  
     
   ***MOTION: To approve the recommendations of the proposal review committee (Kindelan; second by Beals). Unanimous***

Brent Libby expressed his concern that there needs to be a serious discussion about the RFP prior to the next round of contracts; and in particular to improve the deliverables in light of the ASMI report and community expectations.

1. Medical Director report – Dr. Sholl reported on the protocol revision process which is nearing completion. The Education Committee has been working on education content based upon the latest working draft.  
     
   The QI Committee produced a report on Narcan in the 1st quarter and is preparing an airway report for the 2nd quarter, with a 3rd quarter report planned on strokes. Future reports are planned on cardiac arrests in 2018 using the CARES data.  
     
   The first northern New England Resuscitation Academy was held May 30 & 31 in Lincoln, NH. 138 people attended and the reviews were superb, with many experienced nurses and prehospital providers commenting on how much they learned and have already implemented within their hospitals/services.  
     
   Discussion will continue with those who participated in the Academy on how to keep up the interest, and perhaps including an annual State of the Science conference in northern New England.  
     
   NASEMSO Annual Meeting – Drs. Sholl and Zimmerman attended the medical directors council and reviewed highlights of those sessions.   
     
   Planned for later this summer is a visit from Biospatial, which is a company that uses data from EMS, crashes, and other sources to provide visual tools for surveillance, evaluation, and quality improvement. The software is provided at no charge to states due to federal funding that supports the initiative. Data collected is de-identified and access is determined by each state based upon user level and needs.
2. Old Business
   1. Legislative Update – Jay reported on the following bills:  
      LD 124 – An Act to Exempt from Sales Tax an Island-based Nonprofit Provider of Ambulance Services. This bill would provide a sales tax exemption that would benefit the Chebeague Transport Company in the purchase of a new ferry. CTC provides 24/7 service at no charge to the island, but is not currently exempt from sales tax, which has an impact on the purchase of a replacement ferry. An amendment to carve out a tax exemption for them was approved by the Taxation Committee and the bill is on the Special Appropriations Table because of the budget impact.  
        
      LD 215 – An Act to Increase the Reimbursement Rate for Ambulance Service paid by the Dept of Corrections – This bill requires DOC to pay 225% of the MaineCare rate for prisoner transports and was passed by to be enacted. It is now on the Special Appropriations Table for funding. This bill is also affected by LD 915 and the Department’s recommendation is to hold further action on LD 215 pending final action on LD 915.  
        
      LD 915 – An Act to Provide Adequate Reimbursement under MaineCare for Ambulance and Neonatal Transport Services. This bill establishes the MaineCare rate at 100% of the Medicare rate and provides funding for neonatal transportation. It received unanimous support in Committee and is on the Special Appropriations Table for funding.   
        
      LD 1319 – An Act to Prohibit Employer Disciplinary Action Against Firefighters and EMS Persons Responding to an Emergency. Unanimously approved in committee and has been passed to be enacted. Governor’s signing is anticipated next week.  
        
      LD 1724 – An Act to Amend the EMS Act of 1982 and Related Provisions. This is a department bill to update several definitions, clarify the board’s authority to revoke or suspend a license, expands the MDPB with three new seats (BLS provider, ALS provider, and pediatric physician) and one new board member (rep of the field of pediatrics). It also makes grammatical (but not substantive) changes to the immunity extended to medical directors and hospitals. Passed in committee and awaiting floor action.  
        
      An upcoming bill will amend title 29-A (motor vehicle laws) to allow a personal vehicle on a ferry to keep its engine running when needed due to specialized medical equipment. Approval for that allowance will be made by the DPS Commissioner.  
        
      No update on the anticipated bill to conduct a review of the state EMS system. This bill was approved for introduction after cloture.
   2. EMS Rules – Community Paramedicine – Joe Kellner, Amy Drinkwater, Tim Beals, Carolyn Brouillard, and Dennis Russell recused themselves and left the room.  
        
      Jay reviewed the history of the Maine CP project and of the legislation passed in 2017 with the stated goal of enabling pilot projects to become permanent. Based upon that legislation, Maine EMS continued the process of approving new and renewed CP projects until the spring of 2019 when the AG’s office questioned the statutory authority to do so.  
        
      On a parallel path, the Board drafted Rules for CP and included those in a comprehensive rulemaking progress. However, as a result of the AG’s more recent opinion, the recommendation to the Board is to break out Chapter 19, Community Paramedicine, of the proposed rules and consider emergency rulemaking which would enable enactment of that section prior to the public hearings.  
        
      An emergency rule can only be in place for 90 days during which time the rule would be open for public comment and action by the Board. Jay reminded members that the EMS statute requires that we conduct hearings in each region affected by the rule, in the evening, and with a minimum of two board members present. MEMS will work to use remote technology as much as possible.  
        
      Following discussion on the timing of the rulemaking process, the following finding of emergency was made:  
        
      ***MOTION: The promulgation of this rule through emergency rulemaking is necessary to ensure for the continued wellbeing of the current patients enrolled with the original community paramedicine pilot programs. By allowing these EMS agencies to keep providing this service, we can prevent unnecessary visits to the emergency room and provide a service that may otherwise go unmet in terms of these patient’s healthcare. Adding this rule will allow these EMS agencies to continue as was the intent of the legislature when the establishment of Community Paramedicine services was added to the statute in 2017. This rule will allow the Board of Emergency Medical Services to establish the requirements and application and approval process of community paramedicine services. (Kindelan; second by Kellner). Unanimous  
        
      MOTION: To adopt Chapter 19 of the EMS rules with the addition of the finding of the emergency need. (Libby; second by Gerrish) Unanimous***  
        
      Recused members rejoined the meeting with discussion on the impact of this item upon current CP services. While the AG’s office was unable to offer a legal opoinion, the consensus of the board was that services should consider suspending CP services until this emergency rule is in effect.  
        
      Jay explained that MEMS has contacted all current CP projects and explained the situation to them. The office will next be working with these services to be able to turnaround their renewal applications once the emergency rule has been reviewed by the AG’s office and filed with the Secretary of State, at which time the emergency rule goes into effect.  
        
      Discussion then turned to the timing of the rulemaking process for the remaining proposed rules.   
        
      ***MOTION: To proceed with the regular rulemaking process for the proposed EMS rules with the exception of chapter 19. (Kellner; second by Libby) Unanimous***
3. New Business
   1. Director application review and interviews – Commissioner Sauschuck joined the conversation to review the upcoming process. The director position is open for applications until June 14. As of June 4, there were 8 applications received.  
        
      It was agreed that the week of June 24, Jay will coordinate the initial review of applications by the following members: Tim Beals, Brent Libby, Joe Kellner, Matt Sholl, and Commissioner Sauschuck.  
        
      Interviews will then be scheduled with the selected candidates beginning the week of July 8. The interview panel will be: Scott Susi, Judy Gerrish, Matt Sholl, Kate Zimmerman, and Commissioner Sauschuck.  
        
      If a candidate is selected, the board will meet and act on the appointment at the August 7 meeting.
   2. Waiver request – G & H Ambulance. Joe Kellner recused himself. Jason Frantz and Melissa Smart were present to explain that the Town of Glenburn terminated their contract, which forced them to move out of the ambulance base immediately, The Town of Hudson has provided a new base for them but relocating to the new base is a change in license factor and requires a new license. Due to their funding situation and the immediacy of this change, they are requesting a waiver of Chapter 3 § 3. The board went through the waiver requirement of Chapter 13 and made the following findings:  
        
      *Whether the person seeking the waiver took reasonable steps to ascertain the rule and comply with it. Finding: Yes, which supports the waiver request.*

*Whether the person seeking the waiver was given inaccurate information by an agent or employee of the State EMS program. Finding: No, which supports the waiver request.  
Whether the person seeking the waiver, or any other individual or group, would be significantly injured or harmed if the rule is not waived. Finding: Yes, which supports the waiver request.  
  
Whether waiver of the rule in the particular case would pose a health or safety risk to the public at large or a particular individual or community. Finding: No, which supports the waiver request.  
  
Whether waiver of the rule in the particular case would establish a precedent that would unduly hinder the Board or office of EMS in its administration of Maine’s EMS system. Finding: No, which supports the waiver request.*  
***MOTION: After reviewing the waiver requirement, the board finds that the situation with G & H Ambulance is an extraordinary circumstance and that the waiver of Chapter 3 § 3 be granted. (Brouillard; second by Chicoine. Unanimous.***

* 1. NASEMSO Highlights – Marc and Tim reviewed the highlights of their respective council meetings. Marc attended both the Pediatric Emergency Care Council and the Safe Transport of Children (STC) in Ambulances Committee. In addition to updates from other states with EMSC grants, in the STC committee there was discussion by NHTSA and the National Institute for Occupational Safety and Health about the absence of federal standards for testing car seats in ambulances.   
       
     The New England EMSC coordinators are planning conference calls to coordinate efforts since the deliverables for all state grants is the same.  
       
     Marc was appointed to be the PECC rep to the NAEMSP Ground Ambulance Equipment List.  
       
     Tim attended the Data Managers Council. Maine is unique in that we have essentially a single statewide data vendor (LifeFlight of Maine is the only service not using MEFIRS and they export their data to the state system). Other topics discussed included integration with health information exchanges and legacy data as file structure and software changes.  
       
     Tim was elected as Chair-Elect of the Data Managers Council.  
       
     Jay also noted that there was information provided about federal Medicaid (MaineCare) funds for integration with a health information exchange. The local contribution is 10% and the federal match is 90%. Jay will collect more information and talk with the Director of the Bureau of MaineCare services after the Legislature has adjourned.
  2. Data Committee – At the May meeting, in response to the discussion about the data contract, integration with health information exchanges, etc. Tim distributed documents about the Data Committee. This committee was very active about a decade ago during the conversion to electronic run reporting. For the past 5-6 years, the committee met infrequently as needed, then not at all.

M***OTION: To reconvene the Data Committee to include at a minimum 6 services, including a service who exports data to MEFIRS; and a representative of a billing service. The initial role of the committee shall be to review what other options exist for statewide data collection, validating data elements prior to launching, and piloting proposed changes before implementation. (Kellner; second by Libby). Unanimous***  
  
It was the consensus of the board to try and have consistent membership, perhaps with a core group of voting members with additional members depending on the topic. Included in the latter is the importance of engaging with hospital information managers. Joe Kellner agreed to make contact with that group.

* 1. Nominating Committee – A committee to solicit interest from members to serve as chair-elect was formed. Those on the committee are: Rich Kindelan, Judy Gerrish, Dennis Russell, and Amy Drinkwater. Judy agreed to be the chair. The group will solicit letters of interest and report back at the August meetings at which time the election will take place. The new slate of officers would begin with the September meeting.

1. Other
   1. Contract approval – discussion on the statutory language regarding contract approval and the board’s interest in the process.  
        
      ***MOTION: To delegate to the Director the authority to enter into contracts with the regional councils, state medical directors, ImageTrend. (Kellner; second by Libby) Unanimous.***
   2. In addition to items listed above, the agenda for the next meeting will include:
      1. Committee reports, work plans, and membership
      2. Review and discussion about an updated Conflict of Interest policy for board members.
   3. Due to the fourth of July holiday, the next regular meeting of the Board of EMS will be on August 7, at 9:30.
2. Meeting adjourned at 12:30 PM