

NEVADA DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH)  
**Committee on Emergency Medical Systems (EMS)**  
**(Advisory Committee to DPBH)**

**MINUTES**

**October 25, 2018**  
**11:00 A.M.**

**MEMBERS PRESENT**

Temple Fletcher  
Jon Stevenson III

Mark Pinkas  
Darryl Cleveland

Fergus Laughridge  
Dr. Bret Frey, M.D.

**ABSENT**

Donna Miller

**EX-OFFICIO MEMBERS PRESENT**

Christina Conti

**IN ATTENDANCE**

Chris Bosse  
Erin Lynch  
Sheri Oswald  
Michael Bologlu

Dr. David Slattery, M.D.  
Richard Fenlason  
Jenna Burton

Heather Kerwin  
Donald Watson  
Sandy Wartgow

**1. Roll call and approval of July 26, 2018, minutes.**

**MOTION:** Fergus Laughridge motioned to approve the July 26, 2018, minutes with corrections to the date and attendance.

**SECOND:** Mark Pinkas

**PASSED:** Unanimously

**Public Comment** – no public comment.

**2. Update on activities within the State regarding Emergency Medical Services (EMS) since the last meeting.**

**a) Update on the activities of the Nevada State EMS Program.**

Richard Fenlason gave an update for the EMS Program in place of Tina Smith. Tina was attending the Legislative Commission hearings on proposed regulation changes to the R102-18 file.

Richard informed the Advisory Committee that the EMS Program is moving forward with ImageTrend as the new database and patient care reporting system. He said it is

unknown when the new system will go live but explained there has been lots of progress between EMS staff, information technology (IT), and ImageTrend on a daily basis. This is a huge project, and all involved are working diligently to implement ImageTrend as quickly and smoothly as possible.

Richard also explained the EMS Program is preparing for renewal season. He explained all renewal applications will be processed in the order received. EMS staff will be processing renewals as quickly as possible, but he suggested providers submit their applications early to avoid a lapse of their certification/license.

**b) Update on the activities of the Southern Nevada Health District.**

No updates provided.

**c) Update on the activities of the Washoe County Health District.**

Heather Kerwin, Statistician for Washoe County Health District; gave an update on their activities. She told the committee that the trauma data report has been released and are in the process of updating their procedure plan. As of April 1, 2018, the Washoe County Regional Protocols for providers went into effect.

**d) Update on the activities of the local EMS Agencies.**

Fergus gave an update on the activities of Humboldt General Hospital (HGH). He said they will be having a car seat technician program November 13-17, 2018. He invited anyone interested. If anyone would like additional information, they can contact HGH to get registered. Information is also available on the HGH website.

Temple Fletcher gave an update on the activities of Care Flight. They will be doing a safety stand down. There will be two speakers who are survivors of fatal helicopter crashes. She invited anyone that would like to attend. It will be held on Monday, October 29, 2018, at Regional Emergency Medical Services Authority (REMSA) from 9:00 a.m. to 1:00 p.m.

Darryl Cleveland gave an update on the activities of Truckee Meadows Community College (TMCC). He informed the committee TMCC will be hosting the National Association of EMS Educators (NAEMSE) workshop on November 9, 2018, at 8:00 a.m. and November 10, 2018, at 5:00 p.m. This workshop will help improve EMS education techniques. More information can be found on the NAEMSE website.

Jon Stevenson gave an update on the activities of the Las Vegas Fire and Rescue. He told the committee that they have switched over to ImageTrend as well and are

working on finalizing implementation.

He also talked about the mental health crisis response teams that allow Advanced Life Support (ALS) services to place licensed clinical social workers on ambulances to respond to psychiatric calls. The pilot program allows the clinical social worker to better diagnose, treat, and transport psychiatric patients to a mental health facility.

He explained they started this program a couple months ago and it has been extremely successful. They have had so much interest in the program that the Las Vegas Metropolitan Police Department and Clark County are now looking into expanding the program in their direction. He would like to see this program expand even further and hopes it will be something that can benefit the entire state.

He explained one of the hang-ups they have experienced was Medicaid reimbursement. At the time the pilot program started, Medicaid did not reimburse the cost of patient assessment and stabilization. He explained they are seeking a way to improve reimbursement of these types of calls and asked members if they have any ideas or suggestions to please contact him.

Mark Pinkas informed Jon that he thinks Medicaid reimbursement may be out of the scope for this Advisory Committee but let him know and he will contact Alexis Tucey, Behavioral Health Supervisor for the Division of Health Care Financing and Policy (DHCFP).

Dr. Bret Frey did not have any updates currently but had a couple comments he shared with Jon. He told Jon that Colorado does diversion behavioral health patients very well as a state and suggested reaching out to their State Medicaid Office for more information. He also mentioned that in Arizona, John Ford has programs that are equally impressive and that he can forward his information to him. He stated he is a fan of modeling success. He suggested Jon reach out to other States for an example of how they fixed their reimbursement issues to fit the needs of their communities.

**e) Update from EMS Committee Members.**

There were no updates from EMS Committee Members.

**3. Presentation by Erin Lynch, Chief of Hospital and Physician Services for the Division of Health Care Financing and Policy, Nevada Medicaid regarding Community Paramedicine reimbursement.**

Erin Lynch presented on Nevada Medicaid regarding Community Paramedicine (CP)

reimbursement. She thanked Tina Smith and Temple Fletcher for allowing her to be on the agenda, so she can reach out even more about CP.

Erin explained that CP started during the legislative session in 2015. CP was included with assembly bill 305. This assembly bill had an impact on the State EMS office, as well as, Southern Nevada Health District (SNHD) to enact the Nevada Revised Statutes (NRS) 450B changes. She explained that the state laws regarding CP resides in Nevada Administrative Code (NAC )450B and NRS450B.

NRS 450B.0615 is the official state definition on what community paramedicine means. The definition means that an Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT), or Paramedic can treat patients who do not require emergency transportation. The providers work closely with health care systems and social services that are available in their communities to take care of that Medicaid recipient or patient in their home rather than a hospital.

The EMS program was able to revise regulations in NAC 450B that were effective January 27, 2017. Erin explained that prior to these revisions, agencies were required to apply for a CP endorsement on their permit. Any provider working for the agency is also required to apply for a CP endorsement on their certificate. The revisions now allow licensed Nevada hospitals to apply for a CP endorsement, if approved it would be added to the hospital's license. Any providers working for the hospital would also be required to apply for the CP endorsement on their certificate. She said allowing licensed hospitals to provide CP services is great way to get CP into more rural areas.

Erin informed the Advisory Committee that Medicaid will reimburse some CP services. She stated evaluation/assessment, medication management, vaccinations, lab specimens, follow up care, home safety assessment, and telehealth are some things covered by Medicaid. Some examples of services that are not covered include travel/mileage, hospital-acquired conditions, emergency response, and duplicate services. She told the committee a full list of covered and not covered services can be found in the Medicaid service manual.

She explained that Medicaid eligibility is determined by the State Welfare Division and most applicants that qualify are low-income individuals or families. The goal for Medicaid reimbursement for CP services is to cut down unnecessary calls and costly hospital transports. She said Medicaid reimbursement may be a way to generate additional revenue for agencies and hospitals.

Erin stated that the only agency currently billing Medicaid for reimbursement is REMSA. She has presented at several conferences to educate people on the process of applying for reimbursement for CP services. She is also currently working with several agencies to assist

them in learning the process and hopes to see more agencies and hospitals apply for reimbursement in the future.

She explained benefits of providing CP services greatly impacts communities by providing in-home care, reducing emergency phone calls, reducing emergency room visits, and being able to provide a level of care that is appropriate for the patient's actual condition. She mentioned the startup cost to develop a CP program has been mentioned to her as an issue. She told the committee about a grant through Health Resources and Services Administration (HRSA) that can assist rural agencies and hospitals to become endorsed CP programs. Dr. Frey asked if the HRSA grant is available to hospitals that have previously lost their license. Erin told him she wasn't sure and referred him to Joan Hall, Nevada Rural Hospital Partner, for more information.

**4. Discuss and make recommendation on the EMS Advisory Committee organizing an Agency Safety and Wellness Symposium.**

Temple requested this item to be tabled for the next committee meeting when she will be able to attend in person.

**MOTION: Temple motioned to table this item for the next committee meeting.**

**SECOND: Fergus Laughridge**

**PASSED: Unanimously**

**5. Discuss and make recommendation on filling vacant committee member positions.**

Committee members discussed reviewing resumes on file or announcing vacancies and accepting additional resumes. The committee decided to accept additional resumes to be reviewed at the next committee meeting.

**6. Discuss and make recommendations on 2019 committee meeting dates.**

Marc asked for recommendations for 2019 Advisory Committee meeting dates. Darryl suggested setting the dates for the fourth Wednesday of each quarter at 1:00 p.m. if possible.

**MOTION: Fergus Laughridge motioned to schedule the 2019 EMS Committee Meetings for the fourth Wednesday of each quarter at 1:00 p.m.**

**SECOND: Darryl Cleveland**

**PASSED: Unanimously**

**7. Public Comment - no public comment.**

**8. Adjournment**