

CITY COUNCIL STUDY SESSION

Briefing on the King County Medic One/Emergency Medical Services (EMS) Levy

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DIRECTION NEEDED FROM COUNCIL**DIRECTION**

King County staff will provide an overview of the proposed Medic One/Emergency Medical Services (EMS) levy. The proposal would renew the existing six-year EMS levy that expires December 31. Tonight's presentation is an opportunity to ask questions and learn more about the EMS levy.

RCW 84.52.069 requires the legislative bodies of 75 percent of cities with a population over 50,000 to approve a resolution authorizing placing the levy on the ballot. Staff is seeking direction from Council to approve placing the measure on the November ballot. Depending on Council direction, staff will return with a resolution on a future consent agenda.

RECOMMENDATION

N/A

BACKGROUND & ANALYSIS

Michele Plorde, Director and Helen Chatalas, Assistant Division Director, of the Emergency Medical Services Division, Public Health – Seattle and King County will provide an overview of the proposed EMS levy.

The King County EMS system provides essential life-saving services to the residents of, and visitors to, the County. With an international reputation for innovation and excellence, it offers uniform medical care regardless of location, incident circumstances, day of the week, or time of day. The system is recognized as one of the best emergency medical services programs in the country. It serves over two million people throughout King County and provides life-saving services on average every three minutes. It is also acclaimed for its patient outcomes, including among the highest reported survival rates for out-of-hospital cardiac arrest patients across the nation.

RCW 84.52.069 requires the legislative bodies of 75 percent of cities with a population over 50,000 approve a resolution authorizing placement of the levy on the ballot. In King County these cities are Bellevue, Seattle, Kent, Renton, Federal Way, Kirkland, Auburn, Sammamish, Redmond, Shoreline, and Burien.

Levy Rate

Since 1979, the EMS system has been funded through a series of voter approved levies. The current six-year EMS levy expires December 31. To ensure continued emergency medical services in 2020 and beyond, a new levy must be approved by voters. The 2019 rate is \$0.22 per \$1,000 of assessed value (AV). The levy rate passed by voters in 2013 was \$0.33 per \$1,000 of AV. Due to rising property values, the rate has declined over the course of the existing levy. Bellevue property owners contribute approximately \$14 million per year under the current levy.

The proposed EMS levy rate is \$0.265 per \$1,000 of AV for 2020-2025, which would raise \$1.1 billion over the course of the levy. In 2020, Bellevue property owners would contribute approximately \$18.6 million per year under the proposed new rate.

EMS Levy Planning Process

The planning process for the next EMS Levy began in January 2018 with the first meeting of the EMS Levy Advisory Task Force. The 20-member Task Force members included elected officials from the County, cities, and fire districts, representing those who administer, authorize, and are served by the system. Councilmember Jennifer Robertson represented Bellevue on the Task Force.

Representatives of the stakeholder agencies provided detailed programmatic review and financial analysis of the EMS Levy proposal. This review occurred through the work of four subcommittees of the EMS Task Force including: Advanced Life Support (ALS); Basic Life Support (BLS); Finance; and Regional Services. Bellevue staff participated on all subcommittees.

In September, the Task Force adopted final programmatic and financial recommendations, which informed the EMS proposal transmitted to the King County Council by the County Executive.

Key Task Force Recommendations

Subcommittee Recommendations	
Advanced Life Support (ALS)	<ul style="list-style-type: none">• Continue using the unit allocation to fully fund ALS• Include a placeholder for adding a potential future unit• Explore options to address paramedic workforce needs and other efficiencies
Basic Life Support (BLS)	<ul style="list-style-type: none">• Continue the BLS allocation; streamline the BLS funding sources and distribute using agencies' current assessed valuations and service levels• Commit \$4 million per year of levy funding to exploring a Mobile Integrated Healthcare (MIH) model to address community needs; and distribute to all agencies*• Establish guidelines to create consistency around data collection measures and program reporting
Regional Services	<ul style="list-style-type: none">• Continue delivering programs that provide essential support to the system

	<ul style="list-style-type: none"> • Maintain regional focus on creating additional efficiencies and system effectiveness to improve patient care and outcomes • Support strategic initiatives that leverage previous investments made by the region to improve patient care and outcomes, such as the Vulnerable Populations Strategic Initiative that seeks opportunities to improve interactions between EMS and vulnerable populations, including those with limited English and the elderly
Finance	<ul style="list-style-type: none"> • Support financial policies that provide stability to the system by: <ul style="list-style-type: none"> ○ Adapting existing reserve policies to meet County financial policies ○ Incorporating sufficient reserves to mitigate unforeseen financial risk ○ Pursuing an EMS levy length that ensures sufficient funding • Adopt a financial plan that supports a six-year levy collecting \$1.1 billion with a 27-cent EMS levy**

*MIH services are available through ALS and BLS calls, even though the subcommittee recommendation appears in the table above only as a BLS recommendation.

**The Task Force recommended a \$0.27 rate and projected revenues based on the August 2018 economic forecast. Using the updated March 2019 forecast, the proposed rate was calculated at \$0.265 to raise the same amount over the course of the levy.

Tiered Medical Model

Services provided by EMS personnel are derived from the highest standards of medical training, practices and care, scientific evidence, and close supervision by EMS physicians. The tiered system is predicated on BLS agencies responding to every incident to stabilize the patient and secure the scene. This reserves the more limited regional resource of an ALS unit (known locally as a medic unit that is staffed by paramedics) for the serious or life-threatening injuries and illnesses.

The tiered system conserves paramedic services for events requiring advanced skills and reduces the number of calls to which paramedics respond. Compared to systems that send paramedics on all calls, the EMS system in King County is able to provide excellent response and patient care with fewer paramedics. At a cost of about \$2.6 million per ALS unit, this approach results in significant cost savings. The tiered system pairs highly successful outcomes with reasonable cost controls, features that are somewhat unique to the King County system.

In 2018, Bellevue responded to 15,346 EMS incidents: 4,648 for ALS and 10,698 for BLS.

Services funded by the EMS Levy include:

- **ALS Services:** Paramedics provide out-of-hospital emergency medical care for critical or life-threatening injuries and illnesses. They provide physician-level invasive procedures including airway control, heart pacing, the dispensing of medicine, and other lifesaving procedures. There are 26 ALS units located throughout King County,

strategically placed for optimal response times. ALS providers receive full funding from the EMS levy for providing these services. In 2019, each ALS unit costs approximately \$2.6 million. In 2020, this cost is expected to increase to approximately \$2.9 million.

Bellevue is one of five regional providers of ALS services in King County. The Bellevue Fire Department operates four paramedic units; two units are located in Bellevue, one in Issaquah, and one in North Bend. In addition to providing ALS services to Bellevue residents, the Bellevue Fire Department provides ALS to other Eastside communities including: Mercer Island, Medina, Clyde Hill, Beaux Arts, Hunts Point, Yarrow Point, Newcastle, Issaquah (Fire District 10), Fall City, Sammamish, North Bend, Snoqualmie, and Snoqualmie Pass (Fire District 51).

- **BLS Services:** BLS personnel are the "first responders" to an incident, providing immediate basic life support medical care that includes advanced first aid and Cardiopulmonary resuscitation/Automatic External Defibrillator to stabilize the patient. Staffed by firefighters trained as Emergency Medical Technicians (EMTs), BLS units arrive at the scene in less than five minutes on average. BLS contributes significantly to the success of the EMS system. The EMS levy provides partial funding to local fire departments to provide these services.

The proposed BLS funding formula is based on AV and calls for service, which results in a 2019 Bellevue allocation of \$2.5 million. Bellevue would receive an additional \$400,000 each year for BLS services from the proposed levy. Funding is not intended to supplant current funding, but to increase services.

- **Regional Support Services:** The King County EMS Division manages core regional EMS programs critical to providing the highest quality out-of-hospital emergency care available, and provision of these services have proven more effective and economical when delivered on a regional basis. These services emphasize uniformity of medical care across jurisdictions and consistency in training. Regional Services provided by the County include: paramedic and EMT training; development of medical protocols, and medical quality assurance and review.
- **Strategic Initiatives:** Strategic Initiatives are pilot programs designed to improve the quality of EMS services and manage the growth and cost of the system. Successful initiatives can be incorporated into Regional Services as ongoing programs.
- **Mobile Integrated Healthcare (MIH):** The proposed levy also includes \$4 million specifically for MIH services. The MIH funding would be distributed using the same allocation method as BLS, based on AV and calls for service. Bellevue is estimated to receive \$600,000 per year from the levy for MIH services.

Bellevue provides base services already through the Citizens Advocates for Referral and Education Services (CARES) program. The CARES program addresses the needs of

“frequent, low acuity” 911 callers. Without underlying needs being met, individuals often become high users of the 911 system and hospital emergency departments. CARES is staffed with professional social workers and graduate students completing their master’s degree in social work program.

Bellevue funded the CARES program with multiple grants in order to bridge the program until a new levy is passed. Grants and donations will be approximately \$350,000 to fund CARES in 2019, including a \$210,000 King County Emergency Medical Services grant scheduled for June 3 Council action.

POLICY & FISCAL IMPACTS

Fiscal Impact

The current levy expires at the end of 2019. State law permits EMS levies to be approved for six years, 10 years, or on a permanent basis. EMS levies have typically been approved for six years in King County. A new rate is set each year in order to collect the amount needed for the programs.

The 2019 rate is \$0.22 per \$1,000 of AV. The levy rate passed by voters in 2013 was \$0.33 per \$1,000 of AV. Due to rising property values, the rate has declined over the course of the existing levy. The median home value in Bellevue is \$941,000, and in 2019 that property taxpayer contributes about \$205 for EMS services. Bellevue property owners contribute approximately \$14 million per year under the levy.

The proposed levy rate is \$0.265 per \$1,000 of AV for 2020-2025 and would collect \$1.1 billion countywide over the course of the levy. In 2020, Bellevue property owners would contribute approximately \$18.6 million per year under the proposed levy. With the proposed rate of \$0.265, the 2019 median homeowner in Bellevue would pay approximately \$250 per year for EMS services, an increase of approximately \$45 per year over the existing levy.

OPTIONS

N/A

ATTACHMENTS & AVAILABLE DOCUMENTS

N/A

AVAILABLE IN COUNCIL LIBRARY

N/A