

Richland County Joint Ambulance Committee  
February 10, 2022  
Minutes

Present: Brian McGraw, Sharon Schmitz, Glen Niemeyer, Jerome Durst, Gordon Palmer, Terrance Jindrick, Darin Gudgeon. Mary Rognholt, Marc Couey, Jean Nicks via Zoom.

Not Present: Kerry Severson, James Lingel, Verlin Coy, Todd Coppernoll, Doug Duhr, Tim Willis.

1. Meeting was called to order at 19:00.
2. Notification of the meeting had been made, and the agenda was posted.
3. Committee attendance was as noted above, with 9 members present.
4. A motion was made by Schmitz to approve the agenda as posted. Niemeyer seconded it. Motion Carried; the agenda was approved.
5. A motion was made by Schmitz and seconded by Niemeyer to approve the minutes of the previous meeting as presented. Motion carried; the minutes were approved.
6. There were no comments from the public.
7. There were no comments from the EMT delegation.
8. There was no Subcommittee meeting since the previous Joint Ambulance Committee meeting.
9. A. The Revenue/Expense Reports were reviewed for the quarter. For the month of November, there was \$43,937.15 in revenue with \$39,193.01 in expenditures leaving an ending balance of \$261,652.21. BioTron is the company that handles updates and repairs to the cardiac monitors. The BoundTree invoices were increased this month due to ordering some regular use items ahead so as to ensure they would not be on backorder when needed. December had \$59,569.28 in revenue and \$64,367.74 in expenses, with an end balance of \$256,853.75. There were three pay periods in December. Gudgeon extended his thanks to Therese Deckert at Pine Valley for helping us secure \$14,419 in additional funds through COVID programs. For January, revenues totaled \$28,064.16 and expenditures totaled \$40,289.99 leaving an end balance of \$244,627.92. Looking at the finances for 2021, it was shown that on January 1, 2021, there was 163,766.79 in the segregated account, with Decembers end balance shown above. Gudgeon pointed out that on January 1, 2015, when this segregated account was established, there were zero dollars in it. This cash balance has grown due to accountability, Committee oversight, and conscious attempts to not be wasteful.  
B. The Cvikota Billing Report was reviewed, which showed 1110 calls billed by Cvikota for 2021, with 430 billed at the ALS level, 474 as BLS, 9 as ALS2, and 197 for On-Scene Care. Total charges in 2021 equaled \$850,392.20. Total payments received were \$366,000.74, with allowances (write-offs) at \$411,228.30. Gudgeon informed the Committee that Medicaid rates have now changed to match those of Medicare; Medicaid had previously been paid a simple base rate regardless of level of care provided. With 73% of patients being Medicare or Medicaid, Gudgeon expects to see an increase in payments received and a decrease in write-offs.  
C. The Ambulance Call Data Report showed 319 total calls for this quarter, which included 290 911 calls and 24 transfers. 4.7% of patients were transported emergent to the hospital with an additional 1.25% that upgraded to emergent during transport. For 2021, there were 1229 calls with 1077 911 calls and 141 transfers. 5.37% of calls were transported emergent to the hospital

with 0.8% upgrading during transport. Gudgeon presented data regarding the number of calls out of the established service area. He stated that this information was strictly to show the change in need; there was no intention of exposing or shaming any service as Richland County Ambulance Service struggled too. Data for the previous four years of calls out of the service area shown. Gudgeon highlighted the change over time and that it was not just one service or municipality. In 2021, there were 44 calls to assist neighboring services. Gudgeon pointed out that seven of these were mutual aid, where the service covering that area did not have any additional ambulances available whether being on other calls or too many patients were on scene. 11 of the 44 calls were in what was Richland county Ambulance Service's area prior to 2018. Gudgeon also discussed coverage provided to two area services so their members could attend a funeral for a service member who had passed away. Any calls from those services during those times were removed from the presented data. Gudgeon reminded the committee that while these calls were out of the service area so no municipality would be paying as established in the MOU, the patients were billed for care provided.

10. Gudgeon stated he had been working with the billing company to attempt to recover more funds and reduce write-offs/allowances. Clint Johnson with Cvikota suggests raising the base rates and eliminating billing for individual items, as these charges are typically denied payment and are written off. The change in billing will not change documentation needs. Gudgeon stated the base rates have not been raised in two years, and the standby rates have not changed in more than ten years despite a rise in expenses. The proposed rates would keep a lift-assist only at \$75 but if someone required assessment or treatment, the charge would now be \$300. All on-scene care with no transport had previously been billed the \$75. BLS base rate would increase from \$650 to \$675. ALS1 base rate would change from \$825 to \$875. ALS2 would stay the same at \$1,250. Charges for the loaded mile would increase from \$14 to \$15. Standby rates would change from \$200 for the first two hours and \$75 for every hour after to \$250 for the first two hours and \$100 for every hour after. Niemyer made a motion to discontinue itemized billing and adopt the rates as presented, seconded by Schmitz. Motion carried.
11. Transfer data for 2021 was presented. There were 141 transfers in 2021 with one transfer taken from Dodgeville, one from LaCrosse, one from Prairie du Sac, six from Hillsboro, 16 from Viroqua, and 116 from Richland Center. Looking at the tracked requests, December 2021 had 21 requests for transfer with 12 taken and nine turned down. Of those turned down, five were because there was no crew available and four were taken by other services prior to a crew becoming available. For January 2022, there were 22 requests of which eight were taken and 14 were turned down. Of those turned down, one required a higher level of service and 13 found no crew available. A BLS transfer from the Richland Hospital to a hospital in Madison or LaCrosse can generate approximately \$970 in revenue. Gudgeon stated that this highlights the need for two trucks and pointed out these requests came in without soliciting for transfer business. He estimated that if a second truck was regularly staffed and hospitals were aware of the availability, there would be an average of at least one transfer per day.
12. During the November Joint Ambulance Committee meeting, the Committee authorized spending up to \$79,000 on the purchase of the new cardiac monitors. The three monitors were purchased at a final cost of just over \$85,400. Gudgeon reported the Ambulance Association was able to raise more than \$18,100 with donations from the Joan Woodman Orton McCullum

Foundation and United Givers. There were also funds able to be put toward this purchase through the Funding Assistance Program through the State. Gudgeon reported the cost to the Service came to \$64,357.42. The Committee extended their thanks to the Association members for their hard work in raising these funds.

13. A. Paul Kardatzke from Jewell, via Zoom, presented the bid proposal and building plans. He stated the floor plan had generally not changed since the Committee had last seen it but had become more detailed. Jewell has been in contact with the State Plan Reviewer. There was a suggested separation between the day room and the bedrooms to create a safety corridor, however it was not necessary. It would easily be added in if the Committee wished later, as it would simply be a wall and door. Pending approval at this meeting, the bid packet would be uploaded to a website used by contractors to consider bids and an ad would be placed in the local paper. All bids are due back Thursday March 10<sup>th</sup> by 2pm. They will be compiled and presented to the Committee on Monday March 14<sup>th</sup>. A draft resolution is in progress to ensure there is no time lost so the selected bid can be taken before the County Board on March 15<sup>th</sup>. Contractors wishing to have a pre-bid walkthrough will be invited to the building on February 21 with two separate times available. An incentive is included in the documents to encourage contractors to complete the project prior to September 23<sup>rd</sup>, promising up to \$5,000 at a rate of \$100/day for each day the project is completed ahead of schedule. This completion date was established to allow for the space currently occupied by the Service and Emergency Management to be prepared for the next occupant. Nicks made a motion to approve the specifications as presented and to authorize Jewell to take the project out for bids, seconded by Schmitz. Motion carried.  
B. Gudgeon reminded the Committee that REC had pledged to cover up to \$10,000 in roof repair costs. He informed the Committee that a check was received from REC for that amount as a donation; this was placed in the segregated account in a specially made line for roof repair so that it does not show in the overall operating amount as presented in the monthly financial reports. McGraw stated specs will be written for the roof repair and the project will be out to bid as soon as weather allows the ability to fully inspect and identify areas of need in the roof. These bids will be brought before the Committee to review and select the contractor. Depending upon the cost of the bid selected, it is expected the County Administrator will be able to approve the bid; if the selected bid is over a set amount, it would be presented further for approval. There is a preference that the work be completed prior to the majority of internal construction.
14. By direction of the County Administrator, a Study will be conducted on EMS Service in Richland County to determine the best way to provide services to all residents of the county. The Scoping Document was overviewed. Ultimately, the County Administrator will award the project. The Study is expected to be completed by October 7<sup>th</sup>. It was recognized there are only three consultants in Wisconsin who do this type of study, however there is an additional one from Wyoming who has been known to provide such studies. These four will be provided with the opportunity to bid for the project. The Study will look at services provided here currently, explore other potential models, and report the findings and suggestions. The Study will address what is most feasible and efficient, providing guidance to the County's five-year plan and future budgets. The current and future needs to be understood in order to make decisions moving

forward. County Administrator Langreck, via Zoom, stated that the Committee would review the bids and authorize him to approve a bid, which will then go before Finance and Personnel; a resolution may also be necessary depending upon bid amount. Looking at specific questions to be answered, it was noted that the Service currently pays tenant costs such as utilities, but does not pay rent. There are also other costs that we do not see that exist, such as the actual costs when services are provided by volunteers. Minor changes were suggested to clearly express the question asked. Looking at other areas, Administrator Langreck and Director Gudgeon mentioned conversations with Chief Donaldson from Waushara County, where they have agreements with townships outside of their County due to the cost and availability of services. Locally, many small services in the area cover territory in multiple counties; this may present challenges to the consultant to get clear and accurate information that is county specific. However, in order to look at the sustainability of current delivery of EMS, the other services must be considered. The Study will look at the Richland County area regarding coverage, logistics, and response times. Gudgeon stated that he envisioned there is a better way, where the services won't all be vying for the same limited response: licensed members. He expects there may be a way to establish resource sharing, for both people and supplies. There is no intention to take over other territories; the goal is to find better ways to partner to strengthen response. There is no legal obligation to cover for a struggling service, however, Gudgeon reminded the Committee that many of the services struggling today once helped the Service when it was struggling, too. In order to be able to help these neighbors, the Service is in a sense obligated to be stronger. Learning answers to these questions will provide guidance and foresight to ensure there is quality ambulance service in 10 years. There is a need to understand to know how to best evolve, and while there is a moral obligation to respond, it must also be noted there is a financial obligation as well. Nicks made a motion to approve the Scoping document with the changes noted as discussed, seconded by Schmitz. Motion carried. The item will be presented to Finance and Personnel by Administrator Langreck and Director Gudgeon to have ARPA funds allocated to the Study.

15. Bids for the building remodel are due back on March 10<sup>th</sup> to give time to contractors to respond. In order for the project to continue moving forward this spring, the selected bid should be taken before the County Board in March. They meet March 15<sup>th</sup>. To meet this deadline, the Committee needs to meet Monday, March 14<sup>th</sup>. Jewell will review the bids to ensure all requirements are met. They will compile the bids for the Committee to review at this meeting. The next meeting is scheduled for Monday, March 14<sup>th</sup> at 7pm.
16. Schmitz made a motion to adjourn the meeting; motion seconded by Niemeyer. The motion carried; the meeting was adjourned at 20:39.