

Questions and Answers from Open Door Forum: Ambulance, February 6, 2020

1. We are a fire based EMS system with the vast majority of our EMS calls are handled by career staff. We do have a volunteer component but they rarely, if ever are on the ambulance. They may on rare occasion drive. And that would be honestly less than probably a dozen times a year. We also have volunteer fire chiefs that may come on calls and make the initial patient contact but they're not involved with the transport. Would we still need to report that volunteer labor?
 - A. Yes you would. And I think the way the Section 7 is set up if those are the only volunteers in your organization it would probably be less you report there in terms of total hours than you would in the paid section to Section 7. But those activities where they're responding to calls for ambulance service, driving an ambulance those would be in scope and should be reported in the volunteer section of Section 7.
 - 1a. What about if they respond on an engine first response on a motor vehicle collision or a cardiac arrest? Do those hours - or would we include those hours also?
 - i. So if it's a response where an ambulance is ultimately deployed -- if it's a call EMS call that comes in -- then that would be in scope.
2. My department is very similar to the last question. It's a career based fire EMS department. In regards to the hours worked, I have 60 full-time firefighters and each shift has around 11 or 12 members. But every day they're not assigned to the ambulance. They could be on the ambulance one day, then they may be on the engine the next day. How are those hours to be quantified? Do I have to break that up every single shift that they were on the ambulance for so many hours, on the engine for so many hours? Or is it just in general how many hours they work no matter what their staffing was?
 - a. So reporting is a little different. As we mentioned today for fire police or other public safety based organizations -- I'll answer your question in a second -- I guess I would encourage all of the public safety based fire, police, otherwise organizations to dial into the March 12th call and presentation. We'll go into that reporting for organizations like yours in much more detail. The reporting will be different in two ways. First you'll tally total hours that are worked in your organization over all of the staff members' activity. And then separately you'll report out the number of hours that are unrelated to ground ambulance as well as public safety activities. So for the purposes of reporting, you're mostly reporting their total hours across both ambulance and other public safety activities. And again, we'll walk through some specific examples and put up some, you know, completed tables on slides at that webinar in March.
 - 1a. I have an EMS coordinator who is a full-time firefighter paramedic that receives a stipend of \$400 for the year. But to track those hours that he actually did administrative duties is probably difficult to do. So is that going to be an issue when reporting?
 1. Yes, CMS heard as the instrument is being developed that sometimes for volunteers it is the organizations currently don't track specific hours. Just to clarify, was that person a volunteer?
 - a. No. It's a career firefighter paramedic. He works his shift but then he's also the EMS coordinator and gets a stipend due to his

by the city itself. So I think it was pretty much answered in there that we do have to include that labor.

- a. Let me use your repeat question as another signal that this is a common question and just say a couple more things on this scenario. I think we've heard from some organizations that have say using the vehicle maintenance as an example. Some organizations might have some insight and information currently on costs associated with vehicle maintenance. For example, they might be billed for parts and may have that financial record in their ground ambulance organization for that part of it. And so then the task, the goal is to go and collect that information on what's not currently in-house at the ground down ambulance organization. The vehicle maintenance example I'm thinking it would be labor and probably facilities. One other thing to mention here. There are some cases where a municipality provides a service to their community and does not charge for it. CMS has heard some cases where a municipality will handle dispatch and not charge ambulance organizations that are not part of the municipality to use that service. In that case, the organization that's not part of the entity that's providing the service and that doesn't pay for it would not have to report it. And there are several places in the instrument- if that applies to you, there are several places where you can say another entity provides this service to us and we don't pay for it. It's important for CMS to know that that happens again because otherwise it would look like there's a gap in the costs being reported and your reported costs would be lower than you'd expect for other organizations. So there is a lot of nuance here. There are some FAQ questions including some that are about to be added to the FAQ that address this scenario and I'd encourage everyone to revisit the FAQ in the coming weeks to see some of those new questions that add these scenarios.
8. We do interfacility transports which we do not do 911 calls at all as primary or secondary. So does this still apply to our company? And my next question was the finance breakdown, will a financial statement or do we have to go by what is as far as the guidelines here?
 - a. So in response to your first question, all ground ambulance organizations that billed Medicare for ground ambulance services in a prior year were eligible to be selected to report in this first year of the data collection system. And that that includes organizations that exclusively do inter-facility transports. So yes, even though some of the instructions in the instrument are specific to emergency response, all organizations were eligible to be selected. You will see a different set of questions. If you answer one of the very first questions in the instrument which asks you do you respond to 911 calls. If you answer no, that does have an important implication for the questions you'll be asked downstream. So your organization will see a different set of questions than EMS services would see. And then in response to your second question, I'd encourage you to review the Quick Reference Guide on the Ambulances Services Center Website which reviews all of the information that is required to be reported through this data collection system. It's a short document in a bullet list format to give you a sense for the cost revenue and utilization information that you'll need to report. In most cases, organizations already have some financial and other data systems that track metrics. In some cases, all of this information. In other cases, organizations may need to start collecting some types of information now. We're starting on January 1, 2020 for some organizations so that you'll be able to report that during your data reporting period.
 9. When is this going to become mandatory for everybody? Right now it's only a select group that have to do this report. Is it going to be one year or two year?

- a. Each year for four years there will be organizations selected. And the general pool were organizations that billed Medicare in 2017. And then over four years, facilities are randomly selected and you would only be selected once in the four years. So on our Website we have the first year of those organizations that are selected and we will add the next year probably in this fall.
 - i. How do you get selected?
 - 1. It is a random selection of all ambulance organizations that billed Medicare in 2017.
10. My first question is going to be over our medical director. We're a city entity but we belong to a regional organization and we have one medical director for I don't know, probably 53 ambulance services. So I'm just kind of curious on how we go about finding or reporting that annual salary for the medical director.
- a. So that's a great question and I think the answer depends a little bit on your relationship with those other organizations and then the relationship between the medical director and your organization. If your ground ambulance organization is paying that medical director an amount to serve in the capacity as medical director for your organization, then you can just report that. But if instead it's some larger parent organization that's employing that medical director and then that person's time is being split across multiple organizations, you'll have to report it in a slightly different way. This is related to call that we'll have a month or two from now on organizations that bill under multiple NPIs. I'm not sure whether or not that applies in your case. But it's a similar challenge when you have a broader parent organization paying for some costs and then many different ground ambulance organizations taking advantage of the services or staff that come from that broader parent organization. So if that does apply to you, I'd encourage you to stay tuned for scheduling for that later call. And, you know, maybe it is a simpler case where, you know, if your organization pays an amount for that service then for the purposes of reporting, you can report that amount and the time specific to your organization.
 - i. Everyone in our office here in the EMS station here like I said we are a city entity but our director assistant, director training officer, everybody here is a ground paramedic or a ground EMT. So according to the instruction we're going to have to document everybody as ground response and that will make it look like we don't have any administration or facility staff. Is that correct?
 - 1. That's correct with one exception. So in Section 7 question 2 that's the question that asks if you reported not having staff in a category it asks you why. And one of the options is we actually do have staff in that category but we followed your instructions and put them somewhere else. And so for those administrative and facilities categories to check off at least that option, which I think is option 2. You may also choose other ones to report. But you can select that to indicate to CMS that, you know, we actually do have staff in this category but based on your instructions we've reported them elsewhere.
11. The question that we had was our volunteers, their workman's compensation insurance is not paid by the town. It's paid by the county. So it's not a cost that we incur. So how would we figure that into our labor cost? Or would we?
- a. CMS will consider these scenarios for a future FAQ update. FAQs are listed on our website: <https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center> and updated periodically.

12. Reference has been made to this first year of cost data collection. Does that mean that there will be a lottery again next year for additional collection in ensuing years?
 - a. What the provision called for was a data collection over four years.
How CMS interpreted that and finalized that was to take a random sample of all ambulance organizations that billed Medicare in 2017. And what we've done is we have a 25% sample each year for four years. Ambulance organizations will not be selected more than once. So if you're in this first year if you were selected, you will not have to report again. But others may be selected in subsequent years.
13. In our company we have air ambulance paramedics that are 100% air ambulances. Do we even include that in this 7.1?
 - a. No, if any staff member has responsibilities at your organization that are entirely unrelated to ground ambulance. Common scenario might be staff that are 100% air and 0% ground for public safety based organizations. Fire department based organizations say there may well be staff that are 100% fire response and not at all ambulance. In those scenarios, the staff are never reported in Section 7 so they wouldn't contribute to your reporting in question one on whether you have staff in different categories and they wouldn't contribute to ours or compensation reported anywhere else in Section 7. That same general rule applies to other parts of the instrument as well. So when you're thinking about facilities or vehicles in your case anything that would be 100% air ambulance related. So maybe there are some facilities that just have that air component. That would be out of scope for this data collection effort.
14. My question was regarding holiday pay. We have employees, one category of employees that get paid that actually work the holiday, and then there's employees that get holiday pay for not working the holiday. But you had mentioned to exclude the hours for PTO and vacation. Do you exclude the holiday non-working hours as well too but include the working, the holiday working hours?
 - a. If it's so for the purposes of reporting compensation paid time off is a benefit. So you'd include it when reporting total compensation. For reporting hours worked though, if the person is not working due to taking personal leave, sick leave or a holiday that your organization offers as paid, then that would not contribute to total hours worked.
15. When is the collection instrument going to be available?
 - a. And because the earliest anyone will be submitting their data will be between January and May of next year, we are aiming to have training and the data collection system itself for inputting information available next fall. CMS heard as the instrument was being developed that's a fairly common scenario. They encourage you and everyone on the call today at a public safety based organization -- fire, police, or otherwise -- to dial into the future March 12th call. We're going to go over some of these examples in more detail. But you will not be asked to separate out time in that way. You will be asked to indicate whether your staff in each of the labor categories do or don't have a fire roll fire role in your case. And so if you have EMTs also have fire roles you would indicate yes. And then for those staff you'd report their total hours that they worked at your organization overall and then you'd report the total hours that were unrelated to either ambulance or fire. So you never will have to parse out the ambulance versus fire.
16. Mine was regarding the community outreach, things like that. If those standby events are performed by a staffed ambulance, you know, basically an in-service standby, things like that I

assume that would still be included in hours worked. That would not be non-ground ambulance if they do it in a ground ambulance.

- a. That's correct. If an ambulance is being deployed that's fully staffed and your standby at say an event, then that would contribute to total hours worked.

17. My question is we run a combination volunteer part-time and full-time department. My volunteers get \$125 a stipend for 6:00 p.m. to 8:00 a.m. shift. Now would I put that towards compensation? But what about hours worked? Would I put the hours on call or just hours if they went on a call during the night?

- a. So two responses there. The on-call time is not reported as hours worked. The stipend you mentioned, so for volunteers is there is no question for volunteers on total compensation. Actually, they may use that phrase. But there is at the very end of the volunteer section there's a question on total costs associated with volunteers. And so you tally up all of those stipends for all of your volunteers and report that total at the end of the volunteer section.
 - i. So no worries about reporting hours at all for volunteers?
 1. You do have to report hours worked for volunteers. The on call hours do not count but hours worked and ground ambulance responding to calls, et cetera, that is in scope. And there is a question for volunteers to report that total.
 - a. So some of my volunteers also work part-time hours so I guess that would count as hours. But say they do a 14 hour night shift. They go out for an hour, one call. I have to put in for those hours?
 - i. Yes, you'd have to. Because that's work involved in providing a ground ambulance service. That would be in scope for collection and reporting.

18. We are a municipality here and the way our shifts work, our medics are paid from 7:00 a.m. to 5:00 p.m. They're paid hourly. And then at 5:00 p.m. they go on what's called on call status all night long. However, they are paid a stipend for being on call all night long whether they get paged out or not. So how do we, how would we report that stipend that we pay our medics for their on-call time at night?

- a. The stipend itself would be reported in the volunteer section. So then the stipend would contribute to total compensation that you would report in the relevant paid staff category.
 - i. When we were talking about a municipality or a county like a dispatch and maintenance and janitorial support. It's supported by your municipality but it's a different department. So I understand that we need to report that. In other words, so like we need to report our dispatchers who are a part of the police department. But my question is do we have to break apart how much time the dispatchers spend with fire related stuff versus police related stuff versus our EMS stuff?
 1. Right. You will have to do that or else the costs that are reported could look too high relative to the costs that are actually relevant to ground ambulance. And so the instructions of the instrument offer a couple of suggestions on how to handle that. If it's dispatch that handles say police and fire, you could use the share of responses that were police versus fire to do that kind of allocation. For different kinds of costs there might be other approaches that are the best ones to pick to do that kind of allocation. That's a great question. It's an important point, you know, And dispatchers is a great example. If that's a dispatch center that supports both say, you know, fire, police, and ambulance there has to be

some kind of allocation to make the number you relevant rather to just to ground ambulance.