

West Virginia  
Emergency Medical Services  
Advisory Council

*Business Assistance Team*

REPORT TO THE  
TUCKER COUNTY AMBULANCE  
AUTHORITY  
and the  
TUCKER COUNTY COMMISSION

August 23, 2022



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August 23, 2022

Authority Members/Commissioners:

On behalf of the West Virginia Emergency Medical Services Advisory Council and its Business Assistance Team, thank you for the opportunity to independently evaluate the current state of emergency medical services in Tucker County and offer recommendations for improvement.

During this journey authority members and elected officials alike have offered documents, history, facts, and opinions. Most importantly, candid discussion has occurred which has proven to be most helpful.

The call of service to others has been heard by those responsible for the availability of this critical public safety component. Each of you want to do what is in the best interest of your neighbors and for that, I offer most sincere thanks.

Simultaneously, the present state of Tucker County's emergency medical services structure is highly unstable. Response times to emergencies are lengthy, the service is financially insecure, and at times cooperation between stakeholders is limited. This is not in the best interest of those whom you collectively serve. To bring stability, and change toward improvement, bold and decisive actions are a must.

This report contains findings, opinions, and recommendations for meaningful change. Admittedly, its contents may be difficult for some to absorb as factual. I ask that it be read with an open mind, with self-awareness and with a personal commitment to change. Additionally, I ask that the document not be simply discounted as not pertinent to you as an individual, your stakeholder group, or the organization as a whole. Your community deserves nothing less.

For the West Virginia EMS Advisory Council, I am,

Respectfully,



Clinton Burley

## BACKGROUND OF PROJECT ENGAGEMENT/ASSESSMENT METHODS

In June 2022 the West Virginia Emergency Medical Services Advisory Council's Business Assistance Team (BAT) was contacted by leaders from the West Virginia Office of Emergency Medical Services (WVOEMS) and the Tucker County Ambulance Authority (TCAA). Both groups reported that the financial stability of the TCAA was tenuous, and service levels were being decreased. This created serious concern among frontline staff, members, and elected officials.

Subsequently the BAT was contacted by a member of the Tucker County Commission who expressed a desire for a business review and recommendation report. The Commissioner was informed that an engagement was underway, at the request of the WVOEMS and the TCAA. The Commissioner stated that the review would enjoy the full support of elected officials.

The TCAA and the BAT agreed on a meeting date, time, and location. Additionally, a phone conference was conducted between the parties to share perceived challenges within the TCAA and an expectation of deliverables from the BAT.

On the afternoon of August 16, 2022 an in-person meeting was conducted at the Tucker County Courthouse. Members of the TCAA were present as was a representative of the Tucker County Commission and two leaders from the TCAA operations/clinical group. The BAT received an overview from each person present and had the opportunity to receive responses to specific questions related to the current state of the organization.

Findings identified within this report were generated by the consultancy team and are directly based on a thorough review of documents and records presented to it. Additionally, information, opinions, and consensus gleaned from the live interviews were also very helpful.

Recommendations for change to the financial, business structure, and daily operations of the TCAA contained within this report were conceived, developed, refined and delivered based on generally identified best practices for delivery of emergency medical services to residents of super-rural, geographically spread communities. Consideration was given to maintaining minimally acceptable levels of services, the need for development of consistent service delivery, and improvement to response times across Tucker County. Simultaneously,

principal consultants from the BAT remained fully cognizant of financial constraints common to this and similar entities.

This final report was completed on August 23, 2022. Delivery to interested and affected parties was conducted via email distribution. The BAT remains available to address any questions or concerns emanating from this document.

### CURRENT STRUCTURE AND STATE – GOVERNANCE

The TCAA is governed by volunteer membership appointed by the Tucker County Commission. Members serve at the Commission’s will and pleasure.

The BAT found members of the TCAA to be learned, engaged, and interested in moving EMS forward in the county. Members are professionals representing varied skill sets and experiences. Each lends specific knowledge to the needs of the organization.

Indeed, it is rare in Central Appalachia to have such a diverse group managing the interests of the emergency medical services.

At this writing the TCAA is governing in near-crisis mode. Members simply want the service to survive. While this philosophy is presently essential, it is not positive for long-term governance.

### PROPOSED STRUCTURE AND STATE – GOVERNANCE

When stability within the TCAA is restored, the BAT recommends that members create relationships with those in similar roles throughout the state. Common challenges exist within these organizations and sharing of information/problem resolution would serve the county well.

When immediate financial challenges have been managed or resolved, attention of the TCAA must turn to long-term planning strategies. An initial, holistic five-year strategic plan with annual reviews, updates and performance assessments is very important.

## CURRENT STRUCTURE AND STATE – OPERATIONS

The TCAA provides emergency medical services from two stations in Tucker County. Given the geography, distances and remote areas within the county, it is important to maintain this crew basing model.

The importance of multiple basing locations is also important because of the lengthy periods necessary for completion of a single request for service. With “turn around” times exceeding two hours per call, multiple basing locations not only reduces initial response time, but too reduces the overall length of service on a single request. This creates availability for further responses, improves service, and improves financial stability through receipt of additional patient revenue.

In the five years ending in December 2021 request volume for the TCAA saw a significant increase. Specific numbers are as follows:

2016 Total Response Volume:	800 Responses
2021 Total Response Volume:	1,281 Responses

Growth was also noted in the delivery of advanced life support level service. In 2016 the agency operated advanced life support from one station two to three days each week. By the close of 2021 the agency operated advanced life support from two stations, seven days each week. This is a significant and notable achievement which serves residents and visitors to Tucker County well.

Emergency medical services experts often recommend one ambulance crew for every 8,000 to 10,000 residents. However, these recommendations assume minimal transport times to hospitals allowing for rapid availability of crews for additional calls. This is not the case in Tucker County as each request for service takes in excess of two hours to complete.

Emergency response in Tucker County is also complicated by the fact that the population grows during special events and during the winter sports season. Not only does this increase the number of those served by the emergency medical services system, those vacationing in the community are oftentimes engaged in high-risk activities which result in the need for emergency medical services response.

Collectively, these challenges create increased service requirements as compared to rural communities which do not enjoy an influx of visitors.

While pay scales for West Virginia's emergency medical services providers continues to grow, the number of clinicians continues to fall. Agencies simply "mine" clinicians from other agencies. Tucker County is not immune from this challenge and recent financial uncertainties have exacerbated the loss of employees. The service now employs but two paramedics, as others have left employ of the TCAA for nearby services having better financial stability.

To be clear, paramedics and EMTs in West Virginia can literally sell their services to the highest bidder in their region or beyond. The challenges and uncertainty presently seen in Tucker County create a tremendous disadvantage for the TCAA.

### PROPOSED STRUCTURE AND STATE – OPERATIONS

It is the position of the BAT that the TCAA and the County Commission should collaborate to assure continuation of advanced life support level service from two or more locations in the county. This can be a guiding compass toward continuous improvement in the delivery of emergency medical services. Performance metrics should be developed and routinely evaluated, assessing all components of the operation.

Should this proposal be determined to be impractical from a financial or paramedic staffing standpoint, two locations should be maintained with basic life support coverage supplemented by a supervising paramedic operating a mobile paramedic unit. Such a paramedic would respond to each service request in the county, and be subject to cancellation should advanced life support level services not be required on a given call.

The implementation of either of these plans is predicated on the availability of staff to accomplish improvement. That is not available in the current state and will not be possible without a steady, defined, long-term funding stream above patient revenue and direct governmental contributions.

## CURRENT STRUCTURE AND STATE – OPERATIONAL OVERSIGHT

Daily operations are managed by leaders holding experience in the emergency medical services. Leaders actively serve the community while responding to emergency calls.

Leaders appear to be engaged and express a desire to provide good service. Simultaneously, leaders were forthright in stating that management experience and prowess was lacking. A desire for additional management knowledge and skills was also shared.

## PROPOSED STRUCTURE AND STATE – OPERATIONAL OVERSIGHT

The BAT recommends that daily leaders engage in emergency medical services focused leadership training. Such courses are available at little to no cost, and will provide leaders broad knowledge in delivery of management services. Focus should be placed on development of basic finance, quality management, human resources, and logistics knowledge.

## CURRENT STRUCTURE AND STATE – FINANCE

The BAT gained a deep understanding of the current state and challenges present with funding of EMS delivery in Tucker County.

The service has been largely dependent on dollars generated from a countywide EMS fee structure. Those dollars, totaling \$225,000 per annum, supplemented patient collections to allow for daily operations with the capacity for marginal savings earmarked for capital expenditures.

Regrettably, in the May 2022 primary election a proposed excess levy failed to receive voter approval. Had it been approved, the levy would have generated approximately \$400,000 per annum, creating daily financial stability, reservation of funds for capital expenditures, and the ability to compete with ever growing pay scales.

Subsequent to the failure of the levy the EMS fee structure was abandoned, leaving the TCAA with more limited funding sources.



At this writing, funds for maintaining services are approximated as follows:

Patient Service Revenue:	\$504,000
Hotel/Motel Tax Revenue Allocation:	\$100,000
County Commission General Fund Allocation:	\$110,000

At this writing, total annual budgeted expenditures are approximated as follows:

Total Planned Expenditures:	\$1.05M
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The TCAA stated that capital reserve funds are in-place and are being used to supplement daily operations. These funds are projected to sustain operations at the current level until early 2023. At that time capital reserve funds will be exhausted and funding for continued service at the present level will not be available.

The County Commission has created a structure to allow the proposed excess levy to again be placed before voters. This is planned for the general election to be conducted in November 2022. However, even after receiving voter approval funds from a successful levy election would not be available until late in 2023. This creates a troublesome gap between the exhaustion of capital reserve funds presently used to supplement daily operations and continued operational funds which may be generated from an excess levy. There is no doubt, the financial ability to sustain emergency medical services in Tucker County is in jeopardy.

Patient billing for services rendered by the TCAA are conducted by a third-party billing agency. While a contract is in place for the provision of these services, TCAA members lacked deep knowledge of its contents and expected billing practices. As opposed to developing agency specific billing/collection policies, the agency seems to rely on “boilerplate” practices of the billing firm. This creates the potential to leave dollars uncollected and needlessly places the agency at further financial risk.

## PROPOSED STRUCTURE AND STATE – FINANCE

The fragile financial circumstances under which the TCAA presently operates is untenable. The coming exhaustion of capital funds previously used for ambulance and equipment replacement will create an environment which will take many years to correct.

The BAT recommends that plans be created now for a county wide fund-raising effort which would commence immediately after the November 2022 election. Regardless of the outcome of the excess levy election, additional funding will be a must. With any approved levy funds being unavailable until late 2023, leaders must have plans in place to generate dollars to sustain operations in the interim.

Should the excess levy pass, Commissioners should consider the restoration of the ambulance fee for calendar year 2023 only. While this would certainly be politically unpopular coming out of an excess levy election, the Commission must assure adequate funding for emergency medical services operations in 2023 with or without levy passage.

Should the excess levy fail, Commissioners should consider permanent restoration of the ambulance fee. Again, this would be politically unpopular but would be a near absolute necessity to preserve the delivery of emergency medical services in Tucker County.

Alternatively, a broad fund-raising effort could take place across the county. While this would generate dollars, the overall impact would be minimal, and the effort per dollar would be significant.

An option that exists is for the TCAA to shift to a full or partial volunteer service model. While this is a cost savings, the service will undoubtedly suffer. In rural communities trained volunteers are in very short supply. And, regardless of desire to serve, volunteer service must always come after family and work-related commitments. Your community would see the difference in response times and effectiveness of their emergency medical services.

Patient billing and resulting revenue requires careful attention. The BAT recommends that the TCAA partner with its current billing agency to develop specific billing/collection policy/practice documents with associated key performance indicators. Doing so will hold the billing company to task to exceed expectations of the TCAA.

Patient revenue is predicated on reimbursement derived from careful and accurate documentation of the care rendered to patients. It does not appear that the outsourced billing agent is engaged in instruction of frontline staff on improving documentation for improved reimbursement. This is a minimal expectation and should be promptly remedied. A valued billing agent will engage with and instruct every new employee in a small agency such as the TCAA. In truth, it is in the best interest of the billing agent to do so.

Longer term, the BAT recommends that the TCAA create a request for proposal document and create a competitive environment for procurement of patient billing services. This will assure an attractive, longer term contractual relationship with the successful billing agency. Consideration should also be given to development of partnerships with other counties/agencies in the selection of billing services. Contracting with a larger “pool” of customers could lead to volumes-based savings.

#### CURRENT STRUCTURE AND STATE – EXTERNAL RELATIONS

Anecdotal evidence indicates that the professional image of some clinicians within the TCAA is lacking. Stories were shared with the BAT which reflect poorly on the clinicians themselves and the agency in general. This is troublesome and problematic, especially given the fact that voters will be asked to support these individuals with a positive vote on an upcoming levy.

Emergency medical services providers are always on display. Sometimes their actions can be misconstrued and sometimes the actions of those individuals is simply improper. Regardless, when behaviors fail to match expected levels of professionalism, everyone suffers.

#### PROPOSED STRUCTURE AND STATE – EXTERNAL RELATIONS

Operational leaders should focus on creating a more professionally minded organization. This can be achieved through policy development, creation of

expectations for specific, desired behaviors, and structuring an environment of accountability for one's actions.

Attention should also be paid to the professional appearance of all those associated with the service. Paramedics and EMTs must not only act professionally, but too must look professional while in the performance of their duties.

The TCAA should endeavor to engage local media/social media sources to share the story of the agency. Stories of successful patient outcomes, service challenges, data points, and plans for the future can collectively assist the agency in achieving long-term goals in external relations matters.

At this moment, external relations are critically important. Before they reach the polling place in November, voters must be confident that their excess levy dollars are set for use in a professional, progressive and caring emergency medical services system. This is a key point that requires administrative attention.

## SUMMARY

The TCAA has a long and storied history of excellent community service. Clearly the clinicians who have and continue to care for patients are deeply committed to their practice. Additionally, TCAA leaders have been extremely good resource stewards.

Through discussions with stakeholders, it is clear to the BAT that the financial stability of the organization is, at very best, tenuous. Significant change and bold moves are required to allow for the unimpeded delivery of emergency services. The system is increasingly unstable on many levels and requires attention. The BAT believes there is not a single solution. To position the service for the future a multi-faceted approach is required. Thus, our approach to this consultancy engagement has been to offer multiple options regarding governance, operations, funding, and external relations. While finance remains the present, overriding needs, the approach taken in preparation of this report is to allow stakeholders flexibility to mix and match solutions based on local needs and evolving challenges.

In this summary the BAT must be clear; maintenance of the status quo in terms of supplemental financial support positions the service for deep failure, putting critical emergency services at risk. Regardless of the outcome of the November 2022 levy election, supplemental funding is required for 2023. Should the levy fail, supplemental appropriations will be required for future years. Stakeholders must plan now for that potential eventuality.

Within a quasi-governmental organization like the TCAA, change is difficult. Unintended layers exist and there is a tendency for some stakeholders to accept a current state as completely acceptable. Additionally, fear develops within others that service delivery may suffer additional deterioration. These reactions are normal. All stakeholders come to planning meetings with different ideas, and different concerns. Collectively you are urged to stay focused on immediate, short-term needs while simultaneously planning for that which comes next.

The BAT asks operational leaders, TCAA members and governmental officials alike to step back and imagine the future. A future where a community is guaranteed a paramedic unit response within an acceptable response time for rural communities. A future where advanced life support coverage is restored. A future where an established funding stream is present and a future where the organization knows where it is headed in coming years. Please imagine that future and celebrate those varied accomplishments which lead you there.

Thank you for the opportunity to assist your community.