

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS  
ACTION AGENDA SUMMARY

DEPT: Health Services Agency *MDJ*

BOARD AGENDA # \*B-3

Urgent  Routine

AGENDA DATE December 9, 2008

CEO Concurs with Recommendation YES  NO   
(Information Attached)

4/5 Vote Required YES  NO

SUBJECT:

Approval of the State's Emergency Medical Services Appropriation Standard Agreement with the Health Services Agency for Fiscal Year 2008-2009 for Stanislaus County

STAFF RECOMMENDATIONS:

1. Approve the Standard Agreement for the State's Emergency Medical Services Appropriation for Fiscal Year 2008-2009 for Stanislaus County.
2. Authorize the Health Services Agency Managing Director, or her designee, to sign the Standard Agreement.

FISCAL IMPACT:

The Agreement for the State's Emergency Medical Services Appropriation (EMSA) for Stanislaus County is \$285,591 for Fiscal Year 2008-2009. From this amount, \$21,419 will be paid to the Stanislaus Foundation for Medical Care to process claims from providers for emergency services. This funding and the claims processing expense were included in the Agency's Final Budget for Fiscal Year 2008-2009. There is no impact to the General Fund.

BOARD ACTION AS FOLLOWS:

No. 2008-825

On motion of Supervisor Monteith, Seconded by Supervisor Grover  
and approved by the following vote,

Ayes: Supervisors: O'Brien, Grover, Monteith, and Vice Chairman DeMartini

Noes: Supervisors: None

Excused or Absent: Supervisors: Mayfield

Abstaining: Supervisor: None

1)  Approved as recommended

2)  Denied

3)  Approved as amended

4)  Other:

MOTION:

ATTEST: Christine Ferraro  
CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval of the State's Emergency Medical Services Appropriation Standard Agreement with the Health Services Agency for Fiscal Year 2008-2009 for Stanislaus County

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**DISCUSSION:**

In September 2000, the State of California approved SB2132, referred to as the "Emergency Medical Services Appropriation (EMSA)" to fund the reimbursement of uncompensated physician provided emergency medical services. For example, a qualifying claim for payment from these funds would be to an emergency room physician who provided services to an uninsured patient who failed to pay the physician's bill. Payment to providers is limited to 50% of the claimed amount. This funding is for physician services only and does not allow for compensation to hospitals.

The Emergency Medical Services Appropriation is administered by the Health Services Agency Indigent Health Care Program (IHCP). IHCP will retain approximately 2.5% of the appropriation, to offset the cost of the administrative burden. An additional \$21,419, or 7.5% of the appropriation, is to be paid to the Stanislaus Foundation for Medical Care to process and pay claims in accordance with the EMSA regulations for services rendered during Fiscal Year 2008-2009.

Stanislaus County has participated in this program since September 2000 and has entered an agreement each year with the Stanislaus Foundation for Medical Care to process and pay claims. Total revenues received to date for EMSA are \$2,284,725, as shown in the table below.

| Fiscal Year | Funding     |
|-------------|-------------|
| 2000-2001   | \$285,591   |
| 2001-2002   | \$285,589   |
| 2002-2003   | \$285,591   |
| 2003-2004   | \$285,592   |
| 2004-2005   | \$285,590   |
| 2005-2006   | \$285,588   |
| 2006-2007   | \$285,592   |
| 2007-2008   | \$285,592   |
| Total       | \$2,284,725 |

In order to receive this funding, staff is requesting the Board approve an agreement authorizing Stanislaus County to participate in this program. Two original standard agreements are required, each bearing an original signature by the Board or the Board's designee. A board order authorizing the agreement is required by the State.

**POLICY ISSUES:**

Approval of the Standard Agreement for EMSA funds supports the Board's priorities for A *healthy community* and *Effective partnerships*, by providing additional funding to community physicians to offset the cost of the uncompensated emergency care provided to uninsured residents.

**STAFFING IMPACT:**

There is no staffing impact associated with the approval of this agreement.

**STANDARD AGREEMENT  
EMERGENCY MEDICAL SERVICES APPROPRIATION (EMSA)  
FISCAL YEAR 2008-09**

County of Stanislaus

The State of California, by and through the California Department of Public Health (hereinafter called the "Department"), and the County of Stanislaus (hereinafter called the "County"), do hereby agree as follows:

This Standard Agreement (Agreement) is entered into pursuant to the provisions set forth in Assembly Bill (AB) 1183 (Chapter 758, Statutes of 2008). As a condition of receiving EMSA monies, the County agrees to all of the following:

**I. GENERAL REQUIREMENTS**

- A. These monies are only for emergency services to patients who do not have health insurance coverage for emergency services and care, who cannot afford to pay for those services, and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal Government, with the exception of claims submitted for reimbursement through Section 1011 of the federal Medicare Prescription Drug, Improvement and Modernization Act of 2003.  
(W&I Code, Section 16952(f))

Any physician may be reimbursed for up to 50 percent of the amount claimed pursuant to W&I Code, Section 16955, for the initial cycle of reimbursements in a given year. All funds remaining at the end of the fiscal year shall be distributed proportionally, based on the dollar amount of claims submitted and paid to all physicians who submitted qualifying claims during that year. Funds shall not be disbursed in excess of the total amount of a qualified claim.  
(W&I Code, Section 16952(i))

- B. The monies shall not be used to reimburse physicians employed by county hospitals and physicians who provide services in a primary care clinic that receives funds from the Tobacco Tax and Health Protection Act of 1988.  
(W&I Code, Section 16952(b)(1) & (2))
- C. The monies shall be paid only to physicians who directly provide emergency medical services to patients, based on claims submitted or a subsequent reconciliation of claims. Payments shall be made as provided in Sections 16951 to 16959, inclusive, of the W&I Code, and payments shall be made on

an equitable basis, without preferential treatment and without a conflict of interest by favoring any particular facility, physician or group of physicians.  
(W&I Code, Section 16956(f))

D. Physicians shall be eligible to receive payment for patient care services provided by, or in conjunction with, a properly credentialed nurse practitioner or physician's assistant for care rendered under the direct supervision of a physician or surgeon who is present in the facility where the patient is being treated and who is available for immediate consultation. Payment shall be limited to those claims that are substantiated by a medical record and that have been reviewed and countersigned by the supervising physician and surgeon in accordance with regulations established for the supervision of nurse practitioners and physician assistants in California.

(W&I Code, Section 16952(g))

E. A county shall adopt a fee schedule to establish a uniform, reasonable level of reimbursement from the Physician Services Account for reimbursable services. Schedules for payment shall provide for disbursement of funds periodically and at least quarterly.

(W&I Code, Sections 16953.3(a) & 16956(b))

F. Payments shall be made only for emergency medical services provided on the calendar day on which emergency medical services are first provided and on the immediately following two calendar days. If it is necessary to transfer the patient to a second facility that provides for a higher level of care for the treatment of the emergency condition, reimbursement shall be available for services provided to the facility to which the patient was transferred on the calendar day of transfer and on the immediately following two calendar days.

(W&I Code, Section 16956(g) & (h))

G. Accepting EMSA funds does not relieve the County of its obligation to provide indigent health care as required by W&I Code Section 17000.

(W&I Code, Section 16995.1)

## **II. EXPENDITURE REQUIREMENTS**

A. Hospital Services Account (HSA) and Physician Services Account (PSA) funds shall be transferred to the PSA in the County's Emergency Medical Services (EMS) Fund established pursuant to Sections 16951 and 16952 of the W&I Code, to reimburse physicians for uncompensated emergency services.

B. Use of EMSA funds is limited to reimbursement of physicians for losses incurred in providing uncompensated emergency services in general acute care hospitals providing basic, comprehensive, or standby emergency services.

(W&I Code, Section 16953)

- C. The monies shall only be used to reimburse physicians for emergency services rendered during FY 2008-09.

**III. REPORTING REQUIREMENTS**

- A. Counties are required to submit one progress report due in November and one final report due in April of each calendar year of expenditures and physicians data in accordance with the instructions provided by the Department. In addition, counties that submit a Report of Actual Financial Data (Actual) must report the EMSA monies as an expenditure and revenue in the Actual.
- B. Maintain all records and supporting documentation pertaining to the performance of this Agreement, including financial records of the expenditures and physicians data for at least three years after the end of FY 2008-09. These records will be subject to possible review and audit by the State.
- C. Submit an annual report to the Legislature on April 15 concerning implementation and status of the PSA for the preceding fiscal year.  
(W&I Code, Section 16952.1)
- D. Indigent health care program demographic, expenditure, and utilization data shall be reported as specified by the Department in the Medically Indigent Care Reporting System (MICRS) no later than 360 days after the last day of the year to be reported. The Department may withhold the first month's payment if not submitted.  
(W&I Code, Section 16915)
- E. The Rural Health Services (RHS) Program counties are exempt from the MICRS reporting requirements.

**IV. EMSA CONTRACT BACK PROGRAM**

RHS counties may request to have the Department administer their EMSA HSA and/or PSA funds.  
(W&I Code, Section 16809)

**V. ADMINISTRATIVE COST**

Cost of administering the account shall be reimbursed by the account based on actual administrative costs, not to exceed 10 percent of the amount of the account.  
(W&I Code, Section 16952(d))

**VI. INTEREST EARNINGS ON THE ACCOUNT**

All interest earned on the account shall be accrued to the benefit of the account, and all accrued interest shall be expended for the same purposes as the other funds in the account.

(W&I Code, Section 16909(c)(1))

**VII. PAYMENTS AND RECOUPMENT**

- A. EMSA monies shall be returned to the Department if they are not encumbered or expended within the fiscal year according to this Agreement and the requirements of Chapter 4 and 5 (commencing with Sections 16930 and 16940, respectively) of Part 4.7 of Division 9 of the W&I Code.
- B. The Department may withhold payment of any funds if any of the reports and data required in Article III of this Agreement and Part 4.7 (commencing with Section 16900) of Division 9 of the W&I Code have not been received from the County by the required dates. Any funds withheld from the County pursuant to this Article shall be released upon receipt of the required reports by the Department.
- C. Reductions in appropriations shall be prorated among the CHIP/RHS counties and the allocations shall be reduced accordingly upon notification by the Department.

**VIII. CONTRACTUAL CONSIDERATIONS AND LIMITATIONS**

- A. The Department or County may terminate this Agreement upon 30 calendar days advance written notice to the other party. The notification shall state the effective date of termination.
- B. Nothing in this Agreement shall be interpreted to require additional expenditures of County funds for health services beyond those required herein. Also, nothing in this Agreement shall be interpreted to relieve the County of its other obligations to provide health care services to its residents.
- C. No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in this Agreement is binding on any of the parties.
- D. County agrees that the State and designated representatives shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. County agrees to allow the auditor(s) access to records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records.

E. This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.

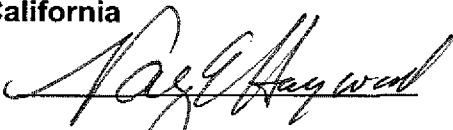
F. In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.

**IX. MAINTENANCE OF EFFORT CERTIFICATION**


By signing this Agreement, the County certifies that they will, at a minimum, maintain a level of financial support of county funds for health services as specified in W&I Code, Sections 16990 et seq. This amount shall not include any county funds expended pursuant to W&I Code, Section 16809.3.

**X. SIGNATURES**

The County certifies that it has obtained authorization and approval for this Agreement from its Board of Supervisors by resolution, order, motion, or ordinance.

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| <b>State of California</b><br>Signature: <u></u><br>Name: <u>Nancy E. Hayward</u><br>Title: <u>Chief, Office of County Health Services</u><br>Date: <u>1/28/09</u> | <b>County of</b><br>Signature: <u></u><br>Name: <u>MARY ANN LEE</u><br>(Please print or type.)<br>Title: <u>MANAGING DIRECTOR</u><br>Date: <u>1/7/09</u> |
|--|--|

APPROVED AS TO FORM:

BY:  DATE: 1-8-2009  
Dean Wright, Deputy County Counsel

**Emergency Medical Services Appropriation (EMSA)  
Fiscal Year 2008-09**

**Standard Agreement Instructions**

Each county is to complete and print their county's EMSA Standard Agreement. Please follow the four steps listed below:

- Step 1 Enter the county's name where indicated on the first page of the document.
- Step 2 Print two original copies.
- Step 3 Obtain signature on both original documents by the chairperson or duly authorized representative of the governing board. If a representative signs, please enclose a copy of the official board resolution authorizing his or her signature.
- Step 4 Mail two signed original EMSA Standard Agreements to the following address by December 15, 2008. Please remember to include the Mail Station (MS) number below in the address block of your envelope. Mail without the MS code will be returned.

California Department of Public Health  
Office of County Health Services  
Attention: County Health Services Unit  
MS 5202  
P.O. Box 997377  
Sacramento, CA 95899-7377

One original executed copy will be returned to you for your records. EMSA monthly payments should begin shortly thereafter. A delay in the issuance of payments could result based upon decisions related to the State Budget.

If you have any questions or need assistance printing the Portable Document Format file, please contact your County Health Services analyst at (916) 552-8016.