



Agenda Date: 11/6/2007
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NAPA COUNTY BOARD OF SUPERVISORS Board Agenda Letter

TO: Board of Supervisors
FROM: Shelli Brobst for Randolph F. Snowden - Director
Health & Human Services
REPORT BY: Shelli Brobst, Contracts Analyst, 253-4720
SUBJECT: Adoption of Resolution Regarding a Fee Increase for Emergency Medical Services ("Maddy") Funds

RECOMMENDATION

Director of Health and Human Services requests adoption of a resolution approving an additional penalty of \$2 per \$10 fine collected for specified traffic violations and certain alcohol-related criminal offenses to provide a specified share for pediatric trauma care and additional funding for recipients of the Emergency Medical Services ("Maddy") Fund.

EXECUTIVE SUMMARY

Adoption of the resolution will enable the County to impose an additional penalty of \$2 per \$10 fine collected for specified traffic violations and certain alcohol-related criminal offenses to provide funding for pediatric trauma care and additional funding for the Emergency Medical Services (EMS) Fund.

FISCAL IMPACT

Is there a Fiscal Impact?	Yes
Is it currently budgeted?	No
What is the revenue source?	Public Health Emergency Medical Services ("Maddy") Fund: additional penalty of \$2 per \$10 fine collected for specified traffic violations and certain alcohol-related criminal offenses.
Is it Mandatory or Discretionary?	Discretionary
Discretionary Justification:	Adoption of the Resolution is discretionary in that there is no mandate to assess this separate additional penalty. However, based on past collections from traffic penalties, HHSA projects that enactment of the additional penalty

would result in approximately \$60,000 in additional funds for pediatric trauma care services and to further assist in reimbursing hospitals and physicians for uncompensated emergency care and treatment.

Is the general fund affected? No

Future fiscal impact: Unless extended by statute, the provisions of SB 1773 will terminate on January 1, 2009.

Consequences if not approved: If the Resolution is not adopted, the County will lose the opportunity to collect additional funding for pediatric trauma care services and to supplement reimbursements to hospitals and physicians for uncompensated emergency care and treatment

Additional Information:

ENVIRONMENTAL IMPACT

ENVIRONMENTAL DETERMINATION: The proposed action is not a project as defined by 14 California Code of Regulations 15378 (State CEQA Guidelines) and therefore CEQA is not applicable.

BACKGROUND AND DISCUSSION

In 1987, Senate Bill 612 created the Emergency Medical Services (EMS) Fund, which allows each county to establish an EMS Fund (also referred to as the "Maddy" Fund) to reimburse physicians, surgeons and hospitals for patients who cannot make payment for emergency medical services and for other discretionary EMS needs. Revenue for the EMS Fund is collected from surcharges on court fines for certain traffic violations (\$1 per every \$10 fine).

In 1988, the Board approved a resolution establishing the Napa County EMS Fund. The amount of funds available changes each year based on the number of violations and penalties assessed. In Fiscal Year 2006-2007, approximately \$240,015 was collected. Emergency room physician claims and costs for uncompensated care provided by hospitals consistently exceed the amount available in this fund.

Legislation passed in September 2006 (SB 1773) authorizes counties to assess a separate, additional penalty of \$2 per \$10 fine collected for specified traffic violations and certain alcohol-related criminal offenses.

The assessments on alcohol-related offenses are a new category; existing assessments apply to traffic offenses only. HHSA is unable to project the exact amount of additional funds that will be generated by these new alcohol-related assessments; however, based on previous collections for traffic penalties, HHSA conservatively projects that enactment of the additional penalties would result in approximately \$60,000 in additional funds. HHSA will make budget adjustments to reflect additional revenues received once the actual amounts are known.

In accordance with SB 1773, up to 10% of the funds collected may be allocated to the EMS Agency to cover actual administrative costs. Of the remaining funds, 15% is to be dedicated to pediatric trauma care services. The balance of the funds will be allocated as follows: (1) 58% to reimburse physicians and surgeons for uncompensated emergency services; (2) 25% to hospitals providing a disproportionate share of trauma and emergency room services; and (3) 17% for other EMS purposes. Unless extended by statute, the provisions of SB 1773 will terminate on January 1, 2009.

The inclusion of funds for pediatric trauma care is new and differs from the utilization of funds under the existing

EMS Fund program. Per SB 1773, the 15% in funding for pediatric trauma care services will be used to:

- | reimburse hospitals, physicians and surgeons, for non-payment for emergency care services received by pediatric trauma patients in hospitals up to the point of the patient's stabilization, and/or
- | expand the services provided at trauma centers to pediatric trauma patients.

HHSA will develop mechanisms for distributing these funds to hospitals providing emergency trauma care to pediatric patients. Based on the existing emergency medical services system design, HHSA expects that the majority of the SB 1773 funds will be allocated to Queen of the Valley Medical Center, which is a local Level III trauma center. However, St. Helena Hospital may also qualify if it provides initial care to pediatric patients before they are transferred to the trauma center.

While these new funds will provide additional monies to reimburse hospitals and physicians for uncompensated care, they will not be sufficient to cover all costs related to such emergency care and treatment. Nonetheless, the funds will improve the County's ability to further offset the impacts of uncompensated emergency care in the community.

SUPPORTING DOCUMENTS

A . Resolution

CEO Recommendation: Approve

Reviewed By: Lorenzo Zialcita