



Napa County Legislative Subcommittee Board Agenda Letter

то:	Napa County Legislative Subcommittee
FROM:	Mary Booher for Minh Tran - County Executive Officer County Executive Office
REPORT BY:	Molly Rattigan, Deputy County Executive Officer - 253-4112
SUBJECT:	AB 1544 (Gipson) Community Paramedicine Programs

RECOMMENDATION

County Executive Officer requests discussion and possible direction on AB 1544 (Gipson), a bill that establishes state guidelines governing the implementation of community paramedicine programs or triage to alternate destination programs by local Emergency Services agencies (LEMSAs).

EXECUTIVE SUMMARY

AB 1544 (Gipson) establishes state guidelines governing the implementation of community paramedicine programs or triage to alternate destination programs by local Emergency Services agencies (LEMSAs). Emergency Medical Services (EMS) administrators and counties have opposed the legislation unless amended due to specific language included in the bill that limits local medical control. Staff will be present at the Legislative Subcommittee meeting to discuss the concerns.

FISCAL IMPACT

Is there a Fiscal Impact? No

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

As required by the Health and Safety Code, the EMS Authority (EMSA) and Local EMS Agencies LEMSAs provide two-tiered regulatory oversight of EMS services in California. LEMSAs provide or coordinate the provision of EMS services in their county or regions. While EMS reviews and approves LEMSA local EMS plans and provides guidance and leadership to ensure consistency and quality of EMS care statewide. Since 2015, EMSA has sponsored community paramedicine pilot projects in a dozen California communities. Community paramedicine is a fairly new and evolving health care field that allows paramedics to function outside their traditional emergency response and transport roles to facilitate appropriate use of emergency care while enhancing access to primary care for medically underserved populations. An example of a paramedicine program would be to allow those experiencing a mental health crisis to be transported to a crisis center rather than an emergency department first.

The pilot has encompassed 18 projects in 13 communities across the state, testing seven different community paramedicine concepts. Twelve projects are currently enrolling patients. Five of the initial projects have closed for various reasons. One project suspended operations in December 2017 but plans to begin enrolling patients again in 2019. Independent evaluations conducted by the University of California, San Francisco, have found generally positive results from the pilots.

AB 1544 would allow the EMSA to issue regulations that establish standards governing community paramedicine programs and expand the programs statewide. EMS Administrators, EMS Medical Directors and counties have opposed AB 1544 unless amended. The primary concern is the erosion of local medical control mainly because AB 1544 currently includes language that gives public agencies the right of first refusal to provide proposed specialties rather than allowing the LEMSA to make the best decisions for a community. AB 1544 also places additional burdens and restrictions on local EMS agencies that opt to operate an alternate destination or triage program, including the formation of new oversight committees. Proposed amendments are under discussion.

California State Association of Counties- Oppose Unless Amended Rural County Representatives of California- Oppose Unless Amended

SUPPORTING DOCUMENTS

A . AB 1544

Recommendation: Approve Reviewed By: Molly Rattigan