



Minutes

MEETING TYPE	Kentucky Board of Emergency Medical Services – Executive Subcommittee		
DATE	May 16, 2024	TIME	1:30 PM EST
LOCATION	Virtual/In person Option available	ROOM	Zoom Meeting Platform/Conf 571SE

Members

P	Keith Smith, Chair	P	Harry Clark			P	Ex Officio: Phi Dietz
	Brandon Edmiston	P	Pennie Berry			P	Ex Officio: Eddie Slone, Executive Director
Audio	David Webb @13:33PM	P	Rob Rothenburger			P	Ex -Officio: Steve Eubank
P	Joe Prewitt – Vice Chair						7 Total: 4=Quorum

#	Item	Discussion/Issue	Action/Responsible Party
1	Call to Order	Officially call meeting to order	Meeting called to order by Chair Smith at 13:30
2	Roll Call	Check roll and ensure quorum	Quorum established with six (6) members present.
3	Approval of Minutes	Review for Approval <ul style="list-style-type: none"> • March 14, 2024 	Motion to approve minutes made by Rob Rothenburger and seconded by Pennie Berry. Motion carries. Minutes approved.
4	Financial Report		Financial report provided by Executive Director Slone. Motion to approve made by Judge Clark and seconded by Pennie Berry. Motion carries.
5	Public Comment		
	Old Business		
6	Legislative Update	On Hold	Chair Smith reported that the legislative session is over. Two bills went through. We need to start working now for next year. The Board has started working on it now as well as other groups in KY for next session. No other updates at this time.
7	KBEMS Update		Two new personnel added to the office. We are stable for now. We will put an emphasis on agendas and not having to table issues when it comes to committee meetings.

8	Revision of Block Grant	Discussion regarding changes possible regarding passage of HB 484	<p>Could be affected. Regulations could need updating. We may want to rely on the changes to come through the regulation workgroup. No changes to date but be proactive before others have an opportunity to make changes for us. Two potential areas of funding where we can help EMS across the state. Director Slone: We can't make changes in regulation because of statute, simplify so the regulation is easier and not drag it out over two years. Take a look and see if there is more to lose than to gain or more to gain than to lose.</p> <p>Discussion about whether there had been any conversation regarding Medicaid Review Committee or Mobile Integrated Healthcare by Rob Rothenburger. Chair Smith indicated yes but they haven't been able to nail down if it's with ambulance or professional on scene. Joe Prewitt agrees it's on the radar but doesn't think it's priority yet. Trying to get MCO's on board. Two MCO's reluctant to move on anything brought up right now. Chair Smith shared the committee is well versed that is working on this Medicaid review committee. Represents a variety of groups but in a good place now with Medicaid. They have not agreed to move from 7 to 3 he doesn't think but will check on that and confirm. By looking, John Wood says it did not pass.</p>
9	Review of Regulations		<p>Talked about this in previous executive meetings to go back and look at regulations. We need clarifications. People would get contracting information and hear different information from different people. Discussion within executive to form a workgroup to review regulations. Also, a group to review KEMESIS. Only ask for the data we need. Workgroup total is 7. We haven't discussed who our representative would be. We can appoint one person from our group to represent us. Open for discussion on representation. Motion by Rob Rothenburger that Pennie Berry represents the Executive Committee on the regulation workgroup and seconded by Judge Clark. Motion Carries.</p>

			<p>Chair Smith will forward a list of the recommended names to Board Chair Holder and the official list will come from him.</p>
<p>10</p>	<p>Regulation Workgroup Status</p>		<p>Committee met twice and passing this topic to Rob Rothenburger, chair of the committee, appreciate the work he and the committee did.</p> <p>Rob Rothenburger presented recommendation document.</p> <p>Typo to fix on the attachment.</p> <p>John Wood – recommended draft regulation before it goes to the full Board.</p> <p>Judge Clark – Stay with the number for now and know that there could be circumstances that change it; but this gives a target.</p> <p>Joe Prewitt – This is a goal you work towards and in a year from now if it's not working it can be modified. Hold accountability and work toward; or reconsider your service you provide to your community.</p> <p>David Webb – believes the 50% is high. Would like to see it go back to 25%. Thinks it will be hard to get to 50% in smaller counties. Rather see the old grade of 25% than 50%.</p> <p>Judge Clark – if we don't give them a target then we are at the same place we are now. We are supposed to be helping get the paramedic levels up.</p> <p>Joe Prewitt - agrees with Clark; we've been at 25% for so many years and nothing is happening any different.</p> <p>John Wood – when the regulation is being drafted, we need clear requirements for the waiver. Not sure it would qualify for emergency regulation. Have to address for imminent threat for emergency welfare. May need to talk about that some more. He can take a stab at it with the intent for the regulation.</p> <p>Keith Smith – are we comfortable with legal counsel</p>

			<p>working on the draft?</p> <p>Rob Rothenburger, Keith Smith, and Eddie Slone can work it up, see what's required in the quarterly reporting and then let the subcommittee review and then send to John Wood for the draft.</p> <p>For the executive committee in reference to #4 do we want 25% or 50% whatever the consensus is?</p> <p>50% for now but this could get modified later.</p> <p>Once legal counsel has a draft, we will call a special meeting so it can be approved for full board.</p> <p>Classification of ambulance service – Eddie Slone, need to do regulations a little different. Worked on this a bit and think we are close on it. Need to add as a line in order to meet 777 agency declares emergency or non-emergency; most services in the state are licensed to do both but the board can decide. Not an issue of them being able to say the Board didn't allow me or license me. More work needs to be done on definitions and if there are things that need to be clear then we may need to do definition of ALS/BLS etc..</p> <p>David Lovely – OIG doesn't take position on that. As far as licensure we wouldn't expect you all as KBEMS to take a position. Hypothetically, one could take the other to court.</p> <p>Executive Director Slone – we aren't creating a class for a non-emergency class one; we will need to create a place on the application for them to declare on the application.</p> <p>Line 20 and 21 (strike) – 911Pennie, reads different Class 1B 37 reads different – make sure we are not contradicting.</p>
--	--	--	--

			<p>Line 116 – Roman Numerals are incorrect.</p> <p>John Wood – Define interfacility in regulation – would defining it allow 20-21 to stay?</p> <p>Joe Prewitt – Reimbursements are based on how ambulance is dispatched. Emergency level affects Medicare and how we are getting paid.</p> <p>Eddie Slone – when there is a violation/investigation; what constitutes a violation if an interfacility transport isn't taken?</p> <p>Judge Clark – for them everything goes through 911; tracking purposes; non-emergency and schedule it. If its emergency, they tell it, and we move immediately.</p> <p>David Webb – but they don't have to call 911 and then when a patient hears a two hour transport a doctor calls, and it becomes an emergency call.</p> <p>Class 1 have the requirement to do the transport? Eddie Slone – in these classes interfacility transports required to do it.</p> <p>Keith Smith - take interfacility out and higher level of care is needed.</p> <p>Eddie Slone – slippery slope; but go where the executive committee goes – which class it is, and we need to define interfacility.</p> <p>Keith Smith - 777 you can only go to your own hospital/facility.</p> <p>John Wood -Class 1B and 2C – Counties under 1B, 2C are hospitals/cities that do 911 calls. Regulation if you come upon someone in need at that time (is used when needed).</p>
--	--	--	--

			<p>104 – is the AND necessary 7 AND 8 together Alpha Media</p> <p>Definition: Interfacility is a transfer in and begins in a healthcare facility and ends in a healthcare facility.</p> <p>David Webb thinks the definition is now changing the intent.</p> <p>Site some of the provision of 777.</p> <p>May need to address the other interfacility transports that require a stretcher patient and when they can't find an ambulance to pick up a patient.</p> <p>This regulation will be tabled, and the regulation workgroup will work on this and get it ready for 2026. Want to make sure we get this right. Anticipate a lot of legal questions.</p>
11	Establishment of Workforce Sub-Committee		<p>Chair Smith: Good response from people in the state. Seven people on the committee but want others to reach out to the committee and make suggestions so your voice is heard. Thanked everyone for participating and submitting interest. Board met and gave the committee ideas on what they would like for them to work on. Meeting schedule for the group will be put on the KBEMS website.</p>
12	Information/Announcements	Next meeting date: July 18, 2024	
15	Adjournment		<p>Motion to adjourn by Pennie Berry and seconded by Joe Prewitt at 14:57. Motion carries.</p>