

**EMERGENCY MEDICAL SERVICE AUTHORITY – A Public Trust**

**Regular Board of Trustees Meeting**

**September 26, 2018 at 1:00 p.m. via Video Conference**

**EMSA Corporate Offices**

1111 Classen Drive, Oklahoma City, OK

1417 North Lansing Avenue, Tulsa, OK

**Minutes:**

**NOTICE AND AGENDA** for the Regular Meeting of the Board of Trustees for the Emergency Medical Services Authority, a Public Trust, were filed September 24, 2018 at 8:56 a.m. with the offices of the City Clerk of Tulsa and with the City Clerk of Oklahoma City on September 24, 2018 at 8:56 a.m., more than 24 hours prior to the time set for the meeting.

**TRUSTEES PRESENT**

Ms. Kelly Brader  
Mr. Phil Lakin  
Mr. Larry McAtee  
Mr. Kyle Nondorf  
Ms. Jan Slater  
Ms. Allison Petersen  
Dr. Jeffrey Goodloe

**TRUSTEES ABSENT**

Mr. Larry Stevens (Excused)  
Mr. Wiley Williams (Excused)  
Chief Bryan Wood (Excused)

**OTHERS PRESENT**

Jim Winham, EMSA  
Angela McLain, EMSA  
James Davis, EMSA  
John Graham, EMSA  
Johna Easley, EMSA  
Adam Paluka, EMSA  
Holly Jones, EMSA  
Lora Conger, EMSA  
Kent Torrence, EMSA  
Frank Gresh, EMSA  
Tracy Johnson, EMSA  
Julie Roberts, EMSA  
Sonny Geary, AMR  
Jeremy Coombs, AMR  
Jim Orbison, Riggs Abney  
Lindsey Baird, City of OKC  
Tyler Walden, Allen, Gibbs & Houlik

A quorum was present, and the meeting was called to order at 1:00 p.m. by Madam Chair Petersen.

**CONSENT AGENDA**

**1. Approval of Board Minutes from the EMSA Board of Trustees Special Meeting dated August 22, 2018 at 9:30 a.m.**

Upon motion made by Ms. Slater and seconded by Ms. Brader, the Board of Trustees voted to approve the Board Minutes from the EMSA Board of Trustees Special Meeting dated August 22, 2018 at 9:30 a.m.

AYE: Mr. McAtee, Ms. Petersen, Ms. Brader, Ms. Slater, Mr. Lakin, Mr. Nondorf

NAY: None

ABSENT: Mr. Stevens, Mr. Williams, Chief Wood

The motion was passed.

**REGULAR AGENDA**

**1. Chairman's Report**-Allison Petersen, Chairman of the Board – Ms. Petersen relinquished her time as there is nothing new to report to the Board.

Kent Torrence, EMSA's outgoing Chief Financial Officer, introduced the managing auditor representing Allen, Gibbs & Houlik (AGH), Tyler Walden.

**2. Presentation of Audited Financial Statements for Year-End June 30, 2018** – Mr. Walden, going through highlights on the governance letter provided to the Board, stated this audit was performed within governmental auditing standards. He reported accounting policies were consistent—no significant changes. AGH did not identify any significant or unusual transactions during the year. There were three areas requiring management to use judgement in developing estimates for the financial statements. These estimates involve reserves associated with patient accounts receivables and receivables from contractors. When the underlying information was tested, it was concluded that the reserves were conservative, consistently applied, and all the factors that were applied were appropriate which allowed them to conclude that those reserves were appropriately stated during the year. EMSA had three routine audit adjustments during the year--two of these are related to the noncapital subsidies. AGH reclassified those for financial statement purposes to show them on the statement of income, which is comparable to how they were presented last year. The third adjustment is to reclassify grant revenue into a separate revenue line item on the statement of income. AGH found one unrecorded misstatement, but it was

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below materiality threshold. The cause for this uncorrected entry is that there are credits setting in the receivable account that would essentially gross-up your balance sheet. The year-over-year effect of this is not material—it has no impact on the audit opinion. Management representations made during the year were comparable to last year. There was one item added to the audit letter this year. This should not raise any concerns as it was added to make it more transparent for Lora Conger, EMSA’s incoming Chief Financial Officer. It was related to a controlled deficiency due to a segregation of duties due to the small size of EMSA’s accounting department. It was not written in the letter last year even though it existed. The segregation issues are probably best mitigated through hiring more accounting staff. However, that is a decision to be left up to management in determining the cost/benefit of additional staff. The other small segregation item was due to a patient refund account. AGH noticed that some of the checks appeared to be out of sequence due to the checks being issued in batches. This presents a risk that the checks could be misappropriated if there is no control to ensure completeness of the population. Mr. Walden informed the Board of other services AGH has to offer EMSA then concluded his report.

At this time, Ms. Slater inquired about the IT security issues. Frank Gresh addressed this issue by telling the Board they had just completed an annual cybersecurity audit review penetration testing. This test is a comprehensive external vulnerability scan analysis, an internal vulnerability scan analysis, social engineering testing, and a couple of other attempts at e-mail exploits. He reported that the external attempts did not get through our e-mail security system.

**3. President’s Report**

**a. Compliance Report**-Frank Gresh, Chief Information – Mr. Gresh reported operational compliance and exclusion numbers for the eastern and western divisions for the month of August 2018. Both divisions were compliant in all areas. Ms. Slater commented that the western division’s compliance percentages are the highest she has seen in a long time. Dr. Goodloe interjected there have been several Tulsa-based paramedics willing to travel to Oklahoma City to fill in staffing gaps. Also, the field operational supervisors and directors from the east who have been traveling to help the western division supervisors look at some of the software analytics which the east has already been using. Dr. Goodloe stated he has been very pleased to see this dynamic and that there has been a distinct focus on mission task times and to limiting those whenever safely possible for patient care and operational efficiency. He said it is a culture change and he is encouraged at what he sees. Ms. Petersen commented she is glad to hear there has been a shift of the culture in the west and that we are getting some good leadership from the east to help.

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Jim Winham introduced Ms. Lora Conger who will officially be EMSA's Chief Financial Officer beginning Friday.

**b. Financial Report**-Lora Conger, Chief Financial Officer – Ms. Conger reported the financial statements including the highlights of collection rates, emergency/non-emergency transports, cash receipts and disbursements for both divisions for the month of August 2018. Ms. Slater commented she is delighted to see the decrease in the professional services category. She asked about the decline in subscription memberships (EMSAcare) and the increase in travel expenses. Mr. Torrence explained the EMSAcare number is down due to budgeting one month off and the number will reflect consistency next month. He confirmed the travel expenses are also a timing issue and will rectify itself.

**c. Patient Financial Services**-Angela McLain, Chief Revenue Officer - Ms. McLain presented the patient financial services report including call volume, accounts receivable, cash receipts, and overall percentages of cash and revenue per payor category for the eastern and western divisions. Key points from Ms. McLain's report included the call volume trending significantly higher in July and August on emergencies. In accounts receivable by category, there is a 4% increase in private pays which she attributes some of the increase to the switching over to Wakefield on August 1<sup>st</sup>, an outsource business office. She explained we will be working these claims longer rather than sending them to collections as EMSA did not have the resources to work the self-pays who were not EMSAcare members. Wakefield is working claims 90-120 days before sending to collections whereas EMSA sent three billing statements then to collections. The outsourcing is a new territory for EMSA and will be monitored closely to ensure it is beneficial. In the cash category, Medicare Managed Care has gone down due to the implementing of changes to their process. Ms. Petersen reconfirmed that the eastern division's general population is more heavily Medicare age group than the western division which explains the disparity in numbers. Ms. Petersen recalled a discussion regarding staffing movement for Ms. McLain's department when the call volume was expected to be lower and inquired how that was going. Ms. McLain explained that the lower call volume did not occur, so they were not able to move team members around to help fill staffing gaps and they are still functioning at a high efficiency rate. In the cash per payor category, Ms. McLain said she has mentioned this before, but she has a young lady whom she is very proud of who works VA claims and does an outstanding job as you can see by the \$100,000 spike in July.

**d. Key Point Indicators (KPIs)**-Adam Paluka, Public Affairs Director – Mr. Paluka presented the KPIs report for the month of August. Patient satisfaction is still above 91% which is above satisfactory. The IT department had an excellent month with no outages to

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report. Mr. Paluka shared that media hits were down in August and believes this is because he redefined what counts as a media hit--it should only count if it is directly related to EMSA. The website visits were very high, and he correlates this with August being the EMSAcare enrollment month. Mr. Lakin asked what people are visiting when they go to the website. Mr. Paluka responded there were a couple of high numbers in visiting both the Safety Resource Center where there are approximately 600 articles on various safety topics as well as the EMSAcare Member Center where many questions regarding EMSAcare can be answered. He went on to report early numbers from Tulsa's EMSAcare enrollment showing a gain of 601 members and a loss of 290 members--so for every member we lost, we gained two new members. He expects preliminary numbers for Oklahoma City's enrollment next month.

**e. President's Commentary**-Jim Winham, Chief Executive Officer – Mr. Winham began his commentary by introducing the EMSA Team Members of the Month for August 2018. In the western division, Melanie Hollis, who is a Medicaid Specialist. Her nomination comments included she is a hard worker, very kind, courteous, and very considerate to her co-workers. He added that he and Melanie did their EMSA new hire orientation together four years ago. In the eastern division, Melanie Sanders. Melanie recently moved to Medical Coder from Pre-Billing Verifier for the past seven years. She received comments including very goal oriented, extremely thorough in her job, and works very diligently. He congratulated both Melanies and thanked them for their service and for being assets to the EMSA team.

Mr. Winham reported that the Oklahoma State Fair ended this past Sunday and EMSA saw 200 individuals at the fair, responded to 65 calls, and of those 48 were transported. This number is down compared to recent years and he contributes this to a smaller venue and to the weather as it was not as hot. Most of these calls were breathing difficulty, syncope, and falls. The Tulsa State Fair begins this week and it will be interesting to compare the two events.

He continued with the building project in the western division which has proven not to be easy. He stated that consolidating into one location was one of his first goals. The team has looked at churches, vacant retail stores, and automobile dealerships, which one of those is now back on the market. It is an 87,000 square foot facility, centrally located, that has the capability of housing the entire fleet. From a logistics and supply standpoint, it is perfect. We have attorneys and engineers working with John Graham and we will keep the Board apprised of this project's status.

Mr. Winham provided an update on the BLS (Basic Life Support) program from an administrative standpoint. The program started on May 21<sup>st</sup> in the western division and it

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is averaging 8-10 transports per day. He added that EMSA has competition with at least six other transport companies in the city. The eastern division's BLS program started August 20<sup>th</sup> and they are averaging 22 transports per day. On the other hand, Tulsa has no competition as its population doesn't meet the criteria for stretcher aid van licensing.

Mr. Winham reminded the Board of the CPE (Certified Public Expenditures) program which will allow EMSA to be paid additional revenues from Medicaid. This has been a long process for EMSA management, but the latest number provided to him is over \$15 million for our system alone. He said we should receive the first payment in January 2020.

Regarding the new unit configuration, Mr. Winham told the Board that EMSA had an agreement with another corporation to loan us a different type of vehicle at fair market value. The agreement has fallen through, so we are looking at other avenues to possibly purchase a couple of Type 3 vehicles in lieu of the large modular ambulance. There are significant cost considerations with the type of ambulance we have now such as an 8-12% increase in chassis every year, and we were just notified that the 2019 chassis will go up and will have a different type of engine--a hybrid. We will continue to look and evaluate the cost savings with the smaller ambulances and weigh the cost savings against the safety and ability to continue to provide excellent clinical care.

Mr. Winham concluded his commentary by announcing the official retirement of EMSA's Chief Financial Officer, Kent Torrence. He stated Kent has been a familiar face of EMSA for the last twenty years and he will be sorely missed.

4. **Medical Director's Report**-Dr. Jeffrey Goodloe, Medical Director – Dr. Goodloe stated they had a very productive Medical Control Board meeting earlier this month. He brought to the Board's attention that additional protocol standards of care have been promulgated, and they have incorporated over sixty peer-reviewed published medical manuscripts along with the evidence base behind those updates. He reminded everyone to get their flu shots before December to get the best impact. Dr. Goodloe told the Board he is very happy with our standards of care and shared that there are other systems out of state looking very seriously to adopt our standards of care and we will gladly help those systems. Dr. Goodloe ended his report by telling the Board, to his knowledge, there is not a signed contract to continue contractor services post November 1<sup>st</sup> and that many months ago, he was asked to bring to the Medical Control Board a recommendation that the Medical Control Board issue a statement of clinical excellence, so those negotiations could begin. We did that in the timeframe we were asked, and it is unacceptable this contract has not yet been signed. Dr. Goodloe went on to say he has had many conversations with Mr. Winham and believes he has done everything he can to engender appropriate conversations. He requested that we get this done as the providers and the citizens deserve better.

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5. **New Business** – None at this time
6. **Trustees' Reports** – None at this time
7. **Next Meeting** – Wednesday, October 24, 2018 at 1:00 p.m. via videoconference
8. **Adjourn** – The meeting was adjourned by Madam Chair Petersen at 2:05 p.m.

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Julie Roberts, Assistant Secretary

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Date