



**Metropolitan Area EMS Authority (MAEMSA)**

**dba MedStar Mobile Healthcare**

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**Board of Directors**

**May 24, 2023**

**METROPOLITAN AREA EMS AUTHORITY  
DBA MEDSTAR MOBILE HEALTHCARE  
NOTICE OF MEETING**

**Date and Time:** May 24, 2023 at 10:00 a.m.

**Location:** MedStar Board Room, 2900 Alta Mere Drive, Fort Worth, TX 76116

The public may observe the meeting in person, at <https://meetings.ringcentral.com/j/1494009217> or by phone at (469) 445-0100 (meeting ID: 149 400 9217).

**AGENDA**

- |             |                               |   |                           |
|-------------|-------------------------------|---|---------------------------|
| <b>I.</b>   | <b>CALL TO ORDER</b>          |   | Dr. Janice Knebl          |
| <b>II.</b>  | <b>INTRODUCTION OF GUESTS</b> |   | Dr. Janice Knebl          |
| <b>III.</b> | <b>CITIZEN PRESENTATIONS</b>  | <p>Members of the public may address the Board on any posted agenda item and any other matter related to Authority business. All speakers are required to register prior to a meeting using the link on the Authority's website, (see, <a href="http://www.medstar911.org/board-of-directors/">http://www.medstar911.org/board-of-directors/</a> where more details can be found, including information on time limitations). The deadline for registering is 4:30 p.m. May 23, 2023. No person shall be permitted to speak on an agenda item or address the Board during Citizen Presentations unless they have timely registered and have been recognized by the Chair.</p> |                           |
| <b>IV.</b>  | <b>CONSENT AGENDA</b>         | <p>Items on the consent agenda are of a routine nature. To expedite the flow of business, these items may be acted upon as a group. Any board member may request an item be removed from the consent agenda and considered separately. The consent agenda consists of the following:</p>  |                           |
|             | <b>BC – 1558</b>              | Approval of Board Minutes for April 26, 2023  | Dr. Janice Knebl<br>Pg. 1 |
|             | <b>BC – 1559</b>              | Approval of Board Minutes for May 10, 2023  | Dr. Janice Knebl<br>Pg. 4 |
|             | <b>BC – 1560</b>              | Approval of Check Register for April  | Dr. Janice Knebl<br>Pg. 7 |
| <b>V.</b>   | <b>NEW BUSINESS</b>           |   |                           |
|             | <b>BC – 1561</b>              | Approval of Consultant Committee  | Kenneth Simpson           |

## **VI. MONTHLY REPORTS**

<b>A.</b>	Chief Executive Officer Report	Kenneth Simpson
<b>B.</b>	Office of the Medical Director Report	Dwayne Howerton Dr. Jeff Jarvis
<b>C.</b>	Chief Transformation Officer	Matt Zavadsky
<b>D.</b>	Chief Financial Officer	Steve Post
<b>E.</b>	Human Resources	Leila Peeples
<b>F.</b>	FRAB	Fire Chief Jim Davis Fire Chief Doug Spears
<b>G.</b>	Operations	Chris Cunningham
<b>H.</b>	Compliance Officer/Legal	Chad Carr Kristofer Schleicher
<b>I.</b>	EPAB	Dr. Brad Commons

## **VII. OTHER DISCUSSIONS**

<b>A.</b>	Requests for future agenda items	Dr. Janice Knebl
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## **VIII. CLOSED SESSION**

The Board of Directors may conduct a closed meeting in order to discuss matters permitted by any of the following sections of Chapter 551 of the Texas Government Code, including but not limited to any item on this agenda:

1. Section 551.071: To seek the advice of its attorney(s) concerning pending or contemplated litigation or a settlement offer, or on any matter in which the duty of the attorney to the Board and the Authority to maintain confidentiality under the Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act, including without limitation, consultation regarding legal issues related to matters on this Agenda;
2. Section 551.072: To deliberate the purchase, exchange, lease, or value of real property if deliberation in an open meeting would have a detrimental effect on the position of the Authority in negotiations with a third person;

3. Section 551.074: To (1) deliberate the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of an Authority officer or employee; or (2) to hear a complaint or charge against an officer or employee; or
4. Section 551.089: To deliberate security assessments or deployments relating to information resources technology; network security information; or the deployment of, or specific occasions for implementation, of security personnel, critical infrastructure, or security devices.

The Board may return to the open meeting after the closed session and may take action on any agenda item deliberated in the closed section.

## **XI. ADJOURNMENT**

**MAEMSA  
BOARD COMMUNICATION**

<b>Date:</b> 05.24.2023	<b>Reference #:</b> BC-1558	<b>Title:</b> Approval of Board of Directors Minutes
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**RECOMMENDATION:**

It is recommended that the Board of Directors approve the board minutes for April.

**DISCUSSION:**

N/A

**FINANCING:**

N/A

<b>Submitted by:</b> <u>Kenneth Simpson</u>	<b>Board Action:</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Continued until _____
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## MINUTES

### METROPOLITAN AREA EMS AUTHORITY DBA MEDSTAR MOBILE HEALTHCARE BOARD OF DIRECTORS REGULAR MEETING APRIL 26, 2023

The Metropolitan Area EMS Authority Board of Directors conducted a meeting at the offices of the Authority, with some members participating by video conference call pursuant to Section 551.127(c) of the Texas Government Code. The public was invited to observe the meeting at that location, or by phone or video conference.

#### I. CALL TO ORDER

Chair Dr. Janice Knebl called the meeting to order at 10:05 a.m.

Board members participating through video conferencing: Dr. Brad Commons and Bryce Davis. Board members physically present were Chair Dr. Janice Knebl, Dr. Chris Bolton, Councilman Carlos Flores, Fire Chief Doug Spears, Fire Chief Jim Davis, Teneisha Kennard, Ken Simpson (Ex-Officio) and Dr. Jeff Jarvis (Ex-Officio). Others present were General Counsel Kristofer Schleicher, Matt Zavadsky, Chris Cunningham, Steve Post, Chad Carr, Leila Peeples, Dwayne Howerton.

**Guests on phone or in person as attendees:** Dr. Angela Cornelius, Dr. Brian Miller, Assistant City Manager Val Washington, Fire Chief Jeff Ballew, Fire Chief Kirt Mays, Fire Chief Ryan Arthur, Fire Chief Brian Jacobs, Anita Meadows, Bettina Martin, Blair Blame, Bradley Crenshaw, Brandon Pate, Cerenity Jenkins-Jones, Chris Roberts, Desiree Partain, Emily Vinson, Erin Lincoln, Heath Stone, Jason Weimer, Jeramie Davidson, Jessica Duke, Jose Talavera, Kerby Johnson, Kristine Martinez, Lindy Curtis, Maerissa Thomas, Matt Willens, Nancy Cychol, Odelle Carrette, Pete Rizzo, Rhode Ontiveros Romero, Ricky Hyatt, Rosa Palacios, Shaun Curtis, Susan Swagerty, Timothy Statum, William Gleason, William Mercer, and Whitney Morgan.

#### II. INTRODUCTION OF GUESTS

Chair Dr. Janice Knebl introduced Stacy Almond, City Manager with City of Lake Worth.

#### III. CONSENT AGENDA

**BC-1552      Approval of Board Minutes for March 24, 2023**  
**BC-1553      Approval of Check Register for March**

The motion to approve all items on the Consent Agenda was made by Doug Spears and seconded by Carlos Flores. The motion carried unanimously.

**IV. NEW BUSINESS**

**BC-1554 Purchase of 23-24 Chassis for Ambulance**

The motion to approve was made by Dr. Chris Bolton and seconded by Dr. Janice Knebl. The motion carried unanimously.

**BC-1555 Approval of Learn and Earn Program**

The motion to approve was made by Doug Spears and seconded by Teneisha Kennard. The motion carried unanimously.

**BC-1556 Approval of Compensation Increases for Communications Department**

The motion to approve was made by Jim Davis and seconded by Carlos Flores. The motion carried unanimously.

**V. MONTHLY REPORTS**

Ken Simpson deferred from presenting the monthly reports and presented a 2023-24 Budget Overview.

**VI. REQUEST FOR FUTURE AGENDA ITEMS**

Chair Dr. Janice Knebl requested a called Board meeting on May 10<sup>th</sup> to discuss the 2023-24 budget.

**VII. CLOSED SESSION**

**VIII. ADJOURNMENT**

The board stood adjourned at 11:56 a.m.

Respectfully submitted,

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Douglas Spears  
Secretary

**MAEMSA  
BOARD COMMUNICATION**

<b>Date:</b> 05.24.2023	<b>Reference #:</b> BC-1559	<b>Title:</b> Approval of Board of Directors Minutes
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**RECOMMENDATION:**

It is recommended that the Board of Directors approve the board minutes for May.

**DISCUSSION:**

N/A

**FINANCING:**

N/A

<b>Submitted by:</b> <u>Kenneth Simpson</u>	<b>Board Action:</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Continued until _____
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## MINUTES

### METROPOLITAN AREA EMS AUTHORITY DBA MEDSTAR MOBILE HEALTHCARE BOARD OF DIRECTORS CALLED MEETING MAY 10, 2023

The Metropolitan Area EMS Authority Board of Directors conducted a meeting at the offices of the Authority, with some members participating by video conference call pursuant to Section 551.127(c) of the Texas Government Code. The public was invited to observe the meeting at that location, or by phone or videoconference.

#### I. CALL TO ORDER

Chair Dr. Janice Knebl called the meeting to order at 10:02 a.m.

Board members participating through video conferencing: Dr. Brad Commons, Susan Alanis, Teneisha Kennard, and Bryce Davis. Board members physically present were Chair Dr. Janice Knebl, Dr. Chris Bolton, Chief Doug Spears, Chief Jim Davis, Ken Simpson (Ex-Officio) and Dr. Jeff Jarvis (Ex-Officio). Others present were General Counsel Kristofer Schleicher, Matt Zavadsky, Chris Cunningham, Steve Post, Chad Carr, Leila Peeples, Dwayne Howerton and Pete Rizzo.

**Guests on phone or in person as attendees:** Chief Brian Jacobs, Chief Jeff Ballew, Chief KT Freeman, Dr. Brian Miller, Andrew Malone, Angela Larson, Anita Meadows, April Huse, Bettina Martin, Bob Strickland, Bradley Crenshaw, Cerenity Jenkins-Jones, Chris Roberts, Christy Cope, Desiree Partain, Diana Anderson, Heath Stone, Jason Weimer, Jennifer Fee, Jeramie Davidson, Joleen Quigg, Kerby Johnson, Kier Brister, Kristine Martinez, Laura Long, Lindy Curtis, Lisa Gray, Maerissa Thomas, Matt Willens, Monica Cruz, Nancy Cychol, Nick Bombardier, Rhode Ontiveros Romero, Ricky Hyatt, Scott Mesick, Susan Swagerty, Tim Statum, Tyler Stein, and Whitney Morgan, Valerie Washington, Mark McDaniel, Jeremy Blackwell, Josh Jacobs, Michael Glynn, and Zach Shaffer.

#### II. INTRODUCTION OF GUESTS

Chair Dr. Janice Knebl introduced Valerie Washington, Fort Worth Assistant City Manager Mark McDaniel Fort Worth Director of Transformation and Business and Data Analytics, Burleson Fire Chief KT Freeman, Haltom City Fire Chief Brian Jacobs, Lake Worth Assistant Fire Chief Jeremy Blackwell, Burleson Assistant Fire Chief Josh Jacobs, Michael Glynn, President of Fort Worth Firefighter's Association, and Zac Shaffer. Fort Worth Firefighter's 1<sup>st</sup> Vice President.

#### III. NEW BUSINESS

**BC-1557 Approval of ad hoc committee and process to select Consultant to conduct fiscal and operational review.**

The motion to approve was made by Doug Spears and seconded by Dr. Chris Bolton. The motion carried unanimously.

**IR-229      Presentation of Budget Scenarios**

Kenneth Simpson presented scenarios for the 2023-24 budget.

**V.      REQUEST FOR FUTURE AGENDA ITEMS**

**None.**

**VI.     CLOSED SESSION**

**None.**

**VII.    ADJOURNMENT**

The board stood adjourned at 11:21 a.m.

Respectfully submitted,

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Douglas Spears  
Secretary

**MAEMSA  
BOARD COMMUNICATION**

<b>Date:</b> 05.24.2023	<b>Reference #:</b> BC-1560	<b>Title:</b> Approval of Check Register
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**RECOMMENDATION:**

It is recommended that the Board of Directors approve the check register for April.

**DISCUSSION:**

N/A

**FINANCING:**

N/A

<b>Submitted by:</b> <u>Kenneth Simpson</u>	<b>Board Action:</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Continued until _____
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AP Check Details Over 5000.00  
For Checks Between 4/1/2023 and 4/30/2023



Check Number	CK Date	Vendor Name	Check Amount	Description
111817	4/6/2023	Bound Tree Medical LLC	8,103.94	Various Medical Supplies
111823	4/6/2023	Express Fleet Autobody and Paint	7,967.20	M79 Code 100 Repairs Job #1044
111824	4/6/2023	Founder Project RX Inc	6,850.88	Various Medical Supplies
111833	4/6/2023	Medline Industries, Inc.	13,697.13	Various Medical Supplies
111842	4/6/2023	Paranet Solutions	15,858.25	Additional Storage for Nutanix
111848	4/6/2023	Shook Hardy & Bacon LLP	32,215.06	Cyber Event Services - Jan23
111857	4/6/2023	XL Parts	8,335.23	Various Parts
111913	4/13/2023	Airgas USA, LLC	5,897.01	Rental Cylinders
111920	4/13/2023	Bound Tree Medical LLC	25,474.20	Various Medical Supplies
111924	4/13/2023	Collection Management Company	6,040.12	Collection Services
111934	4/13/2023	Fort Worth Heat & Air	9,852.50	Spring Maint - NDC
111936	4/13/2023	Founder Project RX Inc	6,007.95	Various Medical Supplies
111941	4/13/2023	ImageTrend	23,141.00	Monthly Fee - Elite EMS Saas
111949	4/13/2023	Maintenance of Ft Worth, Inc.	6,198.20	Janitorial Services/Supplies
111951	4/13/2023	Medline Industries, Inc.	6,153.62	Various Medical Supplies
111961	4/13/2023	Paranet Solutions	44,839.06	IT Monthly Services - Apr23
111964	4/13/2023	RingCentral	50,361.65	Digital User / Annual Subscrip
111966	4/13/2023	Shook Hardy & Bacon LLP	15,642.00	Cyber Event Services - Feb23
111969	4/13/2023	Simple Leadership Strategies LLC	17,655.00	Simple Leadership Strategies
111975	4/13/2023	TML Intergovernmental Risk Pool	7,149.66	Liability Deductible
111981	4/13/2023	XL Parts	7,686.04	Various Parts
112031	4/20/2023	Bound Tree Medical LLC	11,658.67	Various Medical Supplies
112036	4/20/2023	City of Fort Worth	58,881.79	Radio System Upgrade 1/01-12/31/23
112038	4/20/2023	CyrusONe	8,060.48	Colocation/Bandwidth Charges
112046	4/20/2023	Logis Solutions	35,944.83	Q2 Maint / HERE License - Mar2
112049	4/20/2023	Medline Industries, Inc.	12,012.67	Various Medical Supplies
112056	4/20/2023	The EMS Training School LLC	6,500.00	Paramedic Tuition - Z Vasquez
112062	4/20/2023	SoftwareOne, Inc.	55,230.90	Microsoft Server Software Main
112121	4/27/2023	All Tire Supply	6,250.00	New R-1234YF A/C machine
112124	4/27/2023	AMBU Inc	5,086.01	Various Medical Supplies
112134	4/27/2023	Bound Tree Medical LLC	17,971.30	Various Medical Supplies
112136	4/27/2023	CDW Government Inc	6,495.61	Spare Monitors
112137	4/27/2023	David McDavid Ford	41,117.65	2023 Ford Explorer VIN#1FMSK7DDHXPGA90878
112138	4/27/2023	Dell Marketing LP	6,366.94	Two new Laptops for Lindy and Controller and laptop for Chris
112140	4/27/2023	Express Fleet Autobody and Paint	5,082.50	M80 code 100 body repairs
112142	4/27/2023	Founder Project RX Inc	8,686.81	Various Medical Supplies
112145	4/27/2023	ImageTrend	13,460.00	Annual Fee - Auto Export NEMSI
112147	4/27/2023	Kroll Information Assurance LLC	69,077.17	Incident Response Service
112151	4/27/2023	M-Pak, Inc.	6,815.10	Uniforms
112155	4/27/2023	Medline Industries, Inc.	9,214.54	Various Medical Supplies
112158	4/27/2023	O'Neill Marketing & Event Mgmt.	6,382.75	2023 Annual Careholders' Report
112168	4/27/2023	Paranet Solutions	8,633.76	5 Mos Acrobat Pro/Network for Alta Mere
112174	4/27/2023	T & W Tire	5,013.63	Ram Tires
112176	4/27/2023	The State of Texas	5,128.65	Microsoft Subscription - Mar23
112181	4/27/2023	XL Parts	5,280.64	Various Parts
2477892	4/11/2023	Direct Energy Business	7,979.33	Electric Services
3256008	4/3/2023	Frost	39,363.52	Frost Loan #39001
3262205	4/4/2023	MetLife - Group Benefits	34,429.33	Dental/Vision/STD/Basic Life/Supp Life
3262215	4/4/2023	UMR Benefits	50,887.05	Health Insurance Premium - Apr
3294099	4/12/2023	M Davis and Company Inc	5,240.00	Detection of Elder Abuse - Mar
3294154	4/12/2023	WEX Bank	140,694.59	Fuel
3366242	4/28/2023	Integrative Emergency Service Physician	15,000.00	Contract Services - A Cornelius
3366257	4/28/2023	UT Southwestern Medical Center	12,833.33	Contract Services - B Miller
4032023	4/3/2023	Frost	61,053.88	Frost Loan #30001
4042023	4/4/2023	Frost	38,540.62	Frost Loan #4563-001
4182023	4/18/2023	JP Morgan Chase Bank, N.A.	42,459.04	MasterCard Bill
4252023	4/25/2023	Frost	52,993.77	Frost Loan #4563-002
18654531	4/13/2023	AT&T	16,058.06	Cell Phone / Aircards - Mar23

**MAEMSA  
BOARD COMMUNICATION**

<b>Date:</b> 05.23.2023	<b>Reference #:</b> BC- 1561	<b>Title:</b> Approval Consultant Scoping Committee
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**RECOMMENDATION:**

It is recommended that the Board of Directors approve the request to establish a committee to establish a scope for a study of the MAEMSA System, submit a request for proposals and recommend an organization to the MAEMSA Board.

**DISCUSSION:**

During the initial budget discussions there were many differing thoughts about the amount of time and appropriate scope for a consultant to evaluate the Metropolitan Area EMS Authority ('MAEMSA') system. Likewise, there have been questions regarding the structure of the system, the utilization of resources, and the lines of business. The recommendation was made to establish a multifaceted committee to establish a scope of work for an outside consultant, work with MAEMSA staff to request proposals for that scope and provide a recommendation to the MAEMSA Board of Directors on who to select.

The suggested committee make-up was the chair of the First Responder Advisory Board ('FRAB'), the chair of the Emergency Physician's Advisory Board ('EPAB'), the chair of the MAEMSA Board of Directors, a hospital representative, a patient representative, a representative for the suburban city managers, representatives for the city of Fort Worth as suggested by the City Manager's Office, Medstar's CEO and MAEMSA's Chief Medical Officer. The list below meets these requirements, and the participants have indicated a willingness to serve.

The scope of the study is recommended to encompass the sources of income for MAEMSA, the effectiveness of current billing practices and any impact on the community, the cost of the services provided by the MAEMSA system, the structure of the MAEMSA system as opposed to other structures, an overview of the challenges or opportunities of EMS nationally as well as how different organizations are funding and meeting those challenges or opportunities.

- David Cooke- City Manager, Fort Worth
- Valerie Washington- Assistant City Manager, Fort Worth
- Mark McDaniel- Director of Transformation and Data & Planning Analytics, Fort Worth
- Stacey Almond- City Manager, Lake Worth- Suburban City Manager Representative
- Joseph DeLeon- Texas Health Resources CEO, Hospital Representative
- Dennis Shingleton- Former Fort Worth City Council member, Patient Representative
- Dr. Janice Knebl- Metropolitan Area EMS Authority Chair
- Ryan Arthur, Fire Chief, Lake Worth- First Responder Advisory Board Chair
- Dr. Brad Commons, Emergency Physicians Advisory Board Chair
- Dr. Jeff Jarvis- System Medical Director, and MedStar Chief Medical Officer
- Ken Simpson- Chief Executive Officer, MedStar

**FINANCING:** When a price is established MedStar staff will work to identify a funding source.

<b>Submitted by:</b> <u>Kenneth Simpson</u>	<b>Board Action:</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Continued until _____
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# Tab A – Chief Executive Officer

## **Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**

### **Chief Executive Officer's Report- May 1, 2023**

**Work Reprioritization Subcommittee/EMS System Performance-** We cancelled the last EMS System Performance Committee meeting due to the MAEMSA Board meeting. We are scheduled to meet again June 14<sup>th</sup>. We continue to monitor calls and patient condition and make any adjustments to the first response that fire requests. When the process was initially established, we agreed that the committee would continue evaluating whether the reprioritization process was working as effectively designed, and whether there are changes that need to be made. We have also agreed that if there are some things that stand out as needing to be adjusted the group will make those adjustments, but a 90-day look back should yield enough calls for better analysis. The primary objectives of the reprioritization effort are to better identify the time sensitive, life-threatening calls so first medical contact occurs within the parameters recommended by the Citygate consultants and so we can begin working towards establishing shorter response time criteria for priority 1, time sensitive, life-threatening medical issues. The system performance committee will continue meeting and will take up response time recommendations in future meetings.

**Legislative Action-** Our Chief Transformation Officer has been working with the Texas EMS Alliance on legislation to prevent surprise billing. The legislation provides that if a governmental jurisdiction publishes its rates, then the commercial insurer must pay those rates, but if a jurisdiction does not publish the rates, then the commercial insurer is required to pay at least 325% of the current Medicare allowable fee. This legislation would apply to commercial insurance plans overseen by the State of Texas, which is a smaller percentage. The bill is SB 2476.

Blue Cross/Blue Shield has notified many EMS agencies throughout the State of Texas that they overpaid claims as far back as 2017. In working with TEMSA we have learned that it is likely these notifications were sent to meet a federal requirement, but it is unlikely they will try to collect the overpayment. We are monitoring this closely for any changes.

**Optima-** We have received the first release of the Optima software. This release is not intended to model as it is utilized for assuring the variables are dialed in so the modeling will compare with historical performance. The Optima team has also modeled the resources needed to establish an 8:59 response time 90% of the time in the current system as well as a few different options around that. We will be discussing the response time modeling more in the EMS System Performance Committee.

**Ongoing Discussions-** We have been visiting several cities to speak about the state of EMS in the country, the challenges we continue to face locally, and the work that is being done to mitigate those challenges. This includes the high likelihood that, at least in the short term, there will be a need to help support the rising cost of uncompensated care in the MedStar system. We will continue working to find solutions that are focused on the patients and the care they need.

# Tab B --Office of the Medical Director



## Improving Systems and Educating Clinicians to Enhance Patient Outcomes

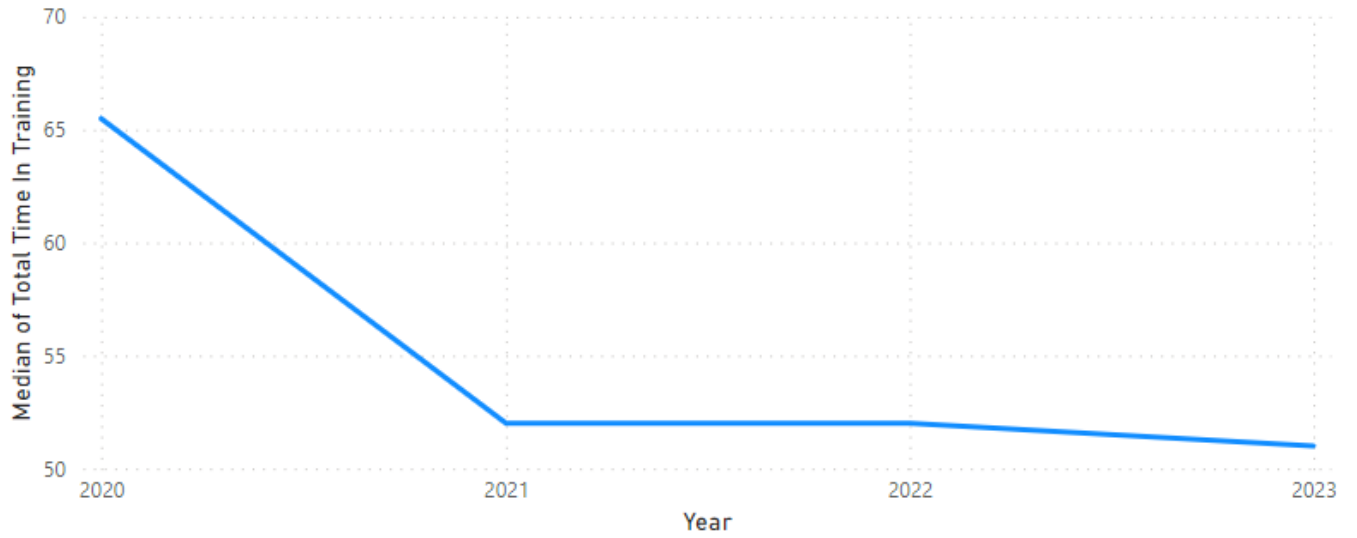
### Education and Training

- OMD 23Q2CE – June
  - Protocol Update
    - Headache, Stroke, Agitation/Capacity
  
- Journal Club
  - Fishe JN, Smotherman C, Burcham S, Martin-Gill C, Richards CT, Powell JR, Panchal AR, Salloum RG. Measuring the Implementation Preferences of Emergency Medical Services Clinicians Using Discrete Choice Experiments. Prehosp Emerg Care. 2023 Mar 1:1-9.
  - Toy J, Tolles J, Bosson N, Hauck A, Abramson T, Sanko S, Kazan C, Eckstein M, Gausche-Hill M, Schlesinger SA. Association between a Post-Resuscitation Care Bundle and the Odds of Field Rearrest after Successful Resuscitation from Out-of-Hospital Cardiac Arrest: A Pre/Post Study. Prehosp Emerg Care. 2023 Feb 13:1-9.
  
- System Education Committee
  - Annual System CE plan developed
  
- MHP May Course
  - 8-participants from Miami Dade
  - 12-participants from MedStar
  
- Card Course Attendance

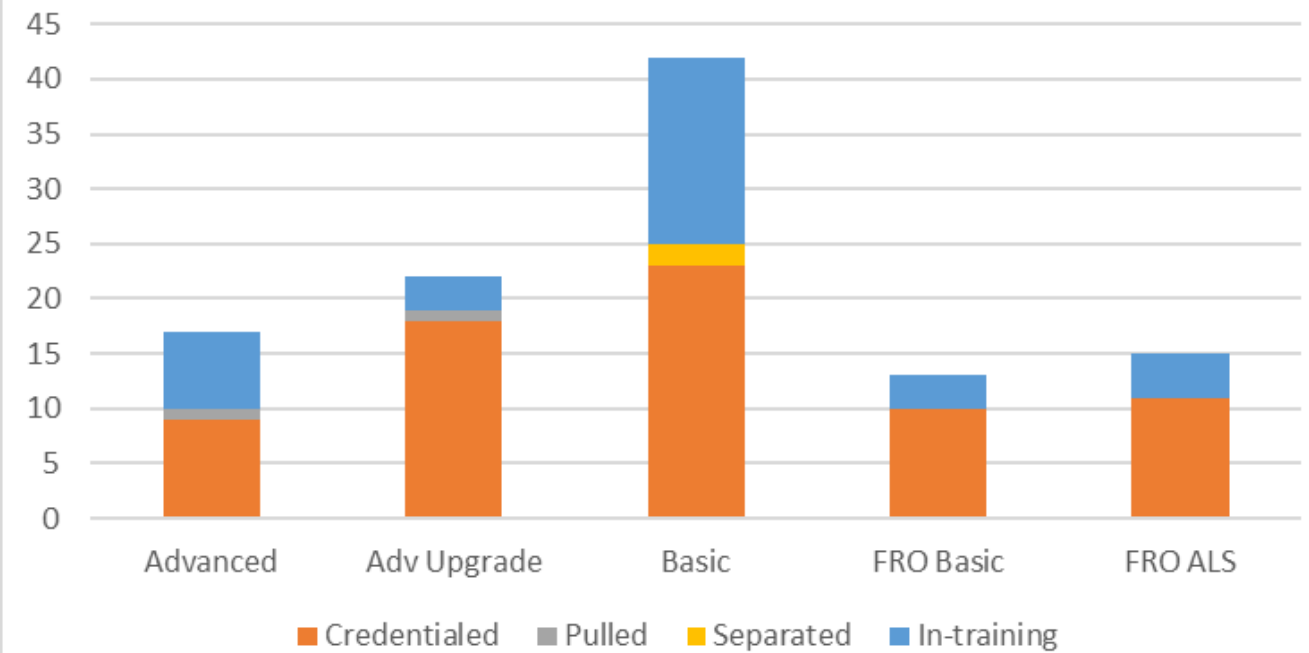
Agency	BCLS	ACLS	Pedi	AMLS	PHTLS	Additional Course Challenges
MedStar	30	11	15	34	30	45
FRO	0	0	1	0	58	0
External	0	0	0	21	30	0

## Credentialing

Median of Total Time In Training by Year



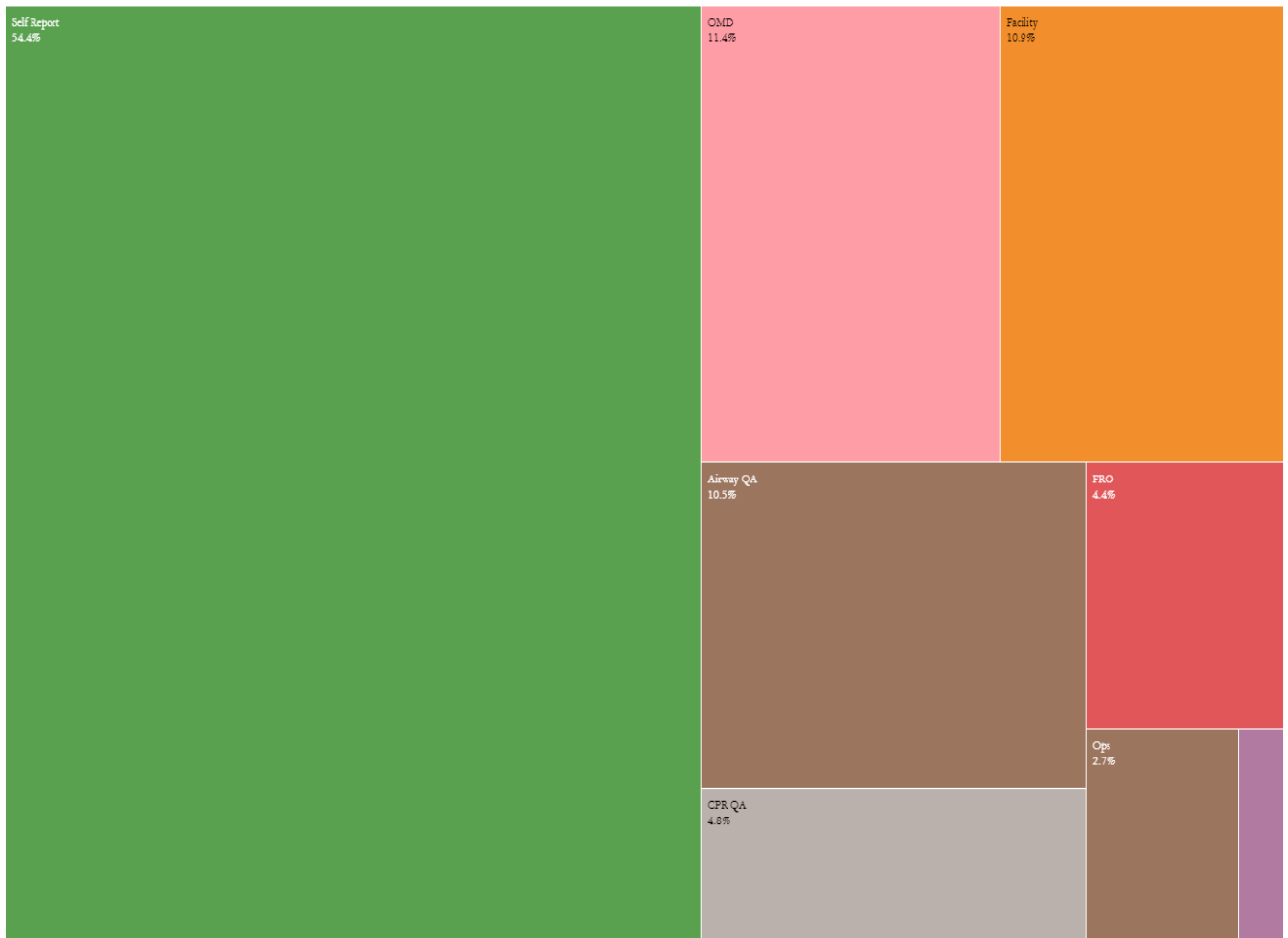
2023 Credentialing Individuals



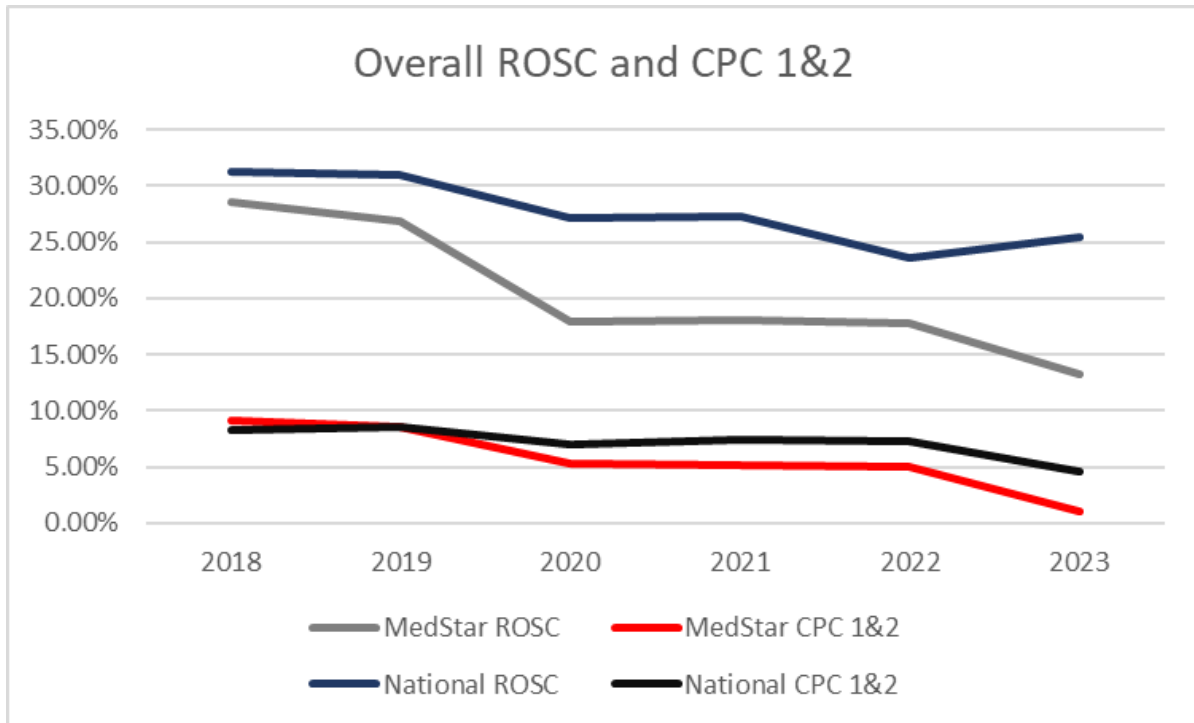
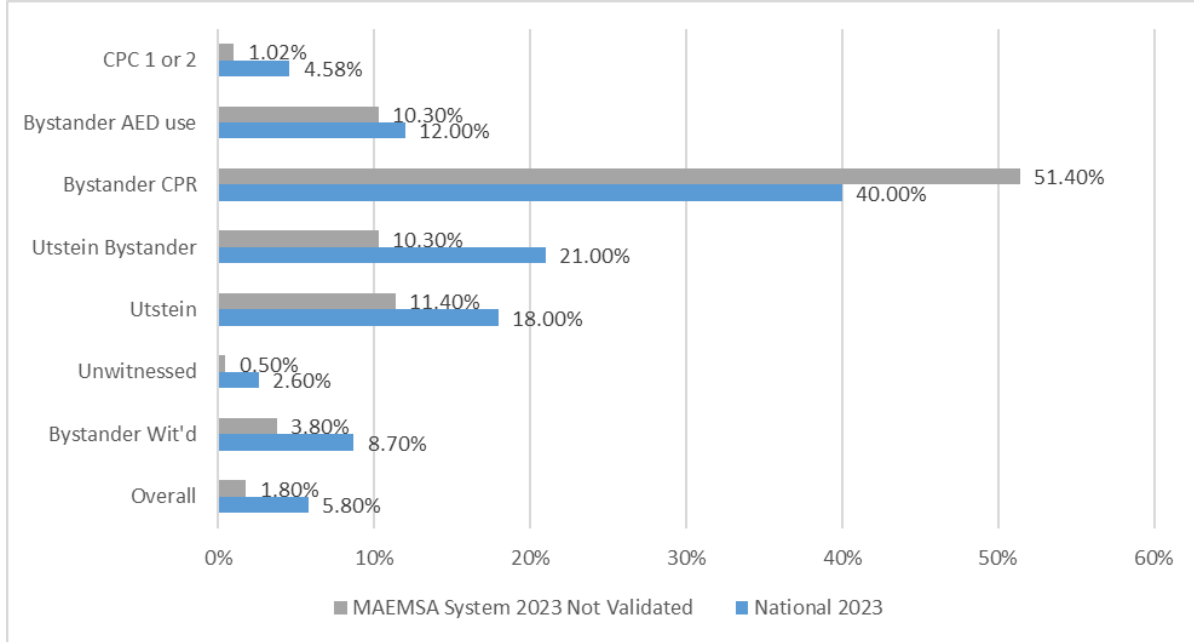
## Quality Assurance

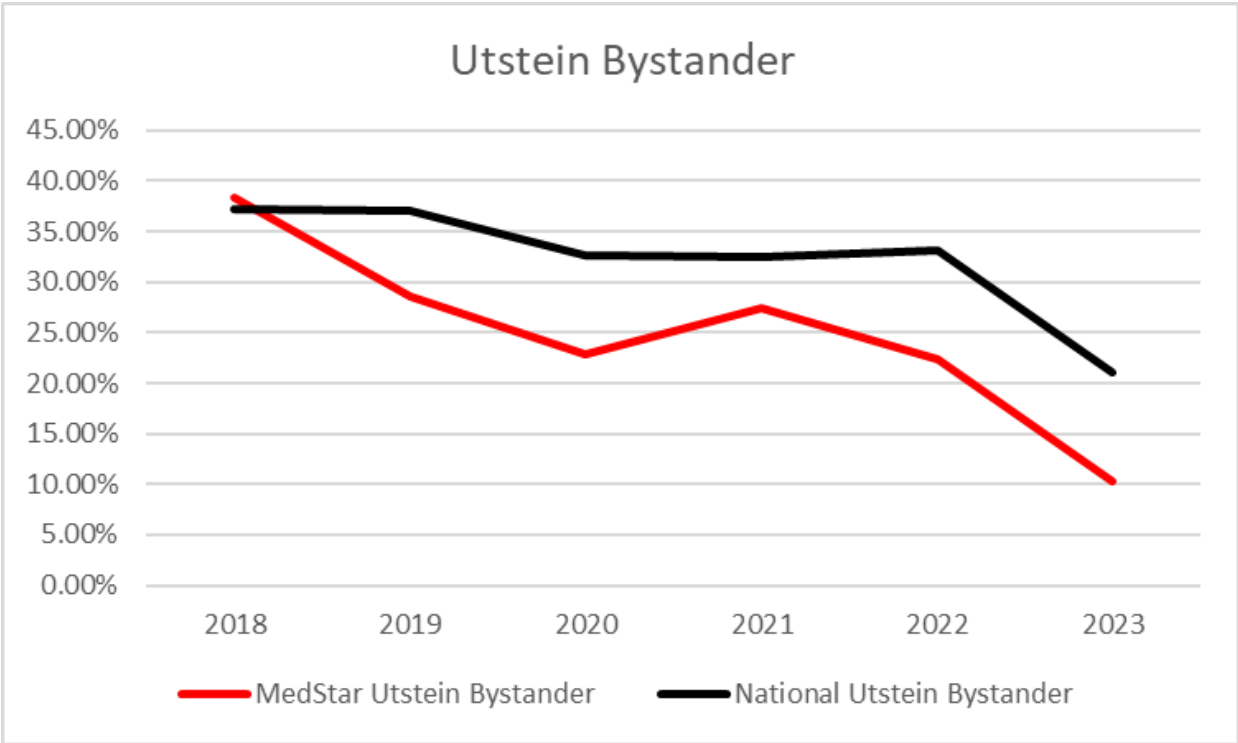
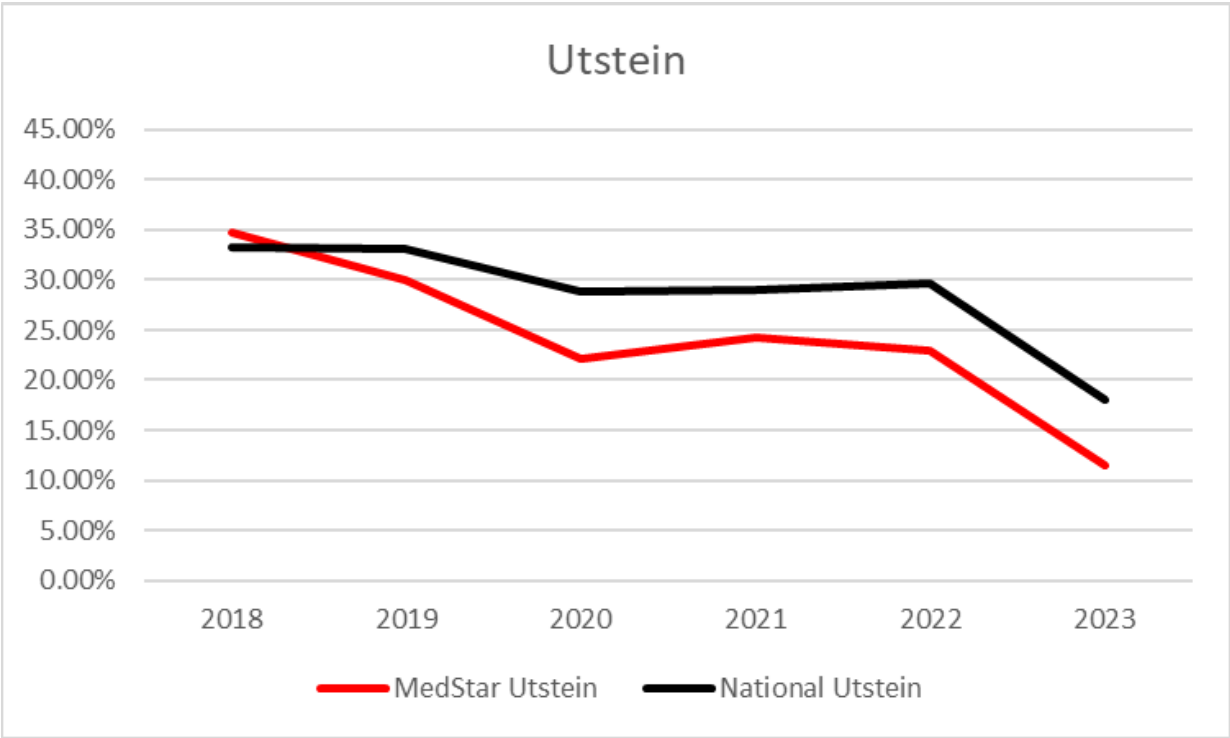
Case Acuity		
	March 2023	April 2023
High	2 (3.2%)	2 (3.9%)
Moderate	13 (20.6%)	9 (17.6%)
Low	32 (50.8%)	31 (60.8%)
Non QA/QI	16 (25.4%)	9 (17.6%)
Grand Total	63 (100.0%)	51 (100.0%)

Case Disposition		
	March 2023	April 2023
Clinically Appropriate	2 (3.2%)	
Needs Improvement	38 (60.3%)	34 (66.7%)
Clinically Inappropria..	1 (1.6%)	
Forwarded	7 (11.1%)	
No Fault	15 (23.8%)	17 (33.3%)
Grand Total	63 (100.0%)	51 (100.0%)



- CARES 2023
  - 391 worked cardiac arrest

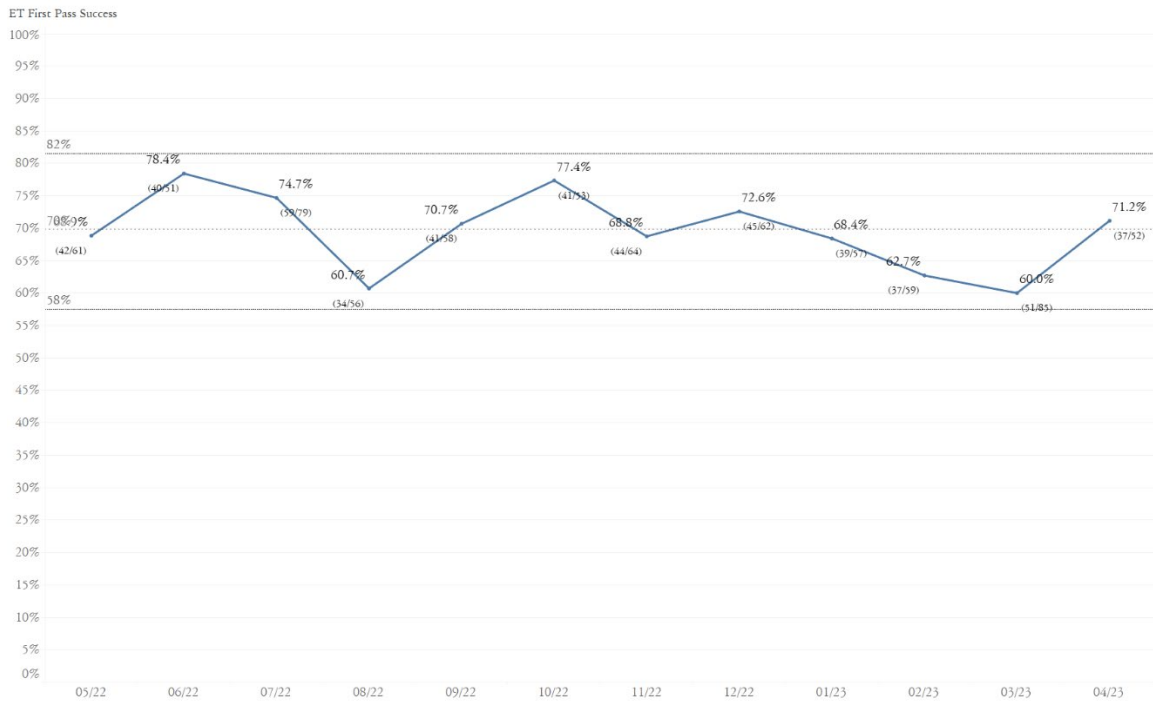




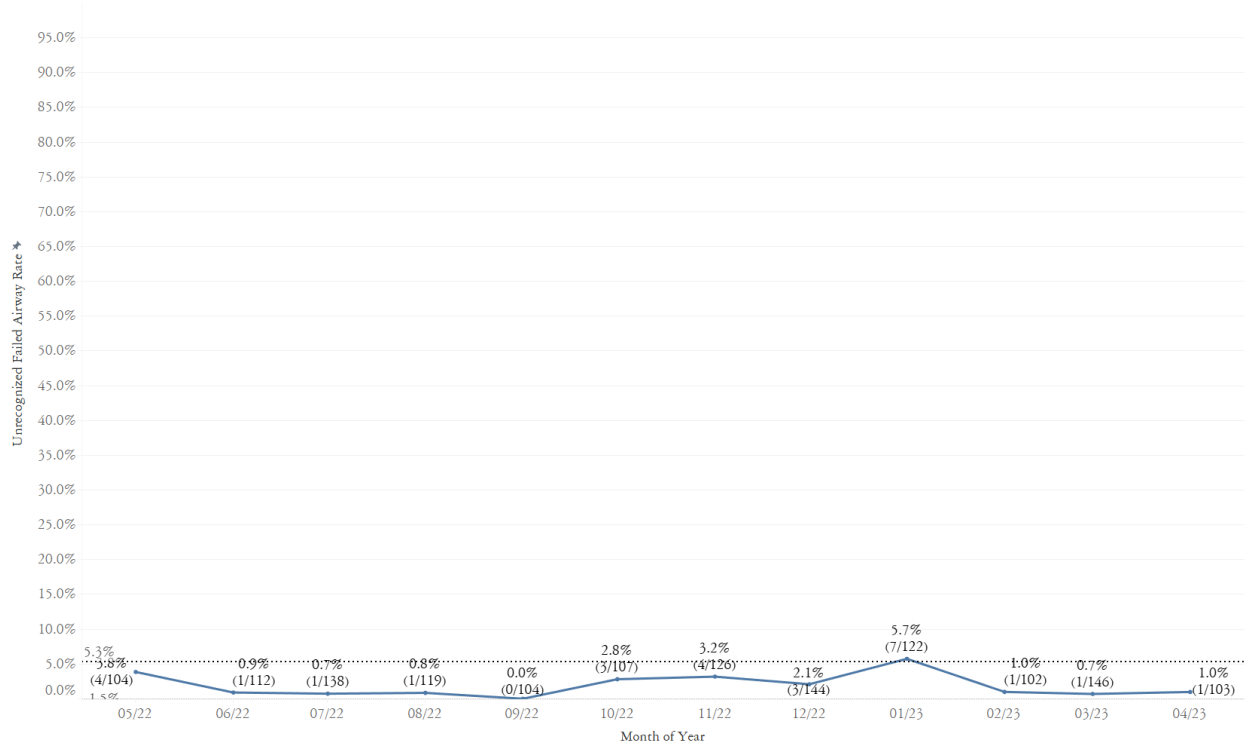
- Mechanical Compression Device (MCD) incident of “Walk”



- Airway Management



Unrecognized Failed Advanced Airway Rate



## Research

- ASA Administration Study
- Multi-center National Studies with letter of support:
  - AI for 911 OHCA / T-CPR
  - EPIC II
  - Pedi-PART

## System Diagnostics

	Goal	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Current Avg.	Goal
<b>STEMI</b>									
% of suspected STEMI patients correctly identified by EMS		60.6%	55.0%	28.6%	63.2%	50.0%	32.0%	62.0%	75.0%
% of suspected STEMI patients w/ASA admin (in the absence of contraindications)		100.0%	100.0%	90.9%	95.7%	96.6%	96.6%	94.5%	90.0%
% of suspected STEMI patients w/NTG admin (in the absence of contraindications)		97.3%	90.9%	81.8%	78.3%	86.2%	82.8%	87.7%	90.0%
% of suspected STEMI patients with 12L acquisition within 10 minutes of patient contact		83.8%	86.4%	59.1%	87.0%	93.1%	82.8%	72.1%	90.0%
% of suspected STEMI patients with 12L transmitted within 5 minutes of transport initiation		78.4%	68.2%	59.1%	65.2%	65.5%	58.6%	62.4%	90.0%
% of suspected STEMI patients with PCI facility notified of suspected STEMI within 10 minutes of EMS patient contact		35.1%	31.8%	31.8%	34.8%	41.4%	41.4%	18.5%	75.0%
% of patients with Suspected STEMI Transported to PCI Center		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.6%	100.0%
% of suspected STEMI patients with EMS activation to Cath Lab intervention time < 90 minutes		52.6%	42.9%	33.3%	37.5%	60.0%	33.3%	32.7%	50.0%
STEMI BUNDLE COMPLIANCE		50.0%	50.0%	33.3%	33.3%	50.0%		25.0%	
<b>Stroke</b>									
% of suspected Stroke patients w/BGL measured	Goal	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		Goal
% of suspected Stroke patients w/CSS measured		85.4%	89.9%	88.2%	88.1%	87.4%	87.2%	88.9%	
% of suspected Stroke patients w/positive CSS scores receiving Los Angeles Motor Score (LAMS) measured		77.2%	79.3%	80.1%	73.8%	80.0%	75.6%	75.2%	
% of suspected stroke patients with stroke facility notified of suspected stroke within 10 minutes of EMS patient contact		90.5%	89.3%	90.7%	88.7%	92.0%	91.5%	78.0%	
% of suspected stroke patients w/LAMS scores 4 - 5 transported to Comprehensive Stroke Center		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	#DIV/0!	
								98.4%	



# Tab C – Chief Transformation Officer

# Transformation Report

May 2023

## Alternate Payment Models & Expanded Services

- Working with Cigna on expanded alternate payment model (APM) for their Exchange insureds and MIH payment model potentially using CPT codes.
- Cook Children’s Health Plan discussions continue for potential APM for their members.

## Ambulance Supplemental Payment Program (ASPP)

- New cost report data released for 2020 & 2021 (full summary attached).
  - Once again, MedStar is the most economically efficient public ambulance agency in Texas.
- Still pushing for ASPP payments based on delta between Medicaid payment ACR.

## Texas Ambulance Supplemental Payment Program

FY20 and FY21 Cost Reports - Trip Statistics at a Glance



### Comparison Data

	FY 2020			FY 2021		
	Fire Based EMS	EMS Only	MedStar	Fire Based EMS	EMS Only	MedStar
Charge/Trip	\$1,628.80	\$883.97	\$1,482.18	\$1,389.32	\$1,039.21	\$1,621.26
Cost/Trip	\$2,127.34	\$1,182.14	\$461.03	\$2,363.93	\$1,150.82	\$495.73

## Medicare Waivers for EMS Treatment in Place, Transport to Alternate Destinations and Telehealth

- Draft language for Congressional action drafted and submitted to Leg Counsel for formatting into Bill language.
- Met w/2 Congressional Rep staffers who reached out to get more information for ? legislation.

## Balance Billing

- Texas
  - [SB 2476](#) flying through Legislative process.
    - Prohibits EMS balance billing.
    - Requires Insurers to pay BILLED CHARGES in jurisdictions that publish their rates.
    - Requires insurers to pay 325% of Medicare in jurisdictions that do not publish their rates.
    - Requires insurers to pay provider directly, not to the patient, if assignment of benefits signed.
- Presented to the CMS/HHS Ground Ambulance Patient Billing (GAPB) committee on 5/2
  - Presentation attached.
  - Many questions regarding reasons for cost differences between provider types.
- Invited to serve on GAPB sub-committee to develop legislative and regulatory solutions to balance billing.
- Invited to participate in a meeting with the federal Office of Domestic Policy on 6/7 to discuss options related to balance billing.

## Upcoming Presentations:

Event (location)	Date	Attendees
American Ambulance Association Annual Conf. (Las Vegas, NV)	June 2023	~700
First There/First Care Conference (Ft. Lauderdale, FL)	June 2023	~750
EMS World Expo (New Orleans, LA)	Sept 2023	~3,000

## **Media Summary**

### Local –

- MCI Response and Mental Health
  - KRLD, NBC 5
  
- Fort Worth Fire Department Union concerns about reprioritization program reducing response volume
  - CBS 11

### National –

- EMS Staffing crisis & apprenticeship programs
  - Fox News

Texas Ambulance Supplemental Payment Program

FY20 Cost Report - Trip Statistics at a Glance

All Payer Data



Providers	100% EMS													Fire-Based	
	Average of All Providers	MedStar	Provider 1	Provider 2	Provider 3	Provider 4	Provider 5	Provider 6	Provider 7	Provider 8	Provider 9	Provider 10	Provider 11		Provider 12
Charge/Trip	\$1,250.52	\$1,482.18	\$1,593.31	\$853.58	\$1,757.56	\$1,960.05	\$1,036.15	\$1,320.84	\$1,316.60	\$1,525.31	\$858.97	\$655.28	\$1,411.96	\$774.68	\$960.81
Cost/Trip	\$2,080.03	\$461.03	\$1,377.60	\$1,173.76	\$1,283.38	\$2,118.78	\$1,725.86	\$3,314.42	\$1,978.36	\$1,958.01	\$4,424.24	\$2,277.72	\$1,064.89	\$4,223.93	\$1,738.46
Weighted Payment/Trip	\$362.33	\$383.53	\$466.09	\$347.28	\$569.84	\$315.46	\$345.02	\$465.56	\$252.66	\$220.95	\$408.90	\$297.76	\$357.50	\$349.99	\$292.02
Cost/Trip less Payment/Trip	\$1,717.71	\$77.50	\$911.51	\$826.48	\$713.54	\$1,803.32	\$1,380.84	\$2,848.86	\$1,725.70	\$1,737.06	\$4,015.34	\$1,979.96	\$707.39	\$3,873.94	\$1,446.44



FY21 Cost Report - Trip Statistics at a Glance

All Payer Data

Providers	100% EMS																			Fire-Based	
	Average of All Providers	MedStar	Provider 1	Provider 2	Provider 3	Provider 4	Provider 5	Provider 6	Provider 7	Provider 8	Provider 9	Provider 10	Provider 11	Provider 12	Provider 13	Provider 14	Provider 15	Provider 16	Provider 17		Provider 18
Charge/Trip	\$1,526.32	\$1,621.26	\$1,016.59	\$1,232.73	\$1,085.85	\$789.71	\$1,719.93	\$1,615.33	\$1,320.89	\$1,180.55	\$1,539.77	\$786.56	\$845.52	\$971.88	\$974.46	\$855.24	\$870.72	\$974.46	\$775.67	\$1,604.03	\$915.55
Cost/Trip	\$1,641.10	\$495.73	\$1,206.88	\$671.07	\$3,481.89	\$3,120.30	\$2,056.10	\$2,847.24	\$1,949.52	\$1,297.09	\$2,556.45	\$1,804.03	\$3,883.47	\$2,934.73	\$1,854.92	\$5,226.04	\$3,076.03	\$2,934.73	\$4,323.92	\$1,797.68	\$1,678.03
Weighted Payment/Trip	\$313.24	\$398.59	\$344.08	\$353.12	\$398.61	\$253.04	\$304.51	\$476.74	\$264.76	\$315.07	\$230.76	\$243.23	\$386.59	\$314.20	\$343.80	\$262.98	\$308.36	\$314.20	\$347.05	\$282.68	\$302.40
Cost/Trip less Payment/Trip	\$1,327.86	\$96.74	\$862.80	\$317.95	\$3,083.28	\$2,867.26	\$1,751.59	\$2,370.50	\$1,684.76	\$982.02	\$2,325.69	\$1,560.80	\$3,496.88	\$2,620.53	\$1,511.12	\$4,963.06	\$2,767.67	\$1,511.12	\$3,976.87	\$1,515.00	\$1,375.63






**GAPB**  
GROUND AMBULANCE AND PATIENT BILLING ADVISORY COMMITTEE

# Ground Ambulance & Patient Billing Advisory Committee

**Potential Legislative and Regulatory Options to Prevent Balance Billing**  
*Matt Zavadsky, NAEMT/MedStar Mobile Healthcare*




1




## Reduce Cost Shift

**Texas Ambulance Supplemental Payment Program  
 FY19 Cost Report - Trip Statistics at a Glance**



Providers	Average of All Providers	MedStar
Charge/Trip	\$ 1,300.10	\$ 1,443.55
Cost/Trip	\$ 2,133.22	\$ 396.01



Payer Class	Billed	Paid	Payer Class	Billed	Paid
Medicare	\$1,443.53	\$425.00	Medicare	\$900.00	\$425.00
Medicaid	\$1,443.53	\$220.00	Medicaid	\$900.00	\$425.00
Commercial	\$1,443.53	\$902.22	Commercial	\$900.00	\$720.00
Self-Pay	\$1,443.53	\$43.31	Self-Pay	\$900.00	\$43.31
<b>Total/Average</b>	<b>\$1,443.53</b>	<b>\$397.75</b>	<b>Total/Average</b>	<b>\$900.00</b>	<b>\$403.33</b>

2

2



## Public Notice



### Michigan Department of Health and Human Services Health and Aging Services Administration Medicaid Ambulance Rate Adjustment

The Michigan Department of Health and Human Services (MDHHS) intends to adjust reimbursement rates for Medicaid covered ambulance services.

In response to Section 1788 of Public Act 87 of 2021, MDHHS began reimbursing ground ambulance services at 100% of Medicare base rates (Locality 01) effective for dates of service on or after November 1, 2021.

For dates of service on or after January 1, 2022, reimbursement will align with Medicare's Calendar Year 2022 base rates.



### Provider Cost Per Trip Analysis

ALL PROVIDER STATISTICS			
	2019	2020	2021
Provider Count	371	363	385
Average Cost Per Trip Inclusive of Outliers	\$ 2,604.66	\$ 2,866.37	\$ 2,750.40
Average Cost Per Trip - Outliers Removed	\$ 2,132.89	\$ 2,361.06	\$ 2,351.34

FIRE & EMS Providers			
	2019	2020	2021
Provider Count	302	300	312
Average Cost Per Trip Inclusive of Outliers	\$ 2,945.55	\$ 3,223.20	\$ 3,106.41
Average Cost Per Trip - Outliers Removed	\$ 2,405.44	\$ 2,673.78	\$ 2,680.77

EMS Only Service Providers			
	2019	2020	2021
Provider Count	69	63	72
Average Cost Per Trip Inclusive of Outliers	\$ 1,127.47	\$ 1,190.35	\$ 1,242.06
Average Cost Per Trip - Outliers Removed	\$ 975.60	\$ 1,008.59	\$ 1,026.32



## Require Coverage

- **Coverage for emergency ambulance service not required**
  - Most insureds believe it is part of their plan
- **Include coverage for Non-Transport**
  - EMS only paid for transport
  - Many EMS calls do not require transport
  - When patient declines transport, generally no coverage
    - Results in bill to the patient for Treat-No Transport fee

5

5




## Assure Commercial Insurance Reimbursement Adequacy


- **Variations in commercial insurance ‘allowable’ rates**
  - Some use *Medicare* or *Medicaid* rates
  - Some use ‘arbitrary’ amounts
- **Require use of regional fee schedule as a basis for ‘allowable’ rates**

6

6




## Commercial Reimbursement Data: 2021




Commercial Payer	Services	Gross Charges	Average Patient Charge	Insurance Reimbursement	Average Insurance Payment	Patient Responsibility
Blue Cross Blue Shield Of Tx	7,745	\$12,834,810	\$1,657.17	\$7,626,145	\$984.65	\$672.52
United Healthcare 31	2,427	\$4,016,792	\$1,655.04	\$2,031,008	\$836.84	\$818.21
Aetna PPO 14	1,529	\$2,514,526	\$1,644.56	\$1,134,199	\$741.79	\$902.76
Cigna 4	1,508	\$2,504,317	\$1,660.69	\$1,506,596	\$999.07	\$661.62
Ambetter of Texas	588	\$1,017,882	\$1,731.09	\$213,867	\$363.72	\$1,367.37
Blue Cross Blue Shield Fed	483	\$794,426	\$1,644.78	\$739,131	\$1,530.29	\$114.48
UMR Salt Lake City	360	\$594,618	\$1,651.72	\$348,983	\$969.40	\$682.32
United Healthcare 1	215	\$378,585	\$1,760.86	\$184,335	\$857.37	\$903.49
Meritain Health ERISA Plan	98	\$163,096	\$1,664.24	\$89,146	\$909.66	\$754.58
Scott and White Insurance	86	\$142,356	\$1,655.30	\$56,057	\$651.82	\$1,003.47
Allsavers	77	\$121,331	\$1,575.72	\$30,922	\$401.59	\$1,174.13
Oscar Insurance of Texas	67	\$113,074	\$1,687.68	\$3,807	\$56.82	\$1,630.85
Cigna 188061	65	\$110,286	\$1,696.71	\$35,243	\$542.21	\$1,154.50
<b>Total/Average</b>	<b>17,334</b>	<b>\$28,816,610</b>	<b>\$1,662.43</b>	<b>\$15,575,665</b>	<b>\$898.56</b>	<b>\$763.87</b>

7



## Commercial Reimbursement Data: 2021



Payer	Services Billed	Total Billed Amount	Average Charge	Insurance Paid	Avg. Ins. Payment	Insurance %	Patient Billed	Avg. Patient Bill	Patient Paid	Patient Paid Per Service	Patient Paid %
Blue Cross Blue Shield Of Tx	7,745	\$12,834,810	\$1,657.17	\$7,626,145	\$984.65	59.4%	\$5,152,043	\$665.21	\$824,089	\$106.40	16.0%
United Healthcare 31	2,427	\$4,016,792	\$1,655.04	\$2,031,008	\$836.84	50.6%	\$1,958,143	\$806.82	\$212,219	\$87.44	10.8%
Aetna PPO 14	1,529	\$2,514,526	\$1,644.56	\$1,134,199	\$741.79	45.1%	\$1,360,355	\$889.70	\$154,490	\$101.04	11.4%
Cigna 4	1,508	\$2,504,317	\$1,660.69	\$1,506,596	\$999.07	60.2%	\$983,420	\$652.14	\$98,280	\$65.17	10.0%
VHA OFFICE OF COMMUNITY CARE	610	\$1,063,347	\$1,743.19	\$704,604	\$1,155.09	66.3%	\$349,476	\$572.91	\$12,043	\$19.74	3.4%
Ambetter of Texas	588	\$1,017,882	\$1,731.09	\$213,867	\$363.72	21.0%	\$798,924	\$1,358.71	\$87,778	\$149.28	11.0%
Veterans Administration Bonham	605	\$986,953	\$1,631.33	\$609,509	\$1,007.45	61.8%	\$352,816	\$583.17	\$10,103	\$16.70	2.9%
Fhfs Wps Tricare	544	\$889,377	\$1,634.88	\$199,575	\$366.87	22.4%	\$684,300	\$1,257.91	\$21,925	\$40.30	3.2%
Blue Cross Blue Shield Fed	483	\$794,426	\$1,644.78	\$739,131	\$1,530.29	93.0%	\$61,813	\$127.98	\$19,727	\$40.84	31.9%
UMR Salt Lake City	360	\$594,618	\$1,651.72	\$348,983	\$969.40	58.7%	\$244,285	\$678.57	\$29,303	\$81.40	12.0%
United Healthcare 1	215	\$378,585	\$1,760.86	\$184,335	\$857.37	48.7%	\$192,209	\$893.99	\$15,913	\$74.01	8.3%
Meritain Health ERISA Plan	98	\$163,096	\$1,664.24	\$89,146	\$909.66	54.7%	\$70,091	\$715.22	\$2,352	\$24.00	3.4%
Scott and White Insurance	86	\$142,356	\$1,655.30	\$56,057	\$651.82	39.4%	\$85,775	\$997.38	\$13,083	\$152.13	15.3%
Allsavers	77	\$121,331	\$1,575.72	\$30,922	\$401.59	25.5%	\$89,117	\$1,157.36	\$18,299	\$237.64	20.5%
Oscar Insurance of Texas	67	\$113,074	\$1,687.68	\$3,807	\$56.82	3.4%	\$107,650	\$1,606.71	\$6,988	\$104.31	6.5%
Cigna 188061	65	\$110,286	\$1,696.71	\$35,243	\$542.21	32.0%	\$63,803	\$981.58	\$9,848	\$151.51	15.4%
<b>Total</b>	<b>17,334</b>	<b>\$28,816,610</b>	<b>\$1,662.43</b>	<b>\$15,575,665</b>	<b>\$898.56</b>	<b>54.1%</b>	<b>\$13,060,148</b>	<b>\$753.44</b>	<b>\$1,554,881</b>	<b>\$89.70</b>	<b>11.9%</b>

8



## Why are Ambulance Fee's What They Are?



- **Providers attempt to assure revenue = cost of service delivery**
  - Non-Subsidized Providers = FFS revenue meets cost
  - Tax Subsidy = FFS **offsets** costs as much as possible
- **Low reimbursement from some payers result in the need for higher reimbursement from others**
  - Cost-Shift

9

9

## Assure Medicare & Medicaid Reimbursement Adequacy



- **Medicare & Medicaid generally reimburse less than the cost of service delivery**
  - Results in pressure for higher reimbursement from commercial payers (cost shift)
    - And higher fees to offset low Medicare and Medicaid reimbursement
  - Use upcoming CMS Ground Ambulance Cost Data Collection process as a **reasonable estimate of service delivery cost**
  - Set Medicare and Medicaid allowable rates to at least cost of service delivery
    - Emergency and non-emergency services

10

10



## DEPARTMENT OF REGULATORY AGENCIES

### Division of Insurance

3 CCR 702-4

### LIFE, ACCIDENT AND HEALTH

New Regulation 4-2-66



#### Section 5: Payment Methodology Rules

- A. Carriers shall reimburse a non-contracted service agency that provides emergency ambulance services to a covered person at two hundred seventy-five percent (275%) of the Medicare reimbursement rate for the same service provided in the same geographic area, including mileage.
- D. Covered persons shall only be responsible for the applicable in-network deductible, coinsurance, and/or copayment they would be required to pay for in-network emergency ambulance services.
- E. Payment made in compliance with Section 5.A. of this regulation shall be considered payment in full for the covered services provided, except for any in-network deductible, coinsurance and/or copayment amount required to be paid by the covered person.

11

11

## Assure Commercial Insurance Reimbursement to Provider



- **Many commercial insurers reimburse the PATIENT**
  - Despite assignment of benefit signatures
  - Requires **provider** to bill the patient the full amount
    - Private pay collection rate ~3%

12

12



# Protect the Patient from Payment Disputes

- **Require arbitration between payer and provider**
  - Allow the arbitrator flexibility to consider
    - Cost of service delivery
    - Average regional charges/fees

Balance billing protections | Senate Bill 1264 biennial report

## Overview

In 2019, the Texas Legislature passed Senate Bill 1264 to protect consumers who have certain state-regulated health plans from surprise medical bills. The new law requires the Texas Department of Insurance (TDI) to issue a report on the impacts of the legislation each biennium. This report includes arbitration and mediation information maintained by TDI and the data collected from health plans as authorized by SB 1264. Because of the limited time covered, the data does not yet support trend analysis. This initial set of data creates a foundation for future reports and analyses.



## Arbitration

SB 1264 outlines an **arbitration process for billing disputes** between out-of-network health care providers (not facilities) and health plans. From January 1 through October 31, 2020, TDI received 32,036 requests for arbitration.

### Settled in informal teleconference

Most provider requests for dispute resolution are settled during an informal teleconference before an arbitrator is assigned.



### Decided by an arbitrator





**Thank You!**

# Tab D – Chief Financial Officer

Metropolitan Area EMS Authority dba MedStar Mobile Healthcare  
Finance Report – April 30, 2023

The following summarizes significant items in the April 30, 2023, Financial Reports:

Statement of Revenues and Expenses:

**Month to Date:** Net Income for the month of April 2023 is a loss of (\$262,023) as compared to a budgeted loss of (\$326,284) for a positive variance of \$64,260. EBITDA for the month of April 2023 is a gain of \$101,743.25 compared to a budgeted gain of \$56,390.41 for a positive variance of \$45,352.84.

- Patient Contact volume in April ended the month 111% to budget.
- Net Revenue in April is \$352K over budget or 107.6% to budget.
- Total Expenses ended the month 105.8% to budget or \$287K over budget. In April, MedStar incurred additional expenses in Salaries and Overtime of \$134K, Benefits of \$94K, Fleet Maintenance of \$20K, Comp. Maintenance \$80K, Professional Fees of \$25K and Misc. Ex. of \$31K. The total of all other line-item expenses is below budget by (\$98K).

**Year to Date:** EBITDA is \$2,273,537.74 as compared to a budget of \$2,187,402.66 for a positive variance of \$86,135.08.

- The main drivers for this variance are YTD patient encounters are 105% to budget and YTD net revenue is 104% to budget equating to a YTD positive variance to budget for Net Revenue of \$1,325,841. Year to date expense is 104% to budget or \$1,155,010.58 over budget. The main driver for the overage in expense is Salaries and OT is above budget by \$601K and Misc. Expense is above budget by \$641K. The Misc. Expense is driven by the Ransom attach year to date cost of \$695K. The total of all other expense lines is below budget by (\$87K) for the year.

Key Financial Indicators:

- Current Ratio – MedStar has \$8.75 in current assets (Cash, receivables) for every dollar in current debt. (Goal: a score of \$1.00 would mean sufficient current assets to pay debts.)
- Cash Reserves – The Restated Interlocal Cooperative Agreement mandates 3 months of operating capital. As of April 30, 2022, there is 3.02 months of operating capital.
- Accounts Receivable Turnover – This statistic indicates MedStar’s effectiveness in extending credit and collecting debts by indicating the average age of the receivables. MedStar’s goal is a ratio greater than 3.0 times; current turnover is 5.44 times.
- Return on Net Assets – This ratio determines whether the agency is financially better off than in previous years by measuring total economic return. An improving trend indicates increasing net assets and the ability to set aside financial resources to strengthen future flexibility. Through March, the return is -.56%.

MAEMSA/EPAB cash reserve balance as of April 30, 2023, is \$475,470.69.

**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**

**Balance Sheet By Character Code**

For the Period Ending April 30, 2023

<b>Assets</b>	<b>Current Year</b>	<b>Last Year</b>
Cash	\$15,322,651.36	\$20,878,787.35
Accounts Receivable	\$11,053,171.73	\$7,374,705.03
Inventory	\$409,910.36	\$383,481.43
Prepaid Expenses	\$1,936,208.80	\$1,056,089.50
Property Plant & Equ	\$71,873,625.99	\$63,374,619.00
Accumulated Deprecia	(\$29,840,601.94)	(\$27,412,040.83)
<b>Total Assets</b>	<b>\$70,754,966.30</b>	<b>\$65,655,641.48</b>
<b>Liabilities</b>		
Accounts Payable	(\$450,014.45)	(\$342,199.76)
Other Current Liabil	(\$1,872,122.41)	(\$1,527,704.18)
Accrued Interest	(\$7,781.31)	(\$7,781.31)
Payroll Withholding	\$12,671.70	(\$104,598.01)
Long Term Debt	(\$3,069,074.24)	(\$3,480,198.21)
Other Long Term Liab	(\$8,124,945.19)	(\$9,667,215.93)
<b>Total Liabilities</b>	<b>(\$13,511,265.90)</b>	<b>(\$15,129,697.40)</b>
<b>Equities</b>		
Equity	(\$57,564,191.40)	(\$52,884,378.49)
Control	\$320,491.00	\$2,358,434.41
<b>Total Equities</b>	<b>(\$57,243,700.40)</b>	<b>(\$50,525,944.08)</b>
<b>Total Liabilities and Equities</b>	<b>(\$70,754,966.30)</b>	<b>(\$65,655,641.48)</b>

Metropolitan Area EMS Authority dba MedStar Mobile Healthcare  
Statement of Revenue and Expenditures  
April 30, 2023

Revenue	Current Month Actual	Current Month Budget	Current Month Variance	Year to Date Actual	Year to Date Budget	Year to Date Variance
Transport Fees	\$21,258,806.82	\$18,895,748.75	\$2,363,058.07	\$147,854,917.98	\$139,533,519.38	\$8,321,398.60
Contractual Allow	(\$11,254,334.29)	(\$8,205,595.27)	(\$3,048,739.02)	(\$65,706,664.77)	(\$60,526,277.43)	(\$5,180,387.34)
Provision for Uncoll	(\$5,368,865.50)	(\$6,343,408.00)	\$974,542.50	(\$48,766,987.17)	(\$46,790,374.00)	(\$1,976,613.17)
Education Income	\$940.00	\$29,690.00	(\$28,750.00)	\$1,268.70	\$102,550.00	(\$101,291.30)
Other Income	\$88,457.30	\$96,223.00	(\$7,765.70)	\$745,121.30	\$776,161.00	(\$31,039.70)
Standby/Subscription	\$239,264.75	\$138,895.50	\$100,369.25	\$1,035,196.57	\$763,316.00	\$271,880.57
Pop Health PMPM	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
interest on Investme	(\$136.16)	\$500.00	(\$636.16)	\$2,919.26	\$3,500.00	(\$580.74)
Gain(Loss) on Dispos	\$0.00	\$0.00	\$0.00	\$22,475.00	\$0.00	\$22,475.00
<b>Total Revenue</b>	<b>\$4,964,132.92</b>	<b>\$4,612,053.98</b>	<b>\$352,078.94</b>	<b>\$35,188,236.87</b>	<b>\$33,862,394.95</b>	<b>\$1,325,841.92</b>
<b>Expenditures</b>						
Salaries	\$3,009,799.77	\$2,875,658.33	\$134,141.44	\$20,781,929.86	\$20,180,492.31	\$601,437.55
Benefits and Taxes	\$682,746.98	\$688,489.00	(\$94,257.98)	\$3,532,489.65	\$3,403,895.00	\$128,594.65
Interest	\$29,488.60	\$33,500.00	(\$4,011.40)	\$211,234.64	\$234,500.00	(\$23,265.36)
Fuel	\$148,256.44	\$150,542.00	(\$2,285.56)	\$1,170,520.68	\$1,082,237.00	\$88,283.68
Medical Supp/Oxygen	\$176,251.39	\$218,055.00	(\$41,803.61)	\$1,335,598.93	\$1,553,664.00	(\$218,065.07)
Other Veh & Eq	\$63,353.42	\$43,255.01	\$20,098.41	\$347,767.99	\$308,958.07	\$38,809.92
Rent and Utilities	\$50,484.58	\$59,711.92	(\$9,227.34)	\$366,261.27	\$417,983.44	(\$51,722.17)
Facility & Eq Mtc	\$85,966.10	\$77,162.78	\$8,803.32	\$507,693.69	\$544,446.46	(\$36,752.77)
Postage & Shipping	\$2,353.46	\$2,591.33	(\$237.87)	\$11,566.40	\$19,999.31	(\$8,432.91)
Station	\$65,397.38	\$39,743.25	\$25,654.13	\$338,917.17	\$320,491.75	\$18,425.42
Comp Maintenance	\$136,313.08	\$66,182.84	\$80,130.24	\$635,719.64	\$428,027.92	\$207,691.72
Insurance	\$25,833.36	\$50,654.34	(\$24,820.98)	\$382,823.33	\$361,680.64	\$21,142.69
Advertising & PR	\$2,235.17	\$1,492.00	\$743.17	\$19,668.79	\$23,168.00	(\$3,499.21)
Printing	\$6,869.59	\$2,117.43	\$4,752.16	\$23,035.76	\$35,422.01	(\$12,386.25)
Travel & Entertain	\$14,036.12	\$14,067.00	(\$30.88)	\$55,568.25	\$76,329.00	(\$20,770.75)
Dues & Subs	\$75,126.06	\$117,751.00	(\$42,624.94)	\$753,268.62	\$833,759.00	(\$80,490.38)
Continuing Educ Ex	\$9,578.00	\$7,126.00	\$2,452.00	\$132,063.66	\$150,658.00	(\$18,594.34)
Professional Fees	\$273,225.16	\$247,582.34	\$25,642.82	\$1,832,829.11	\$1,881,526.38	(\$48,697.27)
Education Expenses	\$1,168.50	\$1,945.00	(\$776.50)	\$7,473.42	\$13,675.00	(\$6,201.58)
Miscellaneous	\$33,395.11	\$1,537.00	\$31,858.11	\$679,512.91	\$38,579.00	\$640,933.91
Depreciation	\$334,278.51	\$349,175.00	(\$14,896.49)	\$2,382,794.10	\$2,444,225.00	(\$61,430.90)
<b>Total Expenditures</b>	<b>\$5,226,156.78</b>	<b>\$4,938,338.57</b>	<b>\$287,818.21</b>	<b>\$35,508,727.87</b>	<b>\$34,353,717.29</b>	<b>\$1,155,010.58</b>
<b>Net Rev in Excess of Expend</b>	<b>(\$262,023.86)</b>	<b>(\$326,284.59)</b>	<b>\$64,260.73</b>	<b>(\$320,491.00)</b>	<b>(\$491,322.34)</b>	<b>\$170,831.34</b>
<b>EBITDA</b>	<b>\$101,743.25</b>	<b>\$56,390.41</b>	<b>\$45,352.84</b>	<b>\$2,273,537.74</b>	<b>\$2,187,402.66</b>	<b>\$86,135.08</b>



**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**  
**Key Financial Indicators**  
**March 31, 2023**

	Goal	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
<b>Current Ratio</b>	> 1	9.49	11.59	10.48	8.43	6.04	8.75

of debt. Ratio should be greater than 1, so that assets are available to retire debt when due.

<b>Cash as % of Annual Expenditures</b>	> 25%	47.07%	42.95%	51.76%	44.45%	33.49%	25.20%
---	-------	--------	--------	--------	--------	--------	--------

Indicates compliance with Ordinance which specifies 3 months cash on hand.

<b>Accounts Receivable Turnover</b>	>3	4.28	3.65	5.44	6.34	9.06	5.44
-------------------------------------	----	------	------	------	------	------	------

A measure of how these resources are being managed. Indicates how long accounts receivable are being aged prior to collection. Our goal is a turnover rate of greater than 3 .

<b>Return on Net Assets</b>	-1.00%	10.11%	4.04%	0.00%	-4.03%	-0.07%	-0.56%
-----------------------------	--------	--------	-------	-------	--------	--------	--------

Reveals management's effectiveness in generating profits from the assets available.

Emergency Physicians Advisory Board  
Cash expenditures Detail

	<u>Date</u>	<u>Amount</u>	<u>Balance</u>
Balance 1/1/17			\$ 609,665.59
J29 Associates, LLC	2/27/2017	\$ 1,045.90	\$ 608,619.69
Bracket & Ellis	10/30/2017	\$ 12,118.00	\$ 596,501.69
Brackett & Ellis	11/19/2018	\$ 28,506.50	\$ 567,995.19
FWFD Grant	4/3/2019	\$ 56,810.00	\$ 511,185.19
Brackett & Ellis	4/3/2019	\$ 20,290.50	\$ 490,894.69
Brackett & Ellis	11/27/2019	\$ 9,420.00	\$ 481,474.69
Bracket & Ellis	2/6/2020	\$ 1,382.50	\$ 480,092.19
Bracket & Ellis	2/29/2020	\$ 4,621.50	\$ 475,470.69
Balance 4/30/2022			<u><u>\$ 475,470.69</u></u>

# Tab E – Chief Human Resources Officer

## Human Resources - April 2023

### Staffing

- 2 hires in April
- 70 hires FYTD
- Upcoming Scheduled NEOPs
  - May 1, 2023
  - May 22, 2023 (Learn N' Earn Program)
  - July 10, 2023
  - August 7, 2023
  - September 18, 2023
  - October 23, 2023

### Leaves:

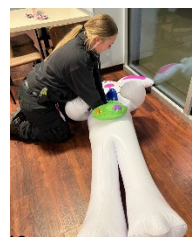
- 35 employees on FMLA / 7.19% of workforce
  - 18 cases on intermittent
  - 17 cases on a block
- Top FMLA request reasons/conditions
  - Orthopedic (7)
  - Baby Bonding (6)
  - FMLA Spouse (6)

### Turnover:

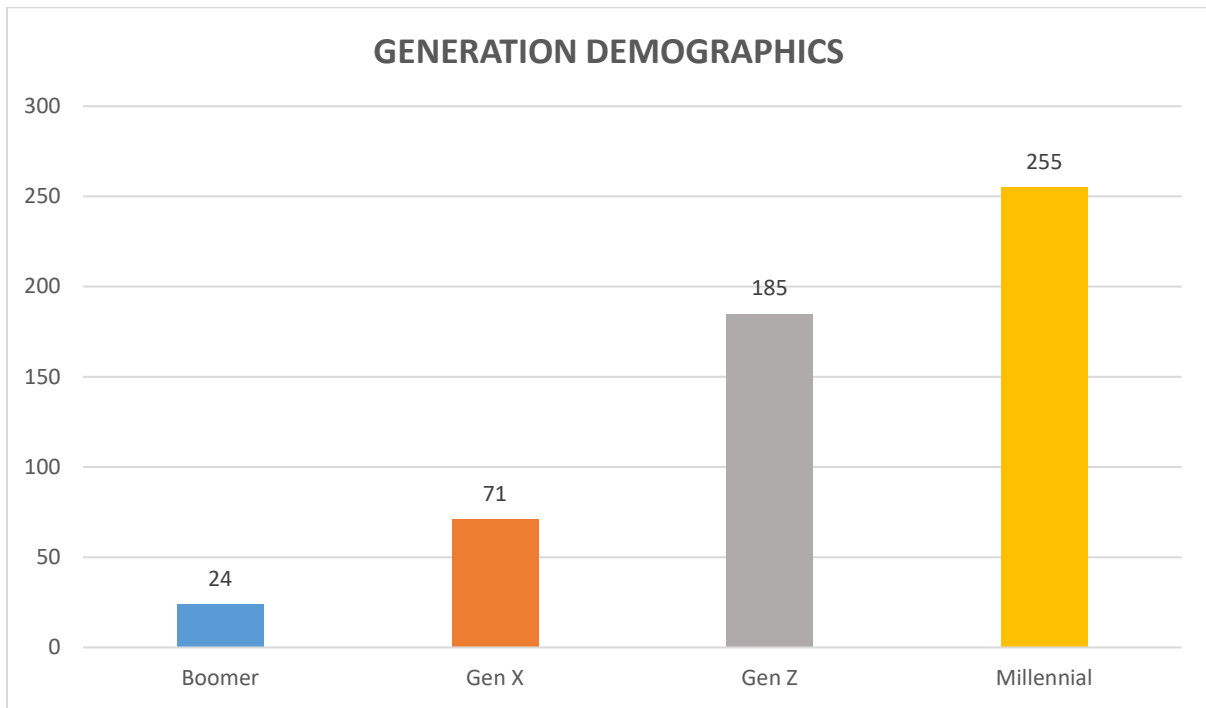
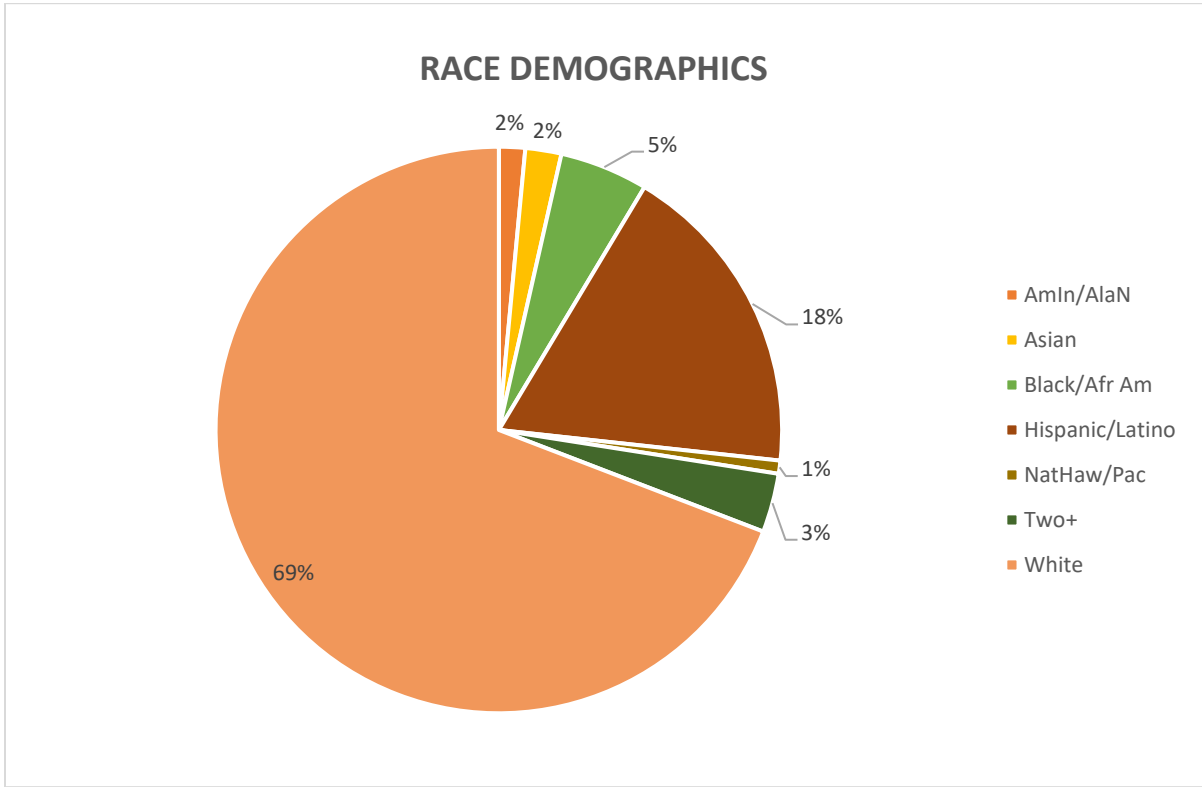
- April turnover –2.06%
  - FT – 1.85%
  - PT – 4.17%
- Year to date turnover –14.58%
  - FT – 9.86%
  - PT – 62.50%

### Engagement:

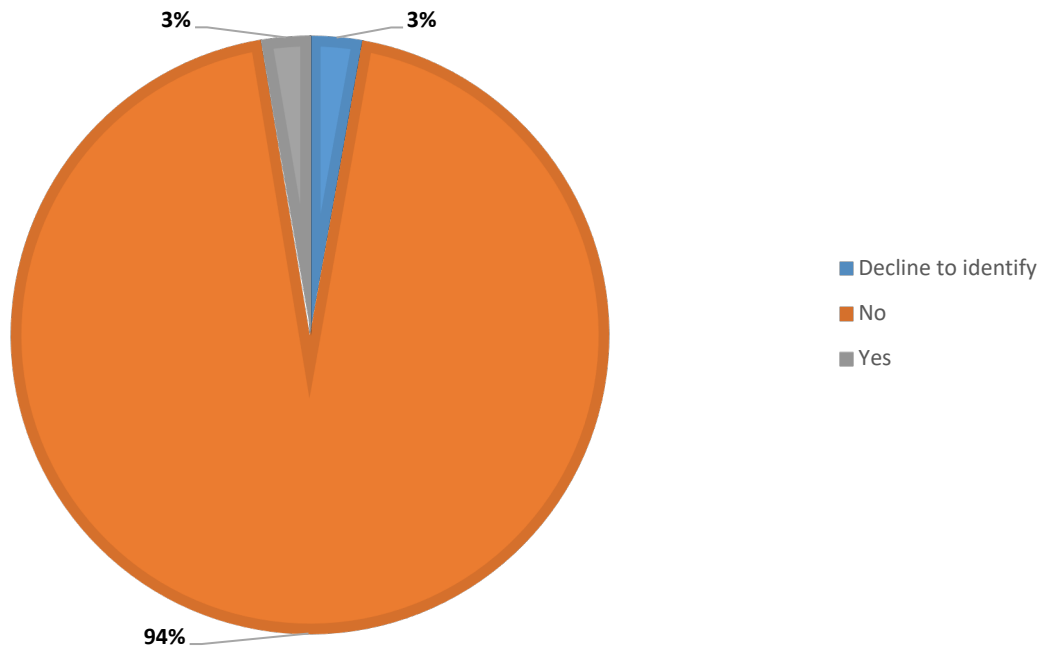
- Administrative Professionals Day
- Easter Activities



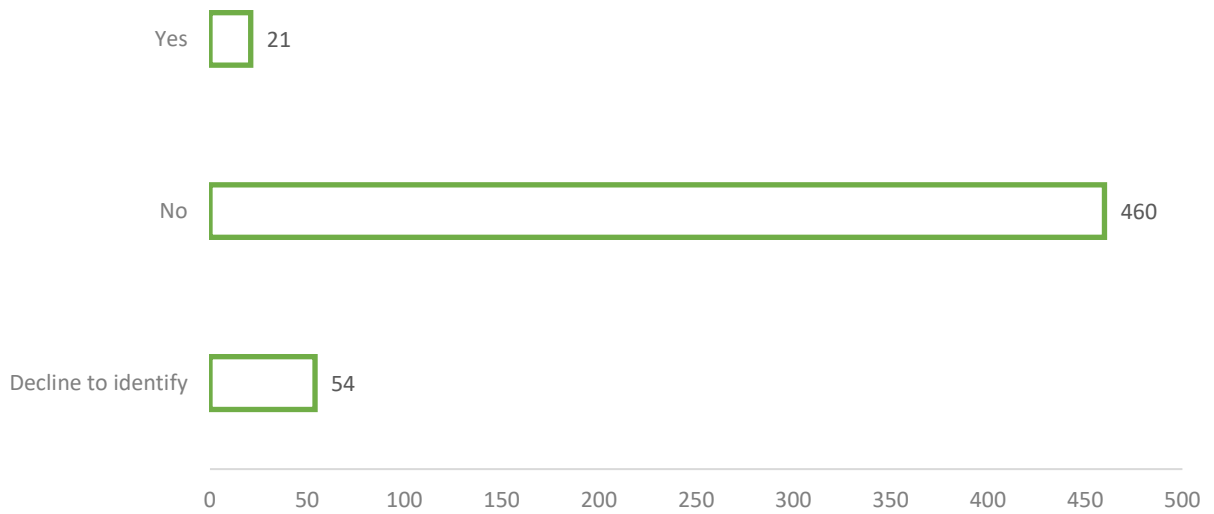
# APRIL 2023 DIVERSITY STATISTICS

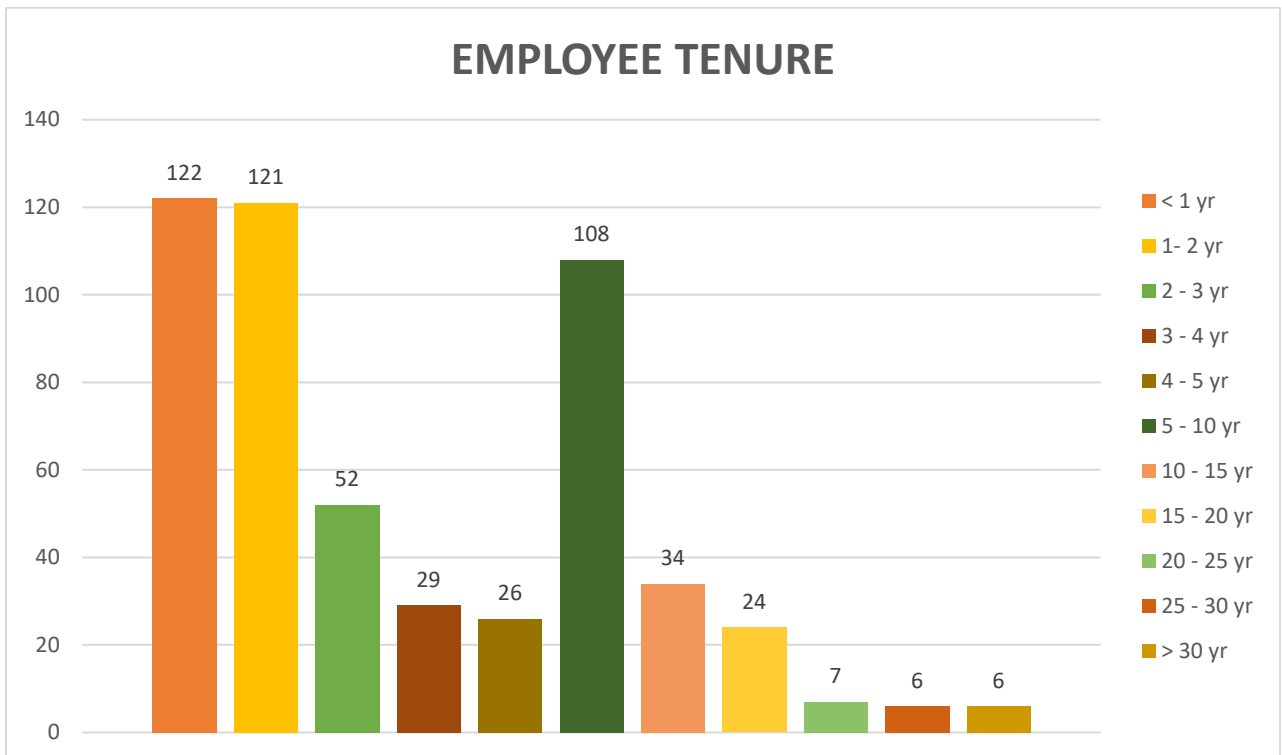
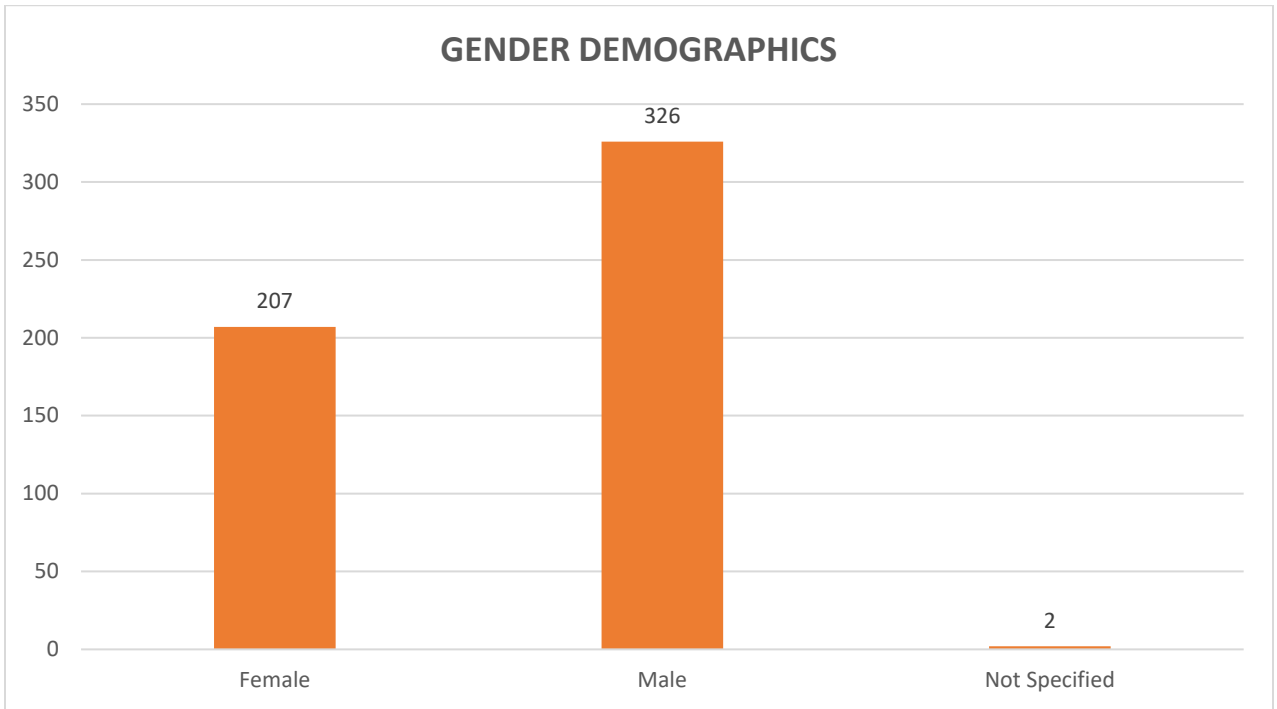


### DISABILITY DEMOGRAPHICS



### VETERAN DEMOGRAPHICS





**FMLA Leave of Absence (FMLA Detailed Report)**  
**Fiscal Year 10/01/2022 thru 04/30/2023**  
**Percentages by Department/Conditions**

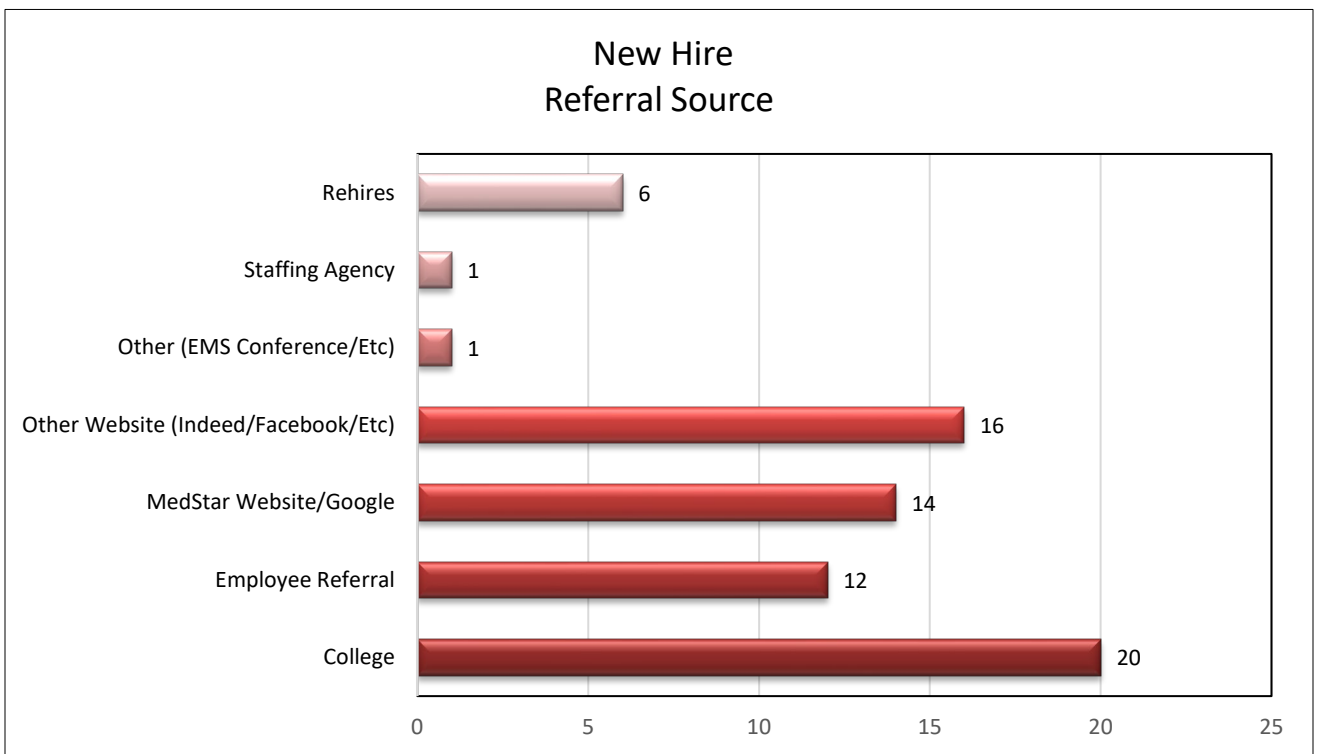
Conditions	
Baby Bonding	6
Digestive	1
FMLA - Child	3
FMLA - Parent	1
FMLA - Spouse	6
Mental Health	3
Neurological	1
Obstetrics/Gynocolo	2
Pulmonary	1
Orthopedic	7
Ophthalmology	2
Cosmetic	2
<b>Grand Total</b>	<b>35</b>

Percentage by Department						
Department	# of Ees	# on FMLA	% by FTE	% by FMLA	% by Dept HC	
Advanced	134	10	2.05%	28.57%	7.46%	
Basic	180	12	2.46%	34.29%	6.67%	
Communications	40	6	1.23%	17.14%	15.00%	
Controller - Payroll, Purchasing, A/P	6	3	0.62%	8.57%	50.00%	
Support Services - Facilities, Fleet, S.E., Logistics	32	3	0.62%	8.57%	9.38%	
Field Managers/Supervisors - Operations	26	1	0.21%	2.86%	3.85%	
<b>Grand Total</b>	<b>418</b>	<b>35</b>				
<b>Total # of Full Time Employees - March 2023</b>	487					
<b>% of Workforce using FMLA</b>	7.19%					
<b>TYPE OF LEAVES UNDER FMLA</b>	<b># of Ees</b>	<b>% on Leave</b>				
Intermittent Leave	18	51.43%				
Block of Leave	17	48.57%				
<b>Total</b>	<b>35</b>	<b>100.00%</b>				

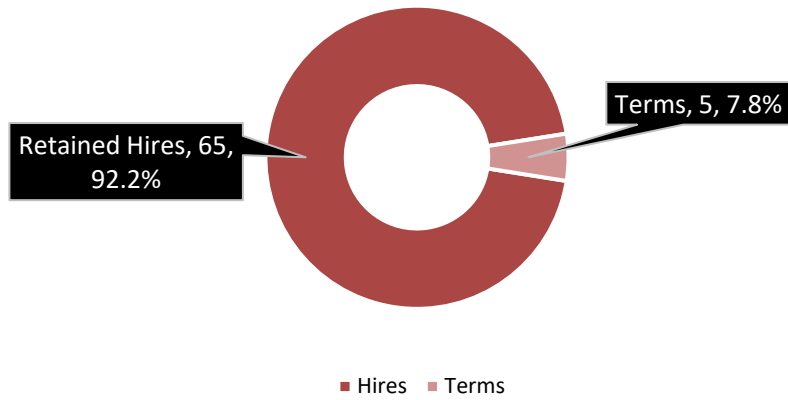


# Recruiting & Staffing Report

Fiscal Year 2022-2023



## 2022-2023 FY Separations



**Fiscal Year Statistics**  
Total hires to date 70  
Total separations from hires 5

**Separation Reasons:**  
Better Opportunity – 2  
Unsatisfactory Introductory Period – 1  
Job Abandonment - 2

**MedStar Mobile Health Care Separation Statistics April 2023**

Full Time Separations  
Part Time Separations  
Total Separations

Current Month		
Vol	Invol	Total
8	1	9
2	0	2
10	1	11

Year to Date		
Vol	Invol	Total
42	6	48
28	2	30
70	8	78

YTD Compared to Apr'22		Headcount
22-Apr	%	Apr-22
75	16.52%	454
13	26.00%	50
88	17.46%	504
Difference	-2.881%	

	Full Time	Part Time	Total
Total Turnover %	1.85%	4.17%	2.06%
Voluntary Turnover %	1.64%	4.17%	1.87%

	Full Time	Part Time	Total
	9.86%	62.50%	14.58%
	8.62%	58.33%	13.08%

**Separations by Department**

Full Time	Current Month		
	Vol	Invol	Total
Advanced	2	1	3
Basics	2	0	2
Business Office			
Communications	3	0	3
Controller - Payroll, Purchasing, A/P			
Executives			
Field Manager/Supervisors - Operations			
Field Operations Other			
Health Information Systems			
Human Resources			
Information Technology			
Legal/Compliance			
Mobile Integrated Health			
Office of the Medical Director			
Public Information			
Support Services - Facilities, Fleet, S.E., Logistics	1		1
<b>Total</b>	<b>8</b>	<b>1</b>	<b>9</b>

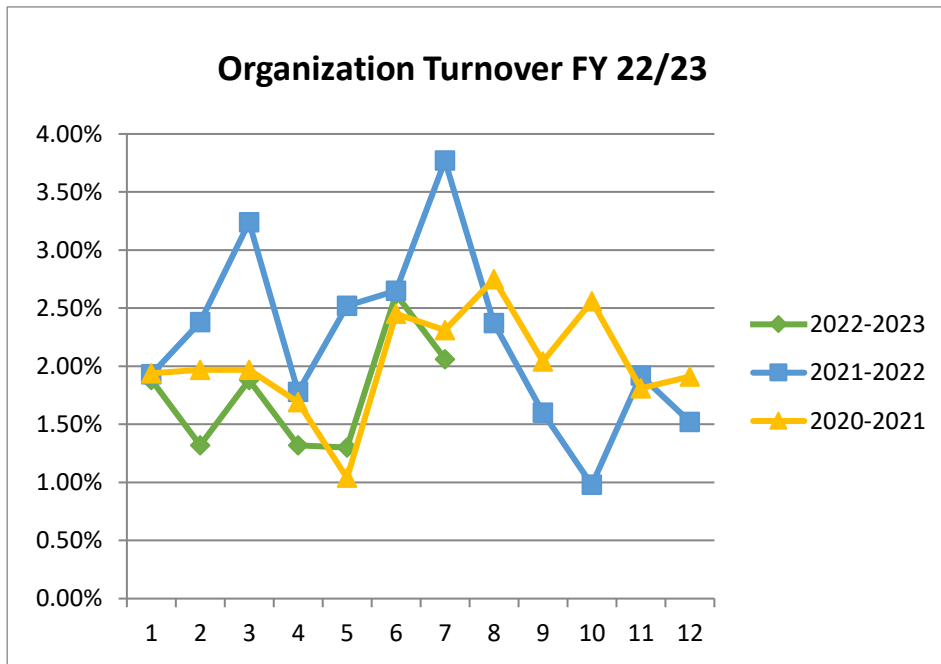
Year to Date			Headcount
Vol	Invol	Total	Apr-23
13	3	16	134
22	3	25	180
			13
5	0	5	40
			6
			8
			26
			7
			3
			7
			7
			2
			8
1	0	1	13
			1
1	0	1	32
<b>42</b>	<b>6</b>	<b>48</b>	<b>487</b>

Part Time	Current Month		
	Vol	Invol	Total
Advanced	1	0	1
Basics			
Business Office			
Communications	1	0	1
Controller - Payroll, Purchasing, A/P			
Executives			
Field Manager/Supervisors - Operations			
Field Operations Other			
Health Information Systems			
Human Resources			
Information Technology			
Legal/Compliance			
Mobile Integrated Health			
Office of the Medical Director			
Public Information			
Support Services - Facilities, Fleet, S.E., Logistics			
<b>Total</b>	<b>2</b>	<b>0</b>	<b>2</b>

Year to Date			Headcount
Vol	Invol	Total	Apr-23
10	0	10	21
15	2	17	19
2	0	2	3
			1
1	0	1	0
			4
<b>28</b>	<b>2</b>	<b>30</b>	<b>48</b>

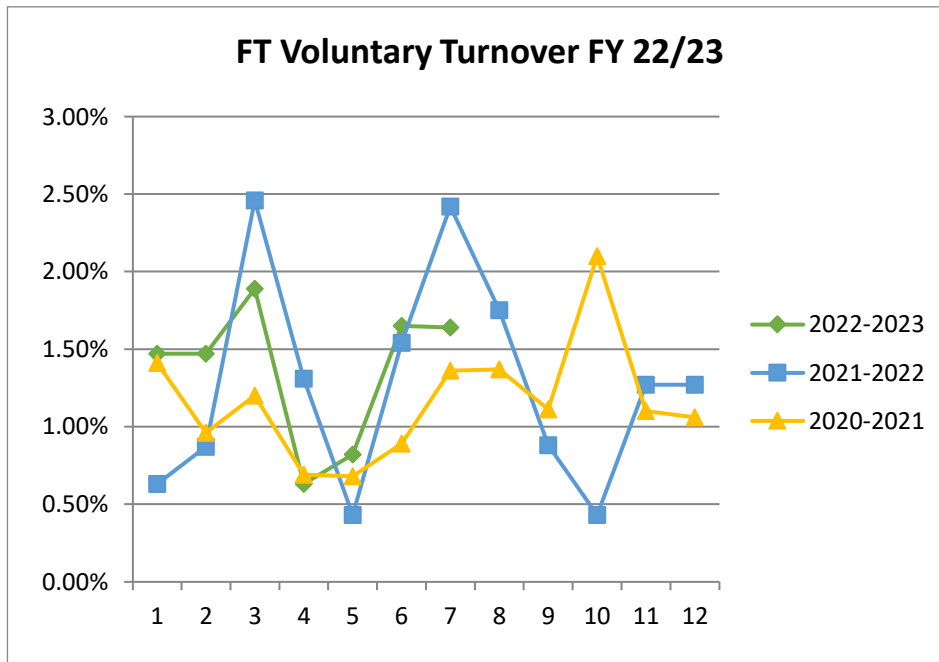
**MedStar Mobile Healthcare Turnover  
Fiscal Year 2022 - 2023**

	Full & Part Time Turnover			Full Time Only
	2022-2023	2021-2022	2020-2021	2022-2023
October	1.88%	1.93%	1.94%	1.89%
November	1.32%	2.38%	1.97%	1.47%
December	1.88%	3.24%	1.97%	1.89%
January	1.32%	1.78%	1.69%	0.63%
February	1.30%	2.52%	1.04%	1.22%
March	2.62%	2.65%	2.45%	1.65%
April	2.06%	3.77%	2.31%	1.85%
May		2.37%	2.75%	
June		1.60%	2.04%	
July		0.98%	2.56%	
August		1.92%	1.81%	
September		1.52%	1.91%	
Actual Turnover	6.03%	24.57%	16.17%	5.46%



**MedStar Mobile Healthcare Turnover  
Fiscal Year 2022 - 2023**

<b>Full Time Voluntary Turnover</b>			
	<b>2022-2023</b>	<b>2021-2022</b>	<b>2020-2021</b>
October	1.47%	0.63%	1.41%
November	1.47%	0.87%	0.96%
December	1.89%	2.46%	1.20%
January	0.63%	1.31%	0.69%
February	0.82%	0.43%	0.68%
March	1.65%	1.54%	0.89%
April	1.64%	2.42%	1.36%
May		1.75%	1.37%
June		0.88%	1.11%
July		0.43%	2.10%
August		1.27%	1.10%
September		1.27%	1.06%
Actual Turnover	5.04%	15.25%	13.58%



# Tab F – FRAB

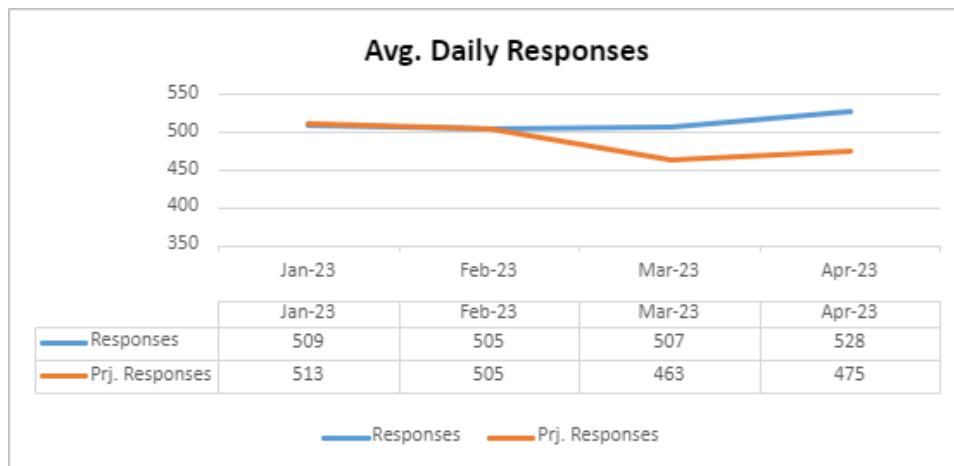
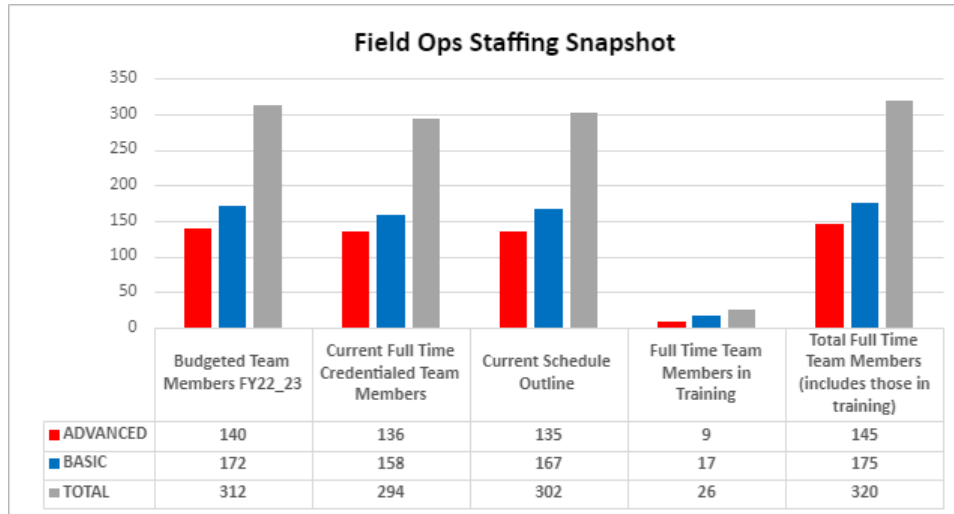
# Tab G – Operations

**Metropolitan Area EMS Authority dba MedStar Mobile Healthcare**

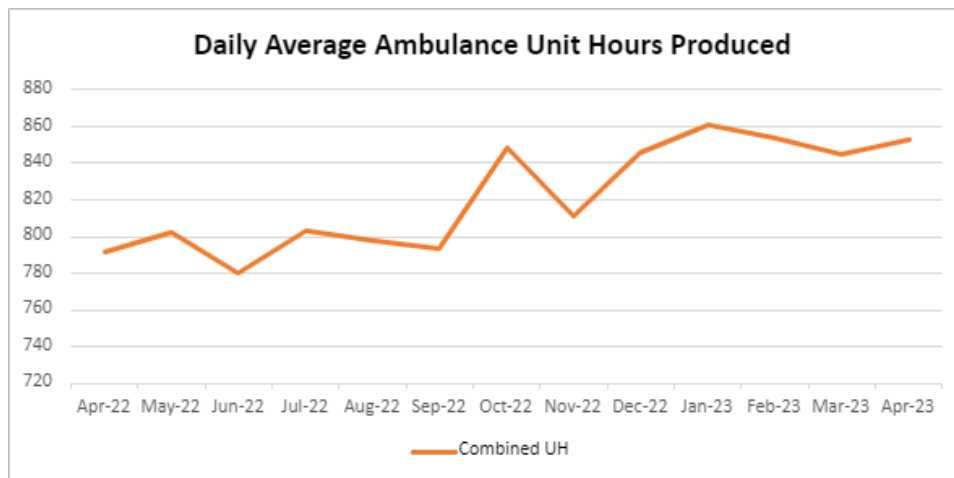
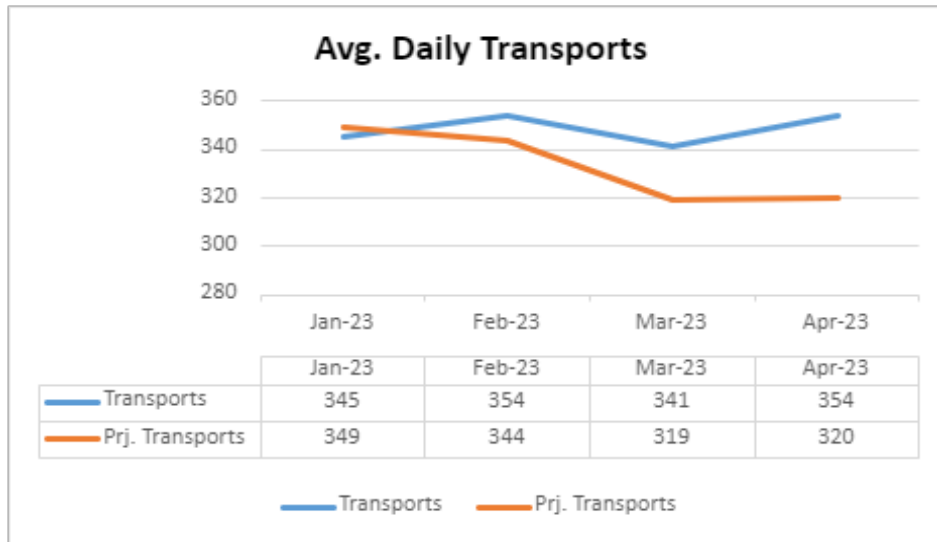
**Operations Report- April 2023**

The following summarizes significant operational items through April 30<sup>th</sup>, 2023:

**Field Operations:**







**Fleet/Logistics/Building Maintenance:**

- Identified new vendor for equipment reducing hard equipment cost by \$6500.00
- Completed Earn While Learn program initiative.
  - 4 Logistics team members will take advantage of the program

**Daily Kit Inventory Log March 2023**



### Kit Inventory Log - Month

Log of kit transactions for the month of April

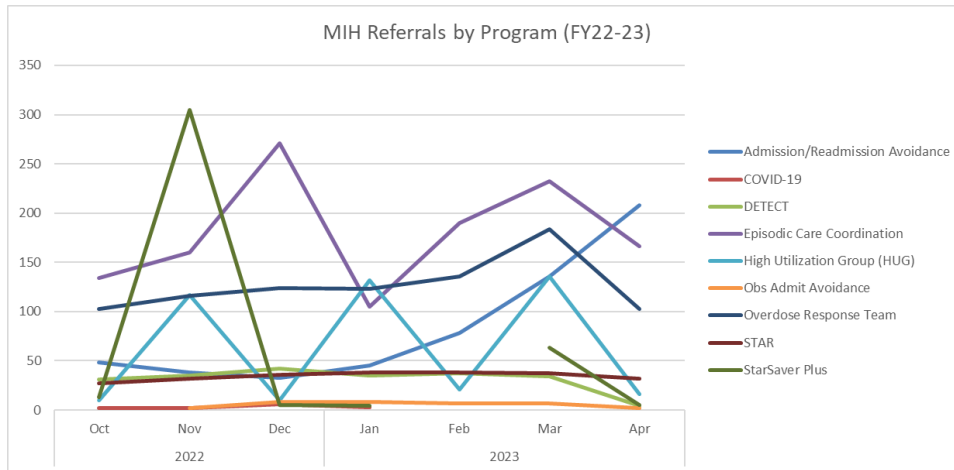


#### Special Operations:

- Completed 85 standby events and 23 community events for the month of April 2023
- Major events covered in April
  - TMS Race
  - NCAA Gymnastics Championship at Dickies Arena
  - Super Safety Saturday at Texas Health Downtown – Safety Clowns, Ambus and ambulance demonstration, teaching Stop the Bleed and Hands Only CPR.
  - Ubbi Dubbi rave event at Panther Island with 19,000 in attendance 5/22/23 and 14,000 in attendance 5/23/23.
  - Main Street Arts Festival
  - Lao New Year

#### Mobile Integrated Health:

- 2,286 clients are currently enrolled
- 193 clients are pending enrollment
  - Admission/Readmission Avoidance: 95
  - High Utilization Group (HUG): 44
  - Overdose Response Team: 24
  - DETECT: 19
  - STAR: 11
- 1,004 MIH responses in March 2023
- Episodic Care Coordination program with Community Healthcare of Texas (Palliative Care) began on 05/01/2023.



### Information Technology:

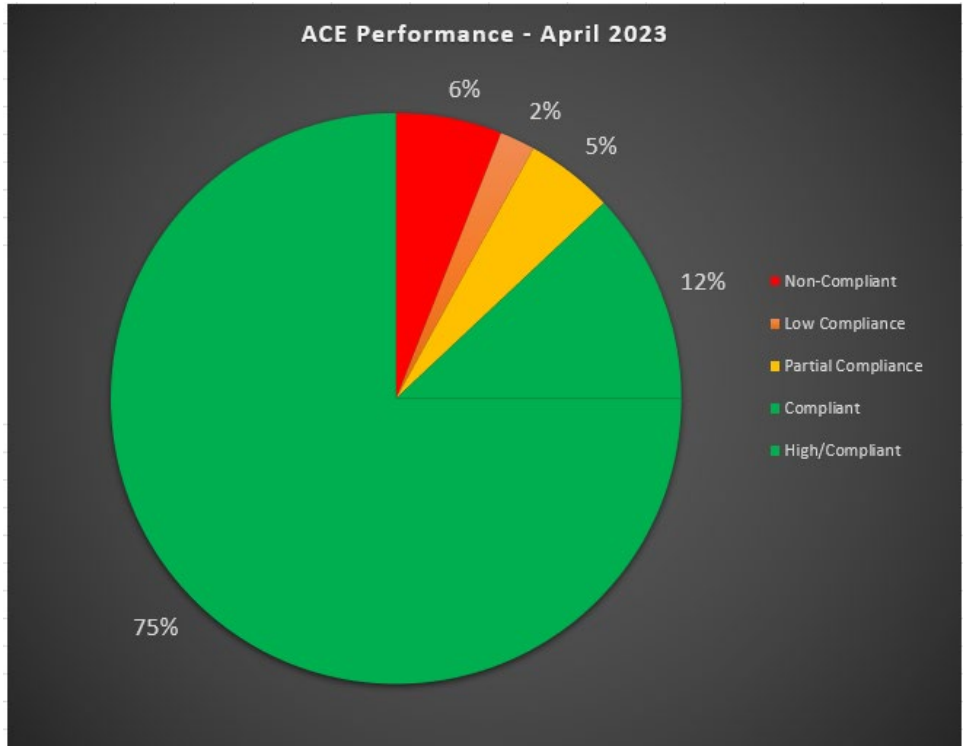
- We continue to review and strengthen our security posture with necessary changes to infrastructure
- Completing installation of new cradles for mobile phones on the ambulances and replacing the old phones with the new supported models
- Continue to work with communications and operations team to strengthen technology redundancies for the communications center.
- Continue to Identify several opportunities for cost and service optimization.

### Business Intelligence:

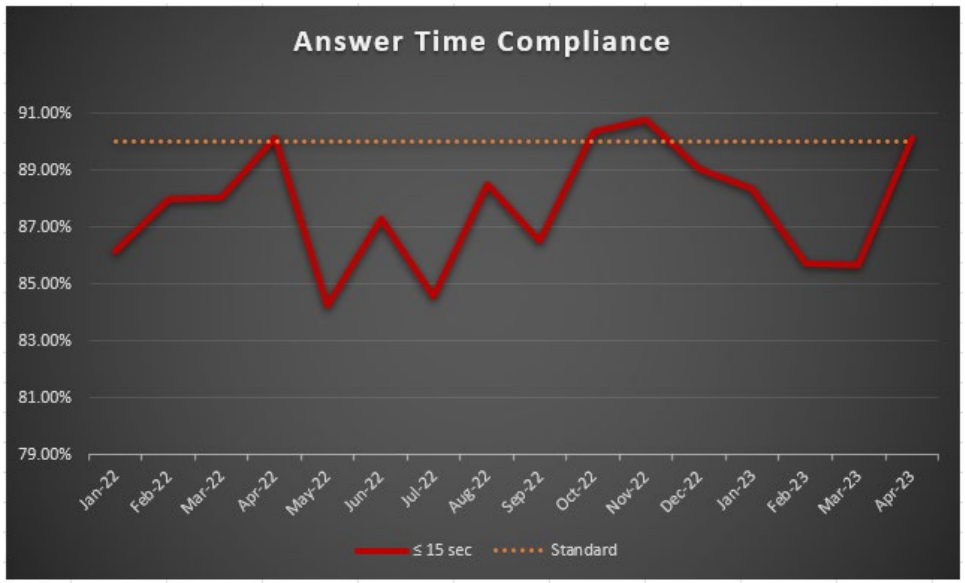
- Optima project implementation continues to be on target
  - Initial training was completed
  - Final training/deployment of software expected by mid-summer
- SharePoint Migration project is on target for completion by end of June
- Tableau conversion project continues should be completed by end of June
- Deployment QI Processed 73 case reviews sent in by various stakeholders
- Continue to work with our external vendor related to capturing response time compliance since reprioritization went live
- Processed various ad hoc reports for multiple departments as requested

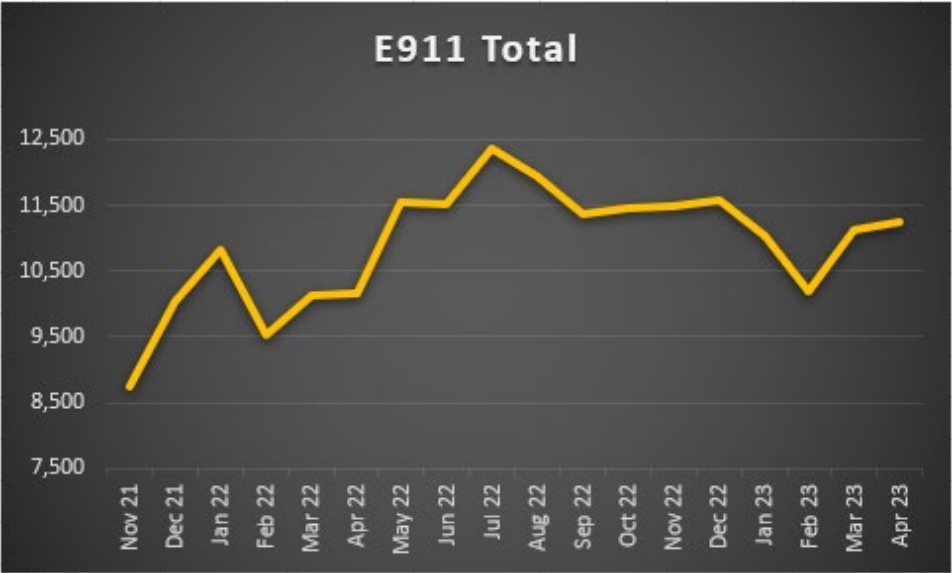
### Communications:

- Eleven (11) controllers in various stages of training.
- Recruiting efforts are being made to fill four (4) controller positions.



Month	Admin In	Admin Out	Admin Total	Admin Avg Dur	E911	E911 Avg Dur	E911 Ans ≤15 sec	E911 Ans ≤20 sec	All Calls Total
Feb-23	7,034	3,833	10,867	151.5	10,181	276.9	85.72%	88.65%	21,048
Mar-23	7,705	4,105	11,810	200.3	11,120	279.6	85.64%	88.69%	22,930
Apr-23	7,860	4,014	11,874	184.7	11,242	268.0	90.13%	92.79%	23,116





# Tab H – Compliance and Legal



## Legal Team Report April 20, 2023 - May 17, 2023

### Compliance Officer Duties

- Assisted MAEMSA jurisdiction Police departments with multiple criminal investigations, records requests, missing persons investigations, and crew member statements, witness interviews as needed.
- Assisted Tarrant County Medical Examiner's office with multiple death investigations, and records requests.
- 6 Narcotic Anomalies occurred during this reporting period:
  - The MedStar narcotic anomaly process was followed in all occurrences, no foul play was detected.

### Paralegal Duties

- Provided internal legal support for the team and processed requests regarding legal matters.
- 3 Subpoenas(s) for witness appearance processed and served.
- 3 Pre-Trial meeting were held with the Tarrant Co. District Attorney's Office.
- 22 DFPS reports were made for suspected abuse, neglect, or exploitation.
- Reviewed multiple legal & privacy matters for compliance / HR and provided guidance as needed.
- Conducted several employee internal affairs investigations regarding various conduct matters.
- Drafted, reviewed, negotiated, and executed multiple agreements with outside parties as needed.
- Worked with outside counsel regarding ongoing active litigation.

Chad Carr  
Compliance Officer  
General Counsel Paralegal  
ACO, CAPO, CRC, EMT-P

# Tab I – EPAB



# COMMONLY USED ACRONYMS

## A

ACEP – American College of Emergency Physicians  
ACEP – American Academy of Pediatrics  
ACLS – Advanced Cardiac Life Support  
AED – Automated External Defibrillator  
ALJ – Administrative Law Judge  
ALS – Advance Life Support  
ATLS – Advanced Trauma Life Support

## B

BLS – Basic Life Support  
BVM – Bag-Valve-Mask

## C

CAAS – Commission on Accreditation of Ambulance Services (US)  
CAD – Computer Aided Dispatch  
CAD – Coronary Artery Disease  
CCT – Critical Care Transport  
CCP – Critical Care Paramedic  
CISD – Critical Incident Stress Debriefing  
CISM – Critical Incident Stress Management  
CMS – Centers for Medicare and Medicaid Services  
CMMI - Centers for Medicare and Medicaid Services Innovation  
COG – Council of Governments

## D

DFPS – Department of Family and Protective Services  
DSHS – Department of State Health Services  
DNR – Do Not Resuscitate

## E

ED – Emergency Department  
EKG – ElectroCardioGram  
EMD – Emergency Medical Dispatch (protocols)  
EMS – Emergency Medical Services  
EMT – Emergency Medical Technician  
EMTALA – Emergency Medical Treatment and Active Labor Act  
EMT – I – Intermediate  
EMT – P – Paramedic  
ePCR – Electronic Patient Care Record  
ER – Emergency Room

## F

FFS – Fee for service  
FRAB – First Responder Advisory Board  
FTE – Full Time Equivalent (position)  
FTO – Field Training Officer  
FRO – First Responder Organization

## G

GCS – Glasgow Coma Scale  
GETAC – Governor’s Emergency Trauma Advisory Council

## H

HIPAA – Health Insurance Portability & Accountability Act of 1996

## I

ICD – 9 – International Classification of Diseases, Ninth Revision  
ICD -10 – International Classification of Diseases, Tenth Revision  
ICS – Incident Command System

## J

JEMS – Journal of Emergency Medical Services

## K

## L

LMS – Learning Management System

## M

MAEMSA – Metropolitan Area EMS Authority  
MCI – Mass Casualty Incident  
MI – Myocardial Infarction  
MICU – Mobile Intensive Care Unit  
MIH – Mobile Integrated Healthcare

# COMMONLY USED ACRONYMS

## **N**

NAEMSP – National Association of EMS Physicians  
NAEMT – National Association of Emergency Medical Technicians  
NEMSAC – National EMS Advisory Council (NHTSA)  
NEMSIS – National EMS Information System  
NFIRS – National Fire Incident Reporting System  
NFPA – National Fire Protection Association  
NIMS – National Incident Management System

## **O**

OMD – Office of the Medical Director

## **P**

PALS – Pediatric Advanced Life Support  
PHTLS – Pre-Hospital Trauma Life Support  
PSAP – Public Safety Answering Point (911)  
PUM – Public Utility Model

## **Q**

QRV – Quick Response Vehicle

## **R**

ROSC – Return of Spontaneous Circulation  
RFQ – Request for Quote  
RFP – Request for Proposal

## **S**

SSM – System Status Management  
STB – Stop the Bleed  
STEMI – ST Elevation Myocardial Infarction

## **T**

## **U**

## **V**

VFIB – Ventricular fibrillation; an EKG rhythm

## **W**

## **X/Y/Z**