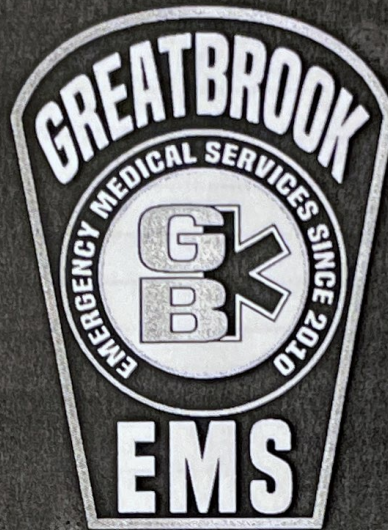


2022



Proposal for Ambulance Service

FOR TOWN OF DEERING NEW HAMPSHIRE
PREPARED BY - CHRISTOPHER ROUSSEAU, PRESIDENT / CEO

GREAT BROOK EMERGENCY MEDICAL SERVICES, LLC |

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EXECUTIVE SUMMARY



Great Brook Emergency Medical Services, LLC (Great Brook EMS) is honored by the invitation to respond to a request for proposal to serve as the ambulance provider to the town of Deering, NH. We share the town's commitment to provide high quality emergency medical services to their residents in an efficient and cost-effective manner.

Our commitment to provide professional quality ambulance and engage in community events and offer many value added benefits in the communities we serve has been evident for the last 12 years. Through the mutual aid that we have provided to communities to the large events that we have covered around the state, high quality service and customer service has been top priority.

After analyzing the town demographics, we have discovered that the town provides its own ambulance services through the fire department currently. The town needs a replacement for the current ambulance. The town also covers the cost of per diem EMS providers during daytime hours only and not on a seven day a week basis. This leaves openings or "uncovered" periods of time during the day. All evenings are covered by on-call providers through the fire department and there is no assurance that those providers will be or are available to answer the call for service. This leaves the town to rely on mutual aid EMS from neighboring departments heavily at times.

Great Brook EMS is proposing a model of EMS that will provide the town of Deering and the surrounding mutual aid communities with a well designed and effective emergency ambulance service including many of the desired value-added benefits. Our model utilizes a combination of full-time employees, per diem employees, and seeks to continue to work seamlessly with the current fire department members on calls when they respond.

Since ambulance providers are only reimbursed for transport of a patient, we have determined that the revenue derived solely from a fee for service operation is not sufficient to financially support an ambulance service appropriate for the town and surrounding mutual aid communities. Therefore, we would require a \$369,209.24-subsidy fee for each year of the contract. It is our goal to grow this ambulance operation to include additional communities in effect creating a regionalized EMS system which would result in a lower subsidy rate for the town of Deering for each additional community that joined.

We look forward to the opportunity to further discuss how Great Brook EMS can be of service to your community. Further inquiries should be directed to our president and CEO Christopher Rousseau.



It's our assessment that town of Deering is seeking proposals for EMS models that will deliver a high-quality ambulance system for the community. The fire department currently operates the ambulance and provides medical services with one ambulance. The ambulance is staffed during most days by per diem employees. That coverage is not seven days per week. When per diem employees are on it is from the hours of 7am to 5pm (10-hour shifts). The evening hours are not covered by per diem employees. The hours after 5pm until the next morning at 7am are covered by on-call employees of the fire department. There is no guarantee that those members will respond. This current model leaves the town potentially uncovered for ambulance service for many hours each week and requires the town to rely on mutual aid from adjacent towns.

It is the goal of Great Brook EMS to first meet the emergency ambulance needs of the residents of Deering. The model that we propose will utilize EMS staff and equipment that meets the standards as set fourth by the State of New Hampshire Bureau of EMS.

We propose the following EMS model:

AMBULANCE SERVICE LICENSE:

Basic Life Support through Paramedic level (as available)

OPERATIONS:

- 1- Ambulance staffed by either basic or advanced life support providers twenty-four hours per day, seven days per week. Staff configurations could be 2-EMTs, 1-EMT and 1_AEMT or Paramedic.
- 2- The possibility of a second ambulance staged out of Deering during specific hours of high activity (daytime ranging into nighttime hours but not overnight). This truck would be primary for interfacility transfer requests from the area but serve as a second resource for emergency calls in the community.

This operational model accounts for the overall low ambulance call volume of the community estimated to be about 250 calls per year. Based on information obtained from TEMSIS peak call volume occurs in the evenings and later toward the end of the week.

By providing EMT level through paramedic level staffing it will provide for flexibility and cost efficiency in terms of staffing.

VEHICLES AND EQUIPMENT



All ambulances will be equipped with state-of-the-art medical equipment that meets or exceeds the state of New Hampshire rules for ground ambulances.

We employ a preventative maintenance schedule for our ambulances that includes routine service and a comprehensive servicing on pre-determined mileage of each vehicle. All ambulances are equipped with a Fleet Complete black box that always monitors the location and speed of the vehicle as well as fuel levels, engine RPMs, and in most cases cabin temperature. These devices send notifications to administration if there is harsh braking or cornering, or speeding is detected. Ultimately this tool provides for a safer environment during transport of our patients.



At this time, we are not able to identify the personnel that would be assigned to the town of Deering. Should we be awarded the contract we would put the hours of operation for the community into our online cloud-based scheduling system and make the assignments several weeks in advance. That schedule can be made available to the Deering administration upon request or need.

Our model would employ two employees to be on duty or on shift 24-hours per day. By staffing a second ambulance in Deering as a back up resource it will give additional EMS support options for second calls for service or for larger events that require additional resources.

At Great Brook EMS our hiring process includes:

- Interview conducted by leadership
- Criminal background check to obtain licensure in NH
- Orientation program consisting of classroom instruction from leadership
- Field Training Program consisting of classroom and clinical proficiency checks conducted by trained field training officers.

Minimum qualifications for clinical providers are:

- Must be 18 years of age with high school diploma or equivalent
- NH EMS License in good standing
- NH Drivers license in good standing
- Valid professional resuser CPR certification
- Certified emergency vehicle operator course.
- IS100, IS200, IS700 incident command training
- Hazmat awareness level training

We provide numerous in-house training opportunities for continuing education that include but are not limited to recertification of existing credentials. Employees are also afforded the opportunity to attend local and state educational opportunities.

OVERVIEW OF CONTINUOUS QUALITY IMPROVEMENT PROGRAM



Great Brook EMS strives to provide superior pre-hospital medical care to our patients and the communities/clients we serve while we demonstrate compassion, understanding, and empathy.

The continuous quality improvement (CQI) mission is to promote the highest level of quality in prehospital care within Great Brook EMS by providing CQI, education, monitoring tools and anticipatory planning.

Goals of the Continuous Quality Improvement Program

- Empower EMS providers to provide consistently the highest quality of emergency medical care to our patients.
- Provide leadership and guidance in promoting quality in the local EMS system with the cooperation of EMS providers in an educational and non-punitive environment.
- Develop leadership to create an acceptance and belief in quality improvement and educate provider management regarding the importance of the commitment to quality improvement.
- Provide leadership in developing programs that implement the CQI process by providing examples of high-quality training and educational resources.
- Develop and provide an atmosphere of encouragement and support that promotes excellence and personal accountability to provider personnel in all levels of management and field staff.
- Create constancy in the CQI process to maximize efficiency and effectiveness in each EMS provider organization.
- Promote rapid and appropriate quality treatment of all patients regardless of economic or social status in the quickest and most efficient manner possible.
- Evaluate the benefits of new programs and procedures to provide "State of the Art" health care.
- Provide a conduit for communication between EMS providers and other agencies to positively resolve issues in addition to providing education and encouraging growth within the EMS system.

The Great Brook EMS CQI Team is responsible for the oversight and implementation of the department CQIP including data collection and evaluation.

The Great Brook EMS Services CQI Team will function with direction and under the auspices of the department's Medical Director and QI Coordinator.

COMPANY BACKGROUND



Great Brook Emergency Medical Services was established back in 2010. When we first started, we were a single ambulance company who specialized in non-transport EMT event stand by services. We had obtained an old ambulance from what was then Rockingham Regional Ambulance" to serve as our "rescue vehicle" This vehicle was for non-transport purposes only and had just over 300,000 miles on it. In fact, she was just broken in, some might say.

As time marched on, the need for Great Brook EMS's services grew and soon we found ourselves looking to provide transport services. We purchased our first transporting vehicle about eight (8) years ago and quickly purchased another.

With two ambulances and armed with a transport license we began to specialize in providing EMS services for motocross. Our first partnership to provide services was with NHMX motocross park in Lempster NH. We learned a lot that year, and then began providing some services to other motocross parks. It was not long before we purchased our third ambulance (a van ambulance) that we affectionately call "Kermit".

In 2018 the decision was made to expand our services once again and move on to include interfacility transfers. It was a slow start, and there was a time that we were happy to just get one call per day. But our reputation soon got out and before we knew it we were running multiple calls per day and running out of ambulances.

We purchased our fourth ambulance and then our fifth in 2020. Today we run five (5) ambulances with three (3) crews on per day handling both interfacility transfer requests as well as providing much needed mutual aid to some municipalities.

Our business model is unique to many. We do not attempt to come into an area or region and "take over". Instead, we know that there is a shortage of good EMS services and transporting organizations. We would rather work with and alongside existing services to help strengthen their efforts and help with overload. Our model is to support services that already exist and not become conflict for or with them. Great Brook EMS has found great success with this model, and we have forged some excellent partnerships a working relationship with many other private EMS services and municipalities alike.

Great Brook EMS provides both basic life support and advanced life support care and services. Besides five (5) ambulances we also have two (2) ATV side by sides that we use for special rescue and extrication. We can provide bike patrol for urban events in towns and cities. We have two stations to better serve our areas and communities and we look forward to the next ten (10) years of growth and working relationships with our partners in healthcare.



President and CEO – Christopher Rousseau

Chris has 32 years of experience in emergency medical services. He has served with the town of Hillsborough, town of Deering, town of Washington, and town of Milford NH. He is a certified Advanced Emergency Medical Technician and level 2 firefighter. Chris established Great Brook EMS and has grown it into the operation that it is today. Great Brook EMS provides interfacility transports in both NH and VT for assisted living and skilled nursing facilities as well as hospitals as well as provide medical services for stand by events of all sizes. Chris has worked in EMS, the fire service, law enforcement, and emergency communications at the local and state levels. Chris has also served as the full-time supervisor of the education technology section for the NH Fire Academy and EMS.

Deputy Chief of Operations Bureau – Thomas Modini

Tom has been with the company for four years. Tom is a paramedic and registered nurse. He came to Great Brook EMS with more than 20 years of experience as an RN. Tom has previous leadership and educational experience by virtue of his service in the United States Military. Tom shares his passion for high quality pre hospital care with us and like Chris, is active on the trucks and hands on with patient care.

Captain of Logistics and Support Bureau – Open

Lieutenant of Field Training Bureau – Monica DaSilva

Monica is an advanced EMT and has been with Great Brook EMS for a year. She brings with her previous patient care provider experience from her time running 911 with other municipalities. She is a part of the field training program with Jaffrey Ambulance and quickly proved to be a tremendous asset with Great Brook EMS and our field training program. Monica heads up our FTO program and oversees our staff of field training officers.

Supervisor of Communications Bureau – Myeshia Prescott

Myeshia works full time as our communications supervisor. She oversees our team of communication specialists that provide our communications and non-emergency dispatches seven (7) days a week. She also oversees our continuous quality improvement (CQI) program and works with our operations team to ensure proper documentation and high-quality patient care.

ASSUMPTIONS

To prepare revenue and expense forecast for ambulance services to the community several assumptions were made on the available data provided by the TEMSIS system.

The town of Deering's ambulance call requests are approximately 250 per year based upon data obtained from TEMSIS.

The average transport is 27 miles. We anticipate 6,750 billable miles

For the purposes of determining revenue, we used the payor mix of 62% Medicare 10% NH Medicaid, 22% Insurance, 6% Private pay.

That the level of Federal and State reimbursement for ambulance providers does not decrease over the contracted time.

We are assuming that about 80% of the calls will be billed at an ALS level rate while the other 20% are billed at a BLS rate.

REPORTING AND CLAIMS PROCESING

Great Brook EMS utilizes a third-party billing company that specializes in EMS billing. They utilize certified billing coders. It is our policy to maximize reimbursement opportunities through:

- Thorough and accurate documentation of patient care by field providers
- The use of modern electronic charting and billing of patient claims
- The timely processing of patient claims to ensure a consistent cash flow

Our billing department processes claims to all third-party insurance, Medicare, NH Medicaid, and self-pay clients. In situations where it is permissible, we will bill the patient any remaining balance after payment of insurance benefits. In situations where the patient does not have, we can opt to arrange a payment plan if the party is agreeable to that type of arrangement.

Our billing cycle is 30, 60, and 90 days. If payment is not received after this time, the patient is sent to our collections department. The collections department will communicate with them to secure payment.

COST

Our goal is to deliver an emergency ambulance system that will meet the needs of the community. Ideally, we would desire a self-sufficient system where revenues from fees for service billing would meet the operational needs, however in this situation where call volume does not generate sufficient revenue we must seek additional funding from the town of Deering.

We propose to charge \$ to the town of Deering for each year of the contract. Below are the tables showing the town the breakdown of costs.

Anticipated BLS Reimbursement (50 calls @ \$500 per call)	\$25,000.00
Anticipated ALS Reimbursement (200 calls @ \$800 per call)	\$160,000.00
Total Revenue	\$185,000.00

Operational Cost	Total
Includes salaries, taxes, vehicle maintenance, consumable supplies, fuel costs, administrative support	\$384,209.24
Total revenue from billing	\$185,000.00
Total loss annually	\$199,209.24

TOTAL CONTRACT PRICE FOR AMBULANCE SERVICE TO TOWN - \$225,000.00

INSURANCE

Great Brook EMS uses Market insurance through our local agent Cindy Albert Insurance. This meets the State of NH and federal requirements for commercial professional liability coverage. We maintain workers compensation insurance through Liberty Mutual.

VALUE ADDED SERVICES

Fire scenes stand by – YES, we would respond to the scene of fires when requested by the fire department. However, we would bill for transport of any patients to include ill or injured firefighters. It is our experience that these types of transports would be covered under the fire department's workers compensation insurance.

Stand by at town functions – YES, we will provide ambulance coverage at events where attendance is expected to be high. We reserve the right to bill any persons transported from the event.

Mobile integrated healthcare – YES, we would look to participate in community outreach and healthcare or follow up visits. This would have to be in coordination with the local area hospital. There would have to be a determination on reimbursement of certain costs not covered in hourly salaries or covered elsewhere in this proposal.