

STATE OF COLORADO

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Dedicated to protecting and improving the health and environment of the people of Colorado

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Colorado Department
of Public Health
and Environment

State Emergency Medical and Trauma Services Advisory Council Public Policy and Finance Committee Meeting Minutes July 24, 2013 - DRAFT

Public Policy & Finance Committee Members: David Dreitlein, Lew Gaiter, John Harney, Linda Joseph, Randy Leshner, Rich Martin, Fred Morrison, Travis Polk.

EMTS Section Staff: Jeanne-Marie Bakehouse, Joni Briola, Michael Gerber, Art Kanowitz, Randy Kuykendall, Lynne Keilman, Matthew Paswaters, Michelle Reese, Grace Sandeno, Michael Seiffert, Alison Sleight, Bill Voges.

SEMTAC and Members of the Public: Amy Allen, Peggy Berkey, Sean Caffrey, Brandon Chambers, Tamara Connell, Dee Crump, Tim Dienst, Gene Eby, Josh Eveatt, Jim Felmlee, Terri Foechterle, John Hall, Steve Hilley, Rob Hudgens, Karen Maciejko, Melody Mesmer, Jon Montano, Chris Montera, Dan Noonan, Sherrie Peckham, Kim Schallenberger, Eric Schmidt, Michael Scott, Mary Shelton, Buddy Shmaltz, Jimmy Taylor, Shirley Terry, Patti Thompson, Linda Underbrink, Phyllis Uribe.

Call to order:

10 a.m. A quorum was established.

Introduction and meeting overview:

Randy Leshner welcomed everyone to the Public Policy and Finance Committee meeting, indicated if members recently appointed to SEMTAC were interested in becoming a part of PP&F to speak with Chief Dan Noonan, and asked for a volunteer to serve as a liaison to the Pediatric Emergency Care Committee.

Old Business

Review of minutes:

The committee reviewed the April 2013 meeting minutes. **Lew Gaiter made a motion to accept the meeting minutes and David Dreitlein seconded. Motion passed unanimously.**

New Business

Fiscal Year 2013:

Lynne Keilman distributed the placemat and indicated that the fiscal year 2013 numbers were likely final, but there could be some small changes as the fiscal year is finalized. Grants program reversions were \$396,626. The state admin budget also had significant reversions in FY13 (\$270,445) due to vacancy savings.

Fiscal Year 2015: Incentive Category

Jeanne-Marie spoke about the incentive category, which is the idea of an additional category in the provider grants program that has an automatically reduced match. Last year the process was put into place and the call for applications went out, but none were received so the fiscal year 2014 provider grants program did not have an incentive category. In order to have the opportunity for fiscal year 2015, it would be time to send out the call for applications. Discussion centered on timing and the importance of allowing enough time for applications to be submitted and properly vetted. The committee generally felt that releasing the call for applications again would be a good idea. **Rich Martin made a motion to release the incentive category application and scoring tool and Linda Joseph seconded. Motion passed unanimously.**

Fiscal Year 2014: Additional Funds

Jeanne-Marie updated the committee on fiscal year 2014. For CREATE, updated guides have been posted to the Colorado Rural Health Center's website, and the previously approved program changes went into effect in July. For provider grants and system improvement, Jeanne-Marie went over the numbers for the FY14 public notice and stated that due to some projects withdrawing and the lowest scored projects being quite expensive, \$500,000 is still available for awarding out. Randy Kuykendall stressed it is important to get the funds out to providers, and that allowing the fund balance to get too far above the spending authority amount is not in the best interests. Randy suggested several options to open the discussion for ideas, including additional funds for CREATE or a one-time process to get the funds out to providers through the RETACs. This could be accomplished through 11 purchase orders to the RETACs, either in amounts all the same or by formula based on the number of counties within each RETAC. **Rich Martin made a motion to distribute the funds through the RETACs, and David Dreitlein seconded.** Further discussion centered on the pros and cons of distributing the available funds through the RETACs, and concerns were noted about timing, including that the June 30, 2014 deadline still applied. It was clarified that at least one RETAC has a mini-grant structure already in place, and that match in this particular one-time instance would not be required. It was also clarified that any project not originally funded through the grant process would not be eligible for these funds. Several RETAC coordinators spoke up in support of the idea. **There was an amendment to the original motion to use the county formula approach, which was agreed upon. A vote was called and the motion passed unanimously.**

Image Trend Funding:

Randy Kuykendall stated that we are in the third year of the five year contract with Image Trend, and that statewide data collection continues to mature with more than 85% of agencies reporting currently. Currently funds to support the Image Trend contract are run through the annual competitive system improvement review process. Approximately \$94,000 is dedicated annually to the Image Trend contract, which supports State Bridge, Field Bridge and the Certification (Licensing) Module. Randy indicated that July is the time when the department looks to the budget setting process, and that now is a good time to discuss and determine whether the Image Trend funding should stay within the competitive system improvement arena or be moved to the section's operational line. Randy also indicated that several of the comments received following the grant review process showed support for the idea of moving the funds to the operational line. **Fred Morrison made a motion to move the funds into the EMTS operational budget and Rich Martin seconded.** Further discussion centered on the pros and cons of the move. The approximately \$94,000 would come "off the top" of the funding pot, and therefore would affect the amounts available for provider grants and system improvement funding. The Northwest RETAC voiced concerns about the further eroding the grants program. Other discussion revealed that scoring the department's request for ImageTrend each year may just be an automatic exercise, in that whether or not it scored high, it would need to be funded one way or the other. **A vote was called, and the motion passed unanimously.**

RETAC Biennial Plan Reviews:

Randy Leshner and Jeanne-Marie provided a brief overview of the process, and a session was held for RETAC biennial plan review for adequacy. Representatives from all 11 RETACs spoke to their accomplishments over the past two years and the regional goals for the upcoming two years.

Regional Medical Direction:

Art Kanowitz talked about regional medical direction, and summarized that previously the committee determined \$363,000 should be allocated each year for three years for the purposes of regional medical direction out of the system improvement pot. Over the past months, the regional medical directors and RETACs worked on a draft deliverables document, and today's discussion needed to center on a how to distribute the funds. Discussion revolved around whether the system improvement category would be replaced or would remain in place as an additional avenue for funding; whether or not the lump sum should be divided equally among RETACs; what the funding amounts requested over the past few years were by the RETACs; that the end goal of being able to tie regional medical direction to patient outcomes remains important; that continued work on CQI was needed; that data remained very important; and that the current RMD program has benefits such as protocols. **David Dreitlein made a motion to take the funding amount of \$363,000 and divide it equally among RETACs with the expectation they would deliver a budget based on the RMD deliverables document within timeframes established by the department. Lew Gaiter seconded.** Further discussion centered on timelines, process, current varying RMD progress, and the added value to the system because of regional medical direction. **There was an amendment to the original motion to specify the submissions should be project proposals that included budgets. A vote was called and the motion passed unanimously.** Over the next few months, Art will send out the deliverable document, currently in draft form, to the regional medical directors and the RETACs with the intention of further discussing and finalizing it at the September RETAC forum.

Meeting adjourned:

With no further business to discuss, the meeting was adjourned at 12:45 p.m.

Next regular meeting:

Oct. 23, 2013, 10 a.m., Pueblo