

**COMMUNITY PARAMEDICINE AD HOC COMMITTEE MEETING**

<b>MINUTES</b>	<b>DATE</b> February 18, 2014	<b>TIME</b> 3:00 PM	<b>LOCATION</b> ODPS – Division of EMS 1970 W. Broad St., Columbus, Ohio 43218
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<b>ATTENDEES</b>	<p><u>Committee Chairperson:</u> Deanna Harris</p> <p><u>Committee Members:</u> Mary Ahlers, Karen Beavers, Pam Bradshaw, Holly Herron, Dr. David Keseg, Dr. Wendy Pomerantz, JD Postage, Joshua Tilton, Joe Toth, Mike White</p> <p><u>ODPS-Division of Emergency Medical Services (EMS) Staff:</u> Dr. Carol Cunningham, John Sands, Dawn Vondracek</p> <p><u>ODPS Staff:</u> None</p> <p><u>Guests:</u> Daniel Ellenberger, Eric Cortez</p> <p><u>Absent Committee Members:</u> James Davis, Matthew Dick, Tom Duffee, Geoff Dutton, Ernest Hatmaker, Bruce Shade, Dr. Brian Springer, Dr. Paul Zeeb</p>
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**AGENDA TOPICS**

<b>TOPIC</b>	<b>Welcome</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The meeting was called to order at 3:06 PM by Chairperson Deanna Harris.
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<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
None		

<b>TOPIC</b>	<b>Meeting Minutes</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	<b><u>ACTION:</u> A motion was made by Chn. Harris to approve the 12/17/13 draft meeting minutes with no changes. Ms. Bradshaw– First. Dr. Pomerantz– Second. None opposed. None abstained. Motion approved.</b>
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<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
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<b>DISCUSSION</b> <i>(Chn Harris)</i>	At the May 2013 EMS Board meeting, this Committee motioned the Board to approve that the Community Paramedicine Committee and Resource Committee work together to create and ultimately release a request for proposals. The RFP would utilize priority V funding during the 2014 grant period for community paramedicine research projects.
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<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
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Chn. Harris will discuss with the EMFTS Board regarding what projects may qualify under the RFP	Chn. Harris	December 17 <sup>th</sup> Meeting
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**TOPIC**      **Old Business**

<b>DISCUSSION</b> <i>(Chn. Harris)</i>	Community Paramedicine Ad Hoc Committee applications were reviewed and approved (subject to EMFTS Board approval) for: JD Postage (Violet Township and Nationwide Children’s Hospital), Joseph Toth (Parma Hospital), Daniel Ellenberger (University Hospitals of Cleveland, Troy Fire & Cuyahoga Community College) and Tom Duffee (Clark State Community College and Enon Mad-River Twp Fire & EMS)
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**ACTION: Motion was made to induct new members to the Community Paramedicine Committee. Those members are as follows: JD Postage, Joseph Toth, Daniel Ellenberger and Tom Duffee. James Davis – First. Pam Bradshaw – Second. All members were in favor. None opposed. None abstained. Motion was approved.**

<b>DISCUSSION</b> <i>(Chn. Harris, Exec Dir Mel House and Andy Spencer)</i>	Chn. Harris stated the meeting purpose was to broadly define Ohio’s community paramedic and to discuss the legislative process of incorporating community paramedicine into the professional umbrella of EMS. Executive Director Mel House introduced Andy Spencer, DPS Legislative Liaison. Mr. Spencer described the opportunity to include new programs such as community paramedicine in the February 2014 Mid-biennium Budget Review (MBR). The process is to seek DPS approval, develop an implementation strategy, identify stakeholders and identify organization(s) to carry it through to legislation.
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<p>DISCUSSION (Chn. Harris)</p>	<p>Chn. Harris led the ad hoc Committee discussion to conceptually define Ohio’s community paramedic as:</p> <ul style="list-style-type: none"> <li>❖ <u>Experience</u> –Must have two years full-time paramedic experience before applying to a training program accredited by the EMFTS Board.</li> <li>❖ <u>Endorsement</u> – Upon graduation from an accredited training program, will receive community paramedicine endorsement (not certification).</li> <li>❖ <u>Community Paramedic Scope of Practice</u> – Remains unchanged from Paramedic, but could expand in future.</li> <li>❖ <u>Specialty Continuing Education</u> – Community paramedic endorsement will require additional specialty continuing education as determined by the EMFTs board.</li> <li>❖ <u>Medical Oversight</u> – Provided by medical director with appropriate credentials as approved by the EMFTS Board.</li> <li>❖ <u>Immunity</u>: Immunity protection regardless of location while performing community paramedic activities.</li> <li>❖ <u>Practice Location</u>: Per needs assessment for individual community.</li> <li>❖ <u>Quality Assurance/Quality Improvement</u>: Unchanged for medical directors, detailed under OAC 4765-3-05.</li> <li>❖ <u>Types of Care</u>: Including but not limited to pre-hospital services, preventative care, social service referrals, chronic care support, treat and release, follow up care and maintenance.</li> <li>❖ <u>Transport</u> – Disposition of patients per community paramedicine protocols and medical direction.</li> </ul>
<p><b>TOPIC</b></p>	<p><b>New Business</b></p>
<p>DISCUSSION (Chn. Harris)</p>	<p>The Committee reviewed the 2013 accomplishments of the MIHC (previously known as Community Paramedicine) Ad Hoc Committee. As no changes were proposed, this document will be submitted as part of the EMFTS Committee Accomplishments Summary.</p>
<p>DISCUSSION (Chn. Harris)</p>	<p>Chn. Harris updated the Committee on the communication piece drafted by legal on the status of community paramedicine in Ohio. Chn. Harris stated that comments received by Board and MIHC Committee members were incorporated into the draft, pending legal review and implementation. Clarification as to “community needs” was proposed to the draft document.</p> <p><b><i>ACTION: Motion was made to clarify “community needs” in the draft document written by legal. Dr. Keseg – First. Ms. Ahlers – Second. All members were in favor. None opposed. None abstained. Motion was approved.</i></b></p>
<p>DISCUSSION (Chn. Harris)</p>	<p>Chn. Harris discussed House Bill 809 “The Field EMS Bill” and asked Committee members to share their knowledge. Mr. Tilton stated that there is a proposal within the Field EMS Bill where EMS would transfer from the federal DOT to under HHS, which would provide EMS and grant funding opportunities that are currently lacking at the state and federal level.</p> <p>EMS on the Hill Day in Washington, DC, is March 25, 2014. Mary Ahlers will be attending. Deanna will get the Board’s opinion if an Ohio contingent should be sent.</p>
<p>DISCUSSION (Chn. Harris)</p>	<p>Chn. Harris shared her presentation on Ohio’s Progress toward community paramedicine given at the University of Cincinnati Residency Course on Community Paramedicine. The community’s perception is that Ohio isn’t supportive of MIHC. Chn. Harris stressed that an association or group must champion MIHC for it to get carried through to legislation.</p>

<b>DISCUSSION</b> <i>(Chn. Harris and Dr. Cunningham)</i>	Dr. Cunningham shared the first draft of the MIHC White Paper. The paper's purpose is to justify the legislative change needed to incorporate Mobile Integrated Healthcare into Ohio EMS law. The Committee was asked to send suggestions or comments to Dr. Cunningham.
<b>DISCUSSION</b> <i>(Chn. Harris)</i>	<p>Mr. Postage suggested that the Committee develop guidelines on completing a community needs assessment. Dr. Cunningham stressed that MIHC isn't ours to build and not the assigned mission of the Community Paramedicine Ad Hoc Committee. OHA or ODH should be contacted. Again, a champion must be identified to carry the legislation through.</p> <p>Chn. Harris suggested we develop a "resource packet" on MIHC issues and that documents related to this topic be forwarded to her.</p> <p>The stakeholder list was reviewed, and it was suggested that "clients" (including patients) and consumer advocacy groups be added to the stakeholder list.</p>
<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The meeting was adjourned.
<b>ATTACHMENTS</b>	
<ul style="list-style-type: none"> <li>• Travel reimbursement forms</li> <li>• MIHC (Community Paramedicine) Ad Hoc Committee – 2013 Accomplishments</li> <li>• Ohio Community Paramedicine Integrated Mobile Healthcare – PowerPoint presentation</li> </ul>	
<b>NEXT MEETING</b>	
<ul style="list-style-type: none"> <li>• The March 18, 2014, meeting was CANCELLED.</li> <li>• The next scheduled meeting is April 15, 2014.</li> </ul>	

**MOBILE INTEGRATED HEALTHCARE (COMMUNITY PARAMEDICINE)  
AD HOC COMMITTEE MEETING**

MINUTES	DATE	TIME	LOCATION
	April 15, 2014	3:00 PM	ODPS – Division of EMS 1970 W. Broad St., Columbus, Ohio 43218

<b>ATTENDEES</b>	<p><u>Committee Chairperson:</u> Deanna Harris</p> <p><u>Committee Members:</u> Mary Ahlers, Karen Beavers, Pam Bradshaw, James Davis, Tom Duffee, Geoff Dutton, Holly Herron, JD Postage, Joshua Tilton, Dr. Paul Zeeb</p> <p><u>ODPS-Division of Emergency Medical Services (EMS) Staff:</u> Dr. Carol Cunningham, Melvin House, John Sands, Dawn Vondracek</p> <p><u>ODPS Staff:</u> None</p> <p><u>Guests:</u> Eric Cortez, Brent Parquette, Adam Howard, Jonathan Lever, Jeffrey Bruggeman, Herb de la Porte</p> <p><u>Absent Committee Members:</u> Matthew Dick, Ernest Hatmaker, Dr. David Keseg, Gary Redd, Bruce Shade, Dr. Brian Springer, Joseph Toth, Mike White</p>
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**AGENDA TOPICS**

<b>TOPIC</b>	<b>Welcome</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The meeting was called to order at 3:00 PM by Chairperson Deanna Harris.
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ACTION ITEM(S)	PERSON RESPONSIBLE	DEADLINE
None		

<b>TOPIC</b>	<b>Meeting Minutes</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	<i>A motion was made by Chn. Harris to approve the 2/18/14 draft meeting minutes. The meeting minutes were not updated to include suggested revision by Dr. Carol Cunningham; therefore, the meeting minutes will be presented for approval at the next meeting.</i>
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<b>TOPIC</b>	<b>Old Business</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The Committee reviewed the 2013 accomplishments of the MIHC (previously known as Community Paramedicine) Ad Hoc Committee. As no changes were proposed, this document will be submitted as part of the EMFTS Committee Accomplishments Summary.
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	Chn. Harris updated the Committee on the communication piece drafted by legal on the status of Community Paramedicine in Ohio. Chn. Harris stated that comments received by Board and MIHC Committee members were incorporated into the draft, pending legal review and implementation. Clarification as to “community needs” was proposed to the draft document.
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	<b><i>ACTION: Motion was made to clarify “community needs” in the draft document written by legal. Dr. Keseg – First. Ms. Ahlers – Second. All members were in favor. None opposed. None abstained. Motion was approved.</i></b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	Chn. Harris discussed House Bill 809 “The Field EMS Bill” and asked Committee members to share their knowledge. Mr. Tilton stated that there is a proposal within the Field EMS Bill where EMS would transfer from the federal DOT to DHHS, which would provide EMS and grant funding opportunities that are currently lacking at the state and federal level.
	EMS on the Hill Day in Washington, DC, is March 25, 2014. Mary Ahlers will be attending. Chn. Harris will get the Board’s opinion if an Ohio contingent should be sent.

<b>DISCUSSION</b> <i>(Chn. Harris)</i>	Chn. Harris shared her presentation on Ohio’s Progress toward Community Paramedicine given at the University of Cincinnati Residency Course on Community Paramedicine. The community’s perception is that Ohio isn’t supportive of MIHC. Chn. Harris stressed that an association or group must champion MIHC for it to get carried through to legislation.
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<p><b>DISCUSSION</b> <i>(Chn. Harris and Dr. Cunningham)</i></p>	<p>Dr. Cunningham shared the first draft of the MIHC White Paper. The paper's purpose is to justify the legislative change needed to incorporate Mobile Integrated Healthcare into Ohio EMS law. The Committee was asked to send suggestions or comments to Dr. Cunningham.</p>
<p><b>DISCUSSION</b> <i>(Chn. Harris)</i></p>	<p>Mr. Postage suggested that the Committee develop guidelines on completing a community needs assessment. Dr. Cunningham stressed that MIHC isn't ours to build and not the assigned mission of the Community Paramedicine Ad Hoc Committee. OHA or ODH should be contacted. Again, a champion must be identified to carry the legislation through.</p> <p>Chn. Harris suggested we develop a "resource packet" on MIHC issues and that documents related to this topic be forwarded to her.</p> <p>The stakeholder list was reviewed, and it was suggested that "clients" (including patients) and consumer advocacy groups be added to the stakeholder list.</p>
<p><b>TOPIC</b></p>	<p><b>New Business</b></p>
<p><b>DISCUSSION</b> <i>(Chn. Harris, Mary Ahlers, JD Postage)</i></p>	<p>Chn. Harris asked for feedback on the March 25, 2014, "EMS on the Hill" in Washington DC. Mary Ahlers, JD Postage, and Jonathan Lever attended the Summit held the day before.</p> <p>Mary Ahlers stated there were many dynamic speakers and a feeling of comradery and support for H.R. 809, which proposes EMS be nationally regulated. Ohio US Representative Brad Wenstrup is a strong supporter of MIHC and offered assistance to the Committee. As far as revising Ohio law, he suggested adding "emergency prevention" instead of taking out "emergency."</p> <p>JD Postage added the Joint Commission speaker suggested MIHC may be regulated under them within 5-10 years. Good information on how other agencies fund MIHC, such as hospitals partnering with payer sources, such as home health care, with payment based upon performance based outcomes.</p> <p>Jonathan discussed additional funding arrangements. For example, home health care is contacted when EMS is called as patients are in a CADD system; unique hospice models are being developing; the Pittsburgh mental health care model is connecting people with resources; and MedStar is partnering with ACOs for shared savings (per member per month fees plus a percentage of any additional savings at year-end).</p> <p>Dan Swayze, Chief Operating Officer at Center for Emergency Medicine of Western Pennsylvania, shared with JD that Pennsylvania is in the process of writing a white paper. Dan Swayze also told Jon that he was meeting with CMS on national reimbursement and PA Medicaid.</p>
<p><b>DISCUSSION</b> <i>(Chn Harris, James Davis)</i></p>	<p>Chairperson Harris and James Davis attended a stakeholder meeting was held on 4/14/14. The Ohio Fire Alliance (Ohio Fire Chief's, Ohio Assoc of Professional Fire Fighters and the Ohio State Fire Fighter's Assoc) hosted a stake holder's meeting to include some private EMS, county/city/township officials, and the Ohio Hospital Association. The Ohio Fire Alliance is willing to take the lead on championing MIHC.</p> <p>MIHC is generating traction. The Ohio Fire Chiefs' Association added community paramedicine to its July 2014 Conference agenda. Larry Bennett of University of Cincinnati continues to offer CP courses.</p> <p>It is important that Committee members, and anyone else we are aware of, speaking on CP go through the Committee to better ensure a unified message is delivered on mobile integrated healthcare The Power Point developed by Chairperson Harris is available to anyone interested.</p>
<p><b>DISCUSSION</b> <i>(Chn Harris, Dr.</i></p>	<p>The community paramedicine communication piece was distributed via LISTSERVS on 4/14/14. There are many questions on whether EMS can provide support to an event, such</p>

<i>Cunningham)</i>	as a marathon. Dr. Cunningham advised to first check with local municipalities; rules may be on the books that limit what EMS can do. In the absence of city rules that prohibit event-specific EMS support, Chairperson Harris advised that, in general, if EMS is simply setting up a makeshift location at a well-attended event to shorten response time, this would be considered an extension of providing EMS emergency services and not community paramedicine.
<b>DISCUSSION</b> <i>(Chn. Harris, Dr. Cunningham, Mr. Davis)</i>	<p>Dr. Cunningham presented the draft white paper by section (6 pages). The paper's target audience is legislators/lay people/business people, and is written from a business viewpoint to determine whether time and resources would be dedicated toward moving community paramedicine forward. Dr. Cunningham reiterated that only published references should be used to maintain the integrity of any white paper.</p> <p>Committee members suggested adding that EMS reimbursement will be quality based, not quantity, which may be an incentive for support.</p> <p>James Davis suggested that the paper clearly emphasize that MIHC integrates with other providers and is not intended to be a takeover of services, as this is a primary concern of the health care community. Chn. Harris also reiterated that the loudest and strongest fear is getting pushed out. We need to emphasize that MIHC isn't intended to replace but to fill in existing gaps. Also, we need to emphasize that communities will not be pressured and will not be mandated to participate.</p> <p>Instead of rewriting the white paper to set this tone, the Committee agreed that a one-page executive summary be included to recap mobile integrated healthcare as collaborative—not mandated or designed to push out any specific healthcare group. MIHC should fill in gaps to meet community needs, ideally achieving financial savings. Links can be used in the white paper executive summary.</p> <p>Mr. Davis suggested that we answer 5 questions: What are we trying to solve? Why is it a problem? How can the problem be solved? What needs to be done? How is it financed?</p>

<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
Chn. Harris will request links from Committee members for possible inclusion in the executive summary	Chn. Harris	
Chn. Harris will draft the executive summary for Dr. Cunningham's review	Chn. Harris	

<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The meeting was adjourned.
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- ATTACHMENTS**
- The Community Paramedicine Communication piece
  - Draft White Paper
  - EMS Introduction to ACOs
  - Power Point developed by Chn. Harris

- NEXT MEETING**
- The next scheduled meeting is June 17, 2014.

**MOBILE INTEGRATED HEALTHCARE (COMMUNITY PARAMEDICINE)  
AD HOC COMMITTEE MEETING**

MINUTES	DATE	TIME	LOCATION
	June 17, 2014	3:00 PM	ODPS – Division of EMS 1970 W. Broad St., Columbus, Ohio 43218

<b>ATTENDEES</b>	<p><u>Committee Chairperson:</u> Deanna Harris  <u>Committee Members:</u> Mary Ahlers, Karen Beavers, James Davis, Geoff Dutton, JD Postage, Joshua Tilton, Joseph Toth  <u>ODPS-Division of Emergency Medical Services (EMS) Staff:</u> Dr. Carol Cunningham, Anna Firestone, Melvin House, Dawn Vondracek  <u>ODPS Staff:</u> None  <u>Guests:</u> Jeffrey Bruggeman, Michael Costello, Herb de la Porte, Vincent Gildone, Adam Howard, Jonathan Lever, Daryl McNutt, Barry Seth  <u>Absent Committee Members:</u> Pam Bradshaw, Matthew Dick, Tom Duffee, Ernest Hatmaker, Holly Herron, Dr. David Keseg, Gary Redd, Bruce Shade, Dr. Brian Springer, Mike White, Dr. Paul Zeeb</p>
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**AGENDA TOPICS**

<b>TOPIC</b>	<b>Welcome</b>
<b>DISCUSSION (Chn. Harris)</b>	The meeting was called to order at 3:00 PM by Chairperson Deanna Harris.

ACTION ITEM(S)	PERSON RESPONSIBLE	DEADLINE
None		

<b>TOPIC</b>	<b>Meeting Minutes</b>
<b>DISCUSSION (Chn. Harris)</b>	<p><b><u>ACTION:</u></b> A motion was made by Chn. Harris to approve the 2/18/14 draft meeting minutes with the addition of Joe Toth as an attendee. Mr. Toth – First. Mr. Postage – Second. None opposed. None abstained. Motion approved.</p> <p><b><u>ACTION:</u></b> A motion was made by Chn. Harris to approve the 4/15/14 draft meeting minutes with no changes. Ms. Ahlers – First. Mr. Postage – Second. None opposed. None abstained. Motion approved.</p>

**TOPIC**      **Old Business**

<b>DISCUSSION (Chn. Harris, Mary Ahlers, JD Postage)</b>	<p>Chn. Harris asked for feedback on the March 25, 2014, “EMS on the Hill” in Washington DC. Mary Ahlers, JD Postage, and Jonathan Lever attended the Summit held the day before.</p> <p>Mary Ahlers stated there were many dynamic speakers and a feeling of comradery and support for H.R. 809, which proposes EMS be nationally regulated. Ohio US Representative Brad Wenstrup is a strong supporter of MIHC and offered assistance to the Committee. As far as revising Ohio law, he suggested adding “emergency prevention” instead of taking out “emergency.”</p> <p>JD Postage added the Joint Commission speaker suggested MIHC may be regulated under them within 5-10 years. Good information on how other agencies fund MIHC, such as hospitals partnering with payer sources, such as home health care, with payment based upon performance based outcomes.</p> <p>Jonathan discussed additional funding arrangements. For example, home health care is contacted when EMS is called as patients are in a CADD system; unique hospice models are being developing; the Pittsburgh mental health care model is connecting people with resources; and MedStar is partnering with ACOs for shared savings (per member per month fees plus a percentage of any additional savings at year-end).</p>
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	<p>Dan Swayze, Chief Operating Officer at Center for Emergency Medicine of Western Pennsylvania, shared with JD that Pennsylvania is in the process of writing a white paper. Dan Swayze also told Jon that he was meeting with CMS on national reimbursement and PA Medicaid.</p>
<p><b>DISCUSSION</b> <i>(Chn Harris, James Davis)</i></p>	<p>Chairperson Harris and James Davis attended a stakeholder meeting on 4/14/14. The Ohio Fire Alliance (Ohio Fire Chief's, Ohio Assoc of Professional Fire Fighters and the Ohio State Fire Fighter's Assoc) hosted a stake holder's meeting to include some private EMS, county/city/township officials, and the Ohio Hospital Association. The Ohio Fire Alliance is willing to take the lead on championing MIHC.</p> <p>MIHC is generating traction. The Ohio Fire Chiefs' Association added Community Paramedicine to its July 2014 Conference agenda. Larry Bennett of University of Cincinnati continues to offer CP courses.</p> <p>It is important that Committee members, and anyone else we are aware of, speaking on CP go through the Committee to better ensure a unified message is delivered on mobile integrated healthcare The Power Point developed by Chairperson Harris is available to anyone interested.</p>
<p><b>DISCUSSION</b> <i>(Chn Harris, Dr. Cunningham)</i></p>	<p>The Community Paramedicine communication piece was distributed via LISTSERVS on 4/14/14. There are many questions on whether EMS can provide support to an event, such as a marathon. Dr. Cunningham advised to first check with local municipalities; rules may be on the books that limit what EMS can do. In the absence of city rules that prohibit event-specific EMS support, Chairperson Harris advised that, in general, if EMS is simply setting up a makeshift location at a well-attended event to shorten response time, this would be considered an extension of providing EMS emergency services and not community paramedicine.</p>
<p><b>DISCUSSION</b> <i>(Chn. Harris, Dr. Cunningham, Mr. Davis)</i></p>	<p>Dr. Cunningham presented the draft white paper by section (6 pages). The paper's target audience is legislators/lay people/business people, and is written from a business viewpoint to determine whether time and resources would be dedicated toward moving Community Paramedicine forward. Dr. Cunningham reiterated that only published references should be used to maintain the integrity of any white paper.</p> <p>Committee members suggested adding that EMS reimbursement will be quality based, not quantity, which may be an incentive for support.</p> <p>James Davis suggested that the paper clearly emphasize that MIHC integrates with other providers and is not intended to be a takeover of services, as this is a primary concern of the health care community. Chn. Harris also reiterated that the loudest and strongest fear is getting pushed out. We need to emphasize that MIHC isn't intended to replace but to fill in existing gaps. Also, we need to emphasize that communities will not be pressured and will not be mandated to participate.</p> <p>Instead of rewriting the white paper to set this tone, the Committee agreed that a one-page executive summary be included to recap mobile integrated healthcare as collaborative—not mandated or designed to push out any specific healthcare group. MIHC should fill in gaps to meet community needs, ideally achieving financial savings. Links can be used in the white paper executive summary.</p> <p>Mr. Davis suggested that we answer 5 questions: What are we trying to solve? Why is it a problem? How can the problem be solved? What needs to be done? How is it financed?</p>

<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
Chn. Harris will request links from Committee members for possible inclusion in the executive summary	Chn. Harris	Ongoing
Chn. Harris will draft the executive summary for Dr. Cunningham's review	Chn. Harris	6/10/14

**TOPIC**      **New Business**

**DISCUSSION**  
*(Chn. Harris)*      The Committee finalized the MIHC white paper and executive summary.

<b>ACTION ITEM(S)</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
Chn. Harris will present the MIHC white paper and executive summary to the EMFTS board for approval	Chn. Harris	6/18/14

**DISCUSSION**  
*(Chn. Harris)*      The meeting was adjourned.

**ATTACHMENTS**

- None

**NEXT MEETING**

- The next scheduled meeting is August 19, 2014.

**MOBILE INTEGRATED HEALTHCARE  
(COMMUNITY PARAMEDICINE)  
AD HOC COMMITTEE MEETING**

<b>Minutes from</b> December 16, 2014	<b>TIME</b> 3:00 PM	<b>LOCATION</b> ODPS – Division of EMS 1970 W. Broad St., Columbus, Ohio 43218
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<b>ATTENDEES</b>	<p><u>Committee Chairperson:</u> Deanna Harris</p> <p><u>Committee Members:</u> Mary Ahlers, Karen Beavers, Pam Bradshaw, James Davis, Geoff Dutton, Ernest Hatmaker, Holly Herron, JD Postage, Joshua Tilton, Joseph Toth, Dr. Paul Zeeb</p> <p><u>ODPS-Division of Emergency Medical Services (EMS) Staff:</u> Dr. Carol Cunningham, Melvin House, John Sands, Dawn Vondracek</p> <p><u>ODPS Staff:</u> None</p> <p><u>Guests:</u> Vincent Gildone, Bruce Graham, Adam Howard, Daryl McNutt, Barry Seth, Chief Chip Welch</p> <p><u>Absent Committee Members:</u> Matthew Dick, Tom Duffee, Dr. David Keseg, Bruce Shade, Dr. Brian Springer, Mike White</p>
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**AGENDA TOPICS**

<b>TOPIC</b>	<b>Welcome</b>
<b>DISCUSSION</b> <i>(Chn. Harris)</i>	The meeting was called to order at 3:00 PM by Chairperson Deanna Harris.

<b>TOPIC</b>	<b>Meeting Minutes</b>
<b>DISCUSSION</b> <i>(Chn. Harris)</i>	<p><b><i>ACTION:</i></b> A motion was made by Chn. Harris to approve the June 17, 2014, draft meeting minutes. Mr. Toth—First, Ms. Beavers—Second. None opposed. None abstained. Motion approved.</p> <p><b><i>ACTION:</i></b> A motion was made by Chn. Harris to approve the August 18, 2014, draft meeting minutes. Mr. Postage—First, Ms. Ahlers—Second. None opposed. None abstained. Motion approved.</p>

<b>TOPIC</b>	<b>Old Business</b>
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<b>DISCUSSION</b> <i>(Chn. Harris)</i>	<p><b><i>Progress of MIHC Stakeholder Group:</i></b></p> <p>Chairperson Harris gave a presentation at the Ohio Fire Chiefs’ Association conference, where EMFTS Board Chair Daryl McNutt, EMS Executive Director Melvin House, Chief Welch, Larry Bennett and several MIHC Committee members were in attendance. Although not all fire chiefs would want to implement MIHC in their areas, the concept was met with overall support.</p> <p>Since ODPS cannot be the primary promoter of MIHC, the Ohio Fire Chiefs’ Association has agreed to lead MIHC with the Fire Alliance support (the Fire Alliance is comprised of the Ohio Association of Professional Firefighters, Ohio State Firefighters Association and the Ohio Fire Chiefs’ Association).</p> <p>Thus far, there appears to be minimal opposition. Many different groups have been involved in discussions, including nurses, the Ohio Hospital Association (OHA), the Columbus Council on Hospitals, hospice, city managers and the Ohio chapter of ACEP. Due to the apparent lack of opposition, it was agreed to implement via the simplest path possible to take the first step to allow MIHC in Ohio. Therefore, the Fire Alliance and Ohio Fire Chiefs’ Association agreed that their recommended action would be to amend the law by striking the word “emergency” from the language resulting in an expansion of the definition of emergency medical services (EMS). The requirements and detailed actions to support MIHC cited by the Committee would then be incorporated into rule as opposed to law.</p> <p>The intent is to fit the law change into existing bill rather than drafting new proposed legislation. They are monitoring what legislation is going to move in lame duck session during November and December and are strategizing on which bill it can be added.</p>
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**Materials and Resources:**

**DISCUSSION**  
*(Chn. Harris, Ms. Bradshaw, JD Postage)*

Ms. Bradshaw and JD Postage shared the article “Nurses Balking About Proposed California Paramedicine Program” which can be accessed online at emsworld.com. The group reiterated Ohio’s intent to “fill in the gaps” in a community’s healthcare resources rather than “taking over” the duties held by other healthcare professionals. The Committee’s intent is to “enable” and not “mandate” MIHC programs.

Chairperson Harris shared and encouraged all to subscribe to the publication, *Integrated Healthcare Delivery*.

Chairperson Harris received a Power Point presentation from an OAMTA program that was created by Matt Zavadsky from MedStar.

Larry Bennett from the University of Cincinnati is holding a summit on October 10 and 11, 2014. Senator Bill Seitz will be speaking and has shown interest in leading the cause to the Senate. As part of the summit, hospital administrators will be meeting on October 10<sup>th</sup> to discuss their interest and role. Deanna will share the flyer to register. The summit is open to public, but requires registration.

JD Postage stated that a Mobile Integrated HealthCare Summit in Minneapolis will be held on October 23 and 24, 2014.

ACTION ITEM(S)	PERSON RESPONSIBLE	DEADLINE
Chn. Harris will email the resources shared at the meeting to any interested attendees	Chn. Harris	10/19/14
<b>DISCUSSION</b> <i>(Dr. Cunningham)</i>	Dr. Cunningham provided an update on potential funding sources and matrices for MIHC programs.	

**DISCUSSION**  
*(Chn. Harris)*

The first step toward the implementation of MIHC is to change the wording of the definition of EMS in the ORC. Following the completion of this step, the work from the MIHC Committee, subject to feedback received during the legislative process, will be used as the basis for incorporating MIHC into rule (OAC).

Chairperson Harris reiterated that MIHC cannot be practiced in Ohio until the ORC and OAC have been changed.

Chairperson Harris also reiterated it is imperative that Committee members communicate a consistent and unified message regarding the status of MIHC in Ohio to the EMS community and potential MIHC stakeholders. Committee members should use the white paper, the honeycomb matrix, and the Power Point presentation as a basis for sharing information to others.

Chairperson Harris stated the October meeting will be canceled. She anticipates sharing the MIHC stakeholder group’s progress at the next scheduled meeting in December.

TOPIC	New Business
<b>DISCUSSION</b> <i>(Chief Welch)</i>	Chief Welch of The Ohio Fire Chiefs’ Association provided an update on the legislative progress of the community Paramedicine Task Force, led by the Ohio Fire Alliance. Executive Director Michelle Fitzgibbons was unable to attend. As a result of many meetings with interested parties and in conjunction with making no changes to scopes of practice, the Task Force concluded to introduce community paramedicine legislation via the simplest means. ORC Section 4765.36, passed in 1995, allowed medics to work in a hospital emergency room environment. By building on a section of the ORC already providing for an exception, the Task Force proposes <b>adding</b> Section 4765.361 to the ORC to allow for community paramedicine as follows:

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4765.361

Authorized non-emergent services

An emergency medical technician—basic, emergency medical technician-intermediate, or emergency medical technician-paramedic may perform emergency medical services in a non-emergent basis if the services are performed under the direction of its medical director or cooperating physician advisory board.

**DISCUSSION**  
*(Chief Welch  
Cont'd)*

The titles are outdated, but they reflect the current wording in the ORC. Using the term “non-emergent” opens up Ohio EMS law to allow community paramedicine.

Chief said the Task Force hoped to find a legislative vehicle on which to tack on the amendment during this last lame duck session, but that did not happen. They are still looking for House and Senate sponsors to introduce it, and more than likely it will not be a stand-alone piece of legislation. Chief hopes to see some movement by the beginning of summer. The executive summary and white paper will be tools to share our vision of community paramedicine in finding sponsors and moving legislation forward. Additionally, once the legislation is passed, the MIHC ad hoc committee will be instrumental in writing rule.

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When pushing this legislation forward, we must reiterate that the intention of MIHC is to fill in gaps within communities that identify a need. Participation is not mandated, and programs that are developed are based upon community need.

It was suggested that we include updating the provider names to match the national nomenclature as part of this legislative process.

**DISCUSSION**  
*(Chn. Harris,  
Executive  
Director  
Melvin House,  
Dr. Carol  
Cunningham)*

Two alternative approaches to changing legislation were presented for Task Force consideration. In general, the ad hoc committee felt that simple, general wording in the ORC with supporting detail in the OAC is the best approach as it offers more flexibility for future changes.

Executive Director Melvin House expressed concern about the slimmed down, very broad proposed ORC wording, because it could potentially be used for unintended purposes, such as using EMS providers in prisons and schools. Additionally, there continues to be a concern about immunity.

Other committee members also express concern about immunity and about using the term “non-emergent” because it may be too broad.

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**ATTACHMENTS**

- None

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**NEXT MEETING**

- The February 2015 meeting has been CANCELLED.
  - The next scheduled meeting is tentatively scheduled for April 14, 2015.
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