



AGENDA

Eau Claire County

EMS Study Committee

Monday, November 4, 2024, at 3:00 p.m.

Eau Claire County Courthouse

721 Oxford Ave., Eau Claire, WI 54703 • Room 3312

A majority of the county board may be in attendance at this meeting, however, only members of the committee may take action on an agenda item.

Join from the meeting link:

<https://eauclairecounty.webex.com/eauclairecounty/j.php?MTID=m5574fee183be62f5119588ddaef3e067>

Join by meeting number:

Meeting number: 2538 328 5632 Password: bJ6xBHtB4H6

Join by phone:

Dial in: 415-655-0001 Access Code: 2538 328 5632

1. Call to Order and confirmation of meeting notice
2. Roll call
3. Public Comment
4. Review/approval of meeting minutes – **Discussion/Action**
 - a. October 7, 2024
5. County Authority to Levy for EMS – **Discussion/Information**
6. Municipal and EMS Transport Agency Interview Summaries - **Discussion/Information**
7. Initial tax levy estimate – **Discussion/Information**
8. File No. 24-25/085: Resolution authorizing the extension of the EMS Committee and Development of Countywide EMS program – **Discussion/Action**
9. Draft EMS Levy Resolution - **Discussion/Action**
 - a. EMS Service Boundary Map
10. Future Agenda Items –
 - a. Future Meeting - TBD
11. Announcements
12. Adjourn

Prepared by: Samantha Kraegenbrink – Executive Office Administrator

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters, remote access, or other auxiliary aids. Contact the clerk of the committee or Administration for assistance (715-839-5106). For additional information on ADA requests, contact the County ADA Coordinator at 839-7335, (FAX) 839-1669 or 839-4735, TTY: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.



MINUTES

Eau Claire County

EMS Study Committee

Monday, October 7, 2024, at 1:00 p.m.

Eau Claire County Courthouse

721 Oxford Ave., Eau Claire, WI 54703 • Room 3312

Present: Joe Alf (remote), Jake Brunette, Tyler Esh, Rod Eslinger, Kirk Dahl, Allen Myren

Others: Samantha Kraegenbrink – Committee Clerk, Kathryn Schauf, Bill O, Garret Z, Kirk Gunderson, Matt Jaggar, Jon Schultz, Jason Szymanski, Natasha Myre (remote), Jennifer Meyer (remote) Jen Meyer (remote), Dan Hanson (remote), Kitzie Winters (remote), Mark Renderman (remote)

Call to Order and confirmation of meeting notice

Chair Myren called the meeting to order at 1:00 p.m. and confirmed meeting notice.

Roll call

The roll is indicated above.

Public Comment

No members of the public wished to make comment.

Review/approval of meeting minutes

Motion by Rod Eslinger to approve the minutes as presented from February 27, 2024. All in favor, motion carried.

Introduction of Bill Oemichen (Professor of Practice-Law/Local Government Educator) and Garret Zastoupil), Community and Leadership Development Educator from Extension – Government Division

Bill Oemichen and Garret Zastoupil provided an introduction.

Levy Transfer Overview by Jason Szymanski, Director of Finance

Jason Szymanski provided an overview of levy transfer.

Updates and Next Steps

The committee was provided updates and next steps which includes one on one meetings with local stakeholders to discuss county-wide EMS, pain points, etc.

Future Agenda Items

- November meeting of this committee
- Resolution to the board in December

The meeting was adjourned at 1:26 p.m.

Respectfully submitted by,

Samantha Kraegenbrink – Committee Clerk
Executive Office Administrator

Co-Muni Code	Type of Service	County Name	Countywide EMS levy	Population (per 2020 census)	Avg per capita cost (levy/pop)	Total Levy Budget	Mill Rate per Equalized Value	EMS Levy per \$1000	Percent of Average Cost Per \$330,000 House	
04999	Grants	Bayfield County	\$220,400	16,220	\$13.59	13,123,505	3.496	3,753,502,200	\$0.06 2%	\$19.38
15999	County Operated	Door County	\$4,768,445	30,066	\$158.60	31,665,832	2.61040301	12130629600	\$0.39 15%	\$129.72
19999	County Operated	Florence County	\$1,538,967	4,558	\$337.64	4599862	6.48	946898500	\$1.63 25%	\$536.34
24999	County Contracts	Green Lake County	\$2,371,267	19,018	\$124.69	18332203	5.173	3543814300	\$0.67 13%	\$220.81
33999	County Operated (Lir	Lafayette County	\$193,524	16,611	\$11.65	10,131,287	6.1738	1,641,000,500	\$0.12 2%	\$38.92
35999	County Contracted	Lincoln County	\$1,505,366	28,415	\$52.98	15,658,766	4.443801	3,523,732,700	\$0.43 10%	\$140.98
39999	County Operated	Marquette County	\$1,600,651	15592	\$102.66	15,195,99	6.005	\$2,530,556,700	\$0.63 11%	\$208.73
40999	County Contracted	Milwaukee County	\$5,238,327	939489	\$5.58	291,434,132	\$3.03	\$96,037,594,500	\$0.05 2%	\$18.00
43999	County Operated (Ou	Oneida County	\$2,539,439	37845	\$67.10	19,081,305	\$1.73	11,007,662,100	\$0.23 13%	\$76.13
49999	County Operated (Ou	Portage County	\$2,878,219	70377	\$40.90	\$34,950,277	\$4.30		\$0.36 8%	\$118.80
54999	County Operated	Rusk County	\$709,673	14188	\$50.02	8,883,169.00	5.22	1,700,685,000	\$0.42 8%	\$137.70
57999	County Operated	Sawyer County	\$1,752,960	18074	\$96.99	\$14,386,859	\$2.68	\$5,376,954,500	\$0.33 12%	\$107.58
60999	County Contracted	Taylor County	\$1,904,433	19913	\$95.64					
69999	County Operated	Waushara County	\$2,083,567	24520	\$84.97	22,396,880	5.6739417	3,947,322,900.00	\$0.53 9%	\$174.19
TOTAL			\$29,305,238							
AVG			\$2,093,231	89,634	\$23.35					\$
	Assumed 2023	EAU CLAIRE CO	\$6,000,000	105710	\$56.75	47508175	4.22	11,255,610,700	0.53 12.5	\$174.90

Summary of EMS Providers

Personnel

- **Staffing Levels:** Most providers have a mix of EMT-Basics, Advanced EMTs, and paramedics. Staffing levels vary, with some providers having around 30-64 staff members.
- **Paramedic Availability:** Paramedic coverage is a common focus, with some providers ensuring at least one paramedic per shift, while others rely on paramedic intercepts from nearby services.
- **Challenges:** Recruitment and retention of paramedics and EMTs are ongoing challenges, with some areas experiencing a decrease in available personnel.

Volunteers vs Employees

- Most of our Communities are covered by full-time paramedic level ambulances. Two townships are primarily served by volunteer-based EMT basic ambulances.
- **Volunteer Reliance:** Many providers rely heavily on volunteers, with a few key volunteers handling the majority of calls.
- **Full-Time Staff:** Some providers have transitioned to having all full-time staff, while others maintain a mix of career and volunteer (paid-on-call) staff.
- **Recruitment Issues:** Recruiting volunteers is increasingly difficult, with some providers noting a lack of community interest and drive.

Recruiting and Retention

- **Retention Rates:** Retention rates vary, with some providers experiencing stable retention and others facing significant challenges.
- **Recruitment Efforts:** Efforts to recruit new EMTs and paramedics include partnerships with local technical colleges, social media outreach, and competitive wages.
- **Challenges:** Retention is often impacted by pay rates, with some providers needing to raise wages to remain competitive. The pandemic has also affected volunteer retention.

Training Challenges

- **National Registry Testing:** The National Registry Testing requirements are a common challenge, with concerns about the increasing hours required for certification.
- **In-House Training:** Many providers conduct in-house training, including online platforms, hands-on training, and chart reviews.
- **Ongoing Training:** Meeting ongoing training requirements while managing call volumes is a challenge for many providers.

Cost of Service

- **Budget Variations:** Annual budgets range from around \$2.4 million to \$5 million, with slight increases each year.
- **Revenue and Expenses:** Providers often face a gap between revenue and expenses, with some relying on subsidies and grants to cover costs.
- **Capital Costs:** Capital costs, including equipment and ambulance replacements, are significant challenges.

Profit

- **Profit Margins:** Profit margins are generally low, with some providers making around \$30K-\$50K per year, while others operate at a loss.
- **Reinvestment:** Profits, when available, are typically reinvested into the department for equipment and training.

Financial Reserves

- **Reserve Levels:** Financial reserves vary, with some providers maintaining reserves of around \$250,000, while others have minimal or no specific reserves for EMS.
- **Reliance on Subsidies:** Many providers rely on municipal subsidies and grants to maintain operations.

5 Year Equipment Needs

- **Ambulance Replacements:** Regular replacement of ambulances is a common need, with some providers planning replacements every few years.
- **Equipment Upgrades:** Upgrades to heart monitors, AEDs, and other critical equipment are planned, with costs often included in capital improvement plans.

- **Funding Challenges:** Securing funding for these replacements and upgrades is an ongoing challenge.

Gaps in County

- **Coverage Issues:** Some areas struggle with consistent coverage, particularly for paramedic services and first responder responses.
- **Mutual Aid:** Mutual aid agreements are essential to fill gaps, especially during multiple simultaneous calls.
- **Rural Challenges:** Rural areas face unique challenges due to lower call volumes and higher operational costs.

Interhospital Transports

- **Revenue Source:** Interhospital transports are a significant revenue source for some providers, while others perform very few transfers.
- **Challenges:** Payment for these transports can be challenging, with some providers struggling to get reimbursed.

Mutual Aid Calls

- **Frequency:** Mutual aid calls vary, with some providers responding to dozens of requests annually.
- **Dependence:** Mutual aid is crucial for managing high call volumes and ensuring coverage during peak times.

Municipal Support

- **Strong Support:** Most providers report strong support from municipalities, with financial assistance provided as needed.
- **Contractual Agreements:** Contracts with municipalities are common, with rate increases anticipated to cover rising costs.

Contractual Change

- **Rate Increases:** Rate increases are a common contractual change, with municipalities understanding the need due to levy limits.
- **No Major Changes:** No significant changes in service contracts are anticipated by most providers.

Additional Comments

- **Funding Needs:** There is a consistent call for increased funding to support EMS services, including staffing, equipment, and training.
- **Part-Time:** There is a desire for the potential to fund part-time first responders in rural communities to cover “shifts”
- **Community Paramedic Programs:** Some providers express interest in developing community paramedic programs and regional approaches to EMS.

Summary of Municipal Leaders

Who provides your EMS transport services – City/Village/Town or contract out?

- **Eau Claire Fire/EMS:** Many municipalities, including Altoona, Augusta, Brunswick, Luddington, and Pleasant Valley, rely on Eau Claire Fire/EMS for their EMS transport services.
- **Mayo Ambulance:** Some areas, such as Fairchild, use Mayo Ambulance, often with backup from Eau Claire Fire/EMS.
- **Chippewa Fire District:** This district provides services to one address, a coalition of towns, mainly in Chippewa County invest in this provider.
- **Mixed Providers:** Some municipalities have a mix of providers, including local fire districts and private services.

Are you finding challenges funding EMS due to levy limits? If there are challenges - Is this causing you to think about other options? If so, what might they be?

- **Funding Challenges:** Many municipalities face challenges funding EMS due to levy limits, with costs rising and budgets being stretched thin.
- **Exploring Options:** Some municipalities have issued RFPs (Requests for Proposals) to explore other options, but responses have been limited.
- **Impact on Other Services:** Funding EMS often takes away from other priorities, such as road maintenance.
- **Legislative Solutions:** There is interest in legislative changes to allow for more flexible funding options, such as forming EMS districts or increasing levy limits.

Do you think there is a need for more funding to support EMS?

- **Consensus on Need:** There is a strong consensus that more funding is needed to support EMS, particularly for wages, training, and equipment.
- **Rising Costs:** The rising costs of providing EMS services, including increased call volumes and higher standards of care, are driving the need for additional funding.
- **Pandemic Impact:** The pandemic has exacerbated funding challenges, with many volunteers dropping out and new ones not signing up.

Would your municipal board support a county tax levy for EMS?

- **General Support:** Most municipal boards would support a county tax levy for EMS, recognizing the financial benefits and the need for sustainable funding.
- **Conditions for Support:** Support is often conditional on seeing a detailed plan and ensuring local control over training and equipment is maintained.
- **Concerns:** Some municipalities are concerned about losing local control and the potential for increased taxes.

How broad is the support within the municipal board for EMS?

- **Strong Support:** There is broad support for EMS within municipal boards, with many considering it a top priority.
- **Competing Priorities:** While EMS is a priority, it often competes with other critical services like road maintenance and fire protection.
- **Mandated Service:** EMS is seen as a mandated and essential service, with strong backing from municipal leaders.

Level of service question – What do you like or what concerns do have regarding your level of EMS service?

- **Positive Feedback:** Many municipalities are satisfied with their current level of EMS service, praising response times and the quality of care.
- **Cost Concerns:** The primary concern is the rising cost of services, which puts pressure on municipal budgets.
- **Response Times:** Some municipalities have concerns about response times, particularly in rural areas where distances are greater.

What advantages and disadvantages do you see if the County takes on financing responsibilities for EMS?

- **Advantages:**
 - **Financial Relief:** Shifting the financial burden to the county could free up municipal budgets for other priorities.
 - **Unified Service:** A county-wide approach could create a more unified level of EMS service across the region.
 - **Efficiency:** Potential for more efficient and effective services through centralized management.

- **Disadvantages:**

- **Loss of Local Control:** Concerns about losing local control over EMS services and decision-making.
- **Implementation Challenges:** Uncertainty about how the transition would be managed and the potential for increased taxes.
- **Funding Allocation:** Worries about how funds would be distributed and whether all municipalities would benefit equally.

FACT SHEET

TO FILE NO. 24-25/086
AUTHORIZING THE EXTENSION OF THE EMS COMMITTEE AND
DEVELOPMENT OF COUNTYWIDE EMS PROGRAM

A special committee was formed to explore the viability of a countywide EMS system in Eau Claire County but has not yet completed their assessment and have not developed a countywide EMS program. Municipalities and local EMS providers generally support Eau Claire County providing EMS primarily because the County can fund the service by levying taxes outside of levy limits. Counties throughout the state are involved in EMS in varying ways.

The special committee is set to expire on December 31, 2024 and it is necessary to extend the term of the special EMS Committee until December 31, 2025 to allow develop a countywide EMS program for County Board review/action.

Fiscal Impact: Unknown

Respectfully Submitted,

Jake Brunette
Assistant Corporation Counsel

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3 AUTHORIZING THE EXTENSION OF THE EMS COMMITTEE AND DEVELOPMENT OF
4 COUNTYWIDE EMS PROGRAM

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6 WHEREAS, the Eau Claire County EMS Committee, who reports to the
7 Committee on Administration, was created on June 20, 2023 pursuant to Resolution 23-
8 24/019 and, after multiple extensions, the special committee is set to expire on
9 December 31, 2024; and

10

11 WHEREAS, the committee has been meeting on a regular basis reviewing
12 information on EMS and engaging with local municipalities and subject matter experts
13 to better understand the current state of EMS, how countywide EMS can be funded
14 including tax implications, and options for countywide EMS moving forward; and

15

16 WHEREAS, the committee, with recent assistance from UW-Extension, has
17 determined there is general support amongst municipalities and EMS providers for Eau
18 Claire County to provide EMS primarily because the County has the option to fund
19 countywide EMS by levying taxes outside of levy limits; and

20

21 WHEREAS, in order for Eau Claire County to provide countywide EMS, the
22 committee must develop an EMS program that takes into account how EMS will be
23 provided throughout the county; the extent of the county’s involvement including control
24 and oversight; how the EMS program will be funded; and how municipalities, EMS
25 providers, and the public will be impacted amongst other factors; and

26

27 WHEREAS, the committee requests additional time to develop a countywide
28 EMS program; and

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30 WHEREAS, subject to change, the committee intends to present details of the
31 countywide EMS program to the County Board in May 2025 with an anticipated program
32 implementation date in January 2026 if approved.

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34 NOW, THEREFORE BE IT RESOLVED; the Eau Claire County Board of
35 Supervisors hereby extends the Eau Claire County EMS Committee until December 31,
36 2025.

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38 BE IT FURTHER RESOLVED, the Eau Claire County EMS Committee shall
39 develop a countywide EMS program and report details of such program to the County
40 Board no later than May 31, 2025.

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ADOPTED:

Committee on Administration

AYE NAY ABSTAIN

Supervisor Nancy Coffey

Supervisor Connie Russell

Supervisor Gerald Wilkie

Supervisor Steve Chilson

Supervisor Katherine Schneider

Dated this _____ day of _____, 2024

Resolution 24-25/086

JCB