



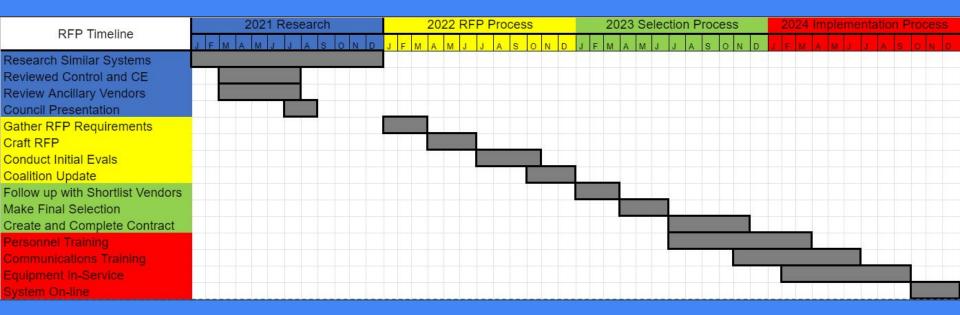
### Purpose

We are looking for your input on the discussed options.

Are there other options that council would like additional information on?

Is the city council comfortable with the current model or would you prefer it be brought in-house?

### Overview of the next three years



## Southeast Collin County EMS Coalition

The initial coalition agreement included Wylie, Sachse, Murphy, Lucas, St. Paul, Lavon, Parker, and Collin County

The current coalition consists of Wylie, Parker, Lavon, and St. Paul, and Collin County

### History of the Current Agreement







#### October 1997

This date marks the first coalition agreement with East Texas EMS

#### October 1st, 2014

On this date our current agreement for ambulance service went into effect.

#### Feb. 13th, 2018

On this date the agreement was transferred from ETMC to Paramedics Plus.

#### October 1st, 2019

The agreement had one automatic 5-year renewal term that began on this date.

#### October 1st, 2024

This marks the end of the current ambulance provider agreement.

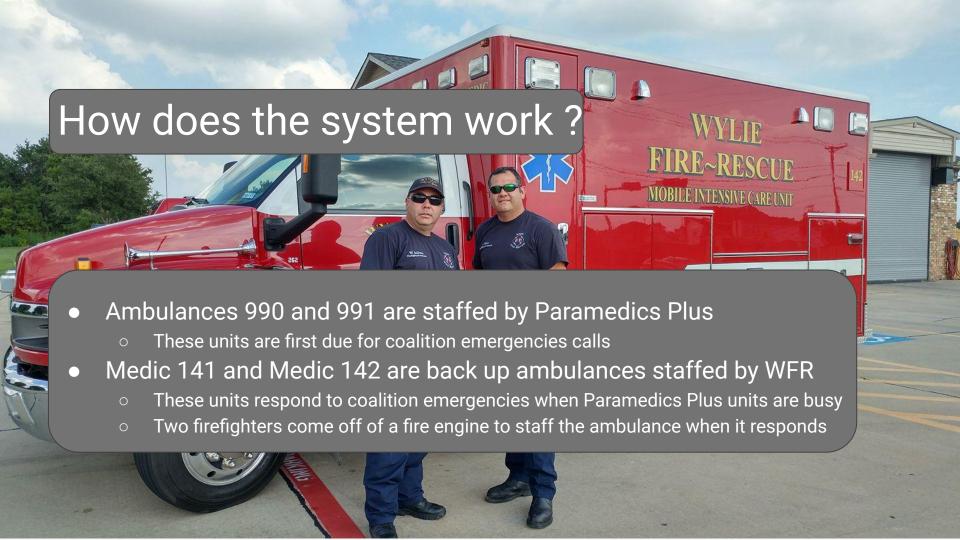
# 2021 Subsidy Breakdown

			Annual	Monthly		
City	Population	Percent	Subsidy	Subsidy	FY20 Pop	FY20 %
Lavon	4,210	6%	14,538.52	1,211.54	3510	6.00%
Wylie	51,730	80%	178,640.75	14,886.73	49500	81.00%
Parker	5,250	8%	18,129.98	1,510.83	4600	8.00%
St. Paul	1,090	2%	3,764.13	313.68	1090	2.00%
Collin County	2,610	4%	9,013.19	751.10	2569	4.00%
Total	64,890	100%	224,086.56	18,673.88		

### Current System

- All of our quints are cross-staffed with FF/Paramedics
- The apparatus are equipped with the same advanced life support equipment as the ambulances
- Our goal is to get a quint or an ambulance to the patient quickly in order to begin advanced care and initiate life saving support quickly.

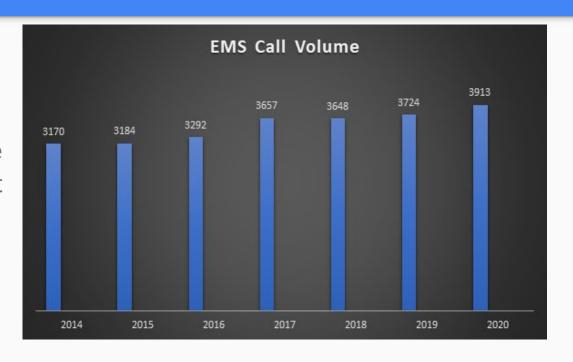




### **Growing Demand**

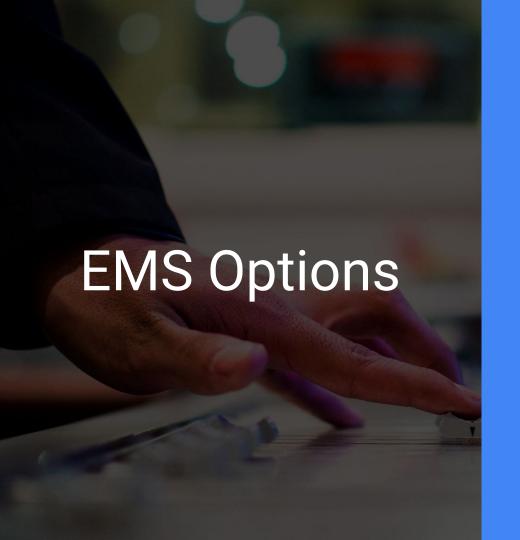
Our current ambulance contract expires in October, 2024.

We anticipate that EMS call volume will grow more rapidly over the next five years due to both Wylie and coalition demand.



### WFR Ambulance Call Volume- M141 & M142

- 2018-182 calls
- 2019- 205 calls
- 2020-310 calls
- 2021- 254 calls (First 6 Months)
  - o 508 projected Medic 141 & 142 calls



- Establish FD based
   ambulance service utilizing
   firefighter/ Paramedics
- Initiate RFP process with the goal of maintaining the current system (Private Vendor)
- 3. Establish a City of Wylie EMS Division
- 4. Become part of a larger system

# Option 1

Establish Fire-based ambulance service utilizing Firefighter/
Paramedics

This option focuses on Wylie Fire Rescue taking over all ambulance services using firefighter paramedics.

### Option #1 Fire Based EMS

#### Pros

- Most common municipal model
- Complete control and oversight of the system
- Employee retention will lead to better consistency
- Flexibility with staffing
  - Cross-trained employees
- Reduces wear and tear on apparatus
- Increased availability of fire apparatus

#### Cons

- Most expensive option
  - Additional staffing expenses
- Added responsibility of billing services
- Administrative functions brought in-house

#### Already in place

- State licensure for Personnel and apparatus
- Medication and supply vendor agreements
- Electronic Patient Care Reporting
- Technology
  - Heart monitors
  - Radios
  - Mobile Data Computers etc.

### **Necessary additions**

- Staffing
- Administrative support
- Ambulances
- Medical Control
- EMS Billing
- Biohazard disposal
- O2 Supply

# Option 2

# Initiate RFP process with the goal of maintaining the current system (Private Partner)

The City of Wylie has partnered with ETMC/Paramedics Plus for two decades. This unique model has been fiscally responsible and has provided our community with high-quality EMS. The current vendor has allowed Wylie Fire to have a significant amount of oversight. Option #2 presents the opportunity of continuing this model with a private vendor.

### Option #2 RFP Private Partner

#### Pros

- Familiarization
- Least amount of departmental transition
- Historically affordable
- Many administrative functions currently handled by vendor

#### Cons

- Anticipated cost increase
- Paramedics Plus does not have the same footprint or system support as ETMC offered.
- For profit status/longevity concerns.
- If another vendor is selected there will be several transitional challenges- current 24 year relationship
- RFP vendor exclusions

# Option 3

### Establish a City of Wylie EMS Division

This option focuses on the City of Wylie taking over emergency medical services by creating a new Emergency Medical Division. This EMS division would operate under the fire department but would employ only paramedics and EMT basics instead of utilizing firefighters.

### Option #3 Wylie EMS Division

#### Pros

- Complete control and oversight of the system
- Employee retention will lead to better consistency
- More affordable staffing than utilizing firefighter paramedics
- Larger hiring pool
- Dedicated EMS employees

#### Cons

- Added expenses to the current model
- All administrative functions brought in-house

### Already in place

- State licensure for Personnel and apparatus
- Medication and supply vendor agreements
- Electronic Patient Care Reporting
- Technology
  - Heart monitors
  - Radios
  - Mobile Data Computers etc.

### **Necessary additions**

- Staffing
- Administrative support
- Ambulances
- Medical Control
- EMS Billing
- Biohazard disposal
- O2 Supply

# Option 4

### Become Part of a Larger System

Option 4 involves contracting with a larger area system. This model is popular in some areas of the state. While it seems fiscally appealing, there would be significant changes to response times and fire department oversight.

### Option #4 Become part of a larger system

#### Pros

Least expensive of the options

#### Cons

- No dedicated Wylie units
- Longer response times
- Limited opportunity for Wylie Fire oversight

### Feedback on Proposed Options

We are looking for your input on the discussed options.

Are there other options that council would like additional information on?

Is the city council comfortable with the current model, or would you prefer it be brought in-house?

### Questions?



### Revenue

- EMS billing
- Revenue from coalition partners

### **Expenses**

**Implementation Cost** 

•	Medical Control	\$70,000 Annually
•	3 Ambulances	\$350,000 per unit  • \$1,050,000
•	Personnel x20  o Could be reduced by 6	\$2,080,000 Annually
•	Medications and supplies	\$10,000/ ambulance • \$30,000
•	Biohazard/Oxygen	\$2,400 Annually

\$3,232,400