

2018

TRI  TOWN
Emergency Medical
Service

2018 OPERATING BUDGET

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TRI-TOWN EMERGENCY MEDICAL SERVICE | 247 Pembroke St, Pembroke NH 03275

TRI TOWN Emergency Medical Service

2018 Budget

2017 SUMMARY

For 2017, Tri-Town EMS continued to implement plans to better serve the two towns, continuing the efforts set forth a few years ago. The Service continues to address employee compensation discrepancies, equipment and vehicle replacement, and general service improvements.

2017 is the last years where the majority of the Service employees will see a significant pay increase. In 2016 a Pay Wage Classification System was developed and adopted by the Tri-Town EMS Board of Directors. 2016 saw employee's pay increased when each employee was placed in their appropriate pay grade. In 2017, each employee's pay will be increased to their appropriate step within the pay grade. After 2017, employees will receive pay increases per the Wage Classification System with each year in each step being represented by the employee receiving a satisfactory annual evaluation. Employees will also receive a Cost of Living Adjustment (or "COLA") when so approved by the Services Board of Directors.

Earlier this year, the Service took delivery of Ambulance 8. This ambulance will be the primary ambulance for about six (6) years. Ambulance 8 was paid for in full using funds in the Service's Unspecified Fund Balance. Ambulance 3, the Service's other ambulance, is being used as a back-up ambulance for when Ambulance 8 is having maintenance performed and for those times when the Service can staff a second ambulance. It should be noted, that the plan is to utilize Ambulance for the On-Call Force in the near future.

In the first part of 2017, the Service started disseminating "Vial of Life" Kits. These are given to residents of both towns and consist of a form where people can write down critical medical information to be used by the Service and the Emergency Department, which decreases the amount of time the ambulance crew spends on-scene obtaining patient information. This program has been well received by both towns and nearly 500 kits have been given out in the first half of this year.

Also in the first part of 2017, the Service started mailing out our Privacy Practice (or HIPAA notice) with a survey card to all patients. This initiative meets our federally mandated obligation of providing our patients with our privacy practices and provides us with valuable feedback from our patients. It is with great pride that I report the overwhelming support for the Service by the residents of Allenstown and Pembroke and the high marks the Service has received on the care that is provided.

For the better part of a year, Tri-Town EMS has been working with the Town of Allenstown to prepare for an Active Shooter Event. On behalf of the Town of Pembroke, the Service applied for and received a grant for \$6,000.00 to be used for the purchase of protective and operational equipment to be used for an Active Shooter Event. The Service has received all the equipment and has started training.

Back in April of 2016, the Service started providing the required training needed by our staff as well as EMS providers for Allenstown Fire Department, Pembroke Fire Department and other area services. These trainings are generally well attended. The Service has been working with Concord Hospital and the New Hampshire Fire Academy to provide experts on different topics to provide the training. This collaborative effort allows us to provide our staff, and others, with a high quality of education. Starting



in the fall of 2017, the Service will be hosting an Emergency Medical Responder (EMR) course and will offer Emergency Medical Technician (EMT) and Advanced Emergency Medical Technician courses in the future. Additionally we now offer CPR classes to our staff, as well as employees and residents of both towns.

Tri-Town EMS has been active with the Old Home Day committee. In 2016 we offered to teach participants Hands Only CPR. This effort was a source of excellent public relations for the Service and we were able to teach almost 55 people how to perform Hands Only CPR. This year, we intend to continue on with this effort as well as have EMS educational items for children and allow for people to sign-up for First Aid / CPR courses. It is the ultimate goal of Tri-Town EMS to make Allenstown and Pembroke Heart Safe Communities and these efforts are part of our efforts in working towards this goal.

Since 2014, the Service has slowly been infusing accreditation standards into our policies and procedures as we feel it is important to incorporate nationally accepted best-practices into our organization. It is our goal to be an accredited ambulance service, thus demonstrating to the two communities that their Ambulance Service is providing the best possible care and adheres to the best practices of EMS. These standards address all aspect of an EMS operation, to include, management, finances, public relations, human resources, clinical, training, finances and planning, and communications. Accreditation refers to a third party who evaluates our operations against established standards and offers suggestions for improvement. Once accredited, the Service will need maintain the standards and show proof until the next evaluation. This process verifies the Service not only meets the standards initially, but maintains them. When providing medical care, it is important that those we serve trust and have faith in the service they are receiving.

CAPITAL IMPROVEMENT PLAN (CIP)

Since 2014, the Service has been working to replace the out dated and aged equipment and ambulances that were acquired with the dissolving of the Tri-Town Volunteer Emergency Ambulance Service in 2013. Most of the equipment was replaced when finances were available to do so within each year's operational budgets. With much of the equipment and the primary ambulance replaced, as well proposed purchases for new equipment of which the Service does not possess yet, and with the recommendation of members of the Board of Directors, the Service with the assistance of the Harold Paulsen, the Pembroke Fire Chief, developed the Service's initial Capital Improvement Plan.

Much of the equipment the Service uses, does not have a defined life cycle period. However, practical experience dictates that ambulances do not have a useful life beyond about ten (10) years. The vehicles become outdated and unreliable, which are two things that are not desirable when transporting sick and injured people. Taking into consideration the annual mileage our primary ambulance acquires (approximately 25,000 miles), a six (6) year period of primary service has been set for each ambulance. Once removed from primary service, the ambulance will be used in a back-up role for an additional six (6) until it is ultimately retired from service. It is important to state the Service maintains two (2) ambulances, one (1) in the primary role and one (1) in a back-up role.

After setting the ambulance life cycle to a total of twelve (12) years, it now becomes logical to look at the replacement of the major Durable Medical Equipment (DME) the service utilizes. The Service will strive to ensure that the DME being used is not out dated and is reliable. The next major DME is the Cardiac



Monitors. These devices are generally replaced by newer models every ten (10) to fifteen (15) years. A time period which encompasses our ambulance replacement cycle.

Patient moving devices such as the stretchers and stair chairs are not updated as frequently as the Cardiac Monitors, but are utilized on virtually every patient transport. The Service currently transports between 700-750 patients a year. That equates to about 4,700 patients being moved by each device during the twelve (12) year life of the ambulance (725 patients x 6 years PLUS 50 patients x 6 years). The stretcher will require replacement of major components at about the 3,000 patient point, which will be in the 5th or 6th year of its life.

The remainder of the DME the Service utilizes are used less frequently but when needed are critical to patient care and has a significant impact on the patient's ultimate outcome. For these pieces of equipment, the concern is not necessarily the day-to-day wear and tear, but rather the fact that they are housed in the ambulance and are exposed to all the movements and environments inherent with ambulance operations and as such may fail because of broken electronic connections or other mechanical failures. For this reason, and the lack of other data defining the life cycle of other DME, the Service plans on replacing all the ambulance's DME when the ambulance is replaced, thus setting the life cycle for each piece of equipment to twelve (12) years. We feel that this will provide us with the relative assurance that all our medical and patient moving equipment, will be reliable and current.

It should be noted that the Portable Ventilator will be discussed later in this proposal and is not currently being used by the Service. The following table shows each piece of equipment and vehicle that is part of our CIP and their initial costs, current replacement cost and estimated replacement costs.

TABLE 1

UNIT/EQUIPMENT	PURCHASED		2017	REPLACEMENT		EQUIP
	YEAR	COST	COST	YEAR	COST	TYPE
<i>Ambulance 3 (A3)</i>	2012	\$ 118,000.00	\$ 150,600.00	2022	\$ 324,176.00	VEH
<i>Ambulance 8 (A8)</i>	2016	\$ 254,000.00	\$ 254,000.00	2028	\$ 456,147.51	VEH
<i>Life Pak 15 (A3)</i>	2014	\$ 25,243.00	\$ 29,222.00	2022	\$ 37,295.00	DME
<i>Life Pak 15 (A8)</i>	2015	\$ 25,243.00	\$ 29,222.00	2028	\$ 49,980.00	DME
<i>Ferno Stretcher (A3)</i>	2014	\$ 11,650.45	\$ 12,423.00	2022	\$ 28,000.00	DME
<i>Stryker Stretcher (A8)</i>	2016	\$ 20,894.00	\$ 21,939.00	2028	\$ 39,400.00	DME
<i>Ferno Stair Chair (A3)</i>	???	\$ 2,600.00	\$ 2,668.00	2022	\$ 4,650.00	DME
<i>Stryker Stair Chair (A8)</i>	2017	\$ 3,640.00	\$ 3,640.00	2028	\$ 6,225.00	DME
<i>Lucas Device (CPR)(A3)</i>	???	\$ 14,000.00	\$ 14,854.00	2022	\$ 20,420.00	DME
<i>Lucas Device (CPR)(A8)</i>	???	\$ 14,000.00	\$ 14,854.00	2028	\$ 27,365.00	DME
<i>Portable Ventilator (A8)</i>	N/A	\$ -	\$ 13,000.00	2018	\$ 13,000.00	DME
<i>Braun Infusion Pumps (A3)</i>	2014	\$ 2,500.00	\$ 2,894.00	2022	\$ 3,693.00	DME
<i>Braun Infusion Pumps (A3)</i>	2014	\$ 2,500.00	\$ 2,894.00	2022	\$ 3,693.00	DME
<i>Braun Infusion Pumps (A8)</i>	2014	\$ 2,500.00	\$ 2,894.00	2028	\$ 4,950.00	DME
<i>Braun Infusion Pumps (A8)</i>	2014	\$ 2,500.00	\$ 2,894.00	2028	\$ 4,950.00	DME
<i>iSTAT Portable LAB (A8)</i>	N/A	\$ -	\$ 15,500.00	????	\$ 15,500.00	DME
TOTAL COSTS		\$ 499,270.45	\$ 573,498.00		\$ 1,039,444.51	



The next table illustrates the expected deposits (CIP Budgetary Line) and the expected expenditures. It should be noted that these values are estimates as excess in revenues and unexpended funds for each year will be used to first maintain an unspecified fund balance per Service policy and then the remaining amount will be applied to the Service's Capital Improvement Plan (CIP).

TABLE 2

2018 Unspecified Fund Balance (20% of Operation Budget)				\$ 167,000.00
YEAR	UNIT/EQUIPMENT	DEPOSIT	SPEND	BALANCE
2016	N/A	\$ -	\$ -	\$ -
2017		\$ 30,000.00	\$ -	\$ 30,000.00
2018	Portable Ventilator	\$ 120,000.00	\$ 13,000.00	\$ 137,000.00
2019	iSTAT	\$ 45,000.00	\$ 15,500.00	\$ 166,500.00
2020		\$ 45,000.00		\$ 211,500.00
2021		\$ 60,000.00		\$ 271,500.00
2022	A3, LP15, Stretcher, Stair Chair, Lucus, Infusin Pumps (2)	\$ 60,000.00	\$ 421,927.00	\$ (90,427.00)
2023		\$ 75,000.00		\$ (15,427.00)
2024		\$ 75,000.00		\$ 59,573.00
2025		\$ 90,000.00		\$ 149,573.00
2026		\$ 90,000.00		\$ 239,573.00
2027		\$ 105,000.00		\$ 344,573.00
2028	A8, LP15, Stretcher, Stair Chair, Lucus, Infusion Pumps (2)	\$ 105,000.00	\$ 589,017.00	\$(139,444.00)
2029		\$ 110,000.00		\$ (29,444.00)
2030		\$ 110,000.00		\$ 80,556.00

2018 BUDGET OVERVIEW

As the Director of Tri-Town Emergency Medical Service, I hereby submit a proposed operational budget for 2018 of *Eight Hundred and Eighty Six Thousand One Hundred and Fifty Nine Dollars (\$886,159.00)*. It is our goal to ensure the residents of Allenstown and Pembroke receive the highest quality pre-hospital care possible. This means we have the staff, training and equipment necessary to deliver the medical treatment needed by our patrons so we can have a positive effect on their medical outcome. Through committees, education and other programs, we are starting to get into aspects of preventative initiatives that have the intent to maintain healthy life styles and to provide directions for those who wish to change their current situation with addiction. As with years past, to include 2017, the 2018 budget addresses not only the direct costs of providing patient care, but also take into account all the fees and supportive functions necessary to adequately operate a high quality medical service.

The proposed budget for 2018 funds all the current full time positions with the current schedule our employees are working as well as all associated taxes, fees and insurance. By the end of 2017, all employees will be in their appropriate pay grade and step, with most of these employees not eligible for a merit-step pay increase in 2018. With the increasing work load being placed on the Service's Director and Assistant Director (both internal and external), it is becoming increasingly more difficult to manage the Service while assigned in the paramedic role of the ambulance. The 2018 budget allocates funds for



a per diem employee to be scheduled when the Director or Assistant Director is assigned to the ambulance. This will give the Service's management the ability to delegate the regular shift tasks to a non-management employee and the ability to triage down calls that do not require a paramedic while maintaining paramedic coverage and ultimately freeing up time for the Director and Assistant Director to address Service business. The 2018 Budget also allocates funds for full time and per diem employees to be in the role of educator for both monthly Service trainings and the anticipated Advanced Emergency Medical Technician Course.

Much of the remainder of the 2018 Budget allocates funds for legal obligations and allocates funds in order to maintain current programs and other already established aspects of the operations.

Funding for the 2018 Budget includes estimations for ambulance billings based on past years values, fees from paramedic intercepts, documentation requests, details and EMS courses (initial and refresher). Some funding will be transfers from Unspecified Fund Balance, with the remaining allocations being the responsibility of the two Towns of Allenstown and Pembroke, to be consistent with the Inter-Municipal Agreement, and is based upon the three (3) year average percentage of calls that occurred in each town. The three (3) year average through December 31, 2016 for Allenstown was 44.53% and for Pembroke is 55.47%.

REVENUE

The 2018 budget for TRI-TOWN EMS projects revenue from a variety of sources to include billing for ambulance services which accounts for approximately 39.8%, funds transferred from *Unassigned Fund Balance* shall account for approximately 12.2% of revenues, 2.3% of the revenue will be from miscellaneous sources, such as EMS details, paramedic intercepts and administrative fees, and the remainder 45.7% being provided by the Towns of Allenstown and Pembroke. Per the Inter-Municipal Agreement between the two towns, the funding requirements from each town will coincide with the percentage of calls that occurred in the respective town for a period looking back at the previous three years.

TABLE 3

MONTH	2013					2014					2015					2016				
	Allenstown		Pembroke		TOTAL															
	# of Inc.	%	# of Inc.	%	VOLUME	# of Inc.	%	# of Inc.	%	VOLUME	# of Inc.	%	# of Inc.	%	VOLUME	# of Inc.	%	# of Inc.	%	VOLUME
January	39	40.21%	58	59.79%	97	41	45.05%	50	54.95%	91	36	39.13%	56	60.87%	92	36	45.57%	43	54.43%	79
February	30	41.67%	42	58.33%	72	43	56.58%	33	43.42%	76	21	35.00%	39	65.00%	60	37	54.41%	31	45.59%	68
March	37	41.57%	52	58.43%	89	22	25.29%	65	74.71%	87	38	48.72%	40	51.28%	78	44	55.00%	36	45.00%	80
April	21	28.00%	54	72.00%	75	30	46.15%	35	53.85%	65	30	40.54%	44	59.46%	74	35	49.30%	36	50.70%	71
May	32	35.96%	57	64.04%	89	39	50.00%	39	50.00%	78	40	36.36%	70	63.64%	110	50	52.63%	45	47.37%	95
June	40	44.94%	49	55.06%	89	33	47.83%	36	52.17%	69	39	45.88%	46	54.12%	85	30	37.04%	51	62.96%	81
July	43	46.74%	49	53.26%	92	36	50.00%	36	50.00%	72	31	45.59%	37	54.41%	68	38	42.70%	51	57.30%	89
August	25	30.86%	56	69.14%	81	39	44.83%	48	55.17%	87	47	48.45%	50	51.55%	97	41	45.05%	50	54.95%	91
September	31	41.89%	43	58.11%	74	45	45.92%	53	54.08%	98	27	33.75%	53	66.25%	80	39	46.43%	45	53.57%	84
October	28	34.57%	53	65.43%	81	30	37.50%	50	62.50%	80	35	44.30%	44	55.70%	79	55	51.89%	51	48.11%	106
November	46	58.23%	33	41.77%	79	29	40.28%	43	59.72%	72	33	43.42%	43	56.58%	76	30	37.04%	51	62.96%	81
December	47	50.54%	46	49.46%	93	32	38.10%	52	61.90%	84	46	49.46%	47	50.54%	93	34	50.00%	34	50.00%	68
Total	419	41.44%	592	58.56%	1011	419	43.69%	540	56.31%	959	423	42.64%	569	57.36%	992	469	47.23%	524	52.77%	993
							838	42.54%	1132	57.46%	1970									
											1261	42.57%	1701	57.43%	2962					
																1311	44.53%	1633	55.47%	2944



Contributions from Allenstown, NH (2006-33790-00000): \$180,333.00 (-\$10,406.00)

Refer to Table 3 to see the three (3) year average of runs per community. For the three (3) years which ended on December 31, 2016, the Town of Allenstown, had a total of 1,311 EMS calls out of a total of 2,944 EMS calls between the two towns, which represents 44.53% of the combined call volume. Using the aforementioned percentage, the Town of Allenstown is responsible for providing \$180,333.00 to the TRI-TOWN EMS' 2018 Operating Budget. This represents a decrease of \$10,406.00 from the 2017 budget which was \$190,739.00.

Ambulance Billing – Revenues (2006-34096-00000): \$352,800.00 (+\$39,800.00)

Since the start of Tri-Town EMS in January of 2013, the Service has been working to establish a reasonable value to be use for Revenues from Ambulance Billing. In years past the projections were very conservative with adjustments being made each subsequent year to get a value consistent actual funds received. Up until 2016, the Service would use the amount of money collected between January 1st and December 31st as the revenue generated for that fiscal year. In 2017, for a variety of reasons, the Service now considers Revenue from Ambulance Billings to be that revenue that is generated between January 1st and December 31st. This means that the 2018 budget will continue to receive funds well after December 31, 2018. In 2017, the Service is still receiving payments on accounts from 2014 to 2016. For 2017, including revenue generated from pasts years, the Service is averaging just under \$7,300.00 per week in deposits. It should be noted that Tri-Town EMS contracts with ComStar Ambulance Billing to charge the appropriate payer for ambulance charges and to collect payment. ComStar provides the Service with weekly, monthly and annual reports, and any other special report the Service requests.

The following table shows the adjusted revenue, amount collected and amount outstanding for 2014, 2015 and 2016. It should be noted that in 2016, there was a rate increase as of January 1st.

TABLE 4

AMBULANCE BILLING SUMMARY <i>for</i> PAST YEARS					
	YEAR (\$/XPORT)		ADJUSTED CHARGES	RECEIVED	BALANCE
(11 Months)	6.5.1	2014 (\$444.68)	\$379,988.31	\$272,588.22	\$107,400.09
	6.5.2	2015 (\$445.33)	\$427,970.94	\$311,823.96	\$116,146.98
	6.5.3	2016 (\$490.74)	\$510,744.62	\$356,541.44	\$154,203.18
	6.5.4	TOTALS	\$1,318,703.87	\$940,953.62	\$377,750.25

For 2017, there is no major changes in our collection percentages, and as such, the projection for 2017, assuming an overall collections rate of 72%, the Service should bring in about \$362,000 for revenue



generated in 2017. For this reason, and with past data, the projected 2018 revenue value of \$352,800.00 is reasonable and slightly conservative.

Interest on Investments (2006-35020-00000): \$1.00 (\$0.00)

Currently TRI-TOWN EMS does not have any investments.

Miscellaneous Revenues (2006-35090-00000): \$20,390.00 (\$6,540.00)

This budgetary line accounts for the incidental revenues received from ancillary services performed by TRI-TOWN EMS, such as paramedic intercepts, administrative fees associated with providing documents upon request and for EMS coverage of events. The Service does not intend to expand these ancillary services, however these services are rendered in an effort to better serve the communities of Pembroke and Allenstown.

In 2018, the Service intends on hosting an Advanced Emergency Medical Technician (AEMT) Course, the anticipated revenues for this course are accounted for in this line. The AEMT course will only be run if a minimum number of student enroll as to ensure the course is financially neutral or is profitable.

The costs of these services must be accounted for in the budget even though they are funded by outside sources and as such are reflected in other Expenditure Lines.

The following table illustrates the expected revenue sources and the anticipated revenue being generated from each source.

TABLE 5

	<u>REVENUE SOURCE</u>	<u>ESTIMATED REVENUE</u>
1	Details	\$2,000.00
2	Paramedic Intercept	\$1,635.00
3	EMT/AEMT Refresher	\$2,105.00
4	EMS Course (AEMT)	\$14,400.00
5	Documentation Fees	\$250.00
	<i>TOTAL</i>	<i>\$20,390.00</i>

Contributions from Pembroke, NH (2006-39110-00000): \$224,635.00 (-\$1,997.00)

Refer to Table 3 to see the three (3) year average of runs per community. For the three (3) years which ended on December 31, 2016, the Town of Pembroke, had a total of 1,633 EMS calls out of a total of 2,944 EMS calls between the two towns, which represents 55.47% of the combined call volume. Using the aforementioned percentage, the Town of Pembroke is responsible for providing \$224,635.00 to the TRI-TOWN EMS' 2018 Operating Budget. This represents a decrease of \$1,997.00 from the 2017 budget which was \$226,632.00.

Transfer from Fund Balance (2006-33791-00000): \$108,000.00 (-\$81,500.00)

In 2016, the Service's Board of Director's adopted the policy on Unspecified Fund Balance. Using the higher of the values stated in the policy, the Service will attempt to maintain funds equal to that of 20% of the operational budget. The operation budget for 2018 is proposed to be \$886,159.00, with 20% of that equaling \$177,230.00. A value of \$167,000.00 was used in the Capital Improvement Plan (CIP), and



a portion of the remaining Unassigned Fund Balance, which is a cumulation of funds from excess in revenues and unexpended funds from years past, is proposed to be assigned to the CIP. The Service started budgeting funds to be added to the CIP in 2017.

At the time of this budget proposal, the Service has funds in Unspecified Fund Balance and as with the 2017 budget, one-time expenses, such as tuition reimbursement and the portable ventilator in the 2018 budget are proposed to be funded out of funds in Unspecified Fund Balance as to minimize the overall impact of the budget as a whole. Table 6 shows those expenditures and their associated costs that the 2018 budget proposes to be funded out of Unspecified Fund Balance.

TABLE 6

	<u>ITEM</u>	<u>COST</u>
1	Tuition Reimbursement	\$5,000.00
2	Ventilator	\$13,000.00
	<i>TOTAL</i>	\$18,000.00

EXPENSES

Full Time Salaries (2006-42152-11000): *\$214,777.00 (-\$8,316.00)*

TRI-TOWN EMS employs four (4) Full Time employees; the Service Director, Assistant Director and two (2) Full Time Paramedics. This model has significantly improved the stability of the schedule and has allowed for certain projects and educational opportunities to progress forward. This staffing model allows the Service to staff 24/7 paramedic coverage. Additionally, the Service Director has delegated projects to each Full Time employee as well as tasking them to prompt all other employees to complete the service required trainings. The full time staff are responsible for completing all assigned shift chores.

All full time employees are currently in their appropriate Grade and Step within the Service’s Wage Classification System. The 2018 Budget allocates appropriate funds to compensate our employees. A 1% Cost of Living Adjustment (COLA) was estimated for 2018. The Service Board of Directors is required to approve any COLA made to the Service’s wage classification system. The budget also adequately allocates funds to compensate the Service’s full time staff for holiday pay in a manner that is consistent with the Service’s policy.

All full time employees work a 24 hour on, 72 hour off rotation (24/72). This includes to some degree the Director and Assistant Director. This ensures no employee is burdened with working every weekend, and rotates the employees through the holidays. As such, the non-salary employees receive 8 hours of overtime as part of their base pay, and that component of their compensation is addressed in the Overtime Line. With the rotation, there are weeks where an employee only works 24 hours between Sunday and Saturday, and for that reason, the Full Time Employee Salary line is decreased.

The Service plans on hosting an Advanced Emergency Medical Technician (AEMT) Course in 2018 and will use some of the Service’s Full Time staff to teach the course. The Service has to account for this expenditure and subsequent payroll costs. The AEMT Course will predominantly be taught by the full time



employees of Tri-Town EMS and as such, their compensation for teaching the course is represented in this line.

TABLE 7

Director's Salary:	\$72,538.46
Assistant Director's Salary:	\$52,728.00
Full Time Paramedic (1):	\$38,432.16
Full Time Paramedic (2):	\$38,432.16
Holiday Pay:	\$7,969.20
Sick Time Buy-Back:	\$2,865.00
Teaching Time:	\$410.00
Rounding Adjustment:	\$0.89
TOTAL:	\$214,777.00

Per Diem Salaries (2006-42152-12000): *\$245,286.00 (+\$13,009.00)*

The Per Diem Salaries line allocates funds for the wages of the services' per diem and part time staff. This budget has funds for per diem and part time employees to attend and teach classes that are part of the NCCP program. Due to the increasing work load of the Director and Assistant Director, this budget allocates funds for a 3rd EMT to be added to the schedule for eight (8) hours on days the Director or Assistant Director is scheduled on the ambulance. This will allow for two employees to perform daily shifts tasks and trainings while the Director or Assistant Director attends to Service business. It will also allow for the Director and Assistant Director to triage calls down that do not require a paramedic, while still maintaining paramedic coverage. The third employee will also assist with the ability to respond a second ambulance on certain days, helping out with the Call Force when fully implemented. Finally this budgetary line also funds the call force. The following table shows the license levels, their applicable pay grades and the pay range.

TABLE 8

<u>License Level</u>	<u>Pay Grade</u>	<u>Pay Range (2017)</u>
Emergency Medical Technician (EMT)	8	\$13.57 - \$19.22
Advanced Emergency Medical Technician (AEMT)	9	\$14.38 - \$20.37
Paramedic	13	\$18.24 – \$25.78
Assistant Director / Paramedic	16	\$21.75 – \$30.76
Director / Paramedic	20	\$57,237 - \$80,785

Employees will now receive a Merit-Step raise during their anniversary month and it will be based upon a satisfactory evaluation with a Cost of Living Adjustment (COLA) made at a time which is consistent with the Town of Pembroke's policy. In 2017, all employees were brought into their applicable Step within their pay grade. Most employees are in year 1 of 3 for their respective steps.



TABLE 9

PD/PT Paramedics (Primary Amb. Position)	\$59,126.40
PD/PT EMT's, AEMT's & Paramedic's	\$131,728.40
Vacation, Sick and Personal Time Coverage	\$8,294.12
Training:	\$4,650.00
Holiday Pay:	\$4,752.00
Details (Revenue Shown in Misc Rev.)	\$1,088.00
3 rd Ride Time / Orientation (New Hires):	\$3,600.00
Call Force:	\$17,526.50
3 rd Employee (Assist Director/Assnt Director)	\$12,896.00
Rounding Adjustment	\$0.33
COLA:	\$1,624.25
TOTAL:	\$245,286.00

Overtime (2006-42152-14000) \$28,153.00 (+\$18,153.00)

The Overtime line in the budget addresses employee compensation for hours that are worked and are not accounted for in the Full Time Salaries and Per Diem Salaries lines. It is reasonable to expect that Full Time employees and Per Diem/Part Time employees alike will incur overtime or unscheduled time as a result of late calls, hold-overs, call outs, vacation and other time off coverage and vacancies. Furthermore with the change to the Full Time Employee's schedule to a 24/72 hour rotation, the non-exempted full time employees now have scheduled overtime as part of their schedule. Those hours are reflected in this budgetary line.

TABLE 10

Scheduled Overtime:	\$24,156.12
Unscheduled Overtime:	\$3,000.00
Training Overtime:	\$996.15
Rounding Adjustment:	\$0.73
TOTAL:	\$28,153.00

Health Insurance (2006-42152-21000) \$43,037.00 (- \$2,963.00)

The Service offers health insurance to the Full Time employees. The Service budgets for healthcare benefits for each of the four (4) Full Time employees and used the employee's current status (family, single, etc.), actual fees from 2017, for estimating the allocated funds for 2018 and added 15% for anticipated premium increases.

Dental Insurance (2006-42152-21100) \$6,000.00 (-\$1,155.00)

The service offers dental insurance to the Full Time employees. The Service will decrease from the 2017 figures for this line in 2018 and historically, the Service has not used all the funds allocated for Dental Insurance.



Life Insurance (2006-42152-21500) \$150.00 (-\$150.00)

TRI-TOWN EMS participates in the Town of Pembroke group life insurance plan and is Full Time employees are automatically enrolled.

Disability (2006-42152-21900) \$2,660.00 (-\$140.00)

The Service provides the Full Time employees with short term and long term disability insurance. This amount was decreased from 2017 to reflect actual costs.

Social Security (2006-42152-22000) \$30,270.00 (+ \$1,417.00)

The Social Security line item allocates funds to pay the Service's portion of the Social Security tax and is 6.2% of the Service's payroll.

Medicare (2006-42152-22500) \$7,519.00 (+ \$771.00)

The Medicare line item allocates funds to pay the Service's portion of the Medicare tax and is 1.54% of the Service's payroll.

New Hampshire Retirement (2006-42152-23000) \$27,476.00 (+ \$220.00)

All Full Time employees are enrolled in the New Hampshire State Retirement System, Group 1. This line item represents the Service's responsibility and is 11.31% of the Full Time payroll.

Uniforms (2006-42152-29000) \$6,500.00 (+ \$1,500.00)

The Service is allocating funds to replace worn uniform items for Full Time employees and active Part Time and Per Diem employees as well as out fitting new employees. There are also funds allocated to bulk uniform purchases such as hats and T-Shirts.

Training & Certification (2006-42152-29001) \$33,500.00 (\$27,182.00)

The Training & Certification line item allocates funds to provide training opportunities to the Service's staff. The Service has taken efforts during 2016 to increase the training that is available to the staff, initiating multiple educational opportunities to meet the re-licensing needs (NCCP) of the Service's providers and to improve the provider's skills and knowledge. Currently the Service subscribes to two (2) EMS magazines and the staff are required to read the designated article each month of which they get educational credit towards their re-licensing requirements. The goal is to provide the staff with different forms of training and education, to address all aspects of the operation. Tri-Town EMS works with area departments, Concord Hospital and the State, to create a diversity of quality training opportunities. This line item also allocates funds towards the recertification courses which are required every two years for EMS providers to re-license.

The 2018 Budget provides funds for the Service to run an Advanced EMT course and an EMT/AEMT refresher. It is the goal of the Service to enroll enough paying students to offset the cost of the course. However, the Service intends to continue with the course(s) if there is enough desire with in the Service and within the two towns.

This budget also allows for up to, \$5,000 to be used for Emergency Medical Service (EMS) license upgrades.



The last major change to this line is the addition of Accreditation. The 2018 Budget provides funds for the Service to have the Commission on Accreditation of Ambulance Services or CAAS, to come to our organization and evaluate the Service. The Service feels it is important to show the two communities that Tri-Town EMS has adopted the best practices of EMS into the organization and will continue to maintain those practices. By having CAAS accredit Tri-Town, we are essentially hiring a third party to come in and verify our adherence to those practices and during the evaluation process, the Service received suggestions on how to improve the Service and becomes part of a network of other EMS agencies for the betterment of those the industry serves. Once accredited, the costs for accreditation are contingent on the length of the accreditation which, depends on how well the Service meets the standards. Accreditation may be for 1, 2 or 3 years.

The following table shows the breakdown of the Training and Certification line.

TABLE 11

Paramedic Refresher Courses	\$800.00
Seminars and Trainings	\$1,500.00
CPR Instructor Course	\$125.00
Instructor I Course	\$700.00
Publications (JEMS & EMS World)	\$53.17
Guest Speaker for NCCP Training	\$250.00
Food for Trainings	\$250.00
Reference Material & Equipment	\$1,075.00
Advanced EMT Course (Books, Fees, Etc.)	\$13,186.25
EMT/AEMT Refresher	\$1,060.58
EMS License Upgrade	\$5,000.00
Accreditation	\$9,500.00
TOTAL	\$33,500.00

Legal Services & Consulting Fees (2006-42152-32000) *\$15,000.00 (+\$0.00)*

The service allocates funds for legal fees in the event legal services or an outside consultant is needed. This item was kept at \$15,000.00 which was the same as 2017.

Telephone (2006-42152-34100) *\$5,820.00 (-\$180.00)*

TRI-TOWN EMS provides a cell phone to the Director and the Assistant Director. This provides a way for the staff and those the Service does business with, a way to contact the Service administrators when they are not in the station. Also the primary ambulance has a cell phone to be used as a secondary communication device to contact Concord Fire Alarm and the receiving hospital (to include Medical Control). The ambulance's cell phone receives text messages from fire alarm given the responding crew the incident address and all incident times. In 2017, the second ambulance was assigned a cell phone as for the same reasons as the primary ambulance. Each cell phone is approximately \$49.00 per month. Each ambulance has a mobile WiFi which is used to transmit patient data to the receiving hospital and to allow for the EMS crews to complete their patient care report. The mobile WiFi is \$39.99 per month per device. The Service also pays for a phone line, internet service and cable service for the station. This service is through Comcast. The 2018 amount was adjusted down slightly to reflect actual costs.



TABLE 12

Service Cell Phones (4)	\$2,352.00
WiFi (2)	\$936.00
Comcast (Cable, Phone, Internet)	\$2,532.00
TOTAL	\$5,820.00

Contracted Billing Service (2006-42152-39000) \$18,000.00 (+\$2,250.00)

TRI-TOWN EMS contracts with ComStar to provide billing services for ambulance transports. ComStar charges a fee of 5% of collected funds. This line item takes into consideration the total amount of revenues received from ambulance billing which is slightly greater than the budgeted Ambulance Billing Revenue.

Accounting Services (2006-42152-39100) \$5,800.00 (\$0.00)

This line item allocates funds to be paid to the Town of Pembroke for the time associated with managing the service's finances.

Building Maintenance (2006-42152-43000) \$250.00 (-\$3,950.00)

This line item accounts for minor cleaning of the Service's spaces, funds for minor repairs and for the purchase of cleaning products and agents.

Ambulance & Monitor Leasing/Purchasing (2006-42152-44000) \$0.00 (- \$189,492.00)

Tri-Town EMS owns all of its Cardiac Monitors and Ambulances. There is no allocated funds for this line in 2018.

Liability Insurance (2006-42152-52000) \$7,500.00 (+ \$500.00)

The Liability Insurance line was increased to reflect the actual cost to the service in 2017.

Unemployment Compensation (2006-42152-52100) \$600.00 (\$100.00)

The Unemployment Compensation line was increased slightly for 2018.

Workers Compensation (2006-42152-52200) \$13,000.00 (\$1,500.00)

Primex³ is the contracted provider to document employee injury and reporting, as well as providing worker compensation insurance for the Town of Pembroke and subsequently TRI-TOWN EMS. This line item reflects the cost of this coverage and was based upon what the Service paid in 2017.

EMS Supplies (2006-42152-62000) \$14,500.00 (+ \$568.00)

This line item provides funds for consumable medical supplies. TRI-TOWN EMS receives a portion of the consumable supplies, at no cost, from Concord Hospital, the Service's medical resource hospital. Supplies include some of the Service's IV supplies, bandaging, some of the oxygen delivery devices, electrodes, and other items. The rest of the supplies are the responsibility of the Service. The Service used a figure of \$800.00 per month which is slightly higher than what the service is currently spending for supplies. As part of the current "EMS Supplies" line, but not specifically accounted for, is oxygen which accounts for



between \$100.00 to \$180.00 per month of expenditures. For 2018, oxygen replacement is being specifically addressed and budgeted for with a monthly allotment of \$110.00 per month. This increase in this line was done to address the increase in the costs of our supplies as well as our increasing call volume.

For 2017, Tri-Town EMS will continue to swap out expired or used supplies when either Fire Department requests the Service to do so.

Postage (2006-42152-62500) \$1,900.00 (\$900.00)

Postage for 2018 was increased to account for the cost of mailing out the Patient Privacy Notice and Patient Surveys a program that was made effective in early 2017. The postage line item is used for normal business correspondence.

Fuel (2006-42152-63500) \$6,000.00 (-\$1,000.00)

The budgetary line for fuel was decreased \$1,000 for 2018. In 2017 the Service is projected to be well below the allocated amount for this line in 2017. However fuel costs remain low and the Service feels it is important to ensure enough funds are budgeted in the event fuel prices return to \$3.00 to \$4.00 per gallon.

Office Supplies (2006-42152-68000) \$3,358.00 (-\$1,192.00)

For 2018, the Office Supplies line item allows for purchasing of office supplies and allows for the monthly fee for an all-in-one Copier/Fax/Scanner of which the Service is already using. Office Supplies line item allocates fund specifically for the toner for the color-laser printer the service uses and for printing fees associated with survey cards, EMS drop forms and privacy practice notices. This line was decrease to reflect actual costs from 2017.

Medical Equipment Maintenance/Replacements (2006-42152-74000) \$15,303.00 (+ \$10,305.00)

Contained within this line item are the service agreements for the current cardiac monitors and the stretchers.

The Service intends on purchasing two major pieces of medical equipment in 2018. The first is a portable ventilator which will allow the Service's Paramedics to apply patients with BiPAP, CPAP and mechanical ventilation. The purchase of a portable ventilation means the Service will have one device that can do all three treatments. Currently the Service uses a disposable oxygen driven device to put patients on CPAP and use a Bagged Valve Mask to perform ventilations when patients cannot breathe on their own. The Without a portable ventilator, we will not be able to perform BiPAP. CPAP pressurizes a patient's respiratory system, allowing for the opening of airway structures and alveolar sacs and can be accomplished with the equipment the Service uses now. The problem is for those patients who have complicated respiratory compromise, the added pressure, which is constants with CPAP, becomes an obstacle to breath against when they exhale. This leads to respiratory collapse and the patient requires endotracheal intubation and mechanical ventilation and will require admission into the ICU. This increases their costs and potential for adverse side effects such as pneumonia. BiPAP is used to assist with a patient respiratory status with the goal of preventing intubation and mechanical ventilation. This procedure will be allowed under the new protocols. The other aspect of the ventilator is for those patients who do required pre-hospital mechanical ventilation, this will allow for the specific delivery of oxygen



concentration and volume, which will decrease the possibility of hyperventilating the patient, blowing off too much carbon dioxide and thus adversely altering the patient's blood gases.

The portable ventilator is proposed to be purchased through Unspecified Fund Balance / Capital Improvement Plan in 2018 and has been put into the CIP.

Radio/Communications Equipment Maintenance & Repair (2006-42152-74001) \$1,000.00 (-\$4,450.00)

This line item allocates funds for the repair and/or replacement of the services communication equipment. In 2018, the Service is allocating funds for the purchase of one (1) new portable radio to be placed on Ambulance 3, our back-up ambulance and replace the current radio. The cost of this radio is proposed to be funded out of Unspecified Fund Balance.

Vehicle Maintenance & Repair (2006-42152-76001) \$5,500.00 (+\$500.00)

This line item allocates funds for the routine maintenance and unscheduled repair of the Service's ambulances. This line item was increased by \$500.00 for 2018.

Computer & Software Purchase & Maintenance (2006-42152-86000) \$2,000.00 (-\$1,250.00)

This budgetary line allocates funds to address the Information Technology (IT) needs of the Service. Budgeted for in 2018 is the subscription fee for "Iam Responding", a dispatch program being used by services in the Capital Area and is supported by Concord Fire Alarm as well as licensing fees for an online dispatch program which will allow the ambulances to have a Mobile Data Terminal (MDT) in them.

Medical Evaluation (2006-42152-74002) \$4,500.00 (-\$3,000.00)

Tri-Town EMS has an agreement with Concentra Urgent Care to provide pre-hire testing, post injury and illness evaluation, N95 respiratory fit testing and fit-for-duty evaluations. This line was decreased to reflect actual costs and historic data.

Future Equipment & Vehicle Replacement (2006-42152-00063) \$120,000.00 (\$90,000.00)

This line allocates funds to be transferred in to the Service's Capital Improvement Plan (CIP) described earlier in this budget.

Transcription Service (2006-42152-68001) \$800.00 (+\$800.00)

This is a new budgetary line, to allocate funds to be used to have the Service's business meetings transcribed.

BUDGET APPROVAL:

The final version of the 2018 Tri-Town Emergency Medical Service Budget was discussed by the Service Director and the Tri-Town Emergency Medical Service Board of Directors on September 13, 2017. The budget was approved by a 5-1 (1 obtained) vote of the Board members.



LINE ITEM NUMBER	LINE ITEM NAME	2017 BUDGET	2018 BUDGET	DIFF ('18-'17)	% CHANGE
2006-33790-00000	Cont. Allenstown	\$190,739.00	\$180,333.00	(\$10,406.00)	-5.46%
2006-34096-00000	Ambulance Billing	\$313,000.00	\$352,800.00	\$39,800.00	11.28%
2006-35020-00000	Interest	\$1.00	\$1.00	\$0.00	0.0%
2006-35090-00000	Misc. Revenues	\$13,850.00	\$20,390.00	\$6,540.00	47.22%
2006-39110-00000	Cont. Pembroke	\$226,632.00	\$224,635.00	(\$1,997.00)	-0.88%
2006-33791-00000	Fund Balance	\$189,500.00	\$108,000.00	(\$81,500.00)	-43.01%
		933,722.00	\$886,159.00	(\$47,563.00)	-5.09%
2006-42152-11000	Full Time Salaries	\$223,093.00	\$214,777.00	(\$8,316.00)	-3.73%
2006-42152-12000	Per Diem Salaries	\$232,277.00	\$245,286.00	\$13,009.00	5.60%
2006-42152-14000	Overtime	\$10,000.00	\$28,153.00	\$18,153.00	181.53%
2006-42152-21000	Health Insurance	\$46,000.00	\$43,037.00	(\$2,963.00)	-6.44%
2006-42152-21100	Dental Insurance	\$7,155.00	\$6,000.00	(\$1,155.00)	-16.14%
2006-42152-21500	Life Insurance	\$300.00	\$150.00	(\$150.00)	-50.00%
2006-42152-21900	Disability	\$2,800.00	\$2,660.00	(\$140.00)	-5.00%
2006-42152-22000	Social Security	\$28,853.00	\$30,270.00	\$1,417.00	4.91%
2006-42152-22500	Medicare	\$6,748.00	\$7,519.00	\$771.00	11.43%
2006-42152-23000	NH Retirement	\$27,256.00	\$27,476.00	\$220.00	0.81%
2006-42152-29000	Uniforms	\$5,000.00	\$6,500.00	\$1,500.00	30.00%
2006-42152-29001	Training	\$6,318.00	\$33,500.00	\$27,182.00	430.23%
2006-42152-32000	Legal Services	\$15,000.00	\$15,000.00	\$0.00	0%
2006-42152-34100	Telephone	\$6,000.00	\$5,820.00	(\$180.00)	-3.00%
2006-42152-39000	Contract Billing SVC	\$15,750.00	\$18,000.00	\$2,250.00	14.29%
2006-42152-39100	Accounting SVC	\$5,800.00	\$5,800.00	\$0.00	0.0%
2006-42152-43000	Building Maint.	\$4,200.00	\$250.00	\$3,950.00	-94.05%
2006-42152-44000	Amb/Monitor PMT	\$189,492.00	\$0.00	(\$189,492.00)	-100.00%
2006-42152-52000	Liability Insurance	\$7,000.00	\$7,500.00	\$500.00	7.14%
2006-42152-52100	Unempl. Comp	\$500.00	\$600.00	\$100.00	20.00%
2006-42152-52200	Worker's Comp	\$11,500.00	\$13,000.00	\$1,500.00	13.04%
2006-42152-62000	EMS Med. Supplies	\$13,932.00	\$14,500.00	\$568.00	4.08%
2006-42152-62500	Postage	\$1,000.00	\$1,900.00	\$900.00	90.00%
2006-42152-63500	Fuel	\$7,000.00	\$6,000.00	(\$1,000.00)	-14.29%
2006-42152-68000	Office Supplies	\$4,550.00	\$3,358.00	(\$1,192.00)	-26.20%
2006-42152-74000	Equip Maint/Rpl	\$4,998.00	\$15,303.00	\$10,305.00	206.18%
2006-42152-74001	Radio/Comms.	\$5,450.00	\$1,000.00	(\$4,450.00)	-81.65%
2006-42152-76001	Veh. Maint.	\$5,000.00	\$5,500.00	\$500.00	10.0%
2006-42152-86000	IT Maint/Rplmnt	\$3,250.00	\$2000.00	(\$1,250.00)	38.46%
2006-42152-74002	Medical Evaluation	\$7,500.00	\$4,500.00	(\$3,000.00)	-40.0%
2006-42152-68001	Transcription Serv.	--	\$800.00	\$800.00	N/A
2006-42152-00063	Equip/Veh. Repl.	\$30,000.00	\$120,000.00	\$90,000.00	300.0%
	TOTAL BUDGET:	\$933,722.00	\$886,159.00	(\$47,563.00)	-5.09%

The TRI-TOWN Emergency Medical Service 2018 Budget was prepared by:

Christopher Gamache, Service Director.

