



REMSA's Community Health Programs

Sparks City Council

November 24, 2014

Acknowledgment

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Health Care Innovation Award (HCIA)

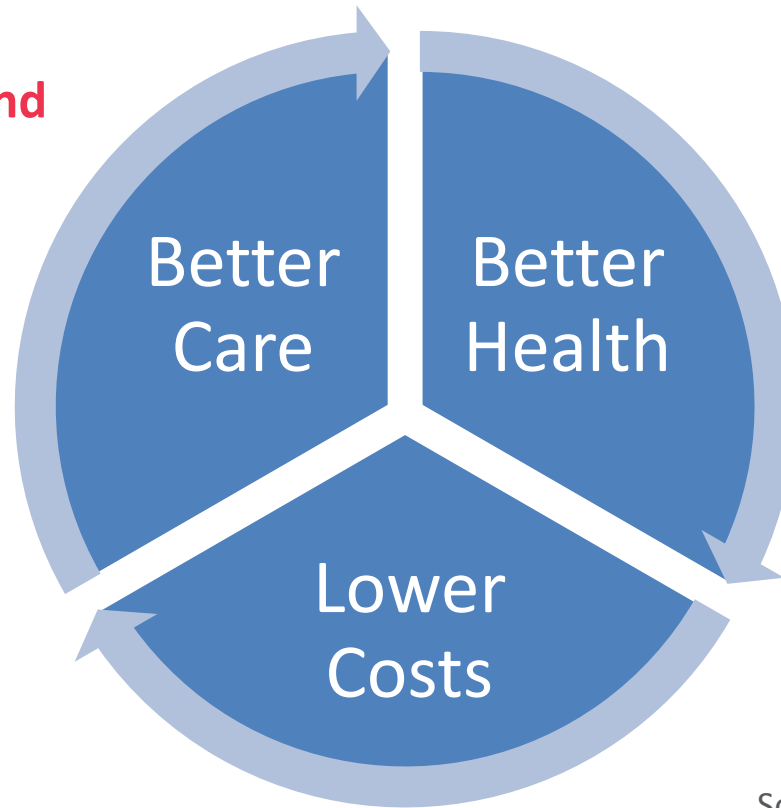
- Funded by Affordable Care Act
- REMSA awarded largest EMS grant, only urban EMS grant, only Nevada-based grants (in round one)
- **Community Health Programs** improve access to appropriate levels of quality care and reduce overall health care costs
- New health care personnel:
 - Community Health Paramedics
 - Nurse Navigators

CMS Innovation Center

“New models of care and payment that continuously improve health and healthcare for all Americans”

TRIPLE AIM

Improve the quality and
experience of care



Improve the health
of populations

Reduce per capita cost

Source: Berwick, DM, et al; *The Triple Aim: Care, Health & Cost*; May/June 2008; Health Affairs

Partners Critical to Success

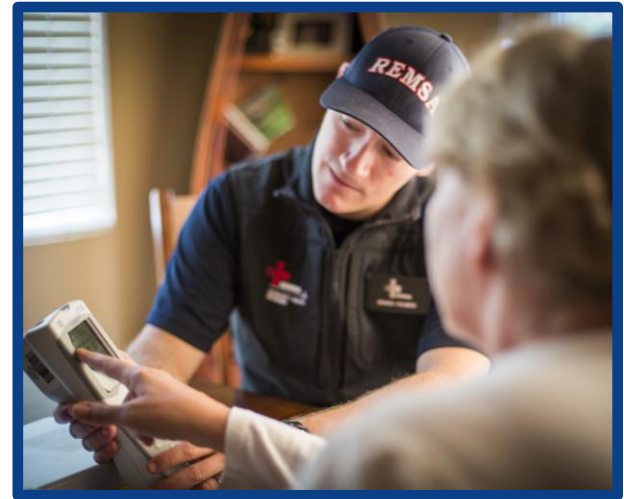
Health Care	Community	Data/Evaluation	Implementation
<ul style="list-style-type: none"> • Northern Nevada Medical Center • Renown Health • Saint Mary's Medical Center • Urgent Care Centers, Clinics, Medical Groups • WestCare Community Triage Center • NNAMHS* & WestHills • HAWC & HOPES • Sierra Nevada Pharmacy 	<ul style="list-style-type: none"> • State EMS Office • State Health Officer • Washoe County Health District • Senior & Community Groups • Reno Fire Department • Sparks Fire Department • Truckee Meadows Fire Prot District 	<ul style="list-style-type: none"> • Federal CMS Innovation Center • University of Nevada, Reno – School of Community Health Sciences • Nevada Center for Health Statistics & Informatics • RTI International – Independent Evaluator • Health Insight – Readmission Data 	<ul style="list-style-type: none"> • First Watch – Automated Data Triggers / Reports • KPS3 – Community Outreach • Priority Solutions – Emergency Care Nurse System/Low Code • ZOLL – Community Paramedic EMR • True Simple – Performance Improvement

A woman with dark hair is shown in profile, wearing a headset with a microphone. She appears to be in a professional setting, possibly a call center or office. The background is blurred, showing what looks like a computer monitor and some office equipment. The entire image has a red overlay.

Community Health Programs

Ambulance Transport Alternatives

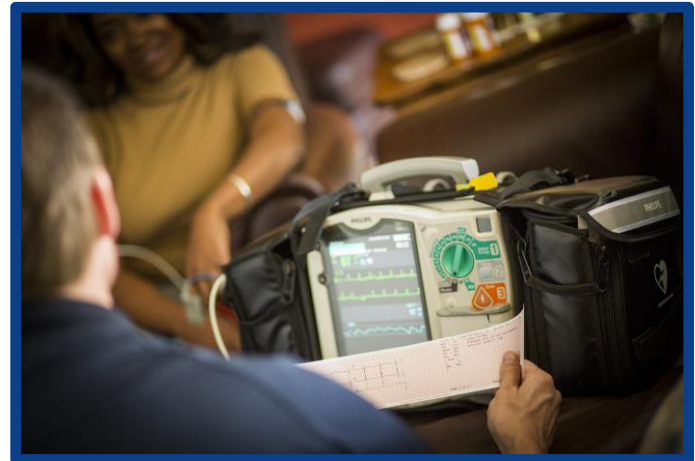
- Advanced assessment by field personnel of 9-1-1 patients facilitating **Alternative Pathways of Care** including transport to:
 - Urgent Care Centers
 - Clinics/Medical Groups
 - Community Triage Center
 - Mental Health Hospitals



Community Paramedicine

Specially-trained **Community Health Paramedics** provide in-home services to improve the transition from hospital to home, including:

- Medical care plan adherence
- Medication reconciliation
- Point of care lab tests
- Personal health literacy

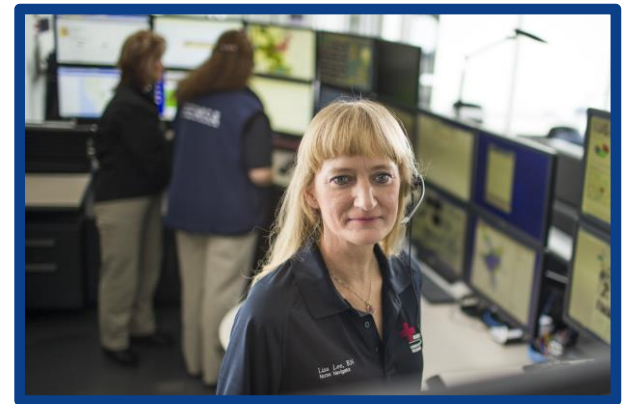


Nurse Health Line

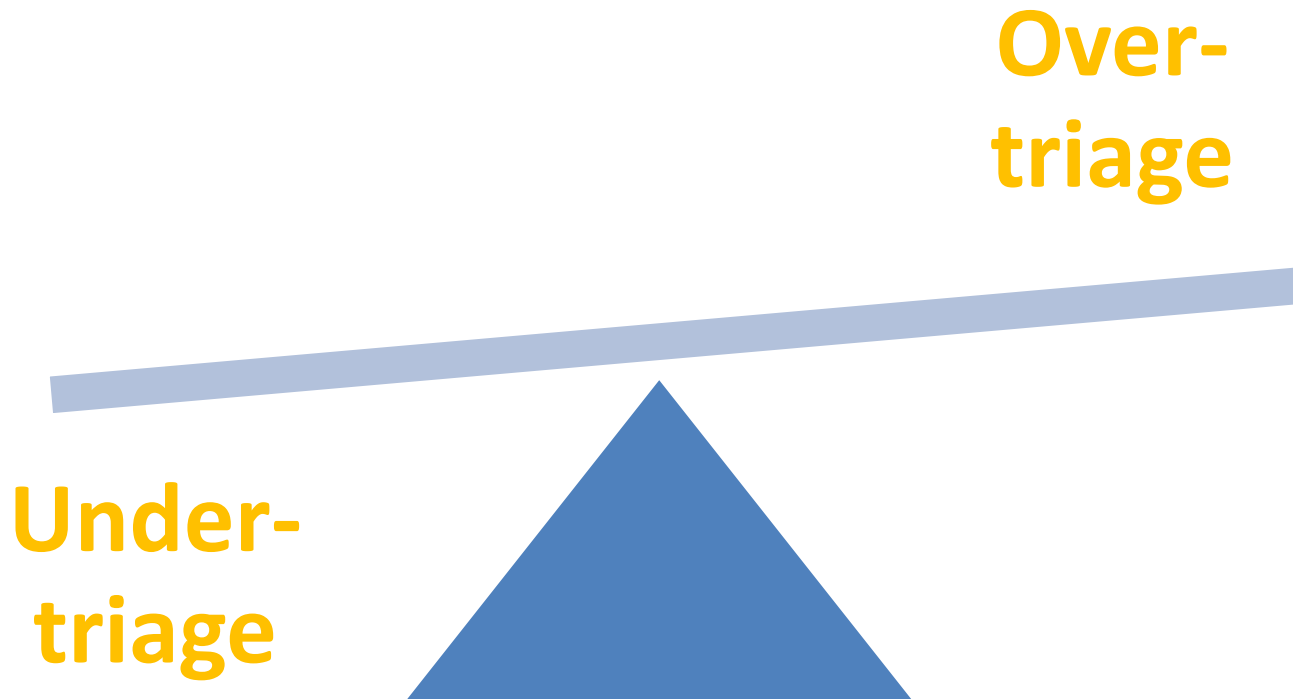
858-1000

Registered Nurses provide 24/7 medical guidance & triage patients to appropriate health care or community service:

- Protocol-driven Assessment & Care Guidance
 - Emergency Care Nurse System
- Recommended Level of Care
 - On-line Directory of Services
- 24-hour Phone Follow-up
- Access: Direct & Omega Protocol



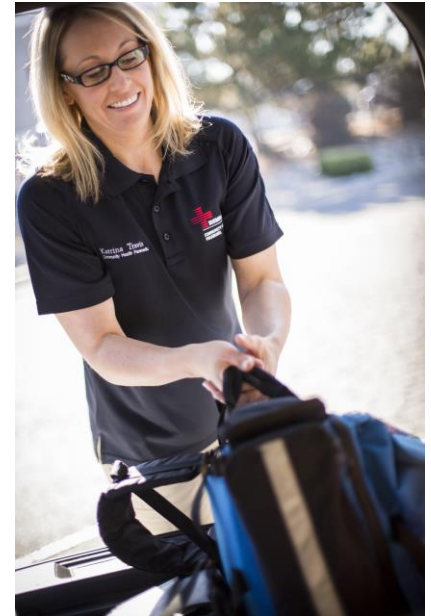
Three Interdependent Interventions Achieving a Balance



REMSA's Community Health Programs

1. Improve 24/7 access to assessment, triage, referral
2. Improve patient satisfaction scores & quality of care
3. Lower the total cost of care

Goal – Develop new payment models to preserve and sustain savings gained



AIM: Improve access to appropriate levels of quality care & reduce patient care expenditures

Emergency ambulance triage and treatment redesign

Broad community & partner engagement

Enable exchange of data and communications

Payment system reform

VOICES

THE OPINION OF THE RGJ EDITORIAL BOARD

REMSA plan may change health care as we know it

With or without the Affordable Care Act, health care in the United States is changing.

It has to. The rising costs of the system — which isn't really a system but a diverse collection of individuals, private organizations and public agencies often working together but not always — make it unsustainable.

Patients are increasingly uneasy, even when the system works for them; so are providers, who are caught in the middle of patients, insurance companies and the government.

So, change is coming whether we like it or not. With health care being used as a political football between Republicans and Democrats, we can only hope that the change is for the better, not the worse.

That's why residents of the Truckee Meadows should be pleased that the Regional Emergency Medical Services Authority, better known as REMSA, is in the forefront of the movement to find ways to provide better health care for Americans at a lower cost.

On Tuesday, REMSA announced that it had won a \$99 million grant from the U.S. Department of Health and Human Services to develop a program that will give patients more options when they call for "emergency" service. If it works, the program has the potential to change the way that many Reno-Sparks residents — and, eventually, all Americans — are treated.

■ ■ ■

If you call for an ambulance today, you will most likely end up in the emergency room. The ambulance service has no choice. Most important, that's the only way it will get paid by insurance companies and Medicare. It's also the most expensive place to be treated.

REMSA wants to change that. Its proposal to HHS is that it be allowed to take patients



Michael Flitt, a communications information technology coordinator at REMSA, tries out the FirstWatch early warning biosurveillance system at REMSA, installed in 2003, the third in the world. CANDICE TOWELL/REMSA

SNAPSHOT

ISSUE: Responding to medical emergencies

OUR VIEW: REMSA's plan would ensure that patients receive the most appropriate care when they call for an ambulance and save money, too.

where they'll get the most appropriate treatment — the emergency room, if that makes the most sense, or to an urgent care center or a physician's office, if that makes more sense.

There are a lot of questions that will have to be answered before the program begins.

REMSA plans to hire specially trained paramedics to focus on home care. A triage nurse will be on duty at the REMSA call center to help patients determine what kind of care they need. Protocols will have to be developed to ensure that decisions are based on what's best for the patient. The program will need the buy-in of doctors,

clinics and hospitals in the area. Insurance companies will have to be convinced that the program is in their best interests, too.

REMSA is in a good position to undertake a project of this sort, however.

Overseen by the Washoe Health District and a board that consists of medical professionals and hospital representatives, it has plenty of expertise to call on to answer the difficult questions and the cooperation of the medical community that it will need to make it all work.

That may be the reason that REMSA's proposal was one of just 107, out of more than 3,700 applications, awarded grants by HHS.

Patrick Smith, president of REMSA, calls the plan "a game-changer." If the game is going to change, it's good to know that we in Reno-Sparks will be the ones changing it.

YOUR VOICE: The Reno Gazette-Journal Editorial Board invites your comments on topics we write about. Go to RGJ.com and click on the "Voice" link to share your thoughts.

HEALTH CARE

REMSA gets \$9.9M grant

Program designed to sidestep costly ER treatment

By Brian Duggan
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The Regional Emergency Medical Services Authority was given \$9.9 million by the federal government to create a program that, among other features, will give patients the option of going to an urgent care facility instead of an emergency room.

The program, announced Wednesday, is projected to save the region \$10.5 million in health care costs over the next three years and will create 22 jobs.

The regional ambulance provider was one of 167 organizations around the country that were awarded the money by the U.S. Department of

Health and Human Services.

The department received more than 3,700 applications for the nearly \$1 billion program, according to REMSA officials.

U.S. Senate Majority Leader Harry Reid, D-Nev., issued a statement on Wednesday, saying he was pleased Nevadans will have new options to seek

AT A GLANCE

With \$9.9 million from the federal government, REMSA will roll out a program that will feature three key parts:

- It will allow paramedics to take patients to an urgent care or doctor's office. Instead of an emergency room, if the injury does not need that level of care, and will be compensated.
- A triage system will be set up in REMSA's 911 center to help patients determine what level of care they need.
- REMSA will train special paramedics to do home-based care for people suffering from chronic disease or needing help following a surgery. They will also conduct health outreach and education efforts in the community.

See GRANT, Page 4A

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REMSA projects \$10.5 million in savings through 2015 through an effort that started two years ago providing three services: a nurse healthline, community paramedicine and ambulance transport alternatives.

PROVIDED BY
REMSA



EMERGENCY SERVICES

REMSA: Service changes pay off

By Jason Hidalgo
jhidalgo@rgj.com

What happens when you turn paramedics into caregivers and divert patients in ambulances away from the emergency room?

Apparently, you save millions of dollars.

More accurately, you save \$10.5 million in area health care expenditures for three years, according to Regional Emergency Medical Services Authority.

That's the total amount of savings that REMSA projects through 2015 for its Community Health Programs effort, which started two years ago.

Created through a \$9.8 mil-

See REMSA, Page 6A

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