

**PERRY COUNTY COMMISSIONER AND COUNTY COUNCIL  
JOINT MEETING MINUTES  
November 19, 2024**

The Perry County Board of Commissioners and County Council met at 4:00 p.m. as was duly advertised. Commissioners: President Randy Cole (RC), Rebecca Thorn (RT) and Randy Kleaving (RK) were in attendance, and Council: President David Etienne (DE), Gale Garner (GG), Stan Goffinet (SG), Kelli Harding (Kelli), Keith Huck (KH), and Paul Malone (PM). Auditor Kristinia Hammack was also present. There was no *Sheriff, Attorney, or News Representative* in attendance.

The meeting began with the Pledge of Allegiance.

**Discuss EMS Funding Shortage for 2024**

DE stated the purpose of this meeting is to discuss the EMS shortage for 2024. The County has a contract with the hospital to provide EMS Services.

DE stated the County received a request for an additional appropriation in the amount of \$120,339.25, which carries through August and September. The Council had budgeted \$275,000 for 2024, which has already been spent plus an additional that the County had for equipment of approximately \$31,000.

RC stated he has reviewed numbers he received, and the County generally got a high of 229 runs and a low of 171. RC had asked the question about having two runs because primarily patients are taken to the hospital, and then they are transferred to another facility in most cases. RC stated he is assuming the County gets paid twice. Leonard Hahus, EMS Director, stated EMS sends the insurance or patient a bill regardless of where the destination. If the patient is picked up and taken to the hospital, they are billing somebody, whether it is the insurance or the patient. If the patient is then taken from the hospital to another facility or back home, as some returns are back to the nursing homes, that is a second run that is also billed for.

RC stated that in January, the gross revenue was approximately \$299,000, and contractual adjustments of \$304,000. In essence, the gross billing was completely offset by the contractual adjustments. RC further stated that he believes it was determined that these adjustments are not month to month correlated. Megan Hanks, Perry County Memorial Hospital Finance Manager, stated that some of that contractual adjustment was from the previous month. Also, it could be December claims paid in January. In addition, with the new billing company, the gross revenue was not as high and they are still having full claims processed with their old billing company.

RC stated that Hahus mentioned in a previous Commissioner meeting that some bills were billed late. He asked how that occurred. In September, the EMS had a contractual adjustment due to either not getting the bill in, or the billing company did not get the bill in, and the revenue was never received. Hahus stated that the part of the contractual adjustments, the billing company projects what the EMS should expect to get paid from that claim. Instead of writing off each month, it was written all off at one time, being August. Hospital CEO Jared Stimpson stated that there is a certain time frame to file claims in healthcare. If you do not file claims in that window, then insurance companies will not pay it. These filing deadlines vary by insurance provider. Stimpson further stated that they went back to the Accounts Receivable (AR) company and asked how many claims were written off due to being past the deadline, and there were only 20. They have approximately 2100 claims per year, so that was less than 1%. RC stated 20 claims at approximately \$300-\$400 a run. Stimpson stated it is common when AR vendors are switched, there are learning processes and developments in healthcare. It happens in every revenue stream and every AR company when you switch over to a new company. Sometimes there are some issues with pairing and credentialing the EMS insurance companies between the hospital and the new company. RC asked if the AR company is the same one that Deaconess uses, and Stimpson confirmed this. Stimpson further stated that in 2022 with the old company, EMS collected \$.16 for every dollar billed. At that time, Deaconess EMS was using Quick Med Claims, who EMS uses now. Deaconess was getting \$.20 so that is why the decision was made to switch, to get more money. Stimpson stated EMS is now collecting \$.26.

RT asked that the EMS walk through the policy, from the time of completion of the ambulance run all the way through to when it is reported to the billing company. Hahus explained the process. RT asked how the entire process is tracked and the dates confirmed as to the ambulance run charting complete submission to billing and date received as well as billing completed? Hahus explained the quality assurance (QA) process. The insurance company is sent the bill from the billing company. If the patient does not have insurance coverage, the bill is sent directly to the patient.

RT asked the cost to outsource versus keeping collection money in Perry County by employing personnel, how does that compare? Hahus stated by using Quick Med for the billing purposes, and they get 5.5% on what they collect, they only get paid for what they collect, not of what is actually billed. RT asked how long has the EMS billing been outsourced, and Hahus stated Quick Med took over billing January 1, and before Quick Med it was Great Lakes, who started in 2021. A third party for billing has been used for approximately four years. Prior to that, it was done in-house. Both Great Lakes and Quick Med only do EMS billing, which allows them to keep up with changes in Medicare and Medicaid requirements and billing practices.

DE asked if a greater return was received by outsourcing, and Stimpson responded that with Quick Med Claims, EMS collects \$583 per claim, and prior they collected \$460.

Kelli asked how the staff pay has progressed as far as staffing, and Stimpson responded that when he took over in May 2023 as CEO, in the prior twelve months they had zero paramedics, and since then they have hired six paramedics and eight EMTs. RC asked how many trucks they use per day, and Hahus stated two truck a day, one in town and the other at the North Station. Two out of three days they have one ALS truck and one BLS truck, one of the three days they have two ALS trucks. The BLS truck is out North due to the higher call volumes are here in town. KH asked if this is due to personnel, and Hahus stated they do not have enough paramedics to staff two on every shift. Hahus stated counting himself, they have five full-time paramedics.

RC stated that if there was a third ambulance, the loss numbers would be greater due to not having an increase in calls plus the personnel costs. Hahus responded correct.

RC asked if they know how much it costs per ambulance to have it staffed and operational? Hahus was not sure but could find out.

The current additional appropriation requested is \$120,000, which will just cover through three-quarters of the year. Hahus stated he just received the October Profit and Loss Statement, and it is a loss of \$26,000, which they will be asking for from the County. RC stated that the County would be looking at \$500,000 in subsidies with running two trucks. Hahus stated that in the first of 2024, three trucks were being ran up until March or maybe some of April. This was not done every day, but probably more often than not. Hahus stated since cutting back to only two trucks, the cost has obviously gone down.

RC asked Hahus if Perry County does their own transfers, or do they have a third party come in and do the transfers out, and Hahus responded most of the time, Perry County is doing the transfers. It could depend on the severity of the case and what they have available.

RC stated that he knows the County has a relationship with Deaconess, and asked if the hospital ever asked them what Perry County is doing is good and areas to improve? Hahus stated he reaches out to their coordinator or director to bounce off ideas or inquire as to how they do some things. RC is curious if there is another way to purchase drugs or to buy things, just having another set of eyes by somebody that is in the business. Stimpson stated that their biggest expense is salaries. Hahus stated they order their drugs through the hospital and get them for their costs. Currently, the trucks are carrying 47 medications every day on all five trucks. Hahus estimates each truck has \$250-\$300 worth of medications or drugs on them.

RK asked Stimpson if approximately 70% of the expenses are for salaries, and Stimpson responded approximately 66%. Year to date, they have expensed \$1 million dollars in salaries, and with benefits it is \$1.3 million.

RC stated that only \$285,000 was budgeted, and there needs to be discussion as to how many ambulances the County wants to have on the road. He stated that obviously this was not budgeted significantly. RC stated that in 2023 they were budgeted \$275,000 plus an additional \$25,000 was given to increase salaries, for a total of \$300,000. Now in 2024, EMS is looking to need \$500,000. RC asked if the additional ambulances on the road the first of 2024 caused the additional \$200,000?

DE stated occasionally there will be a month where the EMS shows a profit, and asked Hahus what he attributes that to? Hahus responded he believes in April they had a low volume month, and significantly more in May.

RC asked Hahus what percentage is Medicare/Medicaid, and what is private insurance pay? Hahus responded they do know the actual number, but just by guessing the Medicare/Medicaid is the bulk of it. RC stated when he visited the hospital in the past, he was informed that Medicare/Medicaid is 67% and the revenue was approximately one-third. RC stated that in January, he believes there is an increase from private pay that is State mandated. He is curious as to how that will impact the EMS budget. Hahus was not aware of this State mandate, but it would obviously be a substantial increase to revenue. However, Hahus stated with commercial or private insurance being such a small portion of their patient population, how much of an effect it will actually make is unknown.

Stimpson stated that last year, Perry County EMS had a strategic planning meeting with Deaconess, and the strategic planning director shared the future market growth in Perry County. It was stated that in five years, the 65 and older population is going to increase 20% in Perry County. That equates to one thousand more people in Perry County that are 65 or older.

RK stated that back approximately 10 years ago, EMS had one ambulance and a call-in crew. It took approximately 20 minutes to get that call-in crew to get in, to the truck, and go. At that time there were several complaints from the citizens of Perry County that it took too much time to get an ambulance there, and sometimes they had to get an ambulance from another county. EMS is a service that the County has to pay for. The County worked hard to get the North Station completed that was promised to the citizens when the highway garage was built. RK stated that we ask people to come to Perry County to live, and this service needs to be provided.

SG asked how employee retention stands, and Hahus stated since he took over in April 2024 as the director, there has been one paramedic that started in June, but he has left to go fly with Airvac. Hahus feels they are doing well with retention, they received a pretty substantial pay raise in June, which drew in several part-time PRN staff who wanted to come and work full-time due to the pay rates.

SG stated that on the P&L statement, there is a line-item label bad debt. He asked how much of that bad debt is sent to a collection agency, and is there a line item when the collection agency collects the money? Hanks stated that it lowers the bad debt amount, it does not show as a separate line item. In addition, lowering of the bad debt occurs for the month the money is collected.

RC asked Hahus if a call-in crew is an option, and are there enough paramedics and EMTs that live within our County? If a transfer needs to occur, this crew could be called in which would leave the other two ambulances available. Hahus responded this has been discussed as to how this would work, and right now they do not have the PRN staff to do this. Therefore, anyone on-call is going to be a full-time employee that just happens to live in town. They would not want someone who lives in Branchville that would take thirty minutes to get in town to do the call. These individuals would have to be paid to be on call, a call sobriety fee, and then they would be making time and one-half once they come in. This would not be an advantage to do this. A decision has not been made, but it has been talked about.

RC asked how many calls are received to help someone get back in their chair, or fall and cannot get back up, and Hahus responded a bunch. RC asked if these calls are charged an amount, and Hahus responded yes and no. Hahus stated anytime patient contact is made, a chart is submitted. In this chart, it can be either transported or they did not. Transport has their fee schedule based on the level of service and the mileage. A treat with no transport, where the EMS is actually performing something on scene, and then letting them go is another fee schedule. Many insurance companies do not pay for this, so the bill gets sent directly to the patient. Sometime they pay, sometimes they do not. Hahus stated there is also what is called an evaluation only or assist. This would be someone who possibly fell out of their chair and needs help getting back up. Hahus stated there is a small fee for this that is billed to the insurance, and if they do not pay, the patient does not see the bill.

RC asked if EMS showed up and provided some type of medical services, and they choose to stay at home, is there a liability? Hahus stated it depends on what type of treatment that is performed. They have a set of protocols that states if the EMS performs any interventions except for ABC, minor interventions, trauma dressings, anything outside of these two or three items, there is a whole other process. EMS will try to do everything they can to get the patient to go to the hospital due to if they needed something done at home, then they are sick enough that they needed help, and should be evaluated. Hahus further stated that there is a refusal form that if someone is very adamant that they do not want to go to the hospital, this form is completed which states EMS was there, helped the best they could, and the patient did not want to go with them. EMS can not be sued.

RC wanted to make sure the ambulance service is not used as a stop gap to go to the emergency room. If an ambulance is called and home service is given, versus having to go to the emergency room.

KH asked Stimpson that if the Commissioners and Council plus the incoming of both did not feel that EMS was working out, would he have an issue of the County bidding this out? Stimpson responded if they feel someone else could manage EMS better, then he would be okay with that. He does not really want to give it up. KH stated that he feels the Commissioners and Council would find out it would cost quite a bit more, but that is what they need to see. RK stated outsourcing this from the hospital would never work. The hospital is the expert in this field.

Kelli asked if there is a way to find out what is the cost to run one truck for 24 hours fully staffed? Hahus asked if she is wanting a salary overview, and Kelli responded salary and whatever is used. Hahus stated he will try to get that to her.

Kelli asked if the wages are still comparable to surrounding areas with the wage increase in June, and Hahus responded yes. Kelli stated she can see the improvements with EMS since she was elected to the Council. The pay is better, there are staffing improvements, and the equipment is better and the Council is starting to plan better for the equipment.

RK stated that a year and one-half ago when the EMS budget was submitted, at that time approximately \$430,000 was requested for 2024. RK further stated that if \$430,000 would have been budgeted, the amount would be really close to what they asked for. RC stated no, the County budgeted \$285,000 plus another \$120,000 requested just to get through September.

RK stated the hospital did its homework, and a number might have been used in budget just to get the budget balanced, with plans to come in at a later date and request additional money. Kelli stated she believes there were costs from other areas that had to be budgeted, which lowered the amount for EMS. She stated she prefers not to do this in budget, it should be closer to what is realistically needed.

RC stated that the County used to have \$60,000 set aside for an ambulance or an ambulance lease, and now the County is using that for subsidies. RC stated there will come a time when the ambulance will need to be replaced again. Auditor Hammack stated that is why the Council is putting \$100,000 back in 2025. RC was glad to hear that.

Auditor Hammack stated that the County, with this additional appropriation of \$120,339.25, will pay the EMS P&L for August and September. The October P&L was just given to the County, and it is for \$26,335. If the Commissioners do an additional for the October amount plus the November P&L, in order to get that paid out in 2024, she would need this by December 4<sup>th</sup>. DE asked if this can be encumbered, and Hammack stated she has to have the P&L in order to encumber it. Hammack stated an additional can be done for October and November, and if the total amount is not used, then only what is needed is paid out. Kelli stated either that or not encumber and then come back in March for the additional. Hammack stated that coming back in March would cut into the 2025 budget.

There was discussion between the Council and Commissioners if the Commissioners want to approve the \$120,339.25. This would then have to be advertised by December 4<sup>th</sup>. Hammack stated the Commissioners can increase the amount, as it is not an advertised amount; it would include August, September, October, and an estimated amount for November for the additional as this is just a department approval. Hammack stated the advertised amount can not be raised. Hammack further stated the amount

needed to get through October would be \$146,674.25. Hanks stated EMS averages approximately \$40,000 per month, and Hammack stated with the additional \$40,000, the total would be \$186,674.25.

RC stated the Council needs to determine the funding, as all the Commissioners do is approve it. He feels the Council needs to look where they are at, what kind of accounts have money in them, and then possibly split the amount from various accounts. RK stated the Commissioners could go ahead and approve the \$190,000, and RC stated they could do this without having a funding number.

RK made a motion to approve \$186,674.25 subject to the Council making the determination what resources are available, seconded by RT. Motion carried 3-0.

The meeting was adjourned at 5:26 p.m. CST.

KH made a motion to adjourn, seconded by PM. Motion carried 6-0.

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Randy Cole  
President

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Rebecca Thorn  
Vice-President

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Randy Kleaving

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David Etienne  
President, County Council

*Minutes reviewed by:*

*Kristinia L. Hammack, Auditor*

*Minutes prepared by:*

*Leisa M. Ecker, Deputy Auditor*