



# BEMS PULSE

Arizona's Bureau of Emergency Medical Services  
Newsletter



Volume 1, Issue 4

November 2005

## EMS Question of the Month

Each month, BEMS Pulse will pose an EMS Question of the Month. Test your knowledge about this important topic:

**How do you bill for multiple patient transport?**

See answer on page 2



### Location and Regional Contact Information:

150 North 18th Avenue  
Suite 540  
Phoenix, AZ 85007  
(800) 200-8523  
www.azdhs.gov/bems

**Gene Wikle**  
Bureau Chief  
wiklee@azdhs.gov  
(602) 364-3150

**Rhonda Montgomery**  
Northern and Central Regional Liaison  
montgor@a.zdhs.gov  
(602) 364-3189

**Rita Weatherholt**  
Southeastern & Western Regional Liaison  
weather@a.zdhs.gov  
(602) 364-3191

## Trauma Designation Takes Effect



**Vicki Conditt**  
EMS/Trauma Development Section Chief

The State Trauma Center Designation process has been in development since August 2004 when A.R.S. § 36-2225 was passed.

As the former EMSC/SAFE KIDS Coordinator and a Rules Analyst, Vicki Conditt was promoted to the position of Trauma Coordinator in September 2004. By February 2005, she was promoted to the position of EMS and Trauma Development Section Chief where she's been diligently working to bring our state up to speed with the rest of the country.

"The majority of the states already have a designation program mandated either by administrative rule or by statute," Conditt said.

However, Arizona maintains a Central Trauma Registry that is currently receiving trauma data from nine hospitals, while many other states do not.

"Right now we're going through a major data standardization and conversion project with the registry," Conditt said, "We anticipate having valid data in November 2005."

Another facet of the system is the revision of the annual statewide EMS and Trauma Assessment that is currently being finalized. The new assessment will ensure that standardized data is collected from all EMS and trauma providers throughout the state. The assessment is expected to be distributed to the four EMS Regional Councils by the beginning of 2006. The councils will then further distribute them to all EMS agencies in their respective regions.

There are two staff members under Conditt's direction, Donna Meyer, Administrative Assistant, and Dave Harden, Trauma Program Coordinator. Harden manages and coordinates trauma system development and implementation of the EMS and Trauma System Plan including administrative processes,

policies for designation, inspections and investigations in compliance with applicable statutes, and rules, trauma system evaluation.

There will soon be a Trauma Center Surveyor who will conduct the on-site inspections of facilities that apply for Trauma Center Designation as a Level IV. The American College of Surgeons Committee on Trauma will conduct inspections for Levels I, II, and III. The Trauma Surveyor will also be responsible for handling complaints and investigations, providing technical assistance to health care facilities and consumers, participating in quality assurance/process improvement activities, and participating in verification visits with the American College of Surgeons (ACS) Committee on Trauma.

The Trauma Center Designation rules provide for the designation of Level I, II, III, and IV trauma centers, as well as require interested owners of health care institutions to submit an application to the Bureau for the desired designation level.

Eligibility for Level I, II, and III Trauma Center Designation requires that a facility either hold current verification by the ACS Committee on Trauma as a trauma facility at a particular level or have current documentation issued by ACS stating that

*(continued on page 2)*

## Employee Profile—Susan Johnson

If you think this face is familiar, it's because Susan Johnson has been working for ADHS for over 14 years. With time spent in Oral Health and Licensure, Johnson transferred from the Office of Infectious Disease Services to the Bureau of Emergency Medical Services in June 2005.

Johnson's talents as a quick learner and excellent customer service skills were obvious from the start. Within four months, she was promoted from receptionist to Customer Services Representative II, where she will continue to interact with the providers in the re-certification process. "My favorite part is that I like working with the statutes and rules and learning about them," Johnson said.

Born and raised in Queens, New York, Johnson lived in the same neighborhood

for 27 years where she was married and raised two daughters (Michelle and Lisa) and one son (Eric). Then in 1985, her husband received a job transfer to Arizona.

"Moving to Arizona was a culture shock. I was used to things being much busier and with more people. Then I began to love it because at that time there was no traffic," Johnson said.

The whole family continues to live in Arizona where her son works as a paramedic. "I have never wanted to go back. I wish I had raised my children here," Johnson said.

Now a busy grandmother of four, in her free time she likes to read Mahve Binchy to relax.

Johnson loves Chinese food and

enjoys redecorating her home.

Johnson is very optimistic about her future and her career with ADHS. "I don't think I ever want to retire," Johnson said.



**Susan Johnson**  
Customer Service Representative II

## Trauma Designation

(Continued from page 1)

the health care institution meets the state standards for a particular level.

A facility applying for Level IV Trauma Center Designation may either hold current verification by ACS or may demonstrate compliance during an on-site survey conducted by the Bureau that the facility meets the state standards for Level IV. The rules further include as Exhibit-1, the state standards for all four levels of Trauma Center Designation. The state standards are modeled after ACS's criteria for verification and are very similar to the standards adopted as guidelines in the Arizona EMS and Trauma System Plan for 2002-2005.

The Administrative Rules for Trauma Center Designation were approved by the Governor's Regulatory Review Council on October 6, 2005. The rules will take effect immediately.

Copies of the rules and the separate applications for trauma center designation and for provisional trauma center designation can be downloaded directly from the BEMS website at <http://www.azdhs.gov/bems/trauma.htm>. Copies of the rules and the applications can also be sent via e-mail by contacting Donna Meyer at [meyerd@azdhs.gov](mailto:meyerd@azdhs.gov) or (602) 364-3158.

Conditt said, "Development of a formal trauma system is essential to saving lives by ensuring that the right patient is taken to the right facility in the right amount of time to give them the greatest chance of survival. This is an exciting time for me to have an integral part in establishing a new process that will ultimately save lives in Arizona."

## Bi-Annual Regional Leadership Conference at ADHS

On October 4, 2005, the Bureau of Emergency Medical Services hosted its second bi-annual Regional Leadership Conference at the ADHS in Phoenix. In addition to BEMS staff attendance, there were over 25 representatives from the four regions throughout the state.

Gene Wikle, Bureau Chief, opened the meeting with a presentation on the Hurricane Katrina efforts, an introduction of the Bureau's Strategic Plan and an update of the ongoing projects and activities that included EMS enforcement statistical activity and audits of the base hospitals and training programs.

Various BEMS staff presented updated information on NREMT testing and test sites in Arizona, trauma designation, a new e-learning system and updates on air ambulance rules.



Arizona Department of Health Services  
Phoenix Office

Michelle Johnston, Training and Base Hospital Program Manager said, "The Bureau has received approval for Arizona to implement all of the proposed test sites from NREMT. The additional test sites will include Flagstaff, Yuma, Sierra Vista and Lake Havasu."

Chuck Kramer, Air Ambulance Services, provided a ScanHealth demonstration, while the southeastern representatives shared their

successes with the project. "The system is easy to use with data input and the data is easy to access," Kramer said.

During an open forum, participants were allowed to ask questions and voice concerns from their regions.

For more information and details regarding the conference, you may contact your Council Members or your Regional Liaison. The next regional leadership conference will be held in March 2006. You can look for further details and updates in our upcoming newsletters and website.

### Certification Notice

As a certified EMT in the State of Arizona, it is your responsibility to complete the required training courses in order to maintain your certification. Furthermore it is your responsibility to submit all required application materials to the Bureau, not your training instructor or employer. You will be held accountable.

## Quick Beats

### Bureau of EMS News in Brief

#### ADHS Rescinds Outdated Substantive Policy Statements

Effective November 1, 2005, ADHS is rescinding the following four substantive policy statements that were based on rules that have been repealed. By rescinding these substantive policy statements, ADHS hopes to alleviate any confusion that they may otherwise cause.

SP-040-PHS-EMS, EMS 315: Certification requirements for a basic emergency medical technician or a Paramedic with current and valid registration issued by the National Registry of Emergency Medical Technicians.

SP-042-PHS-EMS, EMS 316: Procedure for handling an initial emergency medical technician certification application from an applicant or candidate for upgrade of certification who states that the applicant or candidate for upgrade of certification has used, within the last 6 months, an illegal drug or substance or prescription drug without the supervision of a physician.

SP-047-PHS-EMS, EMS 318: Clarification of out-of-state EMT-Intermediate certification requirements under 9 A.A.C. 25, Article 6.

SP-049-PHS-EMS, EMS 319: Clarification of EMT-Intermediate recertification requirements under 9 A.A.C. 25, Article 6.

Notices of Public Information concerning these rescissions will be published in the Arizona Administrative Register on November 4, 2005. Links to those Notices of Public Information will be available on the ADHS website at [http://www.azdhs.gov/diro/admin\\_rules/miscnotices.htm](http://www.azdhs.gov/diro/admin_rules/miscnotices.htm) shortly thereafter. The repealed substantive policy statements themselves will no longer be available through the ADHS website.

#### Feds to Pay Part of Cost of Illegals' Care at Yuma Regional Medical Center

excerpted from the *Yuma Sun*, August 6, 2005

Yuma Regional Medical Center will receive more than \$1 million annually in federal funds to help cover the estimated \$2 million the hospital absorbs each year by giving uncompensated care to illegal immigrants.

Under a new federal program, \$1 billion over four years will be allocated to reimburse hospitals nationwide, plus certain physicians and ambulance providers for emergency services provided to illegal immigrants, according to YRMC chief financial officer Pat Walz.

In addition to reimbursements for undocumented aliens, the program will allow for reimbursements for services given undocumented aliens, aliens in the United States who are eligible for services, and Mexican citizens permitted to enter the United States up to 30 days with their border crossing ID cards. The funds will be effective for care given on or after May 10. YRMC does not expect to begin receiving funds until 2006, Walz said.

News of the funding comes on the heels of hospital estimates that nearly one in three babies born in Yuma County in 2002 were born to illegal immigrant mothers—a rate that is mirrored throughout Arizona, and is among the highest in the country.

#### Answer to EMS Question of the Month

QUESTION: How do you bill for multiple patient transport?

ANSWER: When transporting two or more patients in the same ground ambulance vehicle, the certificate holder shall assess each patient:

- a. Fifty percent of the mileage rate and one hundred percent of the ALS or BLS base rate and;
- b. One hundred percent of:
  - i. The charge for each disposable supply, medical supply, medication, and oxygen-related cost used on the patient; and
  - ii. Waiting time assessed.