



Mobile Integrated Healthcare Advisory Committee

Date: March 10, 2021

Time: 10:00 a.m. EST

Location: via Microsoft Teams online

Members present: Dr. Michael Kaufmann, State EMS Medical Director
Kraig Kinney, State EMS Director
Chief Paul Miller, MIH-CP Program Director
Nate Metz, IEMSA Representative
Steve Davison, Municipal MIH-CP Program
Laura Schwab-Reese PhD, College/University
Shane Hardwick, MIH-CP Provider
Dr. Jennifer Sullivan, FSSA Representative
Keith Mason, Insurance Industry Representative
Andy Van Zee, IN Hospital Association Representative
EMS Chief Doug Randall, IN Fire Chiefs Association
Dr. Eric Yazel, EMS Medical Director

Other Present: Robin Stump, Dr. Sara Brown, Marshal Thacker, Dr. Thomas Lardaro, John Merson, Lea Myers, Tony Murray, Dr. Alexander Ulintz, Breanna Wethington.

Absent Members: Dr. Lindsay Weaver, Chad Owen

Roll Call

Chairperson Kinney welcomed everyone and Robin Stump called roll and announced quorum.

Adoption of Minutes

Chairperson Kinney ask if there were any corrections to the minutes from January 13, 2021. **Motion to approve the minutes from ??? and second by Nata Metz. Roll was taken for approval and all approved.**

Reports

Chairperson Kinney updated that the agency is close to getting a person hired for the mobile integrated health position.

Dr. Kaufmann stated that he is very excited at the work that is being done within community paramedicine. He thanked everyone for all the work and promoting everyone has done with community paramedicine. Family and Social Services (FSSA) has been very supportive with community paramedicine and has freed up reimbursement for vaccine administration, IDHS has approved the hiring of a coordinator to help coordinator effort from the committee and EMS providers has been very active in partnering with the department of health on delivering vaccines. Dr. Kaufmann stated the EMS provider are working with local health department, hospital and long-term care facility's to delivering vaccines to the homebound.

Legislative Update

Chairperson Kinney gave an updated on current legislation. He stated that at this time all items had to be transferred from either House to Senate or vice versa.

HB 1002 Civil immunity related to COVID

HB 1032 newborn safety devices – cleans up language

HB 1118 mobile integrated health expands to mental health plans.

HB 1201 deals with the emergency transport of an operational K9's

HB 1230 is safe haven 911 which allow someone to call 911 and allows EMS to take custody of the infant.

HB 1454 Nonemergency ambulance service and physician order - improvements in billing.

Program Overview

Parkview Regional Health EMS – Dr. Sara Brown and Lea Myers gave an overview of their program.

Ms. Myers stated that their program is hospital based and is a not-for-profit program. They have 10 hospitals covering seven counties in northeast Indiana. They provide “Value-Based Care” which is providing the right care in the right environment to give the best outcome for the best cost. Dr. Brown stated that their purpose was to assist individuals to regain optimal well-being outside of the hospital setting. Their initiatives were to reduce repeat ED visits for non-emergent problems and a sepsis related program in the extended care facilities.

For the reducing of repeat ED visits they focused on home safety assessment, medication organization in the home and connecting with appropriate community resources.

The second initiative was a sepsis rapid response for extended care facilities. Dr. Brown stated that early identification and treatment is critical to achieve best outcome and to reduce cost associated to sepsis related care. Parkview Health worked with six extended care facilities who collaborated on a sepsis initiative. They delivered training regarding sepsis patients and what to look for and treatment. They had barriers in assessment time, lab draws, lab result turn around time and starting IV's and administering fluids. Parkview then worked with their community paramedics on training in a diverse range of settings. The results within nine months of the program starting they saw a significant drop in the number of patients transported to the ED due to early sepsis. Approximately 50% of patients visited by the community paramedics were transferred to the ED and of those transferred 50% were admitted. Five years later in 2020, 92% of the patient avoided transfer to the ED and of those transferred to the ED 90% were admitted. They were able to take the hospital to the nursing homes and get the labs and figure out who needed to be transferred and transport those that did need to be admitted. Over the past five years they also launched other initiatives such as in May 2017 Respecting choices/advanced care planning, October 2017 Cardiac Bundle, March 2019 Telehealth set-ups for congestive heart failure patients and in 2020 COVID. The barriers they have had with the programs and initiatives are funding and paramedic shortage. Parkview is working on future initiative of vaccinations for the homebound Hoosiers, in May 2021 will be doing Program of all-inclusive Care for the Elderly (PACE) and also looking at doing a Maternal/Fetal Health within the community.

Dr. Kaufmann ask how Parkview Health came to the three months of training for their community paramedics? Dr. Brown and Ms. Myers stated that as they decided on a project that they looked at the important items that they needed to recognize and learn about looked at what the families needed to know.

New Business

Chairperson Kinney presented information for an electronic communications meeting policy. Looking at other policies that meet the law, including the EMS Commission's policy, Chairperson Kinney came up with a policy. There was a question posed on if a requirement for members to attend at a minimum one meeting per year in person would be acceptable. Committee agreed that attendance once per year was the most flexible and would be best to allow for it.

There was a motion to approve the policy as written by Andy Van Zee and seconded by Nate Metz. Roll call taken and motion passed.

Chairperson Kinney discussed Senate Bill 498 and our discussion with Senator Tallin in regarding to new community programs. Senator Tallin is interested in seeking funding for new programs. One item in regard to this bill is that there is language that the programs are to be approved by the EMS Commission. Chairperson Kinney shared draft language for requirements of a community paramedicine program. After some discussion there were a few changes made to the draft. The committee was good with the information being a living document and has the ability to be changed and updated. Dr. Brown ask about the option to renew a community paramedicine program. There was also a request to have in the renewal application for the program to include outcome data.

There was a motion to approve the draft language as a living document and able to modify by Chief Davison and second by Chief Miller. Roll call taken and motion passed.

Chairperson Kinney discussed the education requirements for a community paramedicine program. He stated that in looking at the surveys and white paper there was a handful of people that state there should be a college degree requirement but most state for personnel to hold a paramedic license, ADV EMT or EMT certification. There was discussion regarding the community health worker which is a 40-50 hour program. Several of the committee members that have programs also use the community health worker certification. There will be more discussion on education requirements.

Next meeting will be May 12, 2021 at 10:00a.m.

Motion to adjourn from Nate Metz and seconded by Chief Davison.

Chairperson Kinney adjourned meeting at 11:47a.m.

Minutes Approved at the May 12, 2021 Meeting.

A handwritten signature in black ink that reads "Kraig Kinney". The signature is written in a cursive, slightly slanted style.

Kraig Kinney, Chairperson