



Staff Report to Council - for Direction

Title: Huron Bruce Cross-Border Billing Agreement

From: Steve Schaus, Director/Chief, Paramedic Services

Date: December 7, 2023

Staff Recommendation:

That a by-law be introduced authorizing the Warden and Clerk to execute the Cross-Border Billing Agreement for the provision of land ambulance services between the Corporation of the County of Bruce and the Corporation of the County of Huron; and

That By-law 2013-015 be repealed.

Report Summary:

In 2013, the County of Bruce and County of Huron entered into a 10-year agreement that establishes the criteria and process for the provision and payment of land ambulance services provided across the County's boundary. Staff are recommending that the agreement with the County of Huron be extended, on the same terms and conditions, until December 31, 2026.

Background:

The resolution of EMS cross border service billing for the municipalities that comprise the Southwest Zone of the Association of Municipal Emergency Service Services of Ontario (AMEMSO) now known as Ontario Association of Paramedic Chiefs (OAPC) has been problematic with respect to the development of an agreement that can be supported by all parties.

There has been settlement of outstanding accounts between some municipalities for differing fiscal periods and utilizing differing calculation formula but a coordinated approach to municipal agreements has been elusive to date.

Provincially, the Municipality's and District Social Service Administration Board's that comprise the Northern and Eastern Zones have reached agreements with the support of their local municipal leadership organizations such as the Eastern Ontario Warden's Caucus and municipal councils.

Beginning in 2010 a CAO working group of the Western Ontario Warden's Caucus (WOWC) and the Southwest Ontario Ambulance Group (SWOAG) began a joint dialogue on the issue. As a result of these discussions a consensus was reached by the EMS Directors/Chiefs on an agreement, financial formula and principles through which the issue can begin to be resolved.

The agreement (**attachment 1**) is an amendment to the expired agreement from December 31, 2021 for an additional five (5) year period commencing January 1, 2022. Early in the discussions it was determined that any retroactivity for the settlement of accounts would not be possible due to the differing positions of municipalities regarding past settlements. This agreement is being presented as a “go-forward” solution and if adopted is made “without prejudice or precedent” to any municipality’s position on retroactive cross border accounts.

The clauses containing the criteria to determine “billable” calls are reflective of the following principles:

- Emergency Calls (Codes 3 and 4) - are billable when an ambulance arrives on a scene (valid Time 4) regardless of whether a patient is transported or not. The principle employed is that once a paramedic arrives on a scene there is a provision of service (including patient refusals) and the incursion of a liability by the responding municipality.
- Non-emergency Calls (Codes 1 and 2) - are billable if they are not repatriations and provided a patient is transported (valid Time 5). The principle employed is that there may be occasions where a patient is not transported due to factors that are not in control of the municipality (institutional processes).
- Repatriation Calls - are not billable when a municipality repatriates a patient from a healthcare institution in a municipality back to their home municipality. The principle centre for the transfer of patients which are required as a result of the healthcare system structure as opposed to municipal EMS delivery structure.
- Emergency Coverage Standby’s (Code 8’s) - are billable at one-half the applicable rate. The principle employed is that an EMS resource being utilized for standby purposes while providing a service to another municipality is not “committed” and can still be utilized if required to respond to a call in their own municipality.

Generally, municipalities have little control over the utilization of local EMS resources for cross border emergency calls. However, the exposure to cross border activity on non-emergency and standby calls can be controlled through the municipality’s Deployment Plan with their ambulance communications centre.

The original agreement was for ten (10) years, (2012 - 2021) the amendment would be for an additional five (5) years (2022 - 2026).

Over the past two (2) years we have been utilizing our Emergency Management Trailer in Holyrood to increase our coverage in Southern Bruce while we decide if Holyrood is the best location for a station. We are hoping with a shorter agreement that we get to a point we are closer to cost per service neutral. The Cross Border Billing payment to Huron County has been decreasing over the past several years. The payment to Huron County for 2022 is \$62,656.00.

Financial/Staffing/Legal/IT Considerations:

Financially, the agreement utilizes the cost per call rates established by the Single-Tier and Regional Treasurer’s Group. In contrast to the previous default formula discussed above, which utilized an overall municipal “cost per call” formula and its associated inconsistencies,

this methodology utilizes a “cost per staffed hour” calculation which subject to modest variations is very similar between all municipalities.

The application of this methodology recognizes that the determination of EMS resources levels are based on a municipality’s own needs and not cross border service requirements. Therefore, the rate has been developed to provide for the recovery of direct expenses relative to the time the ambulance is being utilized by another municipality. The rates are determined on a regional basis and this agreement utilizes Southwest Ontario average costs and time commitments.

Under the agreement the settlement of accounts for a fiscal year doesn’t take place until the following year. This provision is required to allow time for the call data to be received from the Ministry of Health. It also allows the municipality to make an accurate estimate of the impact of cross border services on their municipal budget and grant funding submissions.

The agreement also contains a provision that allows for its dissolution with appropriate notice in the event there is a material change in legislation or funding by the Ministry of Health that would alter the nature of the agreement.

In summation, the agreement achieves a framework that balances each municipality’s interests and exposure to cross border costs with a fair compensation rate and its adoption is recommended.

Interdepartmental Consultation:

Office of the CAO - County Clerk

Link to Strategic Goals and Objectives:

Community and Partnerships - Enhance and grow partnerships

Approved for Submission:

Derrick Thomson, Chief Administrative Officer