



County of San Mateo

Inter-Departmental Correspondence

Department: HEALTH

File #: 20-111

Board Meeting Date: 3/10/2020

Special Notice / Hearing: None
Vote Required: Majority

To: Honorable Board of Supervisors

From: Louise F. Rogers, Chief, San Mateo County Health
Stephen Dean, Chief Information Officer, San Mateo County Health

Subject: Agreement with San Diego Health Connect for an Emergency Medical Services Connector

RECOMMENDATION:

Adopt a resolution authorizing an agreement with San Diego Health Connect to provide technical expertise and an Emergency Medical Services connector for the term of March 10, 2020 through September 30, 2021, in an amount not to exceed \$376,380.

BACKGROUND:

On January 30, 2019, the California Emergency Medical Services Authority (EMSA) released a grant funding opportunity to develop and implement interoperable health information exchange (HIE) between emergency ambulance service providers and hospitals/electronic health records via HIE organizations. This local assistance grant funding opportunity promotes interoperability and supports collaborative solutions to integrate prehospital emergency medical services as a critical component of the health care system into the HIE landscape, consistent with directions from California Department of Health Care Services and the Centers for Medicare & Medicaid Services. EMSA conducted a successful grant pilot program with San Diego Health Connect (SDHC) to develop and implement an emergency medical services connector for San Diego County. As such, EMSA recommended grant applicants include the work already completed by SDHC in their grant applications.

The Emergency Medical Services (EMS) division of San Mateo County Health (SMCH) submitted an EMSA grant application that included using the SDHC emergency medical services connector and was awarded the grant. On November 12, 2019, the Board approved the grant with EMSA, including the County's receipt of associated funding.

DISCUSSION:

SDHC's emergency medical services connector will allow hospitals, emergency department (ED) and 911 system first responders, and ambulance providers the ability to connect to other healthcare

stakeholders through SMCH's HIE. It will improve quality of care by securely transferring patient information within the healthcare system. The goal of the EMSA-SAFR (Search, Alert, File, Reconcile) grant is to improve coordination between paramedics in the field and the receiving EDs through the EMSA-SAFR process. *SEARCH* allows paramedics to first check the HIE for patient matches and then to query the HIE for problems, medications, allergies, and encounters that are then input into their electronic patient care reporting (ePCR) application. Once a receiving hospital has been assigned, *ALERT* streams the paramedics' narrative findings, EKGs, and vital signs to the ED's electronic medical record (EMR) where they can be viewed real-time by nurses and physicians. *FILE* streamlines the transition-of-care/handoff process at the ED by electronically transferring the complete National Emergency Medical Services Information System record into the hospital EMR. *RECONCILE* automatically sends updated patient demographics, billing information, and eOutcomes from the hospital back to the ePCR and prehospital provider agencies. This final step allows EMS and its 911 system first responder and ambulance transport providers to evaluate care choices and make improvements.

SMCH is requesting the Board waive the Request for Proposals process as the implementation of the EMSA-SAFR services was previously approved as part of the grant between EMSA and the County of San Mateo.

The agreement and resolution have been reviewed and approved by County Counsel as to form.

The Information Services Department has reviewed and approved the IT component of this agreement.

It is anticipated that approximately 50,000 patients per year will observe improved care as a result of SAFR functionality.

PERFORMANCE MEASURE:

Measure	FY 2019-20 Estimated	FY 2020-21 Projected
Approximate number of patients per year that will observe improved care as a result of SAFR functionality	50,000 patients	50,000 patients

FISCAL IMPACT:

The term of the agreement is March 10, 2020 through September 30, 2021. The amount of the agreement is not to exceed \$376,380 for the length of the term. Funding for this agreement is covered by the C19-032 EMSA grant and has been included in the FY 2019-20 Recommended Budget. There is no Net County Cost associated with this agreement.