LEVELS OF CARE & EXPERIENCE LEVELS

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DIFFERENTIATED LEVELS OF CARE

• Not a new concept
• Well documented
• Widely accepted
  • CMS ambulance fee schedule
DIFFERENT LEVELS OF SERVICE

• BLS
  • Care provided at the level of the EMT-B

• BLS – Emergency (1.6)
  • Care provided emergently at the level of the EMT-B

• ALS 1 (1.2) or ALS 1 Emergency (1.9)
  • Assessment and/or 1 intervention provided at the Advanced Life Support level
  • Assessment & care provided at the EMT-I or Paramedic level


DIFFERENT LEVELS OF SERVICE

• ALS II (2.75)
  • Assessment and multiple interventions provided at the Advanced Life Support level
  • Assessment & care provided at the EMT-I or Paramedic level

• Specialty Care Transport (3.2)
  • Assessment and care provided beyond the scope of the Paramedic
  • Critical Care certification can trump this for a Paramedic

WHAT ARE THOSE MODIFIERS

• The numbers after each level of service dictate how much beyond the base rate the service can be reimbursed
  • CMS publishes annually
  • Must provide documentation to justify the level of service

AIR AMBULANCE SERVICE LEVELS

• Rotor Wing
  • Services provided in a helicopter
• Fixed Wing
  • Services provided in an airplane
• Rural
  • If the pickup location of the patient is in a rural zip code, than rural adjustment factors can be reimbursed
AIR AMBULANCE SERVICE LEVELS - CONCERNS

• Rural definitions go up to population densities of 999 people per square mile
• Montana sits at just under 7 per square mile
  • This population density is just over Frontier
• No defined level of service


AIR AMBULANCE SERVICE LEVELS - CONCERNS

• Only consideration made is for the type of aircraft
• No consideration of the medical care on board
PERFECT LEVELS ACCORDING TO SCOTT

- Keep the methodology as far as RW and FW differentiation
- Keep the rural designators
  - These are good ideas
- Add modifiers to level of care
- Have 3 levels of care
  - BLS (1.0) – current levels
  - ALS (2.0)
  - SCT / Intensive Care (2.5)

EXPLANATION OF NEW LEVELS

- BLS (1.0) – current levels
  - Provided by one medical attendant below the Paramedic level
- ALS (2.0)
  - Provided by at least 2 medical attendants – both at least at the paramedic level
- SCT / Intensive Care (2.5)
  - Provided by at least 2 medical attendants – one at least at the registered nurse level – all above the critical care paramedic level
TRANSITION TO EXPERIENCE

- Why does CAMTS require ongoing clinical experience
  - It’s important
  - It’s meaningful
  - It can make the difference between a poor outcome and survival

- What does “ongoing” mean
  - Varies per program

WHAT “ONGOING” MEANS AT BENEFIS MERCY FLIGHT

- Types of services offered
  - Commensurate with experience – This is well beyond just certification in the area
    - NICU – Nifir Oxide – high level ventilation
      - Providers all work in the NICU on a daily basis – 100% certified in their specialty area
    - High Risk OB – 100% certified in their specialty area
      - Providers work with laboring moms daily – they are L&D nurses first and then become flight nurses. But they stay as L&D nurses
WHAT “ONGOING” MEANS AT BENEFIS MERCY FLIGHT

• Critical Care – 85+% of nurses either hold emergency nurses certification or critical care nurses certification & 85+% of Paramedics are FP-c’s
  • Again – they work daily with patients -
  • Assist with mentoring and training of new ED staff
  • Assist in the ICU
  • Part of pediatric code team
• Respiratory Therapy – 80+ %of staff hold specialty certification
  • Work daily with ICU patients.
  • Just this year our 6 RT’s have worked over 4500 hours directly with patients – this does not account for any flight time. Just their FTE’s that they work in direct patient care

WHY IS THE EXPERIENCE IMPORTANT

• Because we are at best a rural state at worst – frontier and sparse
• Average transport times in Montana are approximately 3 times the national average
  • Approximately 45 minutes
• Daily experience with patient care allows good critical thinking to be applied to each patient
• Clinical decision making is always easier when you use it routinely, not just in an aircraft
TIME IS INCREDIBLY IMPORTANT

- Both time to definitive care
  &
- Time spent with the patient in transit receiving appropriate care

- Both are important