



Program #40004 - Ambulance Services (Emergency Medical Services) FY 2025 Adopted

Department: Health Department **Program Contact:** Aaron Monnig
Program Offer Type: Operating **Program Offer Stage:** Adopted
Related Programs:
Program Characteristics:

Executive Summary

Multnomah County Emergency Medical Services (MCEMS) MCEMS plans, procures, contracts, regulates, monitors, and coordinates EMS system activities to comply with the county Ambulance Service Plan, county health code (MCC 21.400), and Oregon Administrative Rules, including a franchised ambulance (AMB) contractor, fire departments, and licensed nonemergency ambulance providers. Under Medical Direction, the system receives 9-1-1- calls, dispatches resources, provides care, and transports patients to the appropriate facilities

Program Description

MCEMS regulates all ambulance business per State and local law including inspection and licensing of ambulances, monitoring of emergency ambulance operations, supervising medical care, levying fines for substandard performance or for violations of county code or administrative rules. MCEMS provides medical supervision, oversight, and guidance to 911 emergency dispatchers, fire and ambulance first response personnel, and non-911 ambulance providers. MCEMS sets medical standards of emergency, pre-hospital care and provides on-scene medical consultation to first responders through a subcontract with OHSU's Medical Resource Hospital. MCEMS provides pre-hospital system regulation and coordination of all 911 medical dispatch and first response for the county. The City of Portland's Bureau of Emergency Communications triages each medical call and dispatches the most appropriate resource. Portland, Gresham, Airport and other volunteer Fire departments and districts throughout the County provide 911 medical first response, accounting for 111,160+ calls annually. A contractor provides 911 ambulance service through an exclusive, franchise fee-based contract with Multnomah County. MCEMS assures that 911 medical dispatch and response is consistent across providers and agencies; maintains contracts for medical first response; responds to complaints related to EMS care; monitors and enforces ambulance response and performance; coordinates and supervises annual joint agency training to assure medical protocols are applied consistently across agencies; establishes clinical quality standards for EMS care and uses quality improvement processes to monitor and enhance the system; coordinates major event planning and medical equipment specifications; and liaises with local hospitals. MCEMS also manages the Tri-County 911 Service Coordination Program (TC911), a brief, yet intensive care management intervention serving 500+ frequent users of EMS systems in Clackamas, Washington, and Multnomah Counties. Licensed clinicians help link people to medical, behavioral health, housing, long term care, and other services.

Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Ambulance response for urgent, life threatening calls in the Urban zones is < or equal to 8 min. 90% of the time.	70%	90%	65%	90%
Outcome	Ambulance response in urgent, life threatening calls in Rural areas is < or equal to 20 minutes. 90% of the time.	70%	90%	65%	90%
Output	TC911 serves highest users of EMS system through care coordination, case management, and referral linkages.	500	500	500	500

Performance Measures Descriptions

Legal / Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. The governing law and contractual obligations include the Multnomah County Ambulance Service Plan; ORS 682; OAR Chapter 333, County ordinances 21.400-21.433; County rules, medical policies, procedures, protocols, the exclusive ambulance franchise agreement with American Medical Response, contracts with OHSU, and intergovernmental agreements with local fire and rescue jurisdictions.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,684,126	\$955,045	\$1,769,757	\$1,007,665
Contractual Services	\$560,754	\$18,700	\$545,858	\$18,700
Materials & Supplies	\$93,693	\$6,277	\$77,458	\$6,277
Internal Services	\$188,503	\$277,053	\$197,337	\$321,853
Total GF/non-GF	\$2,527,076	\$1,257,075	\$2,590,410	\$1,354,495
Program Total:	\$3,784,151		\$3,944,905	
Program FTE	7.87	5.93	7.87	5.93

Program Revenues				
Fees, Permits & Charges	\$2,166,546	\$0	\$2,368,865	\$0
Intergovernmental	\$67,915	\$0	\$0	\$0
Other / Miscellaneous	\$0	\$1,257,075	\$0	\$1,354,495
Total Revenue	\$2,234,461	\$1,257,075	\$2,368,865	\$1,354,495

Explanation of Revenues

This program generates \$169,264 in indirect revenues.

Lic. fees \$175,000, the ambulance franchise fee \$1,530,936, and first responder medical direction contracts and ambulance medical direction \$642,929 pay for MCEMS administration and medical direction costs. Fees are established and collected through agreements with the exclusive emergency ambulance contractor and other jurisdictions. The services' revenues equal the County's expense in providing the service. If expenses increase, the County's exclusive ambulance contractor covers the difference. The County's exclusive ambulance services contract and MCC 21.400 provide authority for MCEMS to levy fines for substandard performance (\$20,000). Fines collected pay for EMS system enhancements. The County pays two fire first response agencies in eastern Multnomah County to provide EMS first response in areas of the County not otherwise served by a Fire Department to provide EMS first response. The EMS Social Work Program (aka TC911) has a contract with Health Share of Oregon through June 30, 2024 to serve Medicaid members. The County supplements this with general funds to allow service to non-Medicaid clients using EMS frequently.

TC 911 HealthShare Grant (50210) \$1,354,495

Significant Program Changes

Last Year this program was: FY 2024: 40004 Ambulance Services (Emergency Medical Services)