

CITY COUNCIL AGENDA ITEM

CITY OF SHORELINE, WASHINGTON

AGENDA TITLE: Public hearing to receive citizens' comments on Resolution No. 341, Approving the Countywide Ballot Proposition for Funding the Medic One/Emergency Medical Services (EMS) Levy for the period from January 1, 2014 through December 31, 2019 and Adoption of Resolution No. 341

DEPARTMENT: CMO

PRESENTED BY: Scott MacColl, Intergovernmental Relations Manager
Jim Fogerty, King County EMS Division Director

ACTION: ☐ Ordinance ☒ Resolution ☐ Motion
 ☐ Discussion ☐ Public Hearing

The current six-year 30-cent Medic One/EMS Levy will expire on December 31, 2013, and must be renewed to maintain the current system. As this is a county-wide system,, any levy proposal must secure the approval of cities within the county with a population greater than fifty thousand prior to placing it on the ballot. There are nine cities in King County, including Shoreline, that must provide such approval. Tonight the City Council is scheduled to hold a public hearing and a potential vote on a Resolution No. 341 approving the levy proposal as proposed by the EMS Advisory Task Force. Mayor McGlashan represented Shoreline on the Task Force.

The EMS Advisory Task Force consists of elected officials, medical professionals, fire chiefs and King County EMS staff. The Task Force worked with EMS stakeholders over a period of nine months beginning in 2011 to develop the Medic One/EMS Strategic Plan, which sets the policy and financial plan directing King County Emergency Medical Services over the next six years. The plan proposes the following:

- Reauthorizing a six-year EMS levy to fund the system;
- Continue funding Advance Life Support (ALS)/Paramedic services, and a portion of first responder (Basic Life Support (BLS)) services for local fire and emergency response departments;
- Maintain a responsible level of reserves;
- Continued programs and initiatives that provide essential support for the system and encourage efficiencies, innovation, and leadership;
- Use conservative financial policies and procedures; and
- Meet future demands with services that include collaborating on programs that reduce impacts on BLS agencies, and 'rescoping' programs to meet emerging community needs.

This plan also proposes an EMS levy for the August 2013 primary election, which would reauthorize the existing levy. The EMS Advisory Task Force has recommended that the

levy beginning in 2014 be set at \$.335 per \$1,000 assessed valuation. The current levy was originally passed at \$.30 per \$1,000, which is the current 2013 rate. The proposed 2014 rate is an 11.7% increase. The proposed levy does not raise funding levels to add services, but provides resources to maintain existing services, incorporate efficiencies and offer improvements where appropriate. The proposal costs less than if 2008-2013 operations were continued into the 2014-2019 levy period.

Tonight Staff will be joined by Jim Fogerty, King County EMS Division Director to provide a presentation on the levy. In addition, representatives of the Shoreline Fire Department, including Chief Bunje, will be available if Council has questions.

FINANCIAL IMPACT:

In 2013 Shoreline taxpayers will contribute \$1.8 million towards the EMS levy. The median valued home in Shoreline for 2013 is \$251,000. A homeowner of a median valued home will pay \$75.30 in EMS property tax in 2013. Assuming a median home price of \$260,500 in 2014, a homeowner of a median valued home would pay \$87.26 in 2014.

RECOMMENDATION

Staff recommends that Council hold the public hearing to receive citizen comments on the proposed EMS levy and then pass Resolution No. 341 authorizing placement of an EMS Levy of \$.335 per \$1,000 assessed valuation on the August Primary Ballot.

Approved By: City Manager ***JU*** City Attorney ***IS***

INTRODUCTION:

Shoreline's Medic One/Emergency Medical Services (EMS) is provided by the Shoreline Fire Department, a separate taxing district within the City. Emergency Medical Services (EMS) accounts for the largest number of 911 responses. The EMS division is dedicated to increasing survival and reducing pain and disability from out-of-hospital emergencies. The Fire Department provides two levels of medical care: Basic Life Support (BLS) and Advanced Life Support (ALS).

BACKGROUND:

Medic One/Emergency Medical Services (EMS)

Basic Life Support (BLS) is the first tier of response and is provided by Firefighter/Emergency Medication Technicians (EMT) who staff the Fire Suppression and Aid vehicles. EMT's are able to provide initial evaluation, determine the required level of care, treat and transport non-life threatening conditions, and provide CPR and defibrillation when necessary.

Advanced Life Support (ALS) is the second tier of response where the condition is more urgent or complex. The ALS response is provided by Firefighter/Paramedics who primarily staff the Medic Units but when needed can function on the fire apparatus. EMT's and Paramedics provide distinct yet complimentary care. The King County EMS system is designed around a two-tiered system. EMT's are the first response and are dispatched to all requests for assistance. Paramedics are the second tier and are sent along with EMT's to manage life-threatening emergencies.

EMS Levy Authorization

RCW 84.52.069 authorizes jurisdictions to levy a property tax for the purpose of providing Emergency Medical Services. Jurisdictions are allowed to impose an additional regular property tax up to \$.50 per \$1,000 assessed value for a period of six (6) years, ten (10) years, or permanently.

Alternatively, a countywide ballot proposition is allowable. In this scenario, the King County Metropolitan Council and cities with a population over 50,000 must approve the levy proposal prior to placement on the ballot. This includes the cities of Shoreline, Auburn, Seattle, Redmond, Bellevue, Kent, Kirkland, Renton, and Federal Way.

In order for the levy to pass a super majority (60%) is required and voter turnout must exceed 40% of the prior general election. The County is proposing that the ballot proposition be placed on the August 2013 primary election to establish the EMS levy for 2014-2019.

The countywide EMS levy first appeared on the ballot in 1979 at a \$.25 per \$1,000 assessed value for a six-year period. Over the years, the tax rate has ranged from \$.25 to \$.30 per \$1,000 assessed value and is typically for a six-year period. It has usually been placed on a general election and has passed with a ~70% approval.

The City Council has a history of supporting the countywide ballot proposition for funding EMS services. In 1997 the Council adopted a resolution for the February 1998 election; in 2001 the Council approved the ballot proposition by motion; and in 2006 the Council also adopted a resolution. The most recent election, which was in the 2006 general election passed at \$.30 per \$1,000 assessed value.

The EMS levy is subject to the same 1% annual increase as the City's regular property tax levy. As a result the levy rate in the ensuing years will change as a result of changes in assessed valuation. That is why the proposed levy is increasing to \$.335 as opposed to the 2007 levy rate of \$.30 per \$1,000 assessed valuation, but it will bring in roughly the same revenue, adjusted for inflation.

While previous levies included substantial increases during the first year of each levy, the proposed plan reduces planned expenditures during the first year, when adjusted for inflation. Proposed new services and programs are minimal and are offset by reduced expenditures. Overall, the proposed increases across the levy span are less than projected CPI plus increased population.

In addition, the levy proposes using funds from the 2008-2013 levy to reduce the amount needed to be raised over planned expenditures. Estimated savings are \$21 million, or a reduction of 1.6 cents, which results in the proposed levy rate of \$.335 per \$1,000 AV.

FINANCIAL IMPACT:

Approximately 90% of the Fire Department's budget is supported by property tax revenue, coming from a fire suppression levy. The Fire Department funds a portion of the BLS services from levy funds, and the majority from general funds.

In addition, King County Emergency Medical Services oversees the regional levy and administers a contract with the Shoreline Fire Department to provide Advance Life Support services. This contract is funded entirely by the countywide EMS levy. The cities served by the Department's ALS program via the contract include Shoreline, Lake Forest Park, Kenmore and Bothell.

If the City of Shoreline were to take no action, change the recommended action or adopt a resolution in opposition to the recommended action, it would prevent the measure from appearing on the ballot. The consequences of such action would mean that there would be no funding for EMS services in Shoreline and the rest of King County in 2014 and subsequent years.

If the levy were to fail or if the Council were to not adopt the recommended action, the Shoreline Fire Department may be able to sustain minimal BLS services until such time as alternative funding could be arranged. This would either be through another attempt at a countywide levy or, in the absence of such an effort, the Shoreline Fire Department would in all likelihood place this on the ballot as a single jurisdiction levy. However, the Department would not be able to maintain ALS service without significant reduction in BLS and fire suppression services throughout Shoreline.

The proposal for Council to consider would reauthorize the existing levy up to \$.335 per \$1,000 assessed value. For the median homeowner (\$251,000) in Shoreline, this equates to approximately \$75.30 in 2013. Assuming a median home value of \$260,500 in 2014, the homeowner will pay \$87.26 in 2014.

RECOMMENDATION

Staff recommends that Council hold the public hearing to receive citizen comments on the proposed EMS levy and then pass Resolution No. 341 authorizing placement of an EMS Levy of \$.335 per \$1,000 assessed valuation on the August Primary Ballot.

ATTACHMENTS

Attachment A: King County Medic One / EMS 2014-2019 levy package
Attachment B: Resolution No. 341 authorizing the EMS 2014-2019 Levy

ATTACHMENT A: King County Medic One/EMS 2014-2019 levy package

SUBJECT

A briefing on the King County Medic One/Emergency Medical Services (EMS) 2014-2019 levy package (Strategic Plan and county-wide ballot proposition)

POLICY ISSUE

The current six-year 30-cent Medic One/EMS levy will expire December 31, 2013. To ensure continued emergency medical services in 2014 and beyond, a new levy must be approved by voters.

RCW 84.52.069:

- Allows for a property tax levy of up to \$.50/\$1,000 assessed valuation (AV) for the purpose of funding emergency medical services;
- May be a six year, 10 year or permanent levy; and
- Requires that any county-wide proposal secure the approval of those cities with 50,000+ in population prior to it being placed on the ballot. In King County, there are nine such cities: Shoreline, Auburn, Bellevue, Federal Way, Kent, Kirkland, Redmond, Renton and Seattle.

BACKGROUND

The King County Medic One/EMS system provides essential life-saving services to the residents of King County, regardless of location, incident circumstance, day of the week, or time of day. It is a tiered system that relies upon **coordinated partnerships** with fire departments, paramedic agencies, dispatch centers and hospitals to ensure patients receive the most appropriate level of care.

Founded on medicine, its services are derived from the highest standards of medical training, practices and care, scientific evidence, and close supervision by EMS physicians. **Programmatic leadership**, state of the art **science-based strategies**, **continuous improvements** and its focus on **efficiencies** have allowed the system to obtain superior medical outcomes, and manage the growth and costs of the system.

Access to EMS System: Bystander Calls 9-1-1
↓
Triage by Dispatcher: Use of Medical Response Assessment Criteria
↓
First Tier of Response: Basic Life Support (BLS) by Firefighter/EMTs (30 agencies)
↓
Second Tier of Response: Advanced Life Support (ALS) by Paramedics (6 agencies)
↓
Additional Medical Care: Transport to Hospital

Universal Access: Any person regardless of location or circumstances can access the Medic One/EMS system by calling 9-1-1 for medical assistance. This immediate and continuous access provides all areas of King County equitable access to this lifesaving service.

Dispatcher Triage: Calls to 9-1-1 are received and triaged by professional dispatchers who determine the most appropriate level of care needed. Dispatchers are trained to provide pre-arrival instructions for most medical emergencies and guide the caller through life-saving steps, CPR and AED instructions.

Basic Life Support (BLS): BLS personnel are the “first responders” to an incident, providing immediate basic life support medical care that includes advanced first aid and CPR/AED to stabilize the patient. BLS units arrive at the scene in under 5 minutes (on average) and contribute significantly to the success of the Medic One/EMS system.

Advanced Life Support (ALS): Paramedics provide out-of-hospital emergency medical care for critical or life-threatening injuries and illnesses. As the second on scene and used only for the most serious injuries and illnesses, they provide airway control, heart pacing, the dispensing of medicine and other life-saving procedures.

Once a patient is stabilized, it is determined whether transport to a hospital or clinic for further medical attention is needed. Transport is most often provided by an ALS agency, BLS agency or private ambulance.

In addition to these components of the system, King County EMS also oversees Strategic Initiatives and Regional Services. These core programs and services further provide for regional coordination and consistent quality across all jurisdictions in King County. These services include program supervision, BLS EMT staff training, 9-1-1 dispatch training, medical data collection and analysis, financial oversight, contract administration, and division management. EMS regularly integrates initiatives that are aimed at preventing/reducing emergency calls and improving the quality of the services.

2014-2019 MEDIC ONE/ EMS LEVY PLANNING PROCESS

The EMS Advisory Task Force was established by King County Ordinance 15862 to develop inter-jurisdictional agreement on an updated EMS strategic plan and financing package for the 2014-2019 levy funding period. Comprised of leaders and decision makers from throughout the region, the 19-member Task Force worked collectively with EMS Stakeholders for over nine months to assess the needs of the system and develop recommendations to direct the system into the future. Mayor Keith McGlashan served as Shoreline's representative on the Task Force.

The Task Force used a subcommittee format to concentrate efforts in four areas: ALS, BLS, Strategic Initiatives and Regional Services, and Financial model. The four subcommittees developed recommendations that were then brought to the full Task Force for consideration.

The Task Force adopted its recommendations on July 26, 2012. The King County Executive transmitted these recommendations to the King County Council in December 2012, as the Medic One/EMS 2014-2019 Strategic Plan.

TASK FORCE RECOMMENDATION/2014-2019 STRATEGIC PLAN

- Reauthorize a six-year EMS levy to fund the system, per RCW 84.52.069;
- Enact a levy rate of **33.5-cents/\$1,000 AV** to fund projected expenditures of \$695 million for the 2014-2019 span;
- Renew the EMS levy in 2013;
- Continue funding ALS (paramedic) services, and a portion of first responder (BLS) services for local fire and emergency response departments;
- Maintain a responsible level of reserves;
- Continue programs and initiatives that provide essential support for the system and encourage efficiencies, innovation and leadership;
- Use conservative financial policies and procedures; and
- Meet future demands with services that include collaborating on programs that reduce impacts on BLS agencies, and "rescoping" programs to meet emerging community needs.

The proposed levy rate does not raise funding levels to add services, but provides resources to maintain existing services, incorporate efficiencies and offer improvements where appropriate. The proposal costs less than if 2008-2013 operations were continued into the 2014-2019 levy period.

Impact on the Shoreline Rate Payer

	2008	2014*
Average Shoreline residence value	\$372,500	\$260,500
EMS levy rate	\$0.300	\$0.335
Levy amount for average Shoreline residence	\$111.75	\$87.26

**2014 value based on overall King County increase of 3.78% projected by the King County economist*

The 2014-2019 Medic One/EMS Strategic Plan financials differ from previous levies by:

1. **Limited new programs and expenditures:** With previous levies, substantial increases were implemented during the first year of each new levy. In contrast, there is reduced planned spending in the first year of the 2014-2019 levy, when adjusted for inflation. Proposed new services and programs are minimal and are offset by reduced expenditures. Overall proposed increases across the levy span are less than projected CPI plus increased population.
2. **Reduced proposed revenues:** The 2014-2019 levy proposes using funds from the 2008-2013 levy to reduce, or “buy down”, the amount needed to be raised over planned expenditures. Estimated savings are \$21 million, or a reduction of 1.6 cents, and result in the proposed levy rate of 33.5 cents per \$1,000 AV. The savings are due to changes in reserve levels, aggressive management to control expenditures, and conservative revenue forecasts.

The “buy down” of the rate reflects various management strategies that include millage reduction reserves that were mandated in the current levy, and using fund balance. The savings are also realized through not adding two anticipated 12-hour ALS units during the 2008-2013 levy period, reducing previous contingency assumptions (such as the ALS Disaster Relief Contingency), and reducing 2008-2013 strategic initiatives and regional services expenditures below planned levels. These forecast savings from 2012 and 2013 are assumed toward a “buy down” for the rate.

The average annual amount of \$111 million is estimated, with total revenues of \$668.1 million forecasted over the six year period, as shown below:

Forecasted Property Tax Revenue for 2014-2019 (in millions)

	2014	2015	2016	2017	2018	2019	TOTAL
City of Seattle	\$39.2	\$39.8	\$40.3	\$40.8	\$41.3	\$41.9	\$243.2
KC EMS Funds	\$67.0	\$68.6	\$70.1	\$71.5	\$73.1	\$74.6	\$424.8
Total	\$106.2	\$108.4	\$110.3	\$112.3	\$114.4	\$116.5	\$668.1
<i>Growth in Total Levy</i>		2.07%	1.75%	1.81%	1.87%	1.84%	

Expenditures

The proposed financial plan anticipates \$694.4 million to support programs and services. The table below denotes the costs by program area:

EMS Expenditures by Program Area

Program Area	Seattle	King County	Total
Advanced Life Support - ALS	\$121,390,108	270,338,534	391,728,642
Basic Life Support – BLS	121,833,460	103,210,353	225,043,813
Regional Support Services/Audit		55,178,130	55,178,130
Strategic Initiatives/CMT Program		10,017,546	10,017,546
Subtotal	243,223,568	438,744,563	681,968,131
Use of Reserves		12,398,310	12,398,310
TOTAL EXPENDITURES	243,223,568	451,142,874	694,366,441

The Task Force Finance Subcommittee endorsed these expenditure and revenue assumptions. These assumptions include policies for the “buy down” use of reserves, inflator policies, and the use of a 65% confidence level financial plan.

Operational and Financial Fundamentals of the Medic One/EMS 2014-2019 Levy

Endorsed by the EMS Advisory Task Force on 7/26/2012

Financial Recommendations		Strategic Plan pages 42 – 72
Continue with EMS levy:	<ul style="list-style-type: none"> ▪ Six-year EMS levy, per RCW 84.52.069 ▪ Forecasted budget of \$695 million over six-year span, including reserves ▪ Levy rate of 33.5 cents/\$1,000 Assessed Valuation ▪ Would be run at either the 2013 Primary or General election, with the King County Council determining which election 	
Advanced Life Support (ALS) Services Recommendations		Strategic Plan pages 23 - 31
Continue services from 2008-2013 levy:	<ul style="list-style-type: none"> ▪ Continue operations with the 26 units currently in service ▪ Fully fund eligible costs of existing paramedic services to prevent cost shifting to agencies ▪ Project annual increases using a compound inflator 	
Provide to meet expected demands:	<ul style="list-style-type: none"> ▪ No new medic units over the span of a six-year levy ▪ Reserves to cover unanticipated and one-time expenses ▪ Efficiencies to refine ALS costs and increase effectiveness ▪ Funding for a possible 12-hour medic unit in the later years of the levy in case demand for services increases 	
Basic Life Support (BLS) Services Recommendations		Strategic Plan pages 32 – 35
Continue services from 2008-2013 levy:	<ul style="list-style-type: none"> ▪ Partial funding for BLS services (firefighters/EMTs) ▪ Maintain King County portion of BLS funding at same percentage of overall expenses of previous levy period ▪ Maintain current funding formula for allocation (based 50/50 on Assessed Values and Call Volumes) 	
Provide to meet expected demands:	<ul style="list-style-type: none"> ▪ Programs and Initiatives that help manage growth, reduce impacts and increase the role of BLS agencies in regional decision-making 	
Regional Services Recommendations		Strategic Plan pages 36 – 41
Continue services from 2008-2013 levy:	<ul style="list-style-type: none"> ▪ Essential Regional Services programs that support the Medic One/EMS system 	
Provide to meet expected demands:	<ul style="list-style-type: none"> ▪ Re-scoped and enhanced Regional Services programs to meet emergent needs 	
Strategic Initiatives Recommendations		Strategic Plan pages 36 – 41
Continue services from 2008-2013 levy:	<ul style="list-style-type: none"> ▪ Conversion of 2008-2013 Strategic Initiatives that have improved the quality of service and managed growth and costs into Regional Services programs to become ongoing programs 	
Provide to meet expected demands:	<ul style="list-style-type: none"> ▪ Revamped and new Strategic Initiatives 	

Strategic Plan can be found here: <http://www.kingcounty.gov/healthservices/health/ems.aspx>

NEXT STEPS

1. Adopt a resolution approving placing on the ballot a county-wide proposition funding EMS pursuant to RCW 84.52.069; OR
2. Do not adopt a resolution authorizing placing the EMS levy on the ballot. Without participation by all the jurisdictions with populations over 50,000, no levy would be on the ballot in 2013, and funding for the EMS system would expire in 2013. At that point, each jurisdiction would have to determine how best to provide these services within its boundaries.

RESOLUTION NO. 341

**A RESOLUTION OF THE CITY OF SHORELINE,
WASHINGTON, APPROVING THE COUNTYWIDE BALLOT
PROPOSITION FOR FUNDING THE MEDIC ONE/EMERGENCY
MEDICAL SERVICES (EMS) LEVY FOR THE PERIOD FROM
JANUARY 1, 2014, THROUGH DECEMBER 31, 2019, PURSUANT
TO RCW 84.52.069**

WHEREAS, the existing Medic One/EMS levy will expire at the end of 2013;
and

WHEREAS, King County is seeking voter authorization of a six-year Medic One/EMS levy of \$.335 per thousand dollars of assessed valuation for the period of 2014 through 2019; and

WHEREAS, the Medic One/EMS levy supports the valuable and renowned regional Medic One/EMS program; and

WHEREAS, in order to continue funding for emergency medical services for six years, King County Council must receive the consent of all of the cities with a population in excess of 50,000 to place the EMS levy before the voters; and

WHEREAS, Shoreline has a population in excess of 50,000; and

WHEREAS, the City Council has determined that it is in the best interests of the City that such a countywide levy again be placed on the ballot;

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE
CITY OF SHORELINE, WASHINGTON AS FOLLOWS:**

SECTION 1. The City of Shoreline hereby approves submission to the voters of a ballot proposition at the August, 2013 primary election for a countywide additional regular property tax levy of not more than \$.335 cents per thousand dollars assessed valuation each year for a period of six consecutive years commencing in 2014 for funding the countywide Medic One/Emergency Medical Services pursuant to RCW 84.52.069.

ADOPTED BY THE CITY COUNCIL ON MARCH 25, 2013.

Keith A. McGlashan, Mayor

ATTEST:

Scott Passey
City Clerk