

2023 ANNUAL REPORT



Madison Rhodes, EMS Chief

1030 E HWY 54 | P.O. Box 168

**KINGMAN EMERGENCY MEDICAL SERVICES
2023 ANNUAL REPORT**

Kingman, KS 67068

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Purpose of this Report

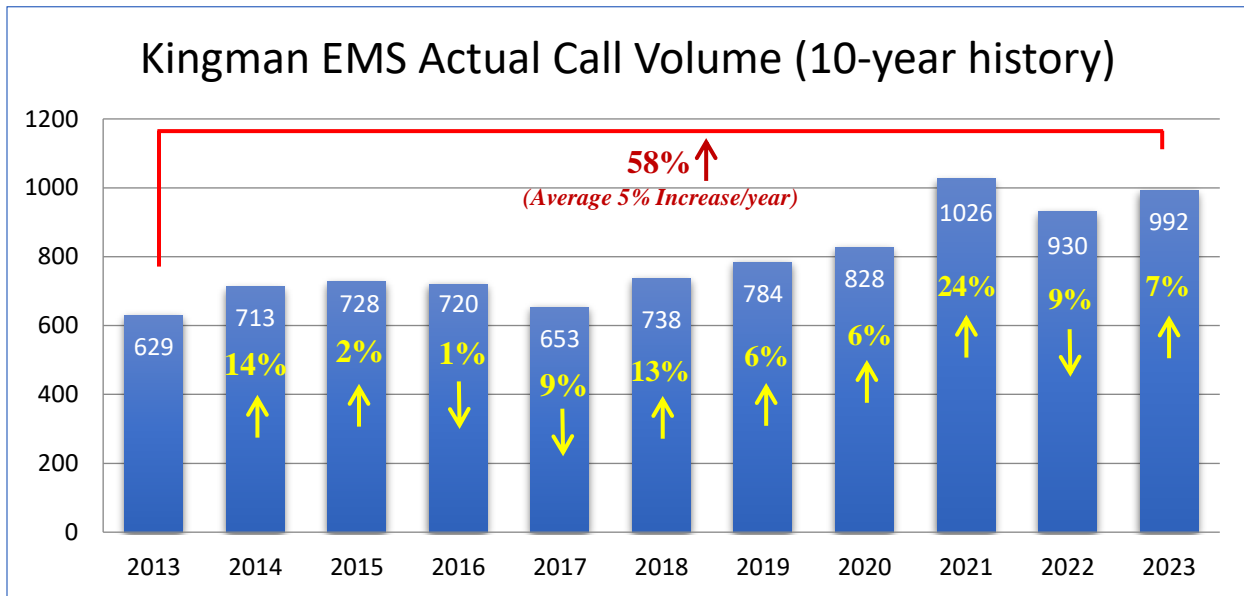
This report relays important operational and financial data of the Kingman EMS department to its stakeholders. Stakeholders of Kingman EMS include EMS staff, city management, city commission, county commission, and the taxpayers of Kingman County. This information may also be shared with other EMS agencies as we participate in information sharing with other agencies for operational education and quality improvement. For more information on the details within this report, or for other operational details, please feel free to contact the EMS director through any method below:

Madison Rhodes, EMT-P
Kingman EMS & Rescue Chief
1030 E HWY 54
P.O. Box 168
Kingman, KS 67068
Office: 620-532-5624
Fax: 620-532-1293
Email: mrhodes@kingmanems.com

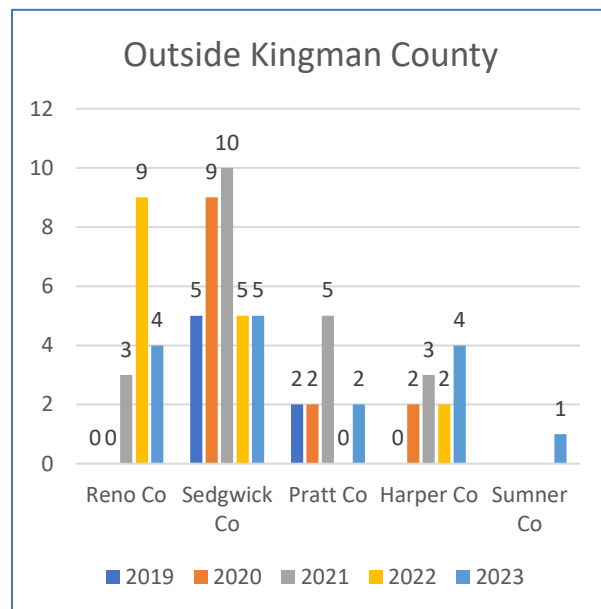
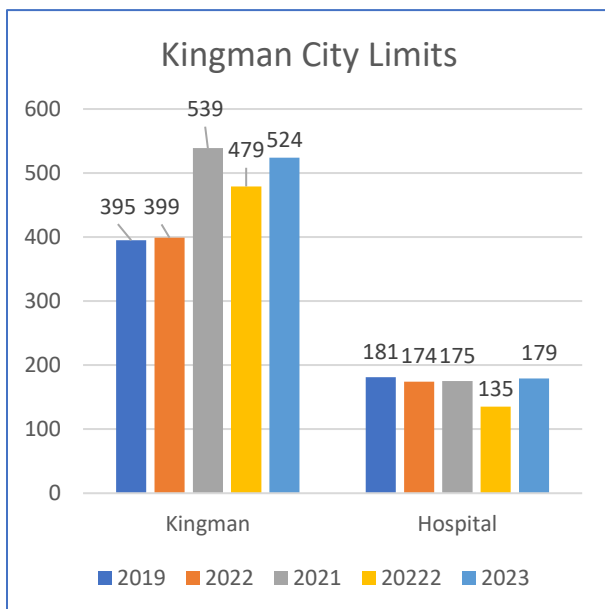
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Call Volume

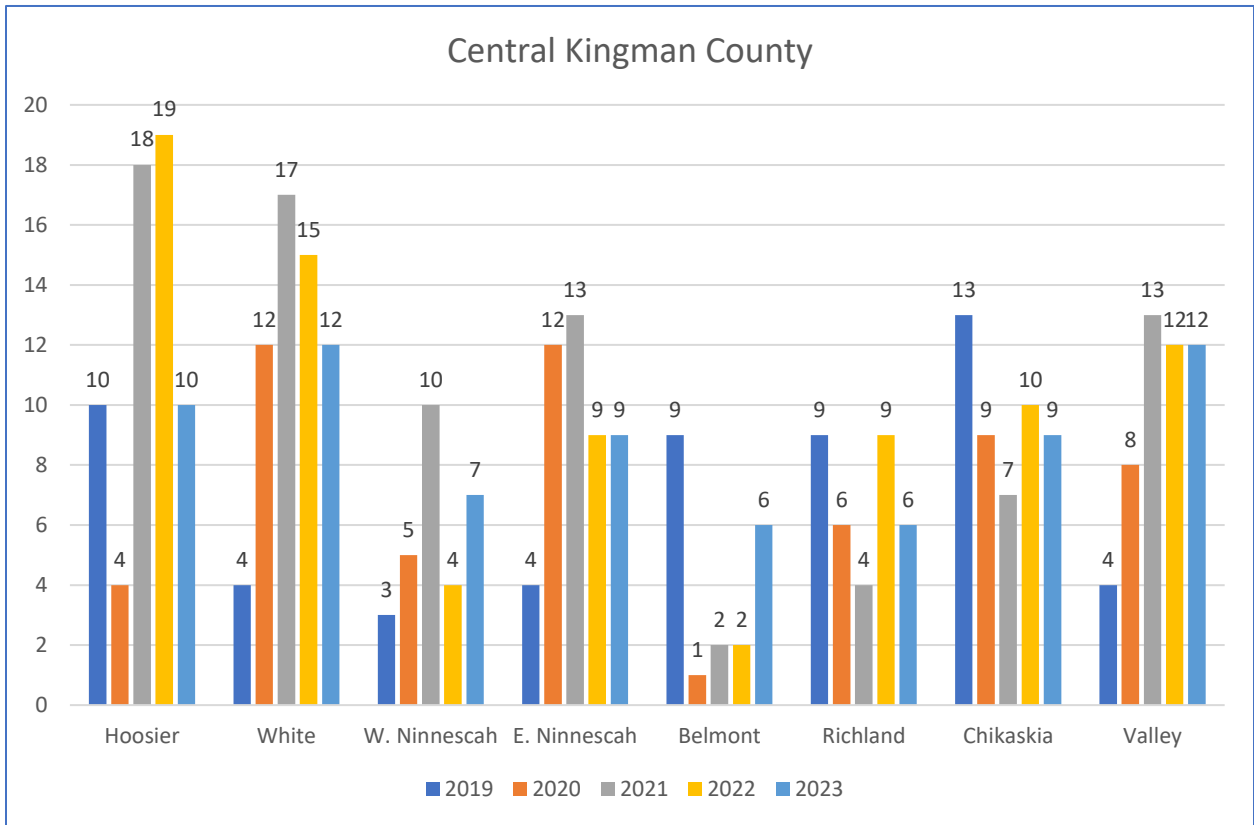
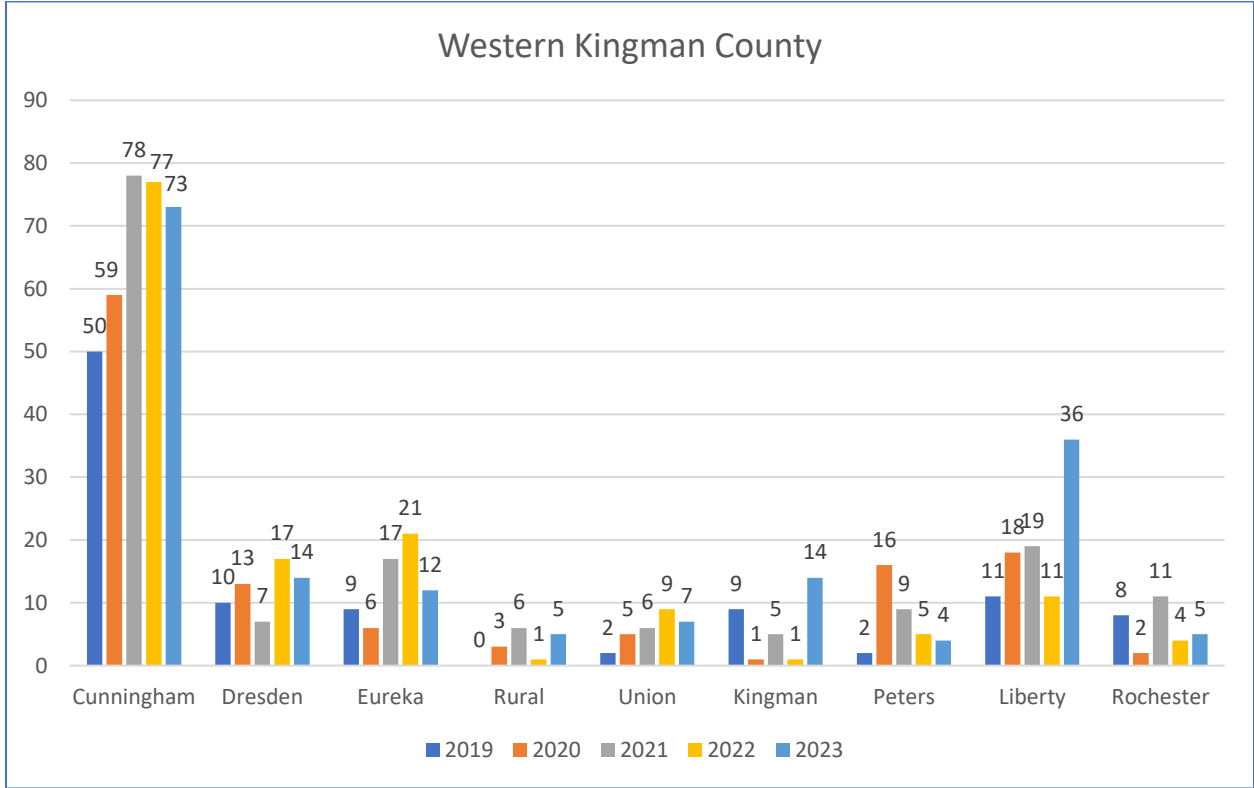
While trends may wax and wane over the next several years, it is expected that they will continue to gradually increase in the coming decades. The gradual increase is expected in all healthcare fields due to increasing demand on healthcare brought on by technology advancements and the aging baby-boomer population. A “Call” is created for every ambulance response to a request. Requests may be of an emergent or non-emergent factor and may include 9-1-1 calls, blood draws, transfers, and public assists. The data in this report (except the “Kingman EMS Actual Call Volume” graph below) is based on “Patient encounters.” Patient encounters are higher than call volume numbers because some calls, such as car accidents, include more than one patient. The graph below shows how many times a Kingman EMS ambulance was requested.



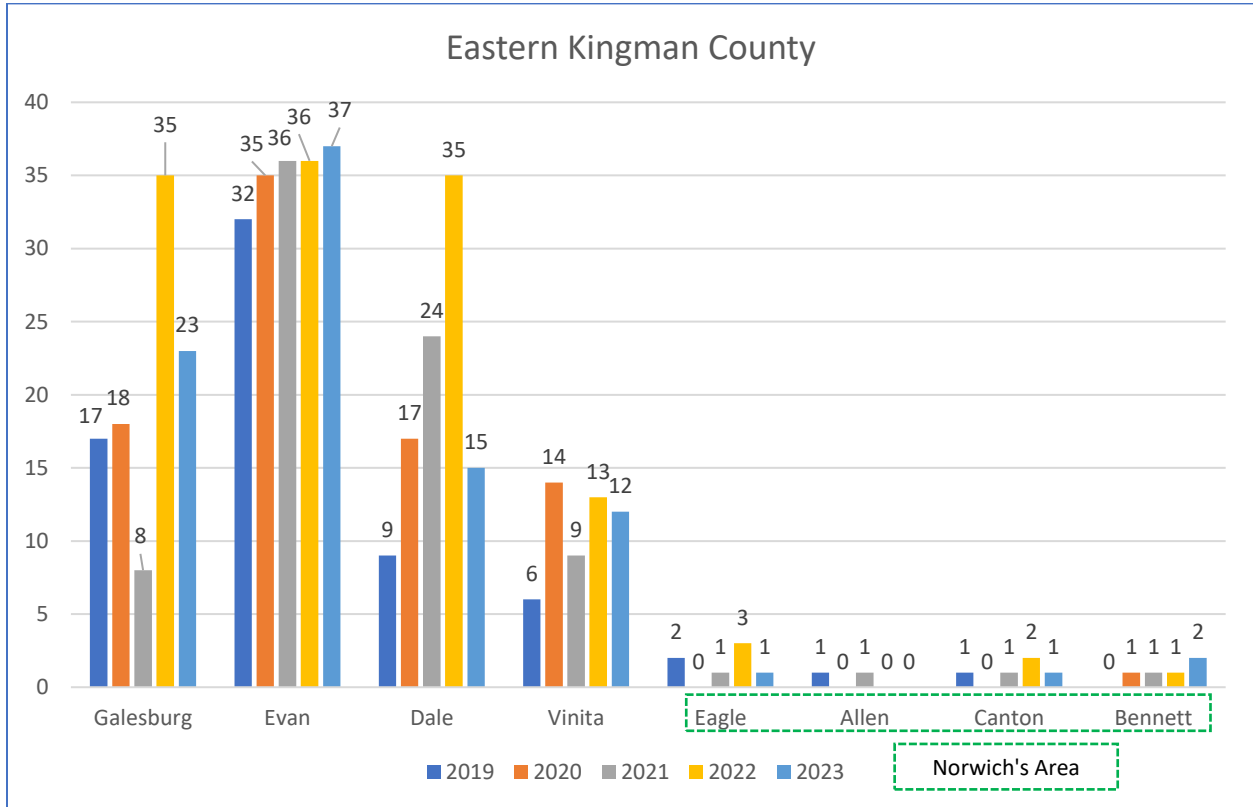
Call Locations



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In 2023, Kingman EMS responded to a total of 703 calls (67%) within the city (city 9-1-1 and transfers combined) and responded to 348 calls (33%) in the county. Compared to 2022, Kingman EMS saw a 14% increase of calls in city calls and a 5% decrease in county calls. The department a 25% increase in transfer calls in 2023. One cause is that EMS has been asked to document when transfers are turned down. Kingman EMS turned down 35 transfers in 2023. This accounts for 20% of the transfer calls.

Cunningham EMS responds to the eight townships in the far west of Kingman County. There were 170 calls occurring in the Cunningham EMS area and they responded to 11 (7%) of those with only one responder.

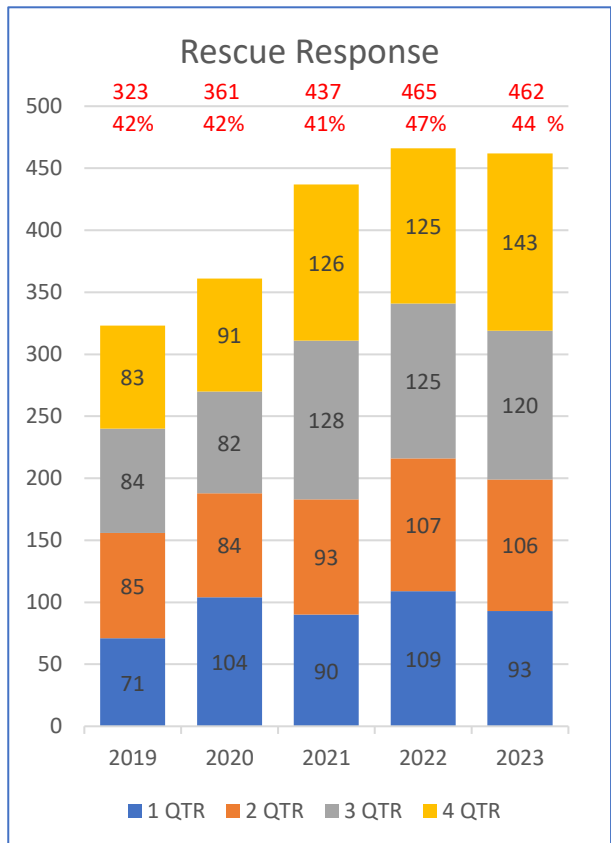
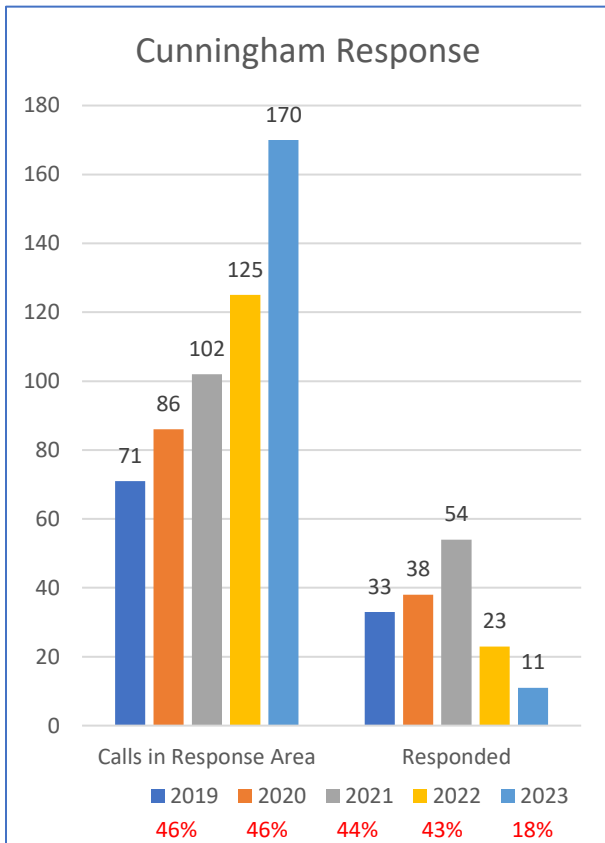
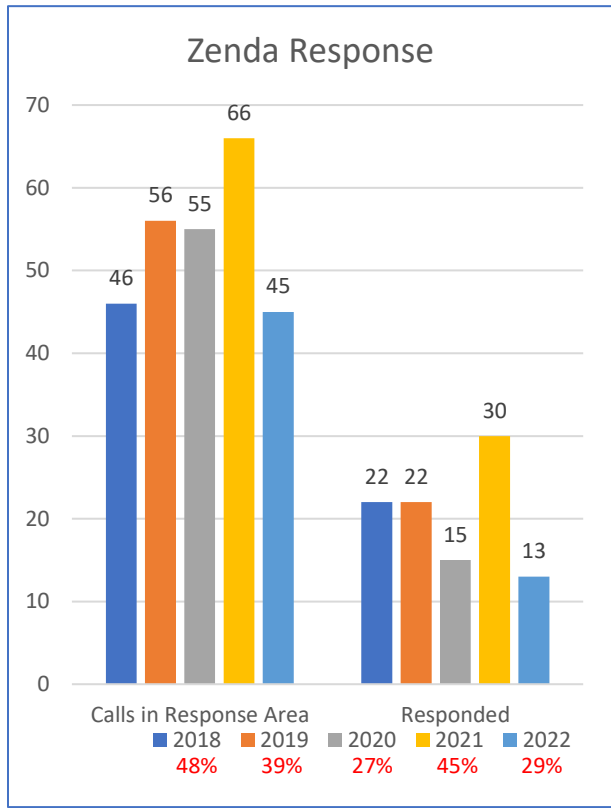
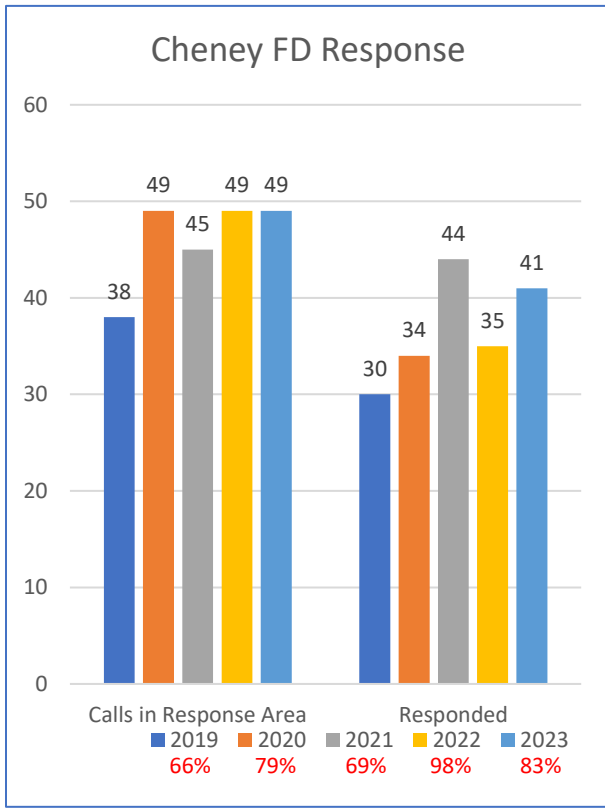
The Zenda responders retired at the end of 2022. The Kingman EMS ambulance that was stationed in Zenda was relocated to Kingman in 2023. Cheney Fire Department responds to 2 townships in northeast Kingman County. There were 49 calls occurring in the Cheney FD response area, and were paged to 43 calls. They responded to 41 (95%) of the calls they were paged to.



Above: City Mechanic, Tyler Esposito, works hard to maintain our EMS fleet and to keep us running.

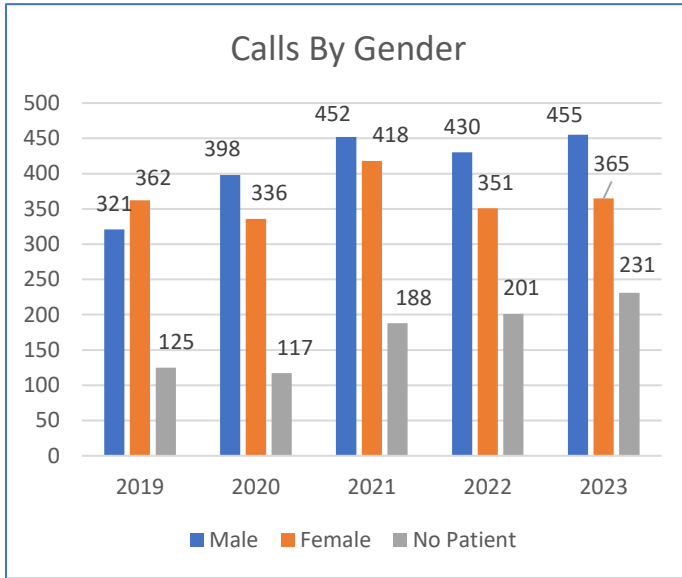
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Kingman Rescue and Outlying Responder Responses

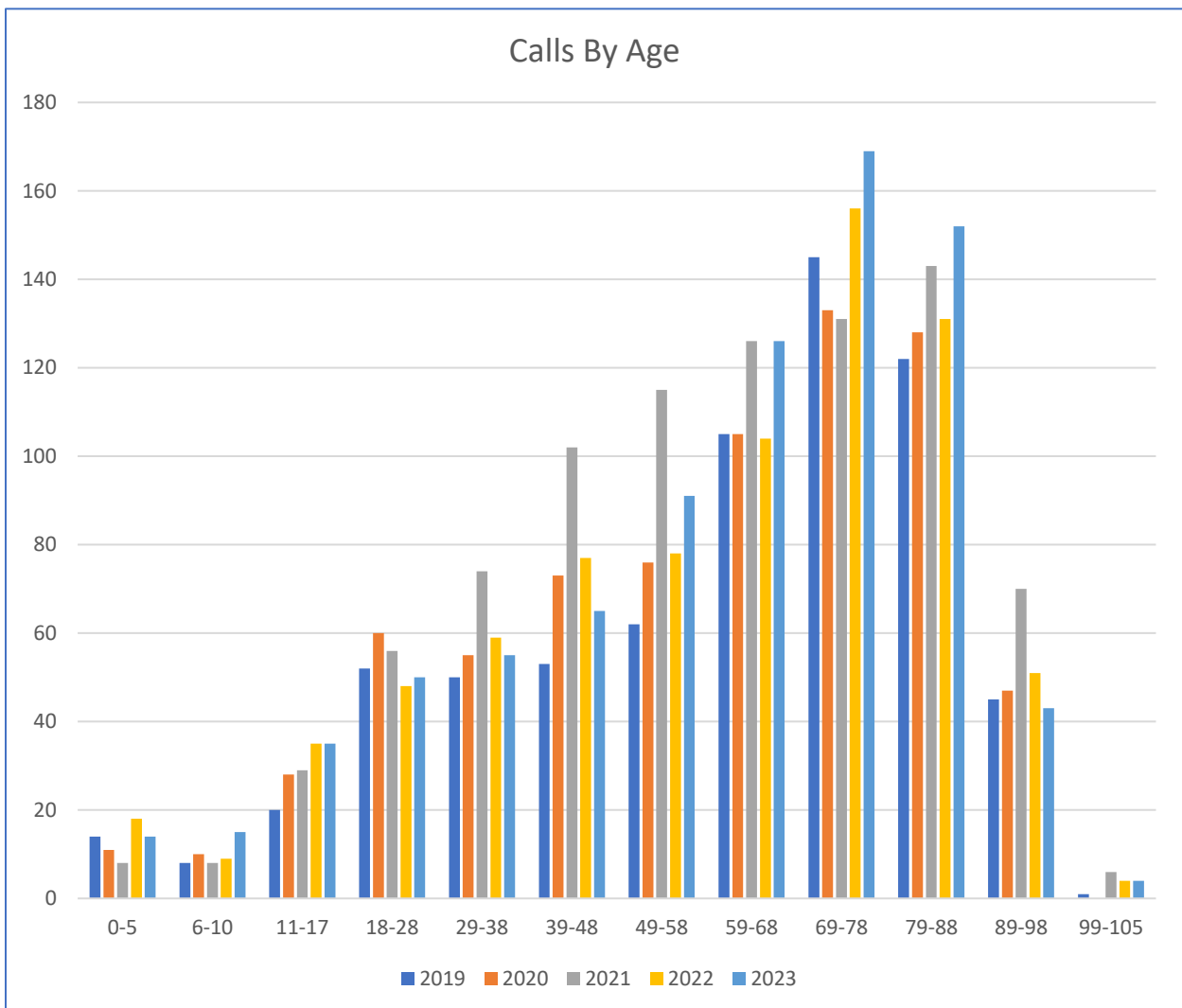


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Patient Demographics

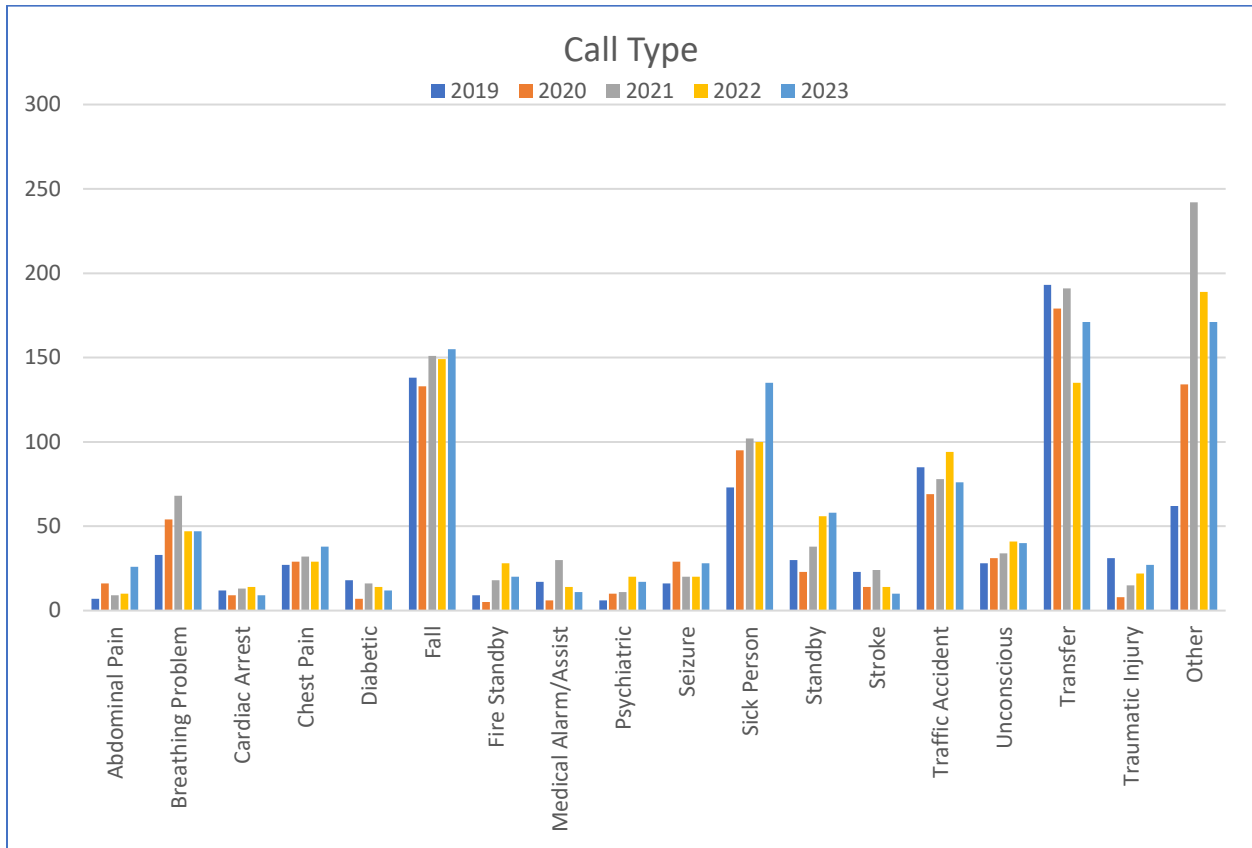


Most of our patients in 2023 were male. As one can see, this has been the trend over the past several years as well. “No Patient” refers to calls where EMS did not encounter a patient, such as a public assist or standby. The majority of our patients were in the 69-78 y/o age bracket and we saw a spike in that same age bracket compared to past years. It is estimated that the baby-boomer generation will continue to assert a demand on healthcare in the coming years, including the demand of Kingman EMS.



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Call Types by Dispatch



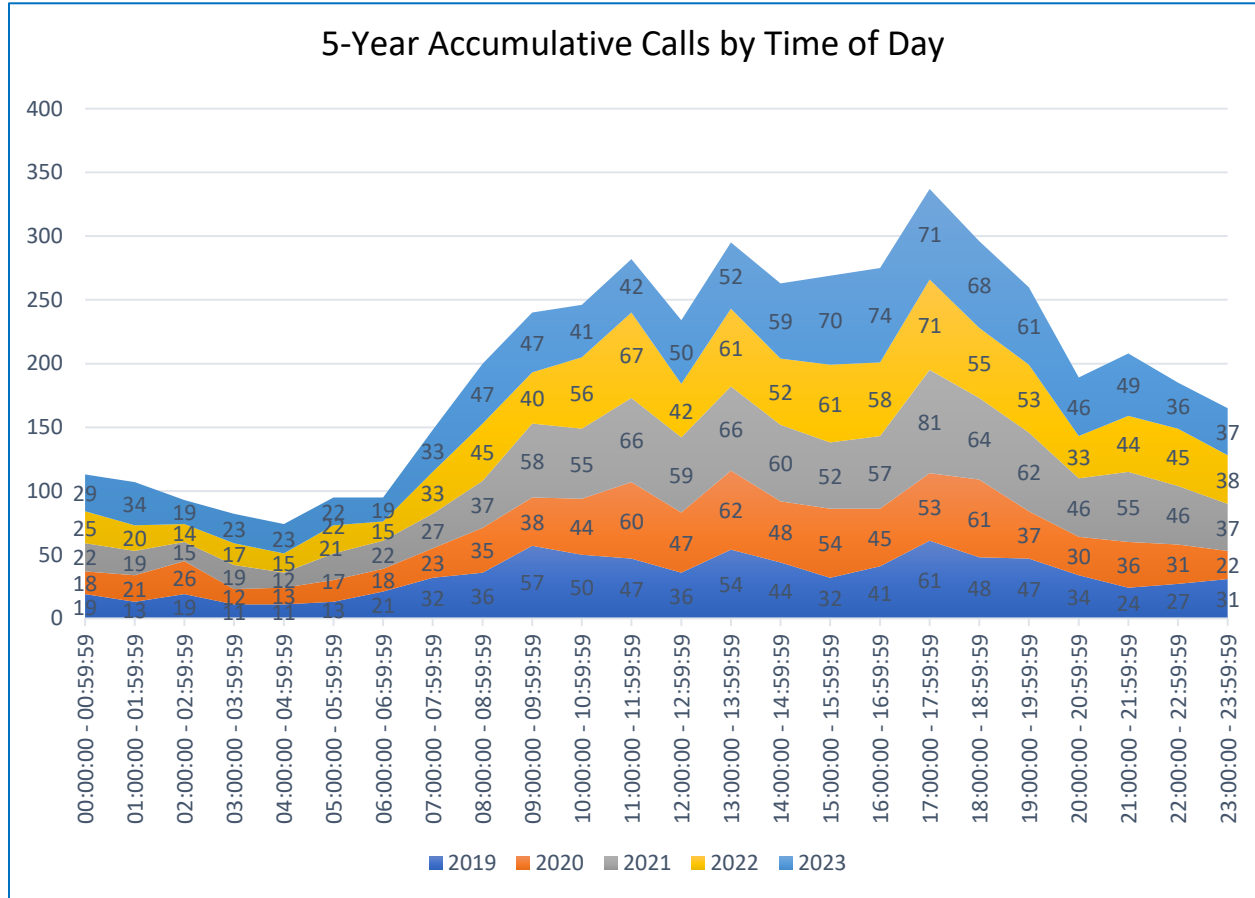
Call Type	2019	2020	2021	2022	2023
<i>Abdominal Pain</i>	7	16	9	10	18
<i>Breathing Problem</i>	33	54	68	47	46
<i>Cardiac Arrest</i>	12	9	13	14	9
<i>Chest Pain</i>	27	29	32	29	37
<i>Diabetic</i>	18	7	16	14	12
<i>Fall</i>	138	133	151	149	155
<i>Fire Standby</i>	9	5	18	28	20
<i>Medical Alarm/Assist</i>	17	6	30	14	11
<i>Psychiatric</i>	6	10	11	20	17
<i>Seizure</i>	16	29	20	20	28
<i>Sick Person</i>	73	95	102	100	135
<i>Standby</i>	30	23	38	56	54
<i>Stroke</i>	23	14	24	14	10
<i>Traffic Accident</i>	85	69	78	94	76
<i>Unconscious</i>	28	31	34	41	40
<i>Transfer</i>	193	179	191	135	190
<i>Traumatic Injury</i>	31	8	15	22	27
<i>Other</i>	62	134	242	189	166

The most common call type in 2023 was transfers, which accounted for 16% of our call volume. Falls were our second highest cause of call volume, which accounted for 15% of our call volume that many times result in a public assist, which means that there are no injuries, and somebody just needed assistance getting up following a fall. “Sick Person” includes several miscellaneous illnesses making that call type our third highest cause of call volume. “Other” includes low volume issues, such as headaches, pregnancy, assault, etc. It is noted that this data reflects how EMS is called out from dispatch and causes sometimes change upon patient contact and further assessment. Example is that some falls or unconscious call outs may be from cardiac arrest, which we cannot identify until we are on scene.

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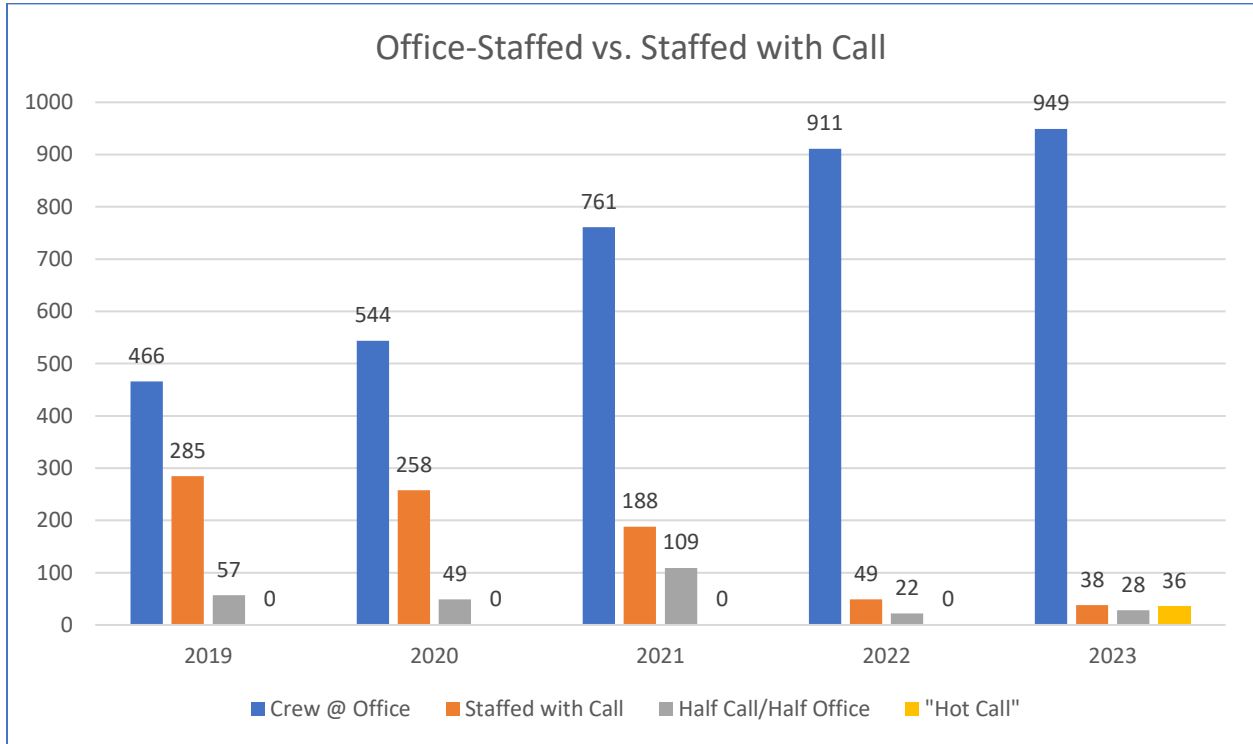
Calls by Time of Day

The decreased response times in the overnight hours seen in 2022 as a result of moving to 24 hour shifts has continued in 2023. Crews now meet the state requirement of 5 minute response time or less on all first out emergency calls due to being staffed at the station 24 hours.

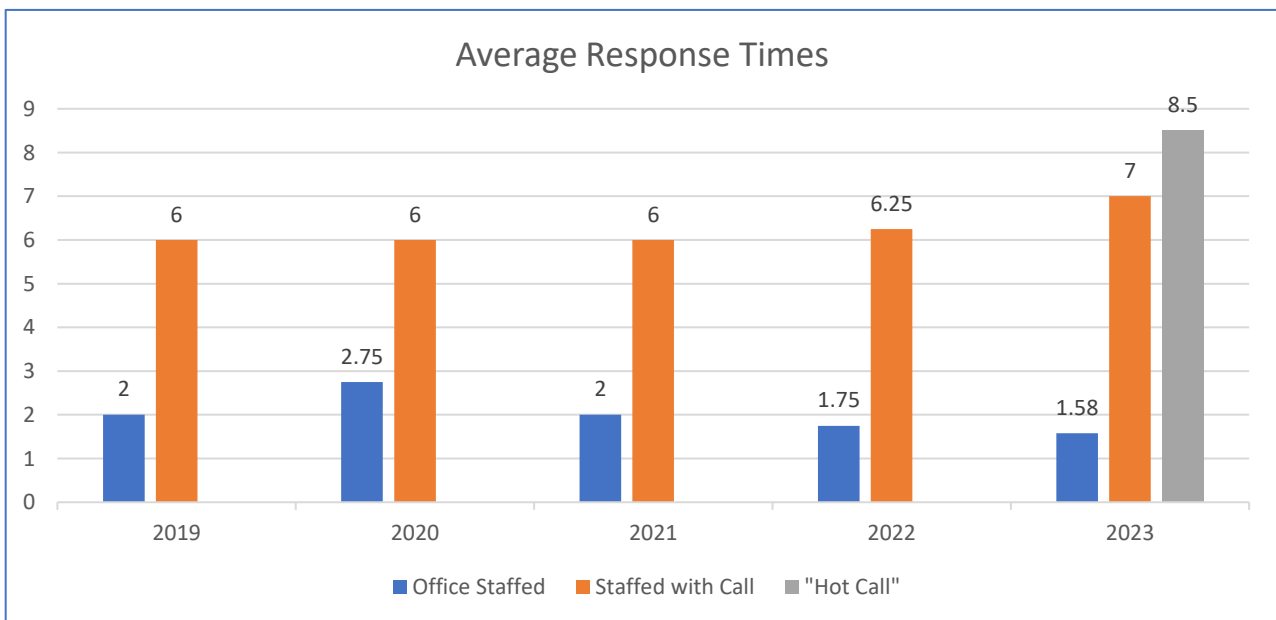


Left: From left to right Paramedic Zach Bieghler, EMT Peyton Kalmar, EMT Jennifer Campbell, EMT Nick Archer, and Paramedic Kirstin Campbell represent Kingman EMS at the Kingman Health Fair. Providers taught hands only CPR, gave tours of the ambulance and rescue truck, and demonstrated how the rescue tools were used.

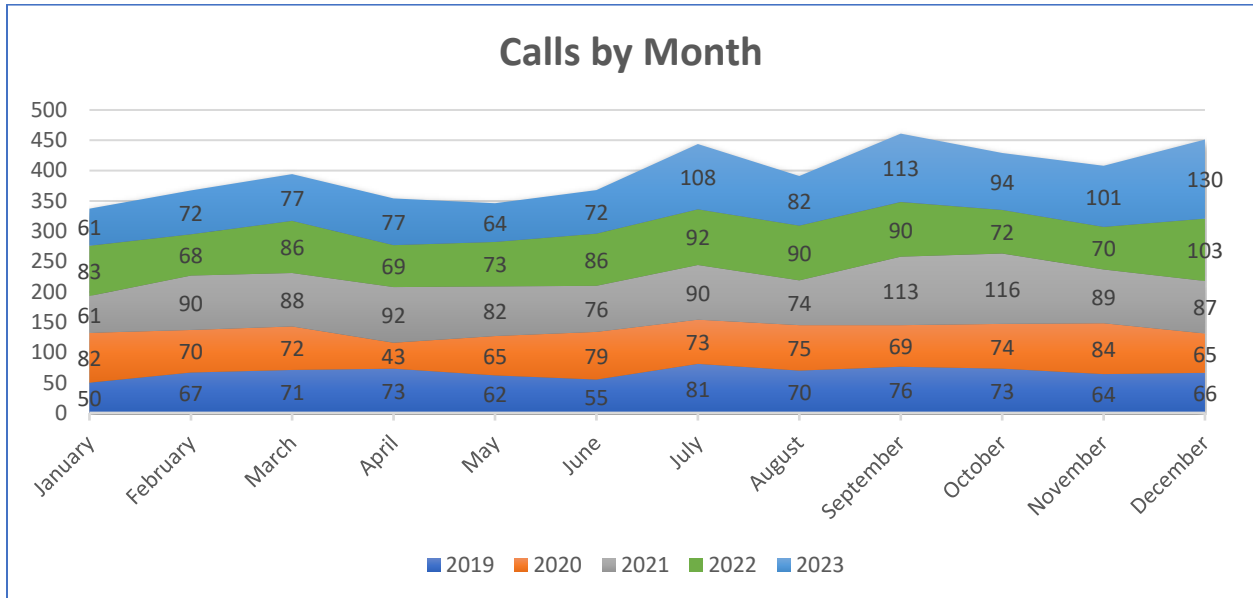
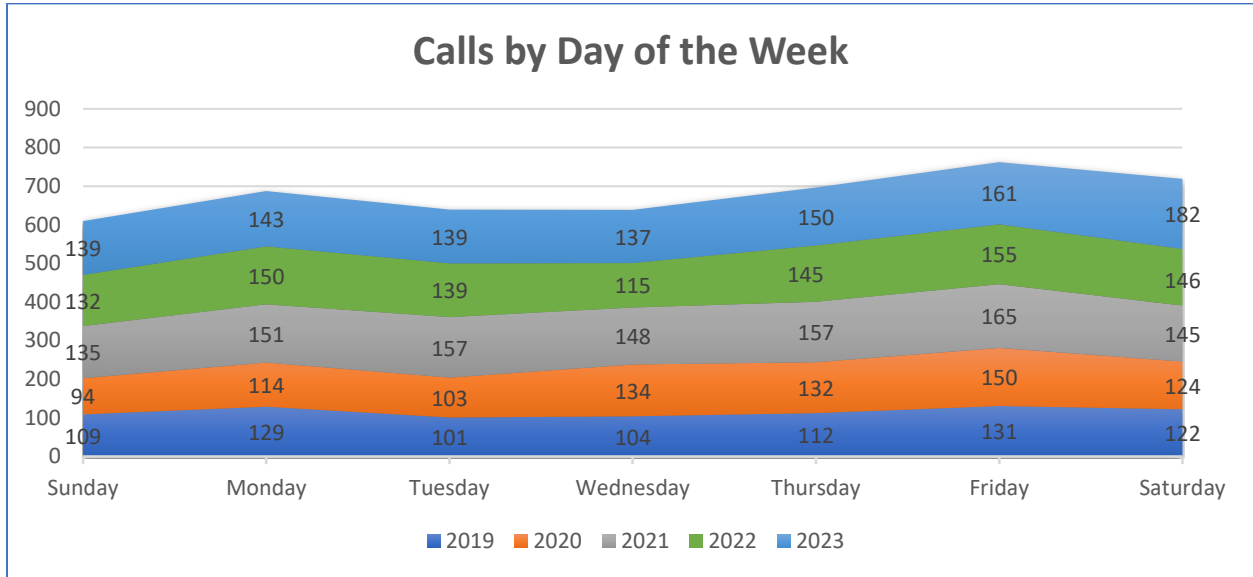
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Looking at the two graphs on this page, one can see that 90% of our calls in 2023 were during times that the office was fully staffed (first-out calls), resulting in 9-1-1 emergency calls having an average response time of 1.58 minutes. 9-1-1 emergency calls where on-call staff was utilized (2nd/3rd/4th out calls) had an average response time of 7 minutes. “Hot Calls” are calls in which there are not providers on standby prior to the call coming out. “Hot Calls” had an average response time of 8.5 minutes. 9-1-1 emergency calls are any calls that require an immediate response and do not include interfacility transfers. Response time is the time between EMS receiving a page for service and the ambulance going enroute to the call.



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Staffing Data

Overtime Worked

Working 24-hour shifts results in automatic overtime, which is budgeted. In 2023, the full-time paramedics, AEMTs, and EMTs were budgeted 800 hours of overtime

each. There are 6 full-time employees excluding the EMS Chief. Some went over that budgeted amount due to the need to cover full-time positions who were out of service on extended illness. Obviously, the department attempts to staff vacancies left by sick and vacation leave with part-time staff; however, there was not always a part-time employee available to cover these openings. Overall the full-time employees came in significantly under hours budgeted. The EMS Director is a salaried position and while they attempts to maintain 40-hour work weeks, there are times that demand exceed the 40 hours per week.

Position	Employment	Hours
Director 1	10 Months	59.5
Director 2	2 Months	11.5
Full-Time ALS	12 Months	2,380.25
Full-Time BLS	12 Months	1,692.75
TOTAL		4,144

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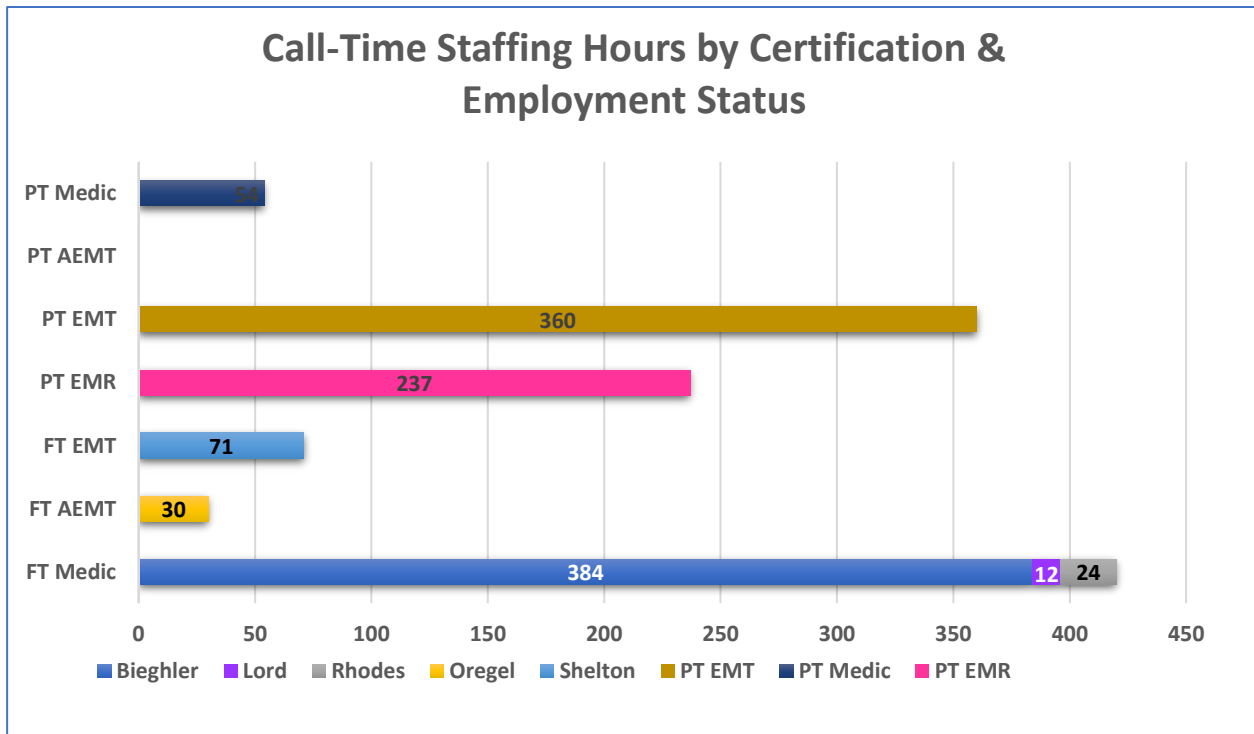
Part-Time Hours Worked

The department continues to rely on part-time staff to ensure proper coverage during times of a full-time employees leave absences, special events, or to supplement peak-time staffing to help increase the chance of a second ambulance being available. Part-time staff is made up of all certification levels and ranges from rescue personnel, scheduled Kingman positions, and outlying responders. Some rescue technicians fill both roles of rescue technician and EMS provider on the ambulance. We could not deliver the quality of care we do without the assistance of our part-time employees. Part-time staff worked more in 2023 due to multiple full-timers out for various reasons and as a result part-timers worked a combined total of 130.75 hours of overtime. Rescue worked time decreased because of the decrease in rescue call volume.

Employment Class	# Employees	2023 Standby Hours	+/- from 2022	2023 Hours Worked	+/- from 2022
<i>Kingman EMS</i>	5	59	+289	1,335	+642
<i>Kingman EMS & Rescue</i>	4	200	-216	425	-187
<i>Rescue Only</i>	8	0	No Change	790	-23
<i>Outlying Responders</i>	2	46	+23	391	+145
<i>Out-of-County</i>	17	45	-86	3,684	+1,201
TOTAL	36	350	-50	6,625	+1,778

Standby Data

With the transition to 24-hour shifts, the department no longer has scheduled call time. Call time is now only assigned as needed when the first ambulance is on a call. Much of the call time is staffed by full-time employees because of open availability. The following is the breakdown of call time hours taken by staff.



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Consecutive Call Status

The following Chart shows the number of times Kingman EMS responded to simultaneous calls. “First Out” means the number of calls where only one ambulance was out. “Second Out” means the number of times two ambulances were out at the same time. “Third Out” is when three ambulances are out on active calls. “Fourth Out” is when all four Kingman ambulances are out on active calls. In some cases, the calls are related, such as two ambulances responding to a car accident. However, most second, third, and fourth out calls are unrelated to other calls.

<i>Call Status</i>	First Out	Second Out	Third Out	Fourth Out
2019	750 93%	53 7%	5 1%	0 0%
2020	767 90%	78 9%	6 1%	0 0%
2021	961 91%	87 8%	10 1%	0 0%
2022	898 91%	83 8%	1 1%	0 0%
2023	932 88.8%	105 10%	12 1%	2 0.2%
TOTAL	4,308 90.6%	406 8.6%	34 0.7%	2 0.04%

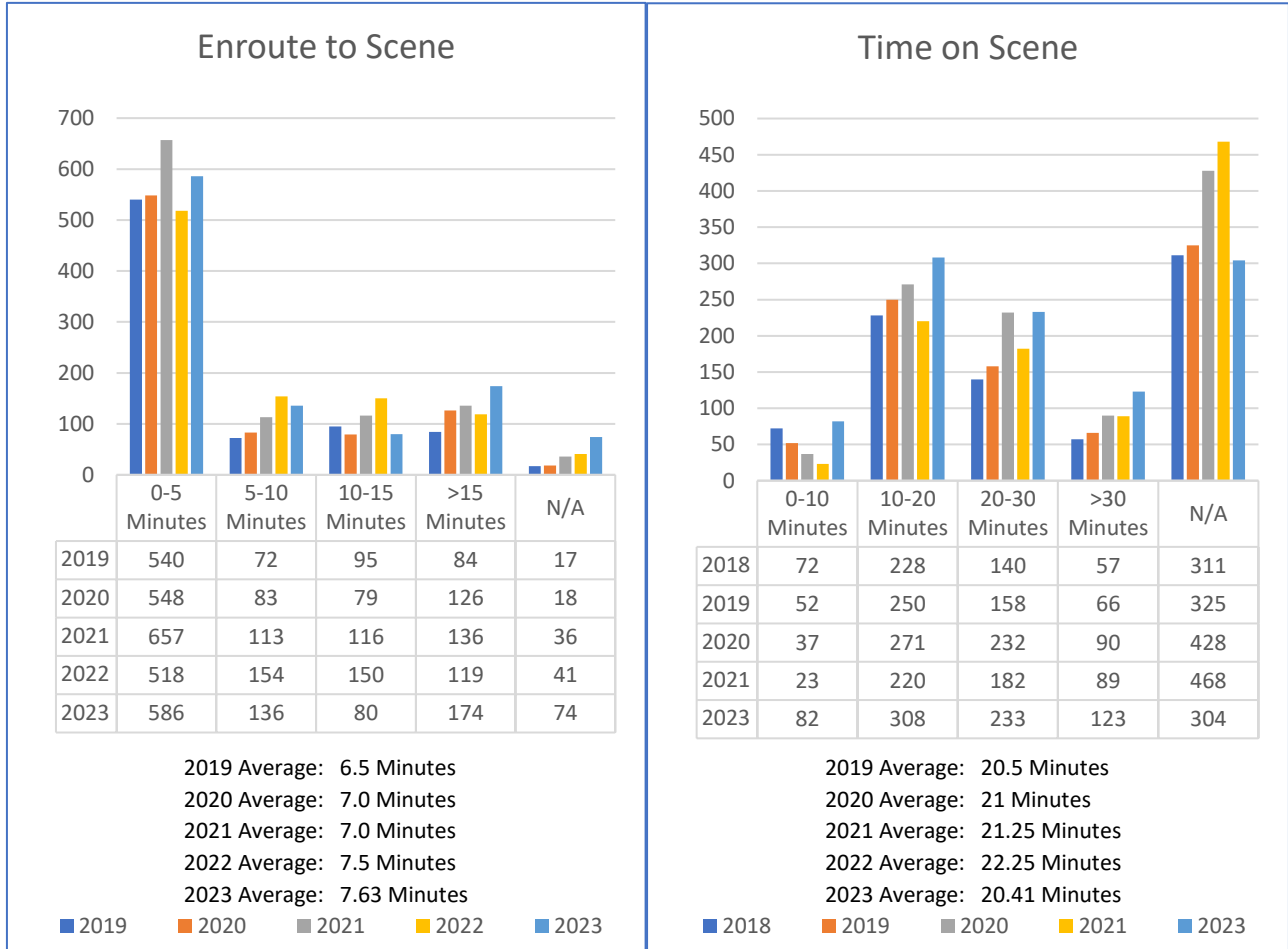
EMS Call Times

Response time is defined as the time from which the ambulance service receives the call from dispatch to the time the ambulance is enroute to the call. The graph labeled “Response Times (ALL CALLS)” is the response times for all calls in which EMS responds, including transfers, standbys, and 9-1-1 calls. The graph labeled “Response Times (EMERGENCY Calls)” are calls that originate from 9-1-1 callers. Standbys and interfacility transfers are not considered emergency calls under KAR 109-2-6, which mandates EMS services maintain an annual average response time of 5 minutes or less.



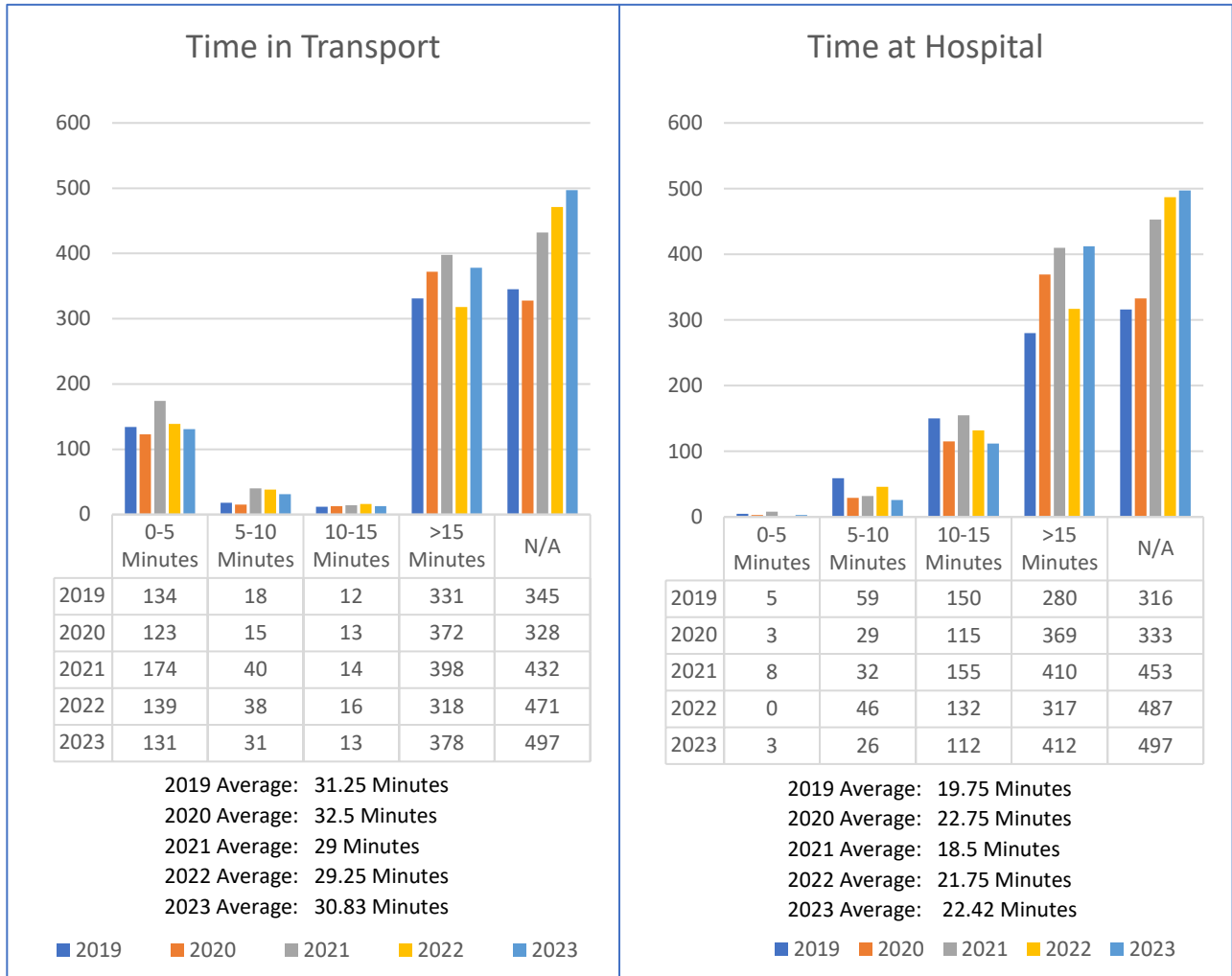
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Response times for non-emergency calls (standbys and transfers) are typically longer because every attempt is made to ensure a second ambulance is available before responding to those calls. The exception to finding standby is emergency standbys such as fires and what the department defines as an emergent transfer. In those cases, the standby and transfer requests are treated like an emergency call. While those calls are treated as an emergency call by the department, they are still defined as non-emergency by KAR 109-2-6.



Left: City Manager Greg Graffman, then EMS Chief Zach Bieghler, Paramedic Kelia Ewy, and EMT Tim Lemen accept a grant from Invenergy for \$8,000. The grant was used to purchase new EMS pumps. These pumps allow providers to give medication in a controlled way.

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In 2022, the **average time** spent on a call from page-out to return to station was 1 hours, 30 minutes. A standard patient care report takes approx. 45-60 minutes to complete upon return to the station. Therefore, the overall average time spent on a call is **approximately 2.5 hours**.

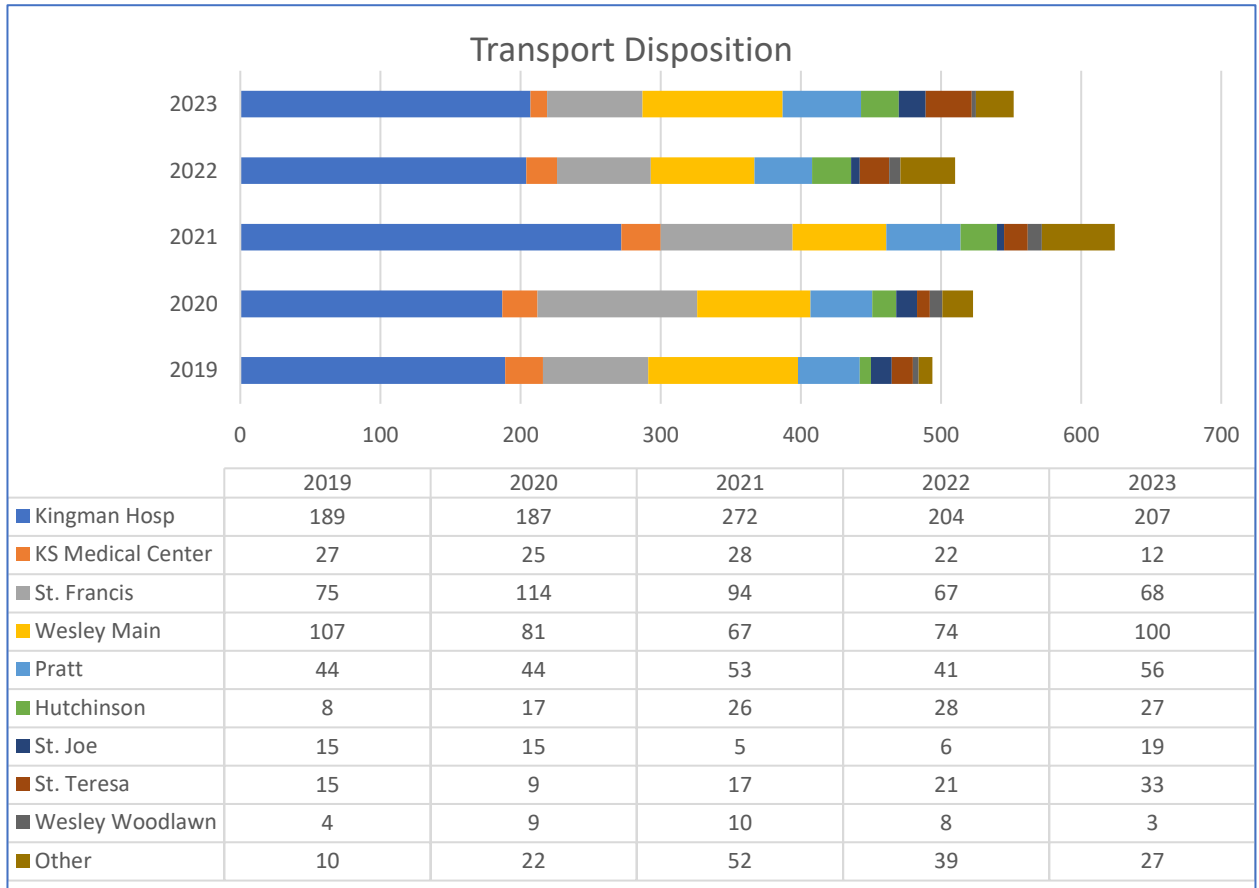
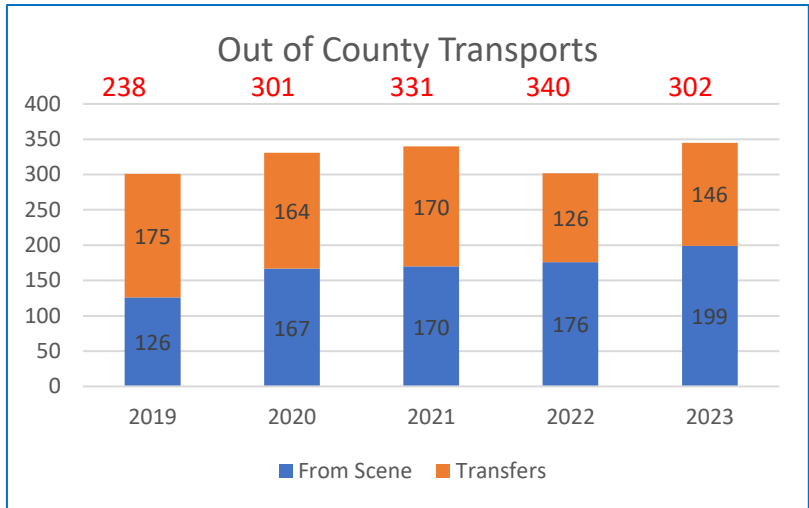


Above: At the 2023 KEMSA conference Kingman took home many awards from the Kansas EMS Association. Kingman EMS was named the 2023 EMS Career Service of the Year. Then EMS Chief Zach Bieghler was awarded the Don E. White Educator of the Year Award. City Manager Greg Graffman received the EMS Support Person of the Year Award.

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Transport Data

Kingman EMS transports to Kingman Healthcare Center most of the time. Kingman Healthcare Center is a critical access hospital. Kingman EMS operates under progressive protocols that allows for hospital bypass with crew discretion. Situations that commonly cause hospital bypass are stroke patients, critical trauma patients, critical cardiac patients, patients that will likely require ICU observation, and patients who request another hospital. While Kingman EMS does transport to hospitals outside of the county, it is worth noting that 43% out-of-county transports were a result of interfacility transfers, while the other 57% were transports directly from the scene. Kingman EMS transported 345 patients of the 820 patient contacts (52%) in 2022. Due to the continued staffing challenges and demand at regional hospitals, Kingman EMS continued to transport patients to hospitals that we do not routinely transport to. It is this reason that there were 27 transports to “other” facilities in 2023.



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Ambulance Vehicle Data

Kingman currently utilizes four ambulances licensed to transport by the Kansas Board of EMS. following describes the trucks and their use. Also provided is the total number of miles traveled for EMS calls. It is important to note that the mileage does not reflect other driving (such as mileage around town for supplies, etc....). Kingman EMS works with the city mechanic to ensure that the trucks are functioning with routine checks and oil changes every 2,000 miles. Because of the speeds, weight, and differing road conditions, we also check tires routinely and end up changing tires about every 20,000 miles (or as tread wear warrants).

Ambulance Use

Unit	Year	Location	Use	2020 Calls	2021 Calls	2022 Calls	2023 Calls
#43	2017	Kingman	9-1-1	627	418	264	333
#41	2021	Kingman	9-1-1	N/A	501	644	529
#42	2012	Kingman	9-1-1	107	96	48	141
#101	1999	Kingman	9-1-1	4	8	15	42
Total				851	1,057	971	1,045

Ambulance Mileage

YR	UNIT	To Scene	To Hospital	To Station	Total Miles
2020	#41 (Backup)	778	2,195	1,968	4,941
	#42 (Backup)	667	2,051	1,907	4,624
	#43 (1 st Out)	3,751	11,899	11,322	26,970
	#101 (Zenda)	92	0	0	92
	TOTAL	5,288	16,145	15,197	36,627
2021	#41 (Backup)	161	440	430	1,031
	#41 (9-1-1)	3,015	8,626	8,660	20,031
	#42 (Backup)	490	1,086	1,185	2,761
	#43 (1 st Out/Backup)	2,453	7,411	7,594	17,458
	#101 (Zenda)	184	0	184	368
TOTAL	6,303	17,563	18,053	41,919	
2022	#41 (1 st Out)	4,072	8,646	8,452	21,169
	#42 (Backup)	245	537	464	1,246
	#43 (Transfers/2 nd Out)	1,473	4,801	4,654	10,928
	#101 (Zenda)	166	0	166	332
	TOTAL	5,955	13,984	13,736	33,674
2023	#41 (1 st Out)	3,320	8,497	7,957	21,431
	#42 (Transfers/2 nd Out)	1,113	2,158	1,979	6,302
	#43 (Transfers/2 nd Out)	1,624	5,554	4,733	13,643
	#101 (Backup)	259	148	101	679
TOTAL	6,316	16,357	14,770	42,055	

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Community Relations

Kingman EMS tries to stay involved in a variety of community events throughout the year. However, the pandemic continued to greatly reduce the number of events held in Kingman County, which limited the department's involvement in the community. The one event that the department enjoys and felt that involvement was needed to continue was our annual food drive. With several citizens out of work due to the pandemic, the Kingman Food Bank found its shelves more desolate as more people utilized their services. Kingman EMS collected 1,940lb of food and goods as well as \$771.82 in cash donations. We thank White's Foodliner and Dollar General for their continued support!



Training

In 2023 Kingman EMS provided in-house continuing education for our providers to assist them in meeting the recertification requirements set out by the State of Kansas. In 2022 Kingman EMS assisted Cunningham EMS by hosting an EMT class in the fall. Cunningham was only able to recruit one student but given the dire circumstances of Cunningham EMS not having any responders following the retirement of EMT Monte Rose, the department felt it necessary to continue the class despite it only having one student. That EMT student was able to successfully gain certification and began working for Cunningham EMS in 2023. Kingman EMS providers have the option to utilize CareerCert, which is an online continuing education platform. The Kansas EMS Association (KEMSA) also provided many CE hours for providers. Kingman EMS providers also attended classes hosted through KEMSA and the annual KEMSA conference which provided many CE opportunities over the course of 3 days.

Kingman EMS utilizes Quality Assurance/Quality Improvement (QA/QI) processes that allow training officers to identify weaknesses and tailor training to help providers strengthen those areas. The QA/QI process is vital to making our providers stronger and more efficient in their skills. By utilizing QA/QI to develop training, providers expand their knowledge base and this allows them to provide progressive and comprehensive care to the citizens we serve.



Above: Kingman EMS providers practice CPR

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The training room at the Kingman EMS facility was able to easily and safely accommodate, not only all providers attending CE classes, but also citizens from the community seeking CPR and First Aid education. Multiple CPR and First Aid classes were hosted during 2023, certifying many members of the community and giving them the confidence to act in the event of an emergency. Kingman EMS also invites Cunningham EMS, Cheney Fire and Rescue, Norwich Ambulance Service, and our Kingman County law enforcement partners to attend training sessions. Our collaboration with these agencies for training strengthens our partnerships and improves coordination on emergency scenes.

Topic	Month	Attendees	Hours	Awarded
<i>Pit Crew CPR</i>	January	17	2.5	36.5
<i>Protocols, SOGs, and Skills</i>	February	17	3	50.25
<i>Pediatric Emergencies</i>	March	14	2.75	36.5
<i>Grain Engulfment</i>	April	19	8	87.75
<i>Code Orange (Mental Health)</i>	May	15	2.25	33.75
<i>Billing and Cardiac Arrest</i>	June	13	3.25	39.25
<i>Airplane Crash Course</i>	July	40	3.25	118.75
<i>Mental Health First Aid</i>	August	7	8	51.25
<i>Patient Assessment and Pharmacology</i>	September	12	3.25	36.25
<i>Patient Assessment Scenarios</i>	October	15	2.75	38.5
<i>Rescue Pit Crew</i>	November	5	2.5	12.5
<i>OB Emergencies</i>	November	13	3	36.75
<i>Haz-Mat Response</i>	December	8	1.75	14

CPR Class Summary

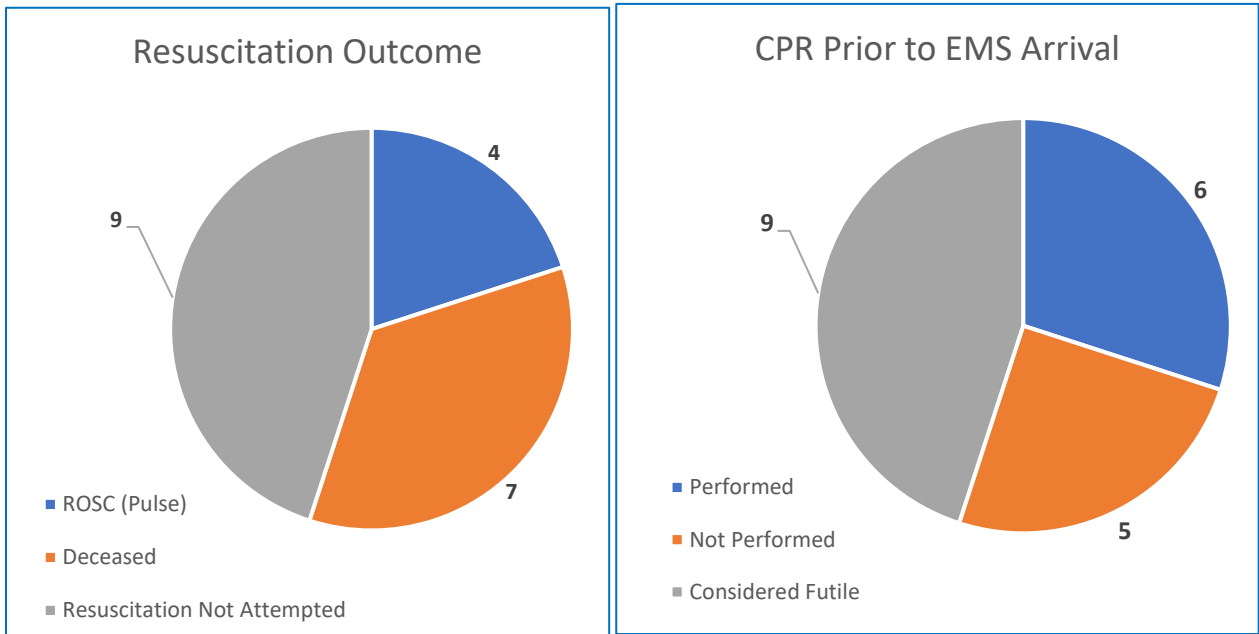
Kingman EMS dedicates many hours per year to the instruction of CPR to the public. In 2023 Kingman EMS switched programs to American Red Cross. In the past Kingman EMS offered three different programs to cover the various classes. The American Red Cross offers the courses Kingman EMS has always offered as well as other various courses in one location. Our most common classes are Adult CPR/First Aid/AED, Pediatric CPR/First Aid/AED, and Basic Life Support. Below is a summary of what the department offered throughout the year compared to past years. Last years numbers were lower than past years.

Course	2019	2020	2021	2022	2023
ASHI BLS (2023 ARC)	70	2	43	28	17
All Age CPR/Adult First Aid (2023 ARC)	32	10	39	38	38
All Age CPR/Pediatric First Aid (2023 ARC)	27	19	14	16	13
TOTAL	129	31	96	82	68

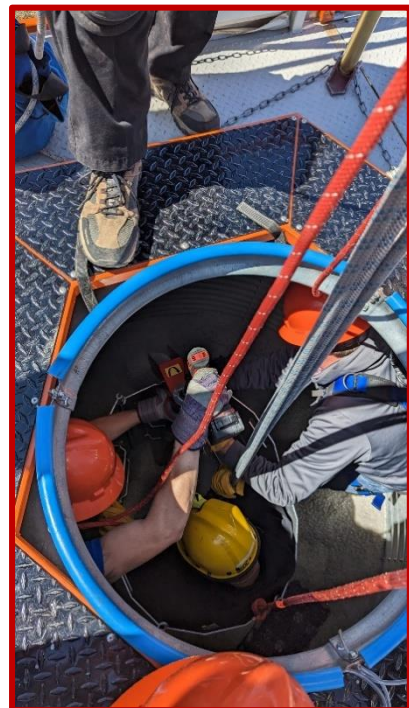
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Cardiac Arrest Field Data

Kingman EMS responded to 8 calls throughout 2023 for reported cardiac arrest. Kingman EMS responded to 12 calls in which the initial dispatch was something other than cardiac arrest/death. Out of the 20 calls in which cardiac arrest was encountered, EMS attempted resuscitation on 11 patients. The other 9 patients were either obviously deceased and resuscitation was considered futile or the patient had Do Not Resuscitate (DNR) orders. 6 of the 11 patients considered viable received CPR prior to EMS arriving (55%). An AED was not deployed in any of the 6 patients where bystanders initiated CPR. Using a team approach called “Pit-Crew CPR”, as well as bystander CPR; EMS and rescue was able to achieve Return of Spontaneous Circulation (ROSC) [a pulse] in 4 of the 11 cardiac arrest patients (36%).



Above: Kingman EMS hosted a Grain Engulfment Course in April. The class was conducted by OSU Fire Service Training and was provided for free.



Right: Providers work to free a simulated patient trapped in grain.

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Billing Summary

The chart below shows the fee schedule that Kingman EMS uses. The current fees listed were approved by the City Commission in September 2021. In late 2023 the City Commission approved a new fee schedule. It is important to note that Kingman EMS writes off many fees due to insurance contracts and policies.

Type of Charge	Charge Amount (Prior to November 2023)	Charge Amount (After November 2023)
<i>BLS Emergent</i>	\$770.00	\$810.00
<i>BLS Non-Emergent</i>	\$550.00	\$580.00
<i>ALS Non-Emergent</i>	\$825.00	\$870.00
<i>ALS Level 1 Emergent</i>	\$880.00	\$925.00
<i>ALS Level 2 Emergent</i>	\$1,100.00	\$1,160.00
<i>Transport Mileage</i>	\$16.50/Mile	\$17.33/Mile
<i>Scene Flight w/o Transport</i>	\$200.00	\$200.00
<i>Evidence Blood Draw</i>	\$40.00	\$40.00
<i>Rescue Extrication</i>	\$150.00	\$150.00
<i>Refusal with Glucagon</i>	\$300.00	\$300.00
<i>Refusal with Dextrose</i>	\$50.00	\$50.00
<i>Standby 1</i>	\$20.00/Hr	\$20.00/Hr
<i>Standby 2</i>	\$30.00/HR	\$30.00/HR
<i>Standby 3</i>	\$50.00/HR	\$50.00/HR
<i>CPR Education</i>	\$35 - \$50	\$50-\$75

Billing Definitions

The following defines the different types of charges by Kingman EMS:

BLS Emergent: Charged when Basic Life Support (BLS) intervention or monitoring was required during the care of a patient. These calls are immediate 9-1-1 responses. This charge also includes deceased patients who either received resuscitation efforts or an assessment to determine the patient was deceased.

BLS Non-Emergent: Charged when BLS intervention or monitoring was required during the care of a patient. This service is typically scheduled with advance notice.

ALS Non-Emergent: Charged when advanced life support intervention or monitoring was required during the care of a patient. In these instances, the department had notice and the nature was not immediate in nature.

ALS Level 1 Emergent: Charged when advanced life support (ALS) intervention or monitoring was required during the care of a patient. These are also immediate level calls where the crew was paged out via 9-1-1.

ALS Level 2 Emergent: Same as ALS Level 1 Emergent -PLUS- advanced procedures such as oral-tracheal intubation, intraosseous access, synchronized cardioversion, chest decompression, or the administration of 3 or more ALS medications.

Mileage: Only patients transported are charged mileage and the mileage is only for "loaded miles." Loaded miles are the number of miles traveled with a patient in the ambulance, otherwise, from the scene to the hospital or other destination.

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Scene Flights: This is charged to patients who are transferred to a flight crew when transport to a landing zone is not necessary. Reimbursement for this service is poor and often not covered by insurance but attempted to reimbursement for supplies used while in the care of EMS while awaiting on an air ambulance.

Evidence Blood Draw: Kingman EMS provides blood draw for the law enforcement agencies of Kingman and the state, including Kingman PD, Kingman SO, Kansas Highway Patrol, and Kansas Department of Parks and Wildlife. Blood draws are typically used in DUI arrests and other arrests where DNA samples are needed. The law enforcement requesting the procedure is billed, and typically recoups the cost through the suspects court fees.

Rescue Extrication: This is billed anytime a person requires the use of heavy rescue or the use of hydraulic tools (such as the Jaws of Life) to extricate patients from damaged vehicles or structures.

Refusal with Glucagon/Dextrose: It is extremely rare that a patient will refuse transport when an emergency medication is needed on scene. However, diabetic emergencies are the exception as the emergency medications given quickly corrects the emergency. The charge is based on the price of the medication, as they greatly vary.

Standby 1: Event standby where only 1 technician is scheduled, who will usually be a BLS provider (non-transporting but dedicated). **Standby 2:** Event standby where the regularly scheduled crew staffs the event, and may leave for 9-1-1 calls, typically an ALS/BLS mix (Transporting but not dedicated to the event).

Standby 3: Event standby covered by a crew specifically scheduled to cover the event, staffed with a minimum of a BLS provider (transporting and dedicated to the event).

CPR Education: All CPR classes that Kingman EMS provides are charged the same price and take the same amount of time to teach.

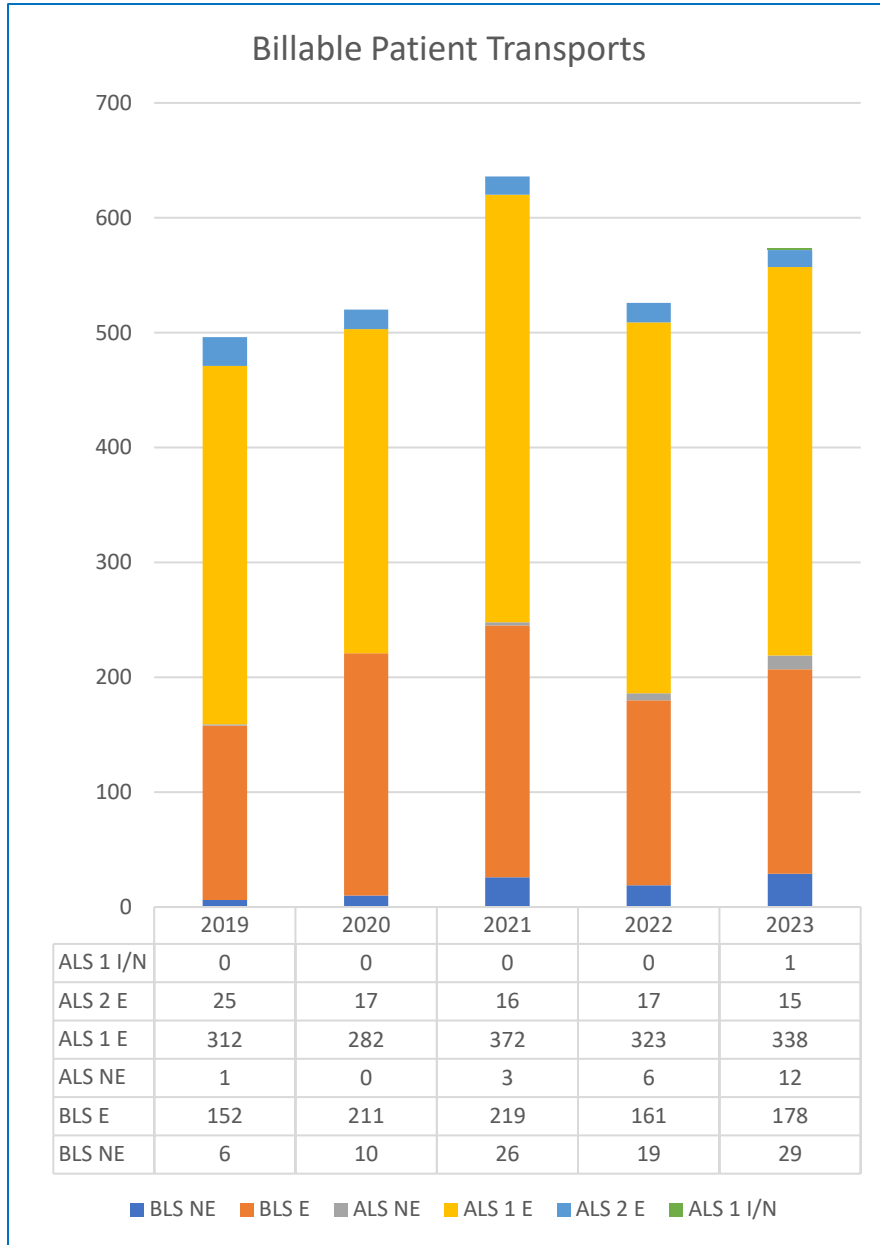


Left: Kingman EMS contracts with Delisa's Medical Billing Services out of Delphos, KS. Pictured is the team who handles all the medical claims and billing for Kingman EMS.

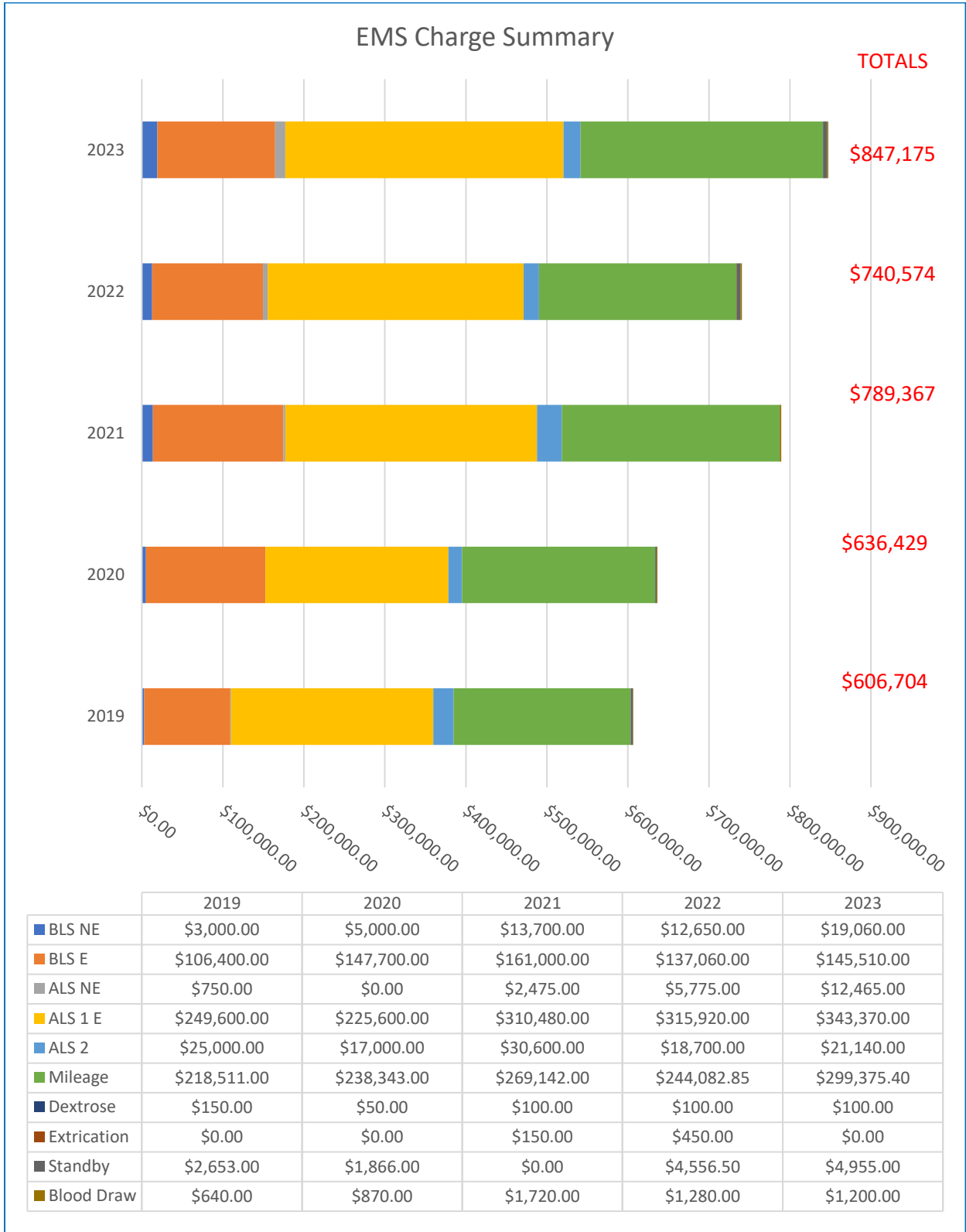
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Charge Summary

Kingman EMS saw an increase in run revenue in 2023. This is attributed to the increase in call volume from the previous year, which brought an increase in billable services. The increase in revenue can be attributed to the increase in emergency calls and transfers that the department saw in 2023. DeLisa’s Medical Billing has also worked hard to ensure that we are bringing in as much as possible.



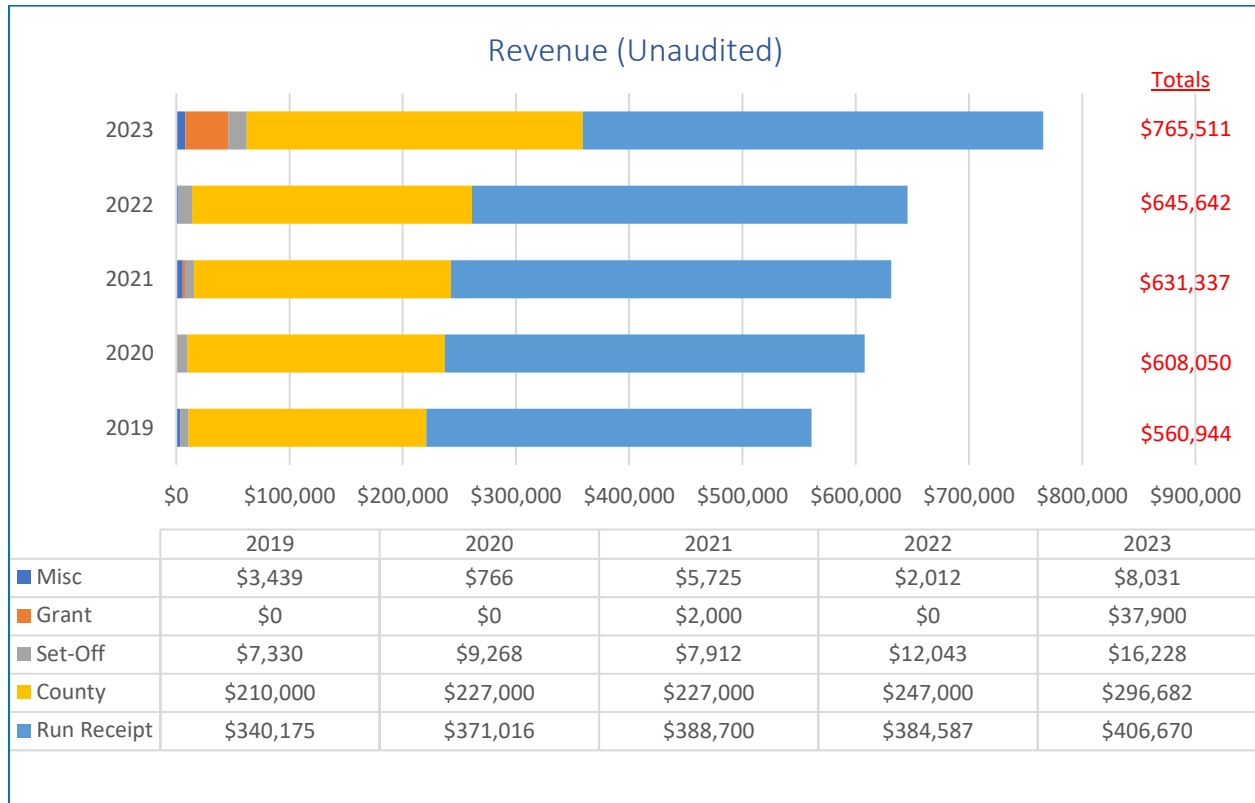
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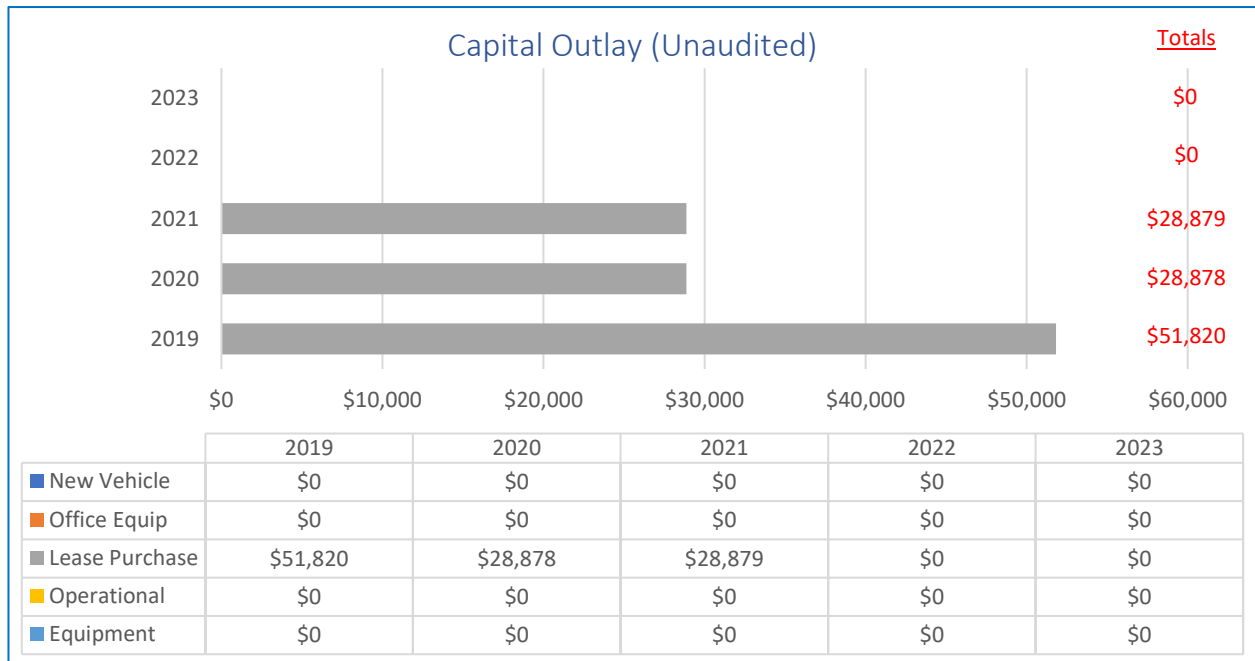
*2021 Standby Note: Standbys performed in 2021 were charged in early 2022.

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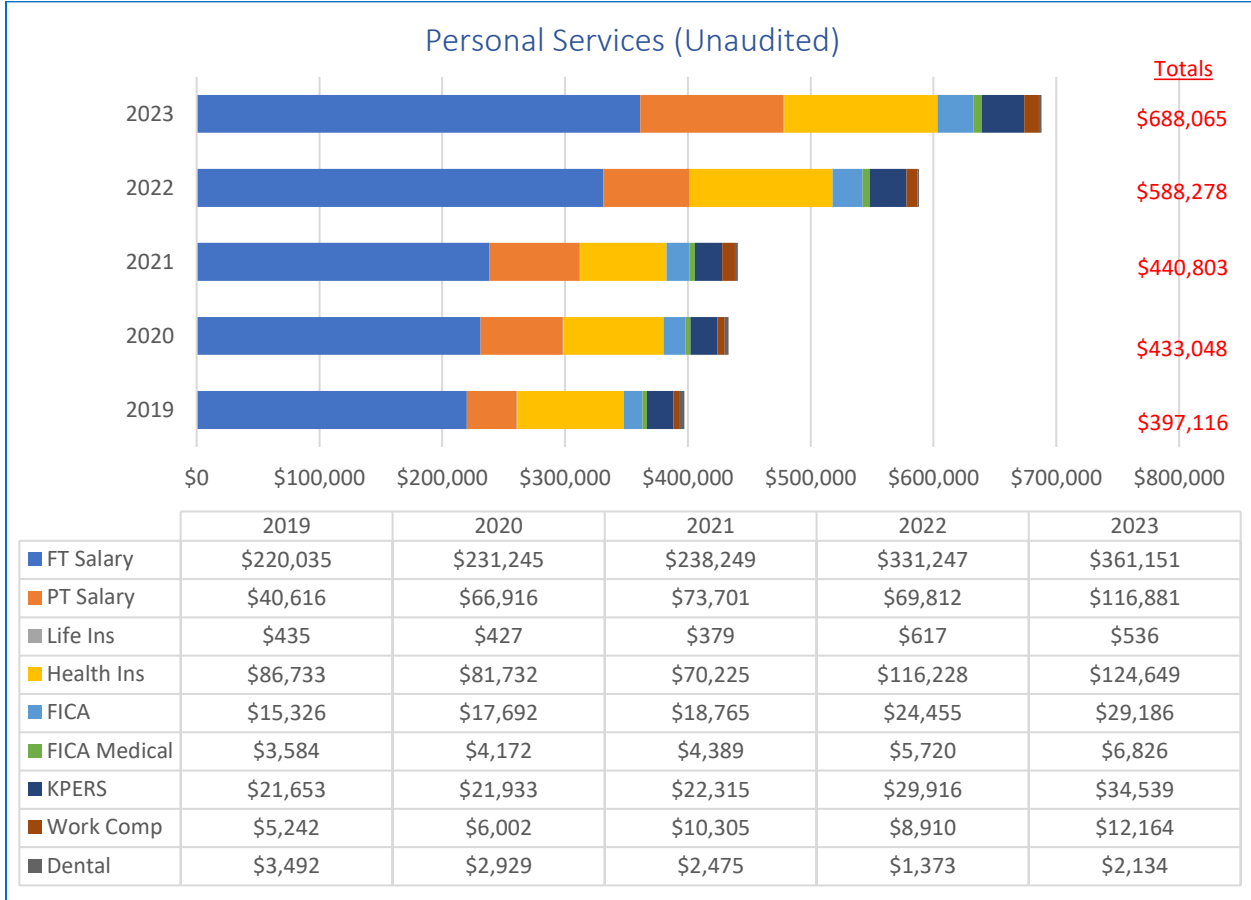
Financial Reports



The department saw an increase in run receipts, which is revenue generated from medical billing. The department budgeted for \$610,632 for 2023, so overall, Kingman EMS saw an additional \$116,978 in revenue over the amount projected. The department did not have any capital outlay projects for 2023.



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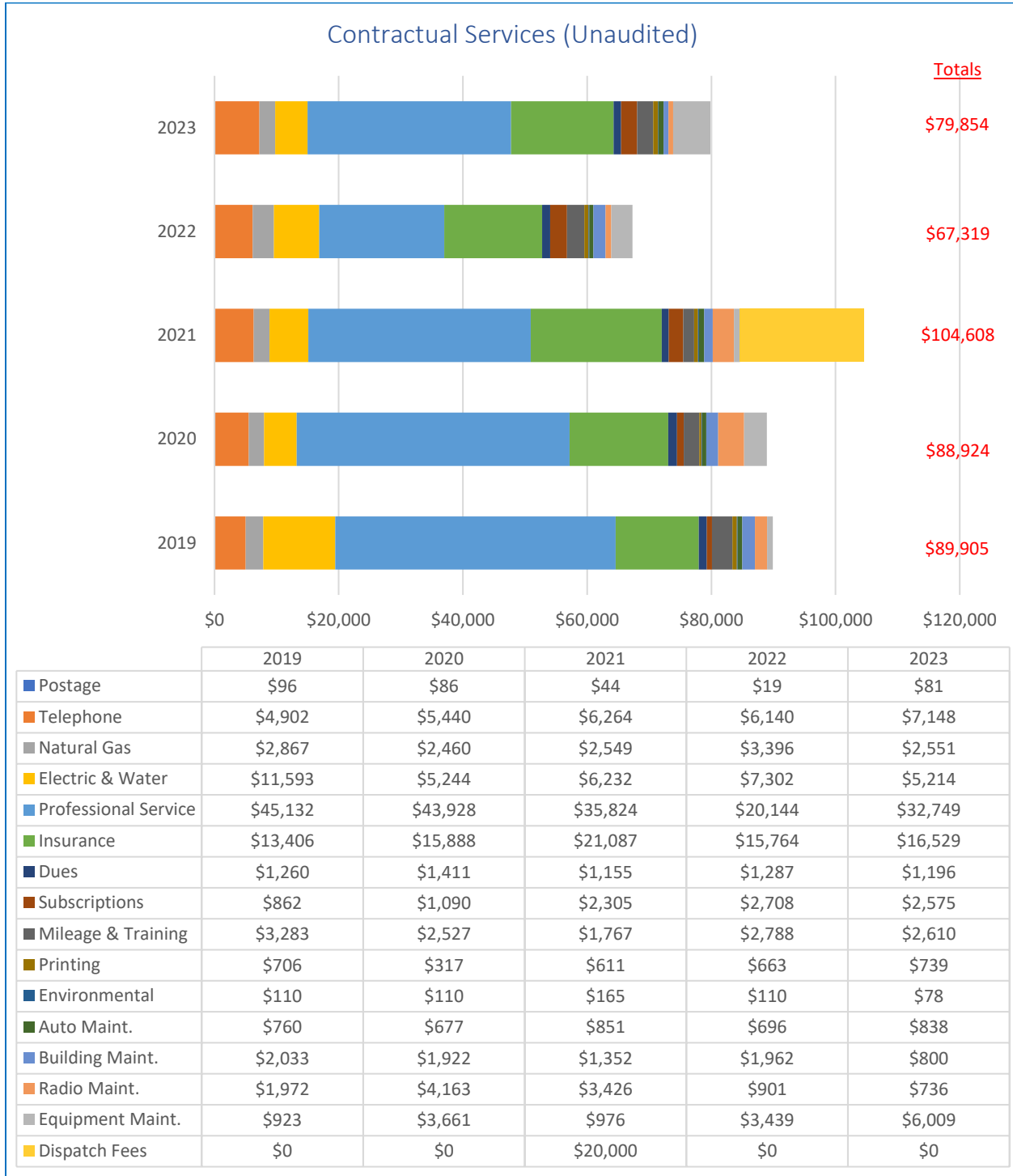


As shown on pg. 15, we routinely struggle to staff a second ambulance when the first ambulance is called out. For this reason, we scheduled a third person in the office during peak operating hours when the director was off to help facilitate additional ambulance staffing and when the first ambulance is on a call or requested for a transfer. In addition to this special staffing, we had two full-time employees who experienced prolonged medical leave of absences which required several hours of coverage by part-time staff. The additional staffing caused a high expenditure of part-time salaries. Despite this increase in part-time salaries, the overall expenditures of personal services did not exceed the budgeted allowance.

Firehouse Subs Public Safety Foundation Grant

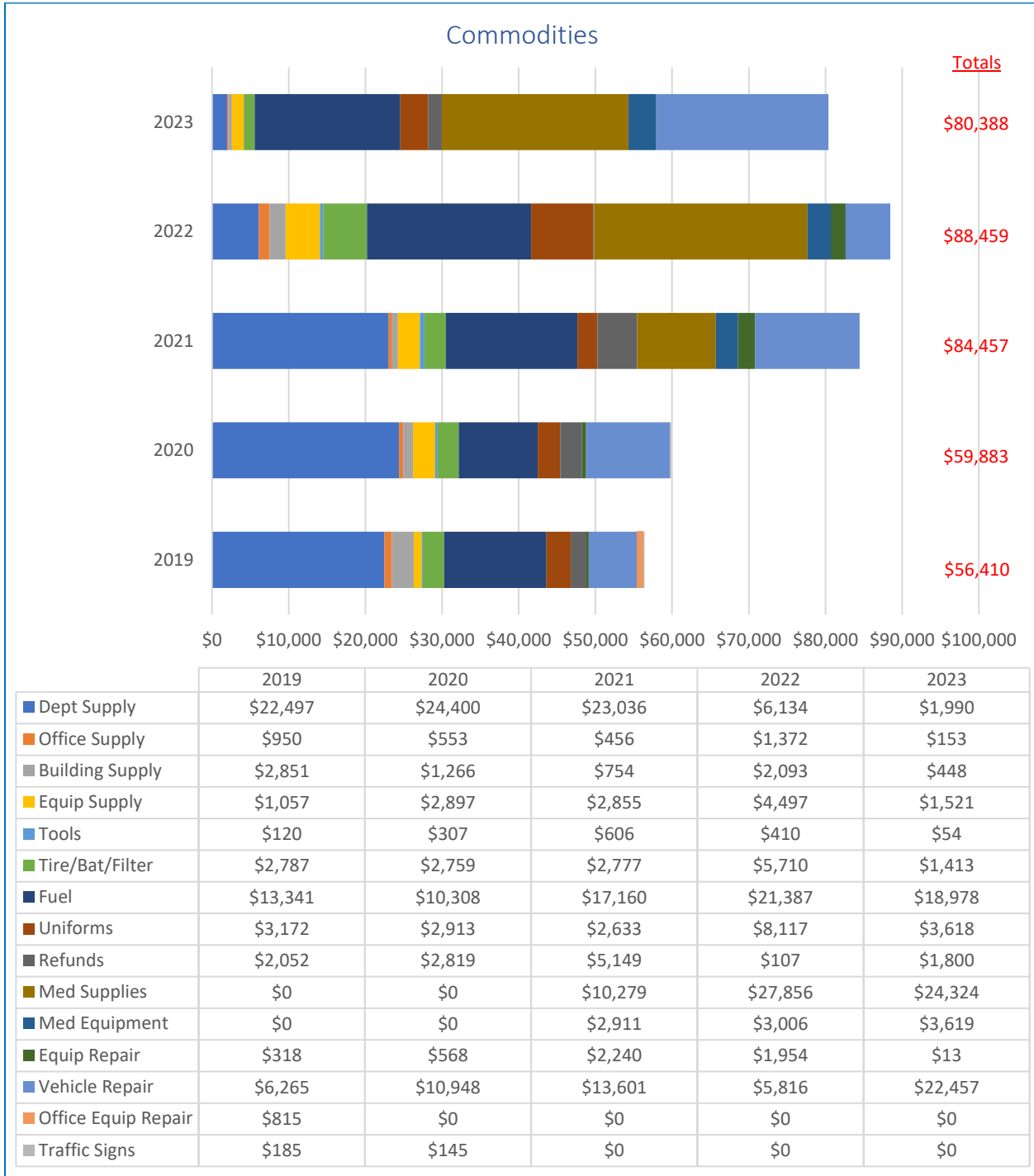
Kingman EMS was awarded a \$29,900 grant from the Firehouse Subs Public Safety Foundation. This grant was used to purchase Battery-Operated rescue tools. This equipment assists rescuers with cutting through vehicles and other materials to gain access to patients who are trapped.

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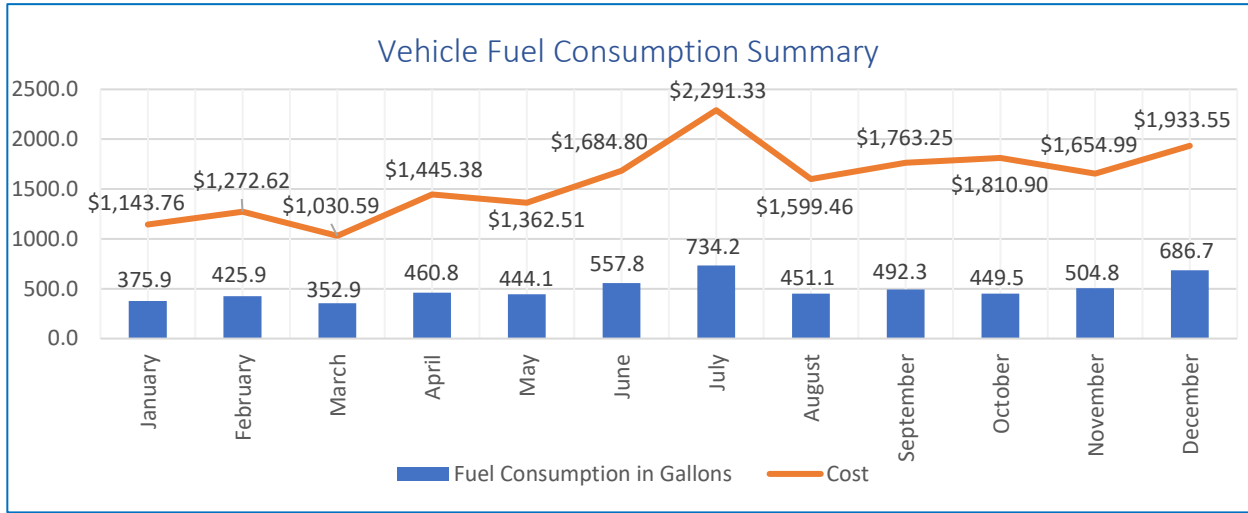
The largest expense in contractual services is professional services. Making up the bulk of this expense is our cost for billing services. Kingman EMS contracts with Delisa’s Medical Billing Services, who charges the department 8.5% of collected revenue, a much better deal than the 10% our previous billing company charged. Also included in professional services is pre-employment screenings and our contractual fees for our Medical Director, Dr. Baxa.

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The department had to add two line-items in 2021 to prepare for some mandatory CMS data collection in 2022 to report in 2023. Those line items were “Medical Supplies” and “Medical Equipment.” Prior to the addition in the late summer, all medical supplies and medical equipment was paid out of “Department Supplies.” It is for this reason that 2022 had a significant reduction in spending under “Department Supplies.” In 2023 there was a large spike in “Vehicle Repair” line item. There were many vehicle issues in 2023 with multiple vehicles resulting in a significant increase in spending in this category.

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Overall Budget Summary

REVENUE

Item	2023 Actual	2023 Budgeted	Used	Budget Variance
Run Receipts	\$406,669.90	\$317,000.00	128%	\$89,669.90
County Share	\$296,681.68	\$293,632.00	101%	\$3,049.68
Set-Off	\$16,227.91	\$0	N/A	\$16,227.91
Misc Revenue	\$8,031.36	\$0	N/A	\$8,031.36
TOTAL REVENUE	\$727,610.85	\$610,632.00	119%	\$116,978.85

EXPENDITURES

Item	Year-to-Date	Total Budget	Used	Variance
Personal Services	\$688,065.36	\$692,990	99%	\$4,924.64
Contractual Services	\$80,853.58	\$81,310	99%	\$456.42
Commodities	\$80,388.48	\$99,650	81%	\$19,261.52
Capital Outlay	\$10,323.41	\$12,400	83%	\$2,076.59
TOTAL EXPENDITURES	\$859,630.83	\$886,350.00	97%	\$26,719.17

TOTAL BUDGET

Item	Year-to-Date	Total Budget	Used	Variance
REVENUE	\$727,610.85	\$610,632.00	119%	-\$116,978.85
EXPENDITURES	\$859,630.83	\$886,350.00	97%	-\$26,719.17
TOTAL CITY BUDGET	\$132,019.98	\$275,718	48%	\$143,698.02