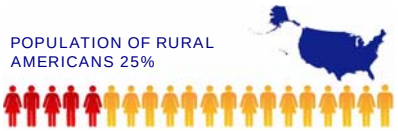
Community Paramedicine

Montana
EMS & Trauma Systems
Chronic Disease Prevention & Health Promotion Bureau

MONTANA DPHHS

Community Paramedicine

POPULATION OF RURAL AMERICANS 25%



PRACTICING PHYSICIANS 10%

Community Paramedicine

Filling an Unmet Need with Untapped Resources

EMS Agenda For the Future – 1996

"EMS of the future should be community-based and fully integrated with the overall health care system"

Community Paramedicine

- **Meets local needs – addresses gaps**
  - Community specific needs assessment
- **Operates within an EMS system**
  - Within scope of practice / expanded role
- **Integrated with healthcare system**

Community Paramedic

- **EMT or paramedic**
- **Additional education & training**
- **Within a designated program**
- **Under medical oversight**
- **Part of community-based team**

Mobile Integrated Healthcare

- Array of mobile health services
- Operated by health agency, facility or system
- Not regulated by a state EMS office for that purpose
- May include variety of providers
- CP may be but one part of service line

Community Paramedicine

Using community paramedics in expanded roles to address locally determined community health needs may be a promising opportunity to leverage an existing caregiver resources to address identified needs and provide overall greater value.

Community Paramedicine: A Promising Model for Integrating Emergency and Primary Care

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Community Paramedicine: A Promising Model for Integrating Emergency and Primary Care

Community Paramedicine

- Act upon patient refusals / alternative transport or care
- Address frequent caller needs with access to primary care and other social services
- Follow-up care for persons recently discharged
  - Discharge instructions, medications, diagnostics
- Provide support for persons with chronic disease
  - Diabetes, congestive heart failure, asthma
- Partner with community health workers / public health
- Hospice – immediate resource to patient or family

Community Paramedicine

Challenges & Opportunities

- Funding and reimbursement
- Regulation
- Expanded roles
- Education
- Medical direction and program oversight
- Integration and collaboration
- Data, performance, outcomes

Community Paramedicine

Challenges & Opportunities

Funding & Reimbursement

Opportunities

- Cost savings
- Nova Scotia – 40% reduction in ER visits; 28% reduction in clinic visits
- TX – 64% reduction in ER visits; $1million / year savings

Challenges

- Still need to make the financial case such that insurance providers will reimbursement for CP services

Community Paramedicine
Challenges & Opportunities

Regulation

Opportunities
- CP = increased role – not increased scope
- What skills and services are allowed

Challenges
- MT statutes = "emergency medical services', "emergency medical program"
- Statute and rule changes to clarify CP implementation

Community Paramedicine
Challenges & Opportunities

Education

Opportunities
- Curriculum and education for CHEMT & CP
- Academic based education…

Challenges
- CP models and roles are evolving and education and refresher education need to be evaluated
- Education for rural areas and providers

Community Paramedicine
Challenges & Opportunities

Integration w/ other health professions

Opportunities
- Collaboration and partnerships with other health providers to meet community needs
- Complementary roles

Challenges
- Fear of EMS supplanting other professions

Community Paramedicine
Challenges & Opportunities

Evaluation and Outcomes

Opportunities
- Building evaluation programs for future programs
- NEMSIS PCR / medical records

Challenges
- Data collection and evaluation (performance improvement) will need to be developed in order to support funding and reimbursement

Community Paramedicine

What Now?
- Is Montana ready for Community Paramedicine?
- Community Paramedicine Strategic Plan
- Develop a multi-disciplinary CP approach for Montana patients
- Foster and fund innovation
- Pilot and evaluate CP in Montana communities

Community Paramedicine

Tier Level	CHW Type	Home/ Community Assessments	Case Management	Health Education	Medical Referrals	Supportive care	Home-based clinical services	Mental health screening	Home-based advanced clinical services
I	CHW/CHR								
II	EMT with CHW								
II	Community paramedic								

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