

REMSA Franchise Compliance Checklist

Franchise Article	Title	Compliance Documentation	Responsible Party	Date Received
1	Definitions	1.1 Definitions - Definitions are stated in the franchise, but are not part of compliance determination		
2	Granting of Exclusive Franchise	2.1 Exclusive Market Rights a) <input checked="" type="checkbox"/> The franchise agreement signed by DBOH and REMSA in May 2014, which gives REMSA the exclusive market rights within the franchise service area (<i>copy on file</i>)	WCHD	7/1/14
		b) <input checked="" type="checkbox"/> All disaster agreements and/or mutual aid agreements (<i>copy on file</i>)	WCHD/ REMSA	12/5/14
		2.2 Franchise Service Area a) <input checked="" type="checkbox"/> Map of the REMSA franchise area (<i>copy on file</i>)	WCHD	7/1/14
		2.3 Level of Care a) <input type="checkbox"/> A copy of state certification for ALS services	REMSA	12/9/15
		b) <input type="checkbox"/> Documentation that demonstrates the staffing model for 9-1-1 units and interfaculty transfer units	REMSA	
		2.4 Term - The franchise term is stated in the franchise, but is not part of compliance determination until 2024		
		2.5 Periodic Review - Requirement of periodic review is stated in the franchise, but is not part of compliance determination until 2024		
		2.6 Oversight Fee a) <input checked="" type="checkbox"/> Copies of quarterly invoices and checks paid to the EMS Oversight Program	WCHD	10/13/15
		2.7 Supply Exchange and Reimbursement a) <input type="checkbox"/> The current supply exchange/reimbursement agreement	REMSA	
		b) <input type="checkbox"/> Documentation that all regional fire agencies were given the agreement - either a signed agreement or evidence the agreement was distributed	REMSA	
c) <input checked="" type="checkbox"/> Confirmation that jurisdictions were reimbursed	WCHD	11/25/15		

2	Granting of Exclusive Franchise (continued)	2.8 No Obligation for Subsidy a) <input type="checkbox"/> A statement from the external auditor that REMSA does not receive any funding/monetary subsidy from the Cities of Reno and Sparks and Washoe County b) <input type="checkbox"/> 501C3 articles of incorporation (<i>copy on file</i>) c) <input type="checkbox"/> Disclosure of grant funding for franchise ground ambulance services, if any	REMSA WCHD/ REMSA REMSA	
3	Governing Body	3.1 Board of Directors a) <input checked="" type="checkbox"/> List of Board members b) <input type="checkbox"/> Legal confirmation that all contractual relationships involving a member of the REMSA Board have been approved by a majority of the disinterested members 3.2 Board Member Separation a) <input checked="" type="checkbox"/> A signed statement by each Board member that declares any contracts/conflicts of interest, and states the Board member is not an employee of REMSA or the contractor 3.3 Meetings a) <input checked="" type="checkbox"/> List of six Board meetings held during the fiscal year b) <input type="checkbox"/> Statement from the DHO that REMSA held six Board meetings with a quorum of its members	REMSA REMSA REMSA REMSA WCHD	11/24/15 11/24/15 11/24/15
4	Ambulance Service Contract, Competitive Bidding and Market Survey	4.1 Market Survey and Competitive Bidding - A market survey or competitive bid is stated in the franchise, but is not part of compliance determination until 2021		
5	Communications	5.1 Radio a) <input type="checkbox"/> 800 MHz Authorization MOUs, or documentation showing attempt to sign an agreement b) <input type="checkbox"/> A checklist that demonstrates outcomes/progress made concerning full interoperability with the Washoe County Regional Communications System (WCRCS) 5.2 Dispatch a) <input checked="" type="checkbox"/> Documentation of regular checks/drills conducted on the backup system	WCHD/ REMSA REMSA REMSA	12/11/15

5	Communications <i>(continued)</i>	b) <input type="checkbox"/> Documentation of one operational drill on the backup system, including dates and names of the individuals who participated c) <input type="checkbox"/> A brief summary of the drill and an AAR-IP d) <input type="checkbox"/> A timeline that demonstrates progress toward the establishment of the CAD to CAD and AVL interfaces e) <input type="checkbox"/> A checklist that demonstrates outcomes/progress made toward the establishment of the CAD to CAD and AVL interfaces 5.3 Change of Priority a) <input checked="" type="checkbox"/> Number of calls that were upgraded and downgraded and why this action occurred (<i>included in monthly Operations Report</i>)	REMSA REMSA REMSA WCHD/ REMSA	 8/25/15
6	Data and Records Management	6.1 Data and Records a) <input type="checkbox"/> A timeline that demonstrates progress toward the establishment of the CAD to CAD interface b) <input type="checkbox"/> A checklist that demonstrates outcomes/progress made toward the establishment of the CAD to CAD interfaces c) <input checked="" type="checkbox"/> List of investigations made by the DHO, or designee during the fiscal year d) <input checked="" type="checkbox"/> Response time compliance report/study zone reports (<i>submitted monthly by REMSA</i>) e) <input checked="" type="checkbox"/> List of DHO requests for data and records during the fiscal year (identifies outcomes of requests to include data provided or reasonable justification why request was not adhered to)	From 5.2d REMSA WCHD WCHD/ REMSA WCHD	 8/25/15 7/22/15 12/1/15
7	Response Compliance and Penalties	7.1 Response Zones a) <input checked="" type="checkbox"/> REMSA Franchise map (Zones A – E) b) <input checked="" type="checkbox"/> Date(s) of meeting(s) of the annual map review c) <input checked="" type="checkbox"/> Zone A report - 90% of all P1 calls have a response time of 8:59 or less d) <input checked="" type="checkbox"/> Zones B, C and D report - 90% of all P1 calls have a collective response time of 15:59, 20:59 and 30:59 e) <input checked="" type="checkbox"/> Zone E report – total number of calls	WCHD WCHD WCHD WCHD WCHD	7/1/14 4/16/15 7/23/15 7/23/15 7/23/15

7	Response Compliance and Penalties (continued)	7.2 Response Determinants		
		a) <input checked="" type="checkbox"/> Meeting date(s) of the EMD determinants review by the REMSA MD and fire agency MDs	REMSA	12/11/15
		b) <input checked="" type="checkbox"/> A summary of all pertinent outcomes/decisions - including updates/change to determinants, if any	REMSA	-----
		7.3 Zone Map		
		a) <input checked="" type="checkbox"/> Date(s) of meeting(s) of the annual map review	WCHD	4/16/15
		b) <input checked="" type="checkbox"/> List of changes to the map, if applicable	WCHD	-----
		c) <input checked="" type="checkbox"/> List of locations of the REMSA franchise map	WCHD	7/1/14
		7.4 Response Time Reporting		
		a) <input checked="" type="checkbox"/> Monthly call/response data with address and zone information (<i>collected monthly from the OCU</i>)	WCHD	8/10/15
		b) <input checked="" type="checkbox"/> Total number of responses in the fiscal year (<i>collected from the OCU</i>)	WCHD	8/10/15
		c) <input checked="" type="checkbox"/> EMS staff monthly review documentation	WCHD	7/23/15
		7.5 Penalties		
		a) <input checked="" type="checkbox"/> Penalty fund dollars verification letter from REMSA and all penalty fund reconciliation documents for FY 14/15	REMSA	12/7/15
		b) <input checked="" type="checkbox"/> CPI calculation	WCHD	5/1/14
		c) <input checked="" type="checkbox"/> Documentation of all penalties – all calls that incurred penalties and number of minutes per month	REMSA	12/9/15
		d) <input type="checkbox"/> Priority 1 penalty fund analysis for FY 13/14 (<i>submitted by independent accounting firm</i>)	REMSA	
e) <input type="checkbox"/> Agreed-upon procedures related to Priority 1 Penalty Fund (<i>submitted by independent accounting firm</i>)	REMSA			
7.6 Exemptions				
a) <input checked="" type="checkbox"/> Monthly exemption reports approved by REMSA (<i>submitted monthly by REMSA</i>)	WCHD/ REMSA	7/22/15		
b) <input type="checkbox"/> Description of REMSA’s internal exemption approval process	REMSA			
c) <input checked="" type="checkbox"/> Any exemption disputes between REMSA and its contractor reviewed by the DHO, if any	WCHD	-----		
d) <input checked="" type="checkbox"/> Letter detailing approved exemptions by the	WCHD	6/27/14		

7	Response Compliance and Penalties <i>(continued)</i>	DHO	WCHD	7/22/15		
		e) <input checked="" type="checkbox"/> Exemption request(s) and any approvals to the DHO, or designee, during the fiscal year, if applicable				
		7.7 Penalty Fund	REMSA	12/9/15		
		a) <input checked="" type="checkbox"/> Letter from REMSA confirming penalty funds are recorded monthly in a separate restricted account				
		b) <input checked="" type="checkbox"/> Documentation of all penalties – all calls that incurred penalties and number of minutes per month			From 7.5c	12/9/15
		c) <input checked="" type="checkbox"/> Documentation of penalty fund usage to include dates received, services rendered, purpose, recipients, etc. <i>(included in the monthly Operations Report, as appropriate)</i>			REMSA	12/9/15
d) <input type="checkbox"/> Documentation from the external auditor that the penalty fund is in a separate restricted account	REMSA					
7.8 Health Officer Approval	REMSA	1/8/15				
a) <input checked="" type="checkbox"/> Letter to the DHO requesting use of penalty fund dollars						
		b) <input checked="" type="checkbox"/> Letter of approval from the DHO	WCHD	2/3/15		
8	Patient Billing	8.1 Average Patient Bill	From 7.5b	5/1/14		
		a) <input checked="" type="checkbox"/> CPI calculation				
		b) <input checked="" type="checkbox"/> Letter(s) from REMSA on schedule of rates, changes and fees as they occur throughout the fiscal year			REMSA	6/30/14 & 1/29/15
		c) <input checked="" type="checkbox"/> Summary of the average bill calculations that are reported monthly to DBOH	REMSA	12/9/15		
		8.2 Increase Beyond CPI				
- Only applicable if REMSA requests an increase beyond the annual CPI adjustment						
8.3 Overage in Bill Amount						
- Only applicable if REMSA exceeds the maximum average patient bill						

8	Patient Billing (continued)	<p>8.4 Third Party Reimbursement</p> <p>a) <input type="checkbox"/> Summary of billing policies/procedures related to billing third parties and mitigating out of pocket expenses</p> <p>8.5 Prepaid Subscription Program</p> <p>a) <input checked="" type="checkbox"/> Silver Saver brochure</p> <p>b) <input checked="" type="checkbox"/> Number of enrolled members as of June 30</p> <p>8.6 Billing</p> <p>a) <input type="checkbox"/> REMSA organizational chart showing placement of billing department</p> <p>8.7 Accounting Practices</p> <p>a) <input checked="" type="checkbox"/> Documentation that the independent auditor adheres to GAAP and GAAS</p> <p>8.8 Audit</p> <p>a) <input type="checkbox"/> FY 14/15 financial audit from independent auditor</p> <p>b) <input checked="" type="checkbox"/> Form 990 from FY 13/14</p> <p>c) <input type="checkbox"/> Agreed-upon procedures on the average bill (submitted by an independent auditing firm)</p>	REMSA	
9	Personnel and Equipment	<p>9.1 Dispatch Personnel Training</p> <p>a) <input checked="" type="checkbox"/> List of dispatch personnel that includes EMD certification, EMT/Paramedic certification number and expiration date</p> <p>9.2 Dispatch Accreditation</p> <p>a) <input checked="" type="checkbox"/> A copy of the certification of the National Academy of Emergency Medical Dispatchers accreditation of the Accredited Center of Excellence (ACE)</p> <p>b) <input checked="" type="checkbox"/> List of Accredited Center of Excellence (ACE) standards/requirements</p> <p>9.3 Personnel Licensing and Certification</p> <p>a) <input checked="" type="checkbox"/> Lists of attendants, EMTs, Paramedics, RNs and EMD certified personnel that includes certification number and expiration date</p> <p>b) <input type="checkbox"/> Letter from State EMS confirming adherence to Chapter 450B</p>	REMSA	9/23/15

9	Personnel and Equipment <i>(continued)</i>	9.4 ICS Training		
		a) <input type="checkbox"/> List of individuals who completed MCIP training	REMSA	
		b) <input checked="" type="checkbox"/> List of individuals trained in ICS 100 <i>(certificates of completion on file at REMSA)</i>	REMSA	9/23/15
		c) <input checked="" type="checkbox"/> List of individuals trained in ICS 200 <i>(certificates of completion on file at REMSA)</i>	REMSA	9/23/15
		d) <input checked="" type="checkbox"/> List of individuals trained in ICS 300 <i>(certificates of completion on file at REMSA)</i>	REMSA	9/23/15
		e) <input checked="" type="checkbox"/> List of individuals trained in ICS 400 <i>(certificates of completion on file at REMSA)</i>	REMSA	9/23/15
		f) <input checked="" type="checkbox"/> List of individuals trained in ICS 700 <i>(certificates of completion on file at REMSA)</i>	REMSA	9/23/15
		g) <input checked="" type="checkbox"/> List of field operational management personnel (both part-time and full-time)	REMSA	12/9/15
		h) <input type="checkbox"/> List of REMSA REOC representatives	REMSA	
		9.5 Ambulance Markings		
		a) <input checked="" type="checkbox"/> Dates of quarterly EMS program “spot checks”	WCHD	4/3/15
		9.6 Ambulance Permits and Equipment		
		a) <input type="checkbox"/> List of all REMSA vehicles	REMSA	
		b) <input type="checkbox"/> List of all capital equipment: monitors, power cots, stair chairs, etc.	REMSA	
c) <input type="checkbox"/> Letter from State EMS office confirming adherence to Chapter 450B (NAC/NRS)	WCHD			
9.7 Field Supervisor Staffing				
a) <input checked="" type="checkbox"/> Example of a week’s supervisor shift schedule	REMSA	12/11/15		
b) <input checked="" type="checkbox"/> Supervisor job description	REMSA	12/9/15		
9.8 Medical Director				
a) <input type="checkbox"/> Medical Director’s CV (from State EMS)	WCHD			
b) <input type="checkbox"/> Documentation that MD meets NAC 450B. 505 state requirements (coordination with State EMS)	WCHD			

10	Quality Assurance	<p>10.1 Personnel</p> <p>a) <input checked="" type="checkbox"/> Written identification of the individual(s) responsible for the internal coordination of medical quality assurance issues</p> <p>10.2 Review</p> <p>a) <input checked="" type="checkbox"/> Quality assurance reviews of ambulance runs for at least 5% of the previous month's ALS calls (<i>included in the monthly Operations Report</i>)</p> <p>b) <input checked="" type="checkbox"/> Summary of the quality assurance review activities conducted throughout the fiscal year</p>	REMSA	12/9/15
11	Community Relations and Public Education	<p>11.1 CPR Courses</p> <p>a) <input checked="" type="checkbox"/> List of all CPR public courses offered during the fiscal year – separated into REMSA employee conducted training and REMSA affiliated trainings (<i>included in the monthly Operations Report</i>)</p> <p>11.2 Community Health Education</p> <p>a) <input checked="" type="checkbox"/> Multimedia campaign(s) about a current need within the community (<i>included in the monthly Operations Report</i>)</p> <p>11.3 Clinical Skills</p> <p>a) <input checked="" type="checkbox"/> List of clinical skill experience(s) offered for specific prehospital care personnel through participating hospitals and the number of attendees, if necessary</p> <p>11.4 Fire EMS Training</p> <p>a) <input checked="" type="checkbox"/> List of training dates provided for regional EMS first responders (at least 4 per year)</p> <p>b) <input checked="" type="checkbox"/> Recommendations from the EMS Advisory Board and presentation to the District</p> <p>c) <input checked="" type="checkbox"/> Minutes of the EMSAB/DBOH demonstrating discussion/recommendations</p>	WCHD/ REMSA	7/23/15
12	Reporting	<p>12.1 Monthly Reports</p> <p>a) <input checked="" type="checkbox"/> Monthly Operations Reports presented to the DBOH</p> <p>12.2 Annual Reports</p> <p>a) <input type="checkbox"/> All documentation for the Compliance Report should be submitted to the WCHD no later than December 31</p> <p>b) <input checked="" type="checkbox"/> Documentation of compliance monitoring</p>	WCHD/ REMSA	7/23/15

13	Failure to Comply/ Remedies	<p>13.1 Failure to Comply with Agreement</p> <ul style="list-style-type: none"> - Failure to comply is stated in the franchise, but is not part of compliance determination unless REMSA does not comply with the terms of the Franchise <p>13.2 Notice of Noncompliance</p> <ul style="list-style-type: none"> - Notice of noncompliance is stated in the franchise, but is not part of compliance determination unless REMSA does not comply with the terms of the Franchise <p>13.3 Failure to Correct/Rescission of Agreement</p> <ul style="list-style-type: none"> - Failure to correct/rescission is stated in the franchise, but is not part of compliance determination unless REMSA does not comply with the terms of the Franchise <p>13.4 Alternate to Rescinding Agreement</p> <ul style="list-style-type: none"> - Alternate to rescinding is stated in the franchise, but is not part of compliance determination unless REMSA does not comply with the terms of the Franchise 		
14	Dispute Resolution	<p>14.1 Agreement to Mediate Disputes</p> <ul style="list-style-type: none"> - Agreement to mediate disputes is stated in the franchise, but is not part of compliance determination unless a dispute occurs 		
15	Financial Assurance/ Continuity of Operations	<p>15.1 Financial Assurance/Continuity of Operations</p> <ul style="list-style-type: none"> a) <input type="checkbox"/> Documentation of the performance security in the amount of 3 million dollars - demonstrating that it is a reserve amount in the equity statement of the REMSA financials (<i>included in the financial audit</i>) 	REMSA	
16	Insurance and Indemnification	<p>16.1 Insurance</p> <ul style="list-style-type: none"> a) <input checked="" type="checkbox"/> REMSA's insurance certificates for general liability insurance, automobile liability, workers compensation and employer's liability b) <input checked="" type="checkbox"/> Documentation that the WCHD is listed as an additional insured <p>16.2 Indemnification</p> <ul style="list-style-type: none"> a) <input checked="" type="checkbox"/> Signed franchise agreement 	REMSA REMSA WCHD	5/19/15 5/19/15 7/1/14

		16.3 Limitation of Liability a) <input checked="" type="checkbox"/> NRS Chapter 41 b) <input checked="" type="checkbox"/> Signed franchise agreement	WCHD WCHD	1/21/15 7/1/14
17	Miscellaneous	17.1 REMSA Contract with Other Entities a) <input type="checkbox"/> All current contracts, service agreements MAAs and MOUs with other political entities	REMSA	
		17.2 Governing Law; Jurisdictions - Governing law; jurisdictions are stated in the franchise, but are not part of compliance determination 17.3 Assignment - Assignment is stated in the franchise, but is not part of compliance determination 17.4 Severability - Severability is stated in the franchise, but is not part of compliance determination 17.5 Entire Agreement/Modification - Entire agreement/modification is stated in the franchise, but is not part of compliance determination 17.6 Benefits - Benefits are stated in the franchise, but are not part of compliance determination 17.7 Notice - Notice is stated in the franchise, but is not part of compliance determination		