

## NURSE Navigation PROGRAM

AMR is at the forefront, leading the charge for a change in the delivery of healthcare. Our company's integrated healthcare models allow our caregivers to deliver care whenever and wherever our patients need it. Our patient-centric solutions are powered by AMR's innovative technology platforms and superior logistical management solutions. Our goal is simple – provide easy access to high-quality care, while controlling costs and improving outcomes for the populations we serve.

AMR proposes to work collaboratively with your organization to develop a medically appropriate nurse triage program for low acuity and frequent system utilizer patients. Even though this proposed program is conceptual for your community, AMR has real life experiences and capabilities with FIRE/EMS-based nurse triage programs. The key goal of this program is to provide the patient with access to appropriate level of care and assure adequate follow-up.

Your Medical Director would have full involvement and authority to approve the EMD-based procedures and protocols associated with the program.

### Medically Appropriate Triage

An overview of the nurse triage program is as follows. When a call comes in to the PSAP and EMD staff have determined the patient does not require EMS response (whether due to its low acuity, detox, or behavioral nature as selected and approved by your medical director), the call would be immediately routed to AMR's Medical Command Center ("MCC") for medically appropriate triage, consultation, navigation and resolution. Our MCC is fully functional today and has the capacity to provide 24/7 coverage.

At the MCC, an AMR nurse navigator (RN or LVN) would provide a quick patient assessment for life threatening conditions and then take the caller through our proprietary nurse triage protocol to determine the most appropriate locus of care. AMR nurse navigators use our evidence-based clinical decision software to immediately evaluate a patient's current condition, providing a needs-matched time-appropriate resource allocation ("NMTARA") to meet the patient's unique healthcare needs. Our five-level triage system ensures we are delivering the right resource at the right time, in the right setting to achieve the right outcome at the right cost.

The care plan for these patients may include the patient's in-network resources, care coordination and navigation services, a stand-alone telemedicine visit, scheduling assistance with the member's primary care physician, urgent care center, federally qualified healthcare center, behavioral health crisis response, or a mobile paramedic response (as available and as permitted locally). The final plan of action would ultimately be determined by availability of resources within a geographical response area, in-network qualification, and your medical directors approval of available resources.

For example, an elderly patient may call and not require an emergent ambulance response. AMR could set-up a referral and utilize existing community based social services, primary health care providers, Community Paramedic and rideshare resources to provide appropriate follow-up care. If necessary and as medically indicated, the patient could be placed back into the EMS system for fire and/or ambulance response, after appropriate Medical Priority Dispatch protocols are applied.

## Experience

We are confident we can provide program with similar success in your community. For those patients requiring medical attention but not an emergency ambulance response, AMR can draw from our experience around the country to provide a variety of scheduled and un-scheduled responses. Below are a few examples of areas we service today with 911 Nurse Triage and Navigation services.

### DC INTEGRATED HEALTHCARE COLLABORATIVE

In Washington, D.C., AMR provides emergency Basic Life Support ambulance response to support D.C. Fire and Emergency Medical Services, responding to more than 45,000 EMS calls each year with a staff of more than 250 employees. Beginning in 2018, AMR added a nurse triage line at the local 911 communications center to help assess medical urgency in calls and steer non-severe cases away from emergency crews and toward proper medical providers.

### ARLINGTON, TEXAS

Another example of experience with these programs can be seen in our Arlington, Texas EMS operation. AMR and the City of Arlington Fire Department are currently piloting an MIH program targeted toward previously identified “frequent utilizers” of 911 services, with the ultimate goal of getting patients the care they need when they need it.

In collaboration, paramedics from both AMR and the City of Arlington Fire Department visit participants three times weekly to check in and perform necessary service. The operation is also actively deploying a 911 nurse triage line to complement this successful program and assist in triaging and navigating 911 callers with COVID type symptoms. We will also be going live with the full 911 Nurse Triage and Navigation solution by 12/15/20.

### DeKalb County, GA

The DeKalb County 911 Nurse Navigation Program, in collaboration with American Medical Response, is the first of its kind in Georgia. The program is designed to provide citizens access to a wider variety of care options to meet their specific medical needs, which may include transportation to a local clinic, urgent care or TeleHealth.

This new program builds on a series of innovative approaches implemented by DeKalb County that have streamlined EMS to better manage 911 call volume and resources in one of the nation’s fastest-growing regions and to better serve the residents of DeKalb County by ensuring that lower acuity calls receive the attention they need and that those callers are presented with more innovative paths to treatment that are often closer to home, where medical treatment can be received faster than a visit to a hospital emergency department.

Through the DeKalb County 911 Nurse Navigation Program, some 911 calls with non-emergency injuries or illnesses will be transferred to a Nurse. The Nurse will assess a patient's symptoms and refer them to the most appropriate medical care that could include referral to a local clinic or urgent care center.

As of today, we are currently triaging about 125 calls a week through the NN line.

## Program Goals

The goal of this 911 Nurse Triage and Navigation program is to:

reduce demand on the overtaxed 911 system

offload the overcrowded emergency departments

provide the right level of care at the right time for the right outcome

improve Fire/EMS moral, improve operational efficiencies like resource availability for high acuity calls, a decrease in fuel and supply spend and overall wear and tear on vehicles by properly managing low acuity 911 complaints through the 911 Nurse Triage and Navigation process.

We know patients often don't want to call 911, but limited healthcare options leave them little choice but to use emergency resources for non-emergent problems. This "Integrated Healthcare Collaborative" seeks to address this and other problems, ultimately providing the right care by the proper method at the right time. Highlights of the collaborative program are described below.

- AMR's system can be fully integrated into the local 911 CAD system or can perform a warm handoff process.
- Our 911 Nurse Triage Staff are all licensed in every state that we provide services.
- We provide the operational and IT infrastructure and equipment, program management, system design, system integration, personnel, and oversight to implement and manage this effort.
- Our system can interface with local Health Information Exchanges and various local medical provider's Electronic Health Record systems, which aggregate patient data into a profile used to make a triage treatment determination and recommendation.
- Our technology automatically provides the nurse navigator with the names and locations of clinics, case worker's information, insurance carrier, transportation vendors, doctors, and patient information to allow them to coordinate referral and transport to an appropriate clinic.
- AMR has the ability to create and maintain preset clinic site and walk-in availability and can restrict access to these particular clinics once the last available space has been utilized for each day.
- Year to date for 2020 about 10000 calls have been triaged through NN and of that:
  - 30% have ended in Nurse Advice/Self Care
  - 40% have been navigated to an alternate destination like an Urgent Care Center
  - 30% have been sent to ED by BLS ambulance

## AMR EXPOSURE/INJURY HOTLINE PROGRAM

AMR had recently developed an internal program, offered as part of our Integrated Healthcare solutions, designed to standardize response and treatment to any AMR personnel injured on the job or exposed to infectious diseases. Given the unique nature of our work, this program uses clinical professionals familiar with our work and workforce.

The Nurse Navigation hotline is available 24 hours a day and is staffed by our own trained nurses who are ready to immediately help AMR employees after an on-the-job injury, illness, or exposure. The intent is to use this service before being seen for any non-emergent on the job injury, illness, or exposure. There is no charge to the operation or employee for use of this service.

AMR hotline provides a variety of benefits:

- Better triage and response to exposures; including coordination with hospitals and occupational health providers

- Reduces unnecessary treatment for exposures when clinically not indicated
- Reduces lost workdays
- Minimizes the need for extensive waits in emergency departments and facilitates evaluation and treatment
- Improves OSHA compliance
- Immediate notification email of exposure/Injury to local leadership when appropriate
- When necessary, employees are referred to local preferred providers

We have taken steps to ensure a simplified, five-step process for employees:

- Employees call a dedicated number
- A nurse navigator triages the employee utilizing evidence-based protocols
- Nurse recommends best course of treatment and follow-up
- Nurse coordinates treatment plan with local supervisor and sends notification email to local leadership team
- Local Operations will still need to enter the incident into STARS post hotline call