

Summary of Maddy Legislation

Background

- The Maddy Emergency Medical Services (EMS) Fund was established under a government code (76000) in 1991, which allows counties to generate revenue through the assessment of penalties on motor vehicles and criminal fines and forfeitures. Santa Barbara County chose not to participate.
- In 2005, the Santa Barbara County Maddy EMS fund has established through special legislation, to address emergency medical and trauma care needs in Santa Barbara County.
- The Richie Pediatric Trauma Fund was established to specifically support for pediatric trauma services (SB1236). This fund has been extended (SB 191) until it sunsets January 1, 2017.

Chronology

- The Nava legislation expired January 1, 2011, although we were still receiving residual funds from the Courts for Nava after that date.
- The Williams legislation began January 1, 2012 and expired on January 1, 2014. We continue to see residual funds from that legislation.

Current status

- There is only one Maddy funding source operational today, SB 191 that includes a portion (15%) of the funding to be allocated the Richie Pediatric Trauma Fund. None of the original Maddy funding for Emergency Medical Services is active at this time.
- It is too early to see what impact the Affordable Care Act will have on the request for Maddy funds from trauma service providers. Many who did not previously have health care coverage may now have funding sources.
- There is no new legislation at this time.

MADDY EMS FUND HISTORY

1991 – Based on a recommendation from the Courts and the Law and Justice Community, the Santa Barbara County Board of Supervisors passed Resolution # 91-682 which allocated all funds collected under Government Code 76000 to the Courthouse Construction Fund and Criminal Justice Facility Construction Fund. The option to implement Maddy Emergency Medical Services (EMS) Fund was not taken at that time.

2003 – Board of Supervisors directed EMS Agency staff to work with other interested parties to seek legislation to establish a Maddy EMS Fund.

2005 – SB 635 was signed into law allowing the County to establish a Maddy EMS Fund by increasing surcharges on fines and forfeitures under GC76000, for Santa Barbara County only, with a sunset date of January 1, 2007.

2007 – AB 2265 extended the sunset date to January 1, 2009 and required the County place an appropriate tax measure on the ballot on or before November 2008.

2008 – Measure S, a parcel tax of \$35.15 per parcel of property was placed on the February 5, 2008 election, but failed to gain the required 2/3 votes to pass.

2008 – AB 1900 was proposed with the stipulation that “should AB1900 be signed and chaptered into law, it is the clear understanding of the legislature and the Governor that the County would not pursue another legislative bill to further extend or remove the sunset date of the Maddy EMS Fund”.

2009 – AB1900 went into effect providing Maddy EMS funding based on fines and forfeitures on alcohol and drug related violations only. It reduced the funding from \$1.9 million to \$600,000 annually. AB 1900 extended the sunset date until January 1, 2011. It stipulated that the County would address Maddy funding through a local mechanism.

2009 – SB 1265 statewide legislation provided an increase in fine and forfeitures on GC 76000 to enhance Maddy funds and to fund pediatric trauma care. Santa Barbara County passed a resolution in December, 2008 that provided access to these funds, which will sunset January 1, 2014.

2011 - Assembly Member Williams proposed legislation to continue Maddy funding in Santa Barbara County. The bill indicated the County would place a tax measure before voters to generate ongoing funding to support the Maddy EMS Fund.

2012 – AB 412 signed into law continues limited fines and forfeitures to alcohol and drug related violations to authorize a Maddy EMS Fund for Santa Barbara with sunset date of January 1, 2014, with the stipulation that the County would address Maddy funding through a local mechanism.

2013 - SB 191/Padilla extend 1265 until Jan 1, 2017 which authorizes counties to continue to collect funds used to support local emergency medical services systems, pediatric trauma centers, and hospitals and physicians who provide uncompensated trauma and emergency care to ill and injured patients. The “Richie” pediatric trauma fund was a key factor in establishing our pediatric trauma center. SB 191 will ensure the continuance of “Richie” pediatric trauma funding as well as funding for local emergency medical and trauma care services and support local EMS agencies.

2014 – Maddy EMS Fund AB 412 for Santa Barbara sunset Jan 1. Statewide Maddy funding continues with SB191 until Jan 1 2017.



California
LEGISLATIVE INFORMATION

SB-191 Emergency medical services. (2013-2014)

Senate Bill No. 191

CHAPTER 600

An act to amend Section 76000.5 of the Government Code, and to amend Section 1797.98a of the Health and Safety Code, relating to emergency medical services.

[Approved by Governor October 05, 2013. Filed with Secretary of State October 05, 2013.]

LEGISLATIVE COUNSEL'S DIGEST

SB 191, Padilla. Emergency medical services.

Existing law establishes the Maddy Emergency Medical Services (EMS) Fund, and authorizes each county to establish an emergency medical services fund for reimbursement of costs related to emergency medical services. Existing law, until January 1, 2014, authorizes county boards of supervisors to elect to levy an additional penalty, for deposit into the EMS Fund, in the amount of \$2 for every \$10 upon fines, penalties, and forfeitures collected for criminal offenses. Existing law, until January 1, 2014, requires 15% of the funds collected pursuant to that provision be used to provide funding for pediatric trauma centers.

This bill would extend the operative date of these provisions until January 1, 2017. The bill would also make a technical, nonsubstantive change to these provisions.

Vote: majority Appropriation: no Fiscal Committee: no Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 76000.5 of the Government Code is amended to read:

76000.5. (a) (1) Except as otherwise provided in this section, for purposes of supporting emergency medical services pursuant to Chapter 2.5 (commencing with Section 1797.98a) of Division 2.5 of the Health and Safety Code, in addition to the penalties set forth in Section 76000, the county board of supervisors may elect to levy an additional penalty in the amount of two dollars (\$2) for every ten dollars (\$10), or part of ten dollars (\$10), upon every fine, penalty, or forfeiture imposed and collected by the courts for all criminal offenses, including violations of Division 9 (commencing with Section 23000) of the Business and Professions Code relating to the control of alcoholic beverages, and all offenses involving a violation of the Vehicle Code or a local ordinance adopted pursuant to the Vehicle Code. This penalty shall be collected together with and in the same manner as the amounts established by Section 1464 of the Penal Code.

(2) This additional penalty does not apply to the following:

(A) A restitution fine.

(B) A penalty authorized by Section 1464 of the Penal Code or this chapter.

(C) A parking offense subject to Article 3 (commencing with Section 40200) of Chapter 1 of Division 17 of the Vehicle Code.

(D) The state surcharge authorized by Section 1465.7 of the Penal Code.

(b) Funds shall be collected pursuant to subdivision (a) only if the county board of supervisors provides that the increased penalties do not offset or reduce the funding of other programs from other sources, but that these additional revenues result in increased funding to those programs.

(c) Moneys collected pursuant to subdivision (a) shall be taken from fines and forfeitures deposited with the county treasurer prior to any division pursuant to Section 1463 of the Penal Code.

(d) Funds collected pursuant to this section shall be deposited into the Maddy Emergency Medical Services (EMS) Fund established pursuant to Section 1797.98a of the Health and Safety Code.

(e) This section shall remain in effect only until January 1, 2017, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.

SEC. 2. Section 1797.98a of the Health and Safety Code is amended to read:

1797.98a. (a) The fund provided for in this chapter shall be known as the Maddy Emergency Medical Services (EMS) Fund.

(b) (1) Each county may establish an emergency medical services fund, upon the adoption of a resolution by the board of supervisors. The moneys in the fund shall be available for the reimbursements required by this chapter. The fund shall be administered by each county, except that a county electing to have the state administer its medically indigent services program may also elect to have its emergency medical services fund administered by the state.

(2) Costs of administering the fund shall be reimbursed by the fund in an amount that does not exceed the actual administrative costs or 10 percent of the amount of the fund, whichever amount is lower.

(3) All interest earned on moneys in the fund shall be deposited in the fund for disbursement as specified in this section.

(4) Each administering agency may maintain a reserve of up to 15 percent of the amount in the portions of the fund reimbursable to physicians and surgeons, pursuant to subparagraph (A) of, and to hospitals, pursuant to subparagraph (B) of, paragraph (5). Each administering agency may maintain a reserve of any amount in the portion of the fund that is distributed for other emergency medical services purposes as determined by each county, pursuant to subparagraph (C) of paragraph (5).

(5) The amount in the fund, reduced by the amount for administration and the reserve, shall be utilized to reimburse physicians and surgeons and hospitals for patients who do not make payment for emergency medical services and for other emergency medical services purposes as determined by each county according to the following schedule:

(A) Fifty-eight percent of the balance of the fund shall be distributed to physicians and surgeons for emergency services provided by all physicians and surgeons, except those physicians and surgeons employed by county hospitals, in general acute care hospitals that provide basic, comprehensive, or standby emergency services pursuant to paragraph (3) or (5) of subdivision (f) of Section 1797.98e up to the time the patient is stabilized.

(B) Twenty-five percent of the fund shall be distributed only to hospitals providing disproportionate trauma and emergency medical care services.

(C) Seventeen percent of the fund shall be distributed for other emergency medical services purposes as determined by each county, including, but not limited to, the funding of regional poison control centers. Funding may be used for purchasing equipment and for capital projects only to the extent that these expenditures support the provision of emergency services and are consistent with the intent of this chapter.

(c) The source of the moneys in the fund shall be the penalty assessment made for this purpose, as provided in Section 76000 of the Government Code.

(d) Any physician and surgeon may be reimbursed for up to 50 percent of the amount claimed pursuant to subdivision (a) of Section 1797.98c for the initial cycle of reimbursements made by the administering agency in a given year, pursuant to Section 1797.98e. All funds remaining at the end of the fiscal year in excess of any reserve held and rolled over to the next year pursuant to paragraph (4) of subdivision (b) shall be distributed proportionally, based on the dollar amount of claims submitted and paid to all physicians and surgeons who submitted qualifying claims during that year.

(e) Of the money deposited into the fund pursuant to Section 76000.5 of the Government Code, 15 percent shall be utilized to provide funding for all pediatric trauma centers throughout the county, both publicly and privately owned and operated. The expenditure of money shall be limited to reimbursement to physicians and surgeons, and to hospitals for patients who do not make payment for emergency care services in hospitals up to the point of stabilization, or to hospitals for expanding the services provided to pediatric trauma patients at trauma centers and other hospitals providing care to pediatric trauma patients, or at pediatric trauma centers, including the purchase of equipment. Local emergency medical services (EMS) agencies may conduct a needs assessment of pediatric trauma services in the county to allocate these expenditures. Counties that do not maintain a pediatric trauma center shall utilize the money deposited into the fund pursuant to Section 76000.5 of the Government Code to improve access to, and coordination of, pediatric trauma and emergency services in the county, with preference for funding given to hospitals that specialize in services to children, and physicians and surgeons who provide emergency care for children. Funds spent for the purposes of this section, shall be known as Richie's Fund. This subdivision shall remain in effect until January 1, 2017, and shall have no force or effect on or after that date, unless a later enacted statute, that is chaptered before January 1, 2017, deletes or extends that date.

(f) Costs of administering money deposited into the fund pursuant to Section 76000.5 of the Government Code shall be reimbursed from the money collected in an amount that does not exceed the actual administrative costs or 10 percent of the money collected, whichever amount is lower. This subdivision shall remain in effect until January 1, 2017, and shall have no force or effect on or after that date, unless a later enacted statute, that is chaptered before January 1, 2017, deletes or extends that date.