FAMA Minutes, July 2015

Florida Air Medical Association Meeting Minutes
Date: July 8, 2015
Location: Orlando, Florida

TOPIC	DISCUSSION/CONCLUSION	
Call to Order		Bari Conte
Moment of Silence	Remembering incident in the last few minutes	Bari Conte;.
Transfer of Presidency	B Conti, formerly President Elect, begins term as FAMA President. Need for nominations for President-elect. This will come via email in the next couple of months.	Julie Bacon
AAMS	 Board elections for 2015 have been completed. The Region 6 representative is Susan Smith, Director, Clarion Clinic Lifeguard, smsmith2@carilionclinic.org AMTC Long Beach CA Oct 19 – 21st. Early Registration expires July 9th. The 2nd Great American Safety Drive, featuring two separate routes, is underway! The Drive is the MedEvac Foundation's major fundraising initiative for 2015, a philanthropic event designed specifically to promote safety with our medical transport programs, and their valued partner organizations across the country.	Gerry Pagano
	 MTLI, continues to build strong support from the Air Medical Community helping to develop future leaders within the industry. 	
President's Report	From Opening Meeting: Budget cuts are and will continue to occur in the office There will be changes in language and statute, so we need to stay aware Three new appointments to the EMSAC – refer to website Chief Tom Quillan has retired effective June 30, 2015	Bari Conte

	Question was brought up as to the feasibility of licensing teams vs vehicles – this may be a positive direction for specialty teams	
Report on Drones	 Participated in a meeting in Washington with the regulators including representatives from FAA & NTSB. The for sure part is we will be integrating with drones at an increased level in the future. The categories are: Public – those specific to military, LE, FF these are considered essential to public safety and given the most freedom of operations, Commercial – these are as described those operations specifically involving commercial activities. This group is currently limited to 500' or less, 55 lbs or less and right now in order to comply with FAR 91.113 See and Avoid regulation they can operate during the day and must be kept within the operators line of sight. This is already being challenged and testing is underway for alternatives to this requirement. More to come. Recreational – which are those operated by individuals not intended for commercial operations. These are virtually uncontrolled and any safety advise is supposedly passed through the manufacturer and part of the initial purchase of the product. These will likely be are greatest concern. 	Gerry Pagano
	 There is an industry group called the small Unmanned Aerial Vehicle coalition http://www.smalluavcoalition.org/current-rules/ An NPRM went out and was responded to final rule is pending 	
	 What can we do as pilots and medical crew members on air ambulances? Avoid operations 500' or less except during takeoff and landing. Stay alert and whenever possible keep your eyes looking outside for traffic Stay aware of rules and regulations governing Drones including those for Public/Government, Commercial, and Recreational. Report adverse encounters with Drones. LE & FAA, ATC and the FAA's website has a specific location for reporting drone interference. If you see one while flying or not flying that creates a danger report it on the website. Faa.gov Support any legislation or rulemaking that requires collision avoid technology on the drone. 	
Medicaid Update	As you are aware we were successful in fending off SB 516 and HB 681 during the 2015 legislative session. If you recall S.B. 516 and H.B. 681 would restrict the ability of emergency providers to collect payment for service of unpaid charges also known as "balance billing". Prohibiting balance billing removes the ability of emergency air medical providers, to work with the patient as an advocate. Health plans, health insurers listen and act based on their customer demands not the provider concerns or ability to stay in business. Without the ability to balance bill providers essentially loses leverage which leashes to artificially low usual and customary payments. We probably also were helped by the greater conflict that occurred between the House and Senate	Submitted via email by Jeff See

	relative to health care. Still one for the win column!	
	Looking ahead we know that Senator Bean is likely to try again in 2016. We have made several trips to Tallahassee in the last few months and believe we stand a good chance at being carved out of any future legislation. We will have to wait and see.	
	Please pass along my thanks to the Board and FAMA members for their assistance and letter of support as attached.	
Hurricane Exercise	Should have a pilot at state level to manage needs of aircraft, that person would implement the FAMA Disaster Plan (fair, impartial, based on assets)	
ASTNA Proposal	An email had been sent out outlining concerns regarding continued ASTNA. In three years have had no volunteers for an upcoming president elect. Mark feels that with changes in state participation and other items he spelled out, that perhaps we need to utilize our resources more effectively. There are no other state chapters of ASTNA, and the national does not know we exists. There is no provision of national to support state programs due to the same challenges we are facing.	Mark Thomas
	J Scott – ASTNA has been an important part of these meetings for a long time; if it is no longer active then that is one thing, but it is difficult to let go and move on. Would like to have everyone recognize that ASTNA has been a vital committee. Downside of ASTNA is that it was restrictive to nursing. Wanted to see if anyone felt that this was something we needed to continue.	
	The thought is to bring together all disciplines and have a more integrated and strong FAMA organization. One challenge is that one person can't go to all of the breakout sessions. Also, Bari brought up that we don't have follow through with issues from meeting to meeting.	
	As a professional organization, we can also take the initiative to meet on our own; to engage others in the transport and flight crews to build a succession plan.	
	Diane F brought up that an issue may be – how many agencies are actively supporting and encouraging their staff to participate in these meetings? Valid concern.	
Chief's Report	Congratulations to Chad McIntyre for appointment to the NAEMT National Committee	
	Re: Air Medical Position. There is a new vetting process. In the past the groups suggested, went through the Chief, and went to the Surgeon General. Now a nomination goes through Chief Bixler's Office, then it goes through the Committee for Performance Improvement, perhaps 6 or 7 folks, to the Chief of Staff who takes a name to the Surgeon General.	
	Announced that Gerry did not get the Air Medical position, Bari has been interviewed by the Surgeon General, but there has not been a final decision made that we are aware of. Bari would be willing to represent Air Medical if the position was offered.	

Question from group as to the process: 1. Nominations are received 2. John's team sets up interviews for each nomination Question raised as to why someone nominated did not get interviewed (Leah asked John to follow through on this) Question from group on how our voice can be heard more clearly in the future – Leah asked that concerns go through our representative, and Leah will handle it personally. Comment from group that the communication appears to be one way, with no dialogue coming back to the constituency groups. Our interests are not addressed, and emails/questions not answered. It is disrespectful to the groups and to the folks that got together. Question regarding the scoring and the packet, Leah will check on whether it is able to be shared under Sunshine. Recommendations from the group as to how Leah can work on this -- Trust - Transparency - Communication Bring back FLEMSCOM Putting minutes and agendas back on the website Communication, multiple times said Leah offer – will provide her contact information to the group; she values community partnerships and that is her history; she wants participation and engagement. Concern from group over decreased EMS meeting opportunities. Leah will look into although a high level decision. Concern from group over lack of strategic plan. Leah.colston@flhealth.gov 850.528.5036 cell 850.245.4693 Moved and seconded that FAMA would support the decision to appoint Bari Conte in the position of EMS Advisory Council position of Air Medical Operator. Concern expressed that this is the third recommendation from the group of Subject Matter Experts in this area, and that it was strongly suggested that the state respect the recommendation. Wrap-Up Report -Submitted separately as group minutes **FNPTNA** FLEMSPA **ASTNA**

Wrap-Up Report –	Moved and Accepted to meet in Orlando with lunch on October 7, 2015 Babbette Bailey to coordinate Moved and Accepted to form a committee to look at current by-laws for return to group on October 7, 2015. Mark Thomas to lead this committee, Diane Fojt volunteered to be on committee. Moved and Accepted for Mark Thomas to Coordinate Safety Summit in the Gainesville Area. Upcoming Air Crew Core Curriculum by MECA – please see website.	
Meeting Adjourned	October 7 - Orlando	

Submitted by J Bacon, FAMA Secretary-Treasurer