

MOTION BY SUPERVISORS HILDA L. SOLIS AND

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**Supporting the Advanced Provider Response Units**

The Advanced Provider Response Units (APRU) are specialty emergency medical services (EMS) response vehicles staffed with a Los Angeles County Fire Department (LACoFD) firefighter/paramedic and an advanced practice provider (nurse practitioner or physician assistant). The APRU program has the goal of responding to low acuity EMS calls to provide simple medical interventions in the field and redirect patients to appropriate levels of follow-up care. Initially launched in 2019 with a single unit, and supported by Measure B funding, the APRU program has proven to provide high quality patient care while reducing preventable ambulance transports and Emergency Department (ED) visits. As a result, the program has also saved capacity in the saturated EMS and ED systems for the higher acuity patients that they were designed to assist. During the COVID-19 pandemic surges, the APRU program was invaluable in helping to sustain EMS and ED operations.

Over the past five years, the mission of the APRU program has pivoted to include

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a special focus on patient navigation for frequent 911 callers and patients with substance use disorders, mental health emergencies, unstable housing, and in custody of law enforcement. In addition, the APRU's can respond to high acuity patients when existing paramedic units are saturated with other calls for service, which occurs with increasing frequency amidst ever rising EMS call volume in Los Angeles County. This year will be the fourth consecutive record year for EMS responses for LACoFD as it exceeds 375,000 EMS calls, and 2023 was the busiest year for ED visits in California history.

In 2023, the funding of the program transitioned from Measure B to American Rescue Plan Act (ARPA), and the program was expanded to three APRUs. Currently, LACoFD operates an APRU in Battalion 10 (El Monte, South El Monte, Temple City, and Rosemead), Battalion 11 (Lancaster/Palmdale), and Battalions 18/20 (Hawthorne, Gardena, Lawndale, Inglewood, and Lennox).

Since the inception of the program in 2019, the APRUs have responded to more than 23,000 EMS calls and diverted more than 8,700 patients from avoidable EMS transports and ED visits. This includes more than 1,200 diversions of mental health patients to crisis stabilization units, including psychiatric urgent care centers (PUCC). This is significant as the base rate for ambulance transportation in Los Angeles County begins at \$2,223 per patient transport. Meanwhile, the average out-of-pocket cost for an ED visit in California is \$3,238. The APRU program has produced dramatic cost savings to uninsured patients, Medi-Cal, Medicare, and health plans, and hospitals. Due to their success, the APRU program received both a Quality and Productivity Commission (QPC) Plaque Award and a National Association of Counties (NACo) Award in 2021 for

the cost savings and improved service to the community. The triaging of mental health patients to PUCCs by the APRU (aka Telemedicine for Alternate Destinations) resulted in a California State Association of Counties (CSAC) award in 2020 and a NACo award in 2022.

Unfortunately, the ARPA funding that has sustained the APRU program since 2023 is expected to be exhausted by the end of March 2025. The APRU program has made an enormous impact on the communities that it has served, and LACoFD is seeking approximately \$7,000,000 annually for the continued operation of the program in Supervisorial Districts 1, 2, and 5, and to add an additional two units in Supervisorial Districts 3 and 4.

The APRUs provide critical services and needed supports to the County's most vulnerable residents, such as those who are unhoused, suffering from behavioral health issues, or facing barriers to accessing primary care. The ability of the APRU to respond directly to 911 calls and to truly meet patients where they are in their time of greatest need distinguishes it from all other street medicine initiatives operating in Los Angeles County. This has resulted in improved care coordination and has contributed to dramatic cost savings for the County, health plans, hospitals and most importantly, residents.

The recently passed Measure E, a parcel tax ballot initiative to raise funds for the LACoFD, is expected to generate an estimated \$152 million annually, of which funds can support the APRU program starting in 2026. Until then, funding to sustain and further expand the program is crucial.

**WE, THEREFORE, MOVE** that the Board of Supervisors direct the Los Angeles

County Fire Department, the Chief Executive Office, and the Department of Health Services, in collaboration with the Departments of Mental Health and Public Health, local health plans, and hospitals to report back in writing in 30 days with an identified ongoing funding source, and if not possible, one-time bridge funding, to sustain and expand the Advanced Provider Response Unit Program to all Districts. Given the impending end of current funding, the consideration for a one-time funding gap should look at opioid settlement funds, among other sources of funding, given the intersection of the APRU program and substance use health emergencies.

**WE, FURTHER, MOVE** that the Board of Supervisors direct the Los Angeles County Fire Department, in collaboration with the Departments of Health Services, Mental Health, and Public Health; local health plans; and hospitals to develop and enhance continued partnerships to improve the care coordination and remove barriers to access physical and behavioral health services of patients who seek avoidable emergency room visits.

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