



**SAN MATEO COUNTY HEALTH  
EMERGENCY  
MEDICAL SERVICES**

**EMS POLICY**

**529**

Effective:

**April 2025**

Approval: EMS Director  
**Travis Kusman, MPH**

Signed:

Approval: EMS Medical Director  
**Greg Gilbert, MD**

Signed:

## **EXCEPTIONAL UTILIZERS OF THE EMS SYSTEM**

### **I. PURPOSE**

It is the responsibility of the San Mateo County Emergency Medical Services Agency to organize an emergency medical services (“EMS”) system that provides efficient, effective, safe and time-appropriate emergency medical services to persons in need of emergency medical care.

### **II. AUTHORITY**

Health and Safety Code, Division 2.5, Sections 1797.220 and 1798

### **III. DEFINITIONS**

Emergency Medical Services Agency (“LEMSA” or “Agency”): The San Mateo County EMS Agency is designated as the Local Emergency Medical Services Agency (“LEMSA”) and is statutorily charged with primary responsibility for administration and medical control of emergency medical services in San Mateo County.

Exceptional Utilizer: A person who activates the 9-1-1 system without medical necessity on a frequent basis.

### **IV. POLICY**

A. The San Mateo County EMS system is designed to help residents and visitors of our County obtain prehospital emergency health care in an efficient and timely manner. There are people who consistently overuse this system without medical need, thereby reducing availability of its resources for patients requiring emergency evaluation, medical care and transport. This policy outlines the identification and management of Exceptional Utilizers.

#### **B. Identification**

1. Exceptional Utilizers of the EMS system may come to the attention of the Agency by direct report from provider agencies, hospitals, the continuous quality improvement program, analysis of system data, or law enforcement.
2. This policy may be applied when the Exceptional Utilizer has accessed the EMS system at least three (3) times in a day, six (6) times in a week or twelve (12) times in a month. Patient transports where an authorized agent applies a Welfare and Institutions Code 5150 hold shall not be included.

### C. Determination

1. The EMS Agency Medical Director and Director shall perform a case review to determine if the Exceptional Utilizer requires further action under this policy.
  - a. Public drunkenness is not an emergency medical condition and will not be treated as such in this policy. Law enforcement-initiated responses will not exempt a person from application of Exceptional Utilizer specific EMS response.
  - b. Exceptional Utilizers who appear to have psychiatric or medical conditions which make them incapable of caring for themselves will be referred to the appropriate agency to assess their competency or ability to care for themselves. If it is determined through consultation that the Exceptional Utilizer is competent to make their own decisions and can care for themselves, this policy shall be applied.
  - c. Payment or non-payment of EMS services, gender, ethnic background, employment status, financial status, or physical/mental condition shall not be used to determine Exceptional Utilizer specific EMS response and transport.

### D. Counseling

1. Once an Exceptional Utilizer is identified pursuant to Section IV(B)(2) of this policy, the following agencies will be notified, if possible, to assist with management of the individual:
  - a. Appropriate law enforcement agency;
  - b. The County Human Services Agency;
  - c. The patient's primary care physician;
  - d. The case management department of the hospital of most frequent visitation;
  - e. County Behavioral Health and Recovery Services;
  - f. Authorized 9-1-1 EMS system ambulance provider agencies; and
  - g. Authorized 9-1-1 EMS system medical first responder agencies.
2. The Exceptional Utilizer will be engaged by one of the agencies on at least one occasion prior to modification of ambulance transport services specific to them.
3. The EMS Agency, or its designee, will counsel the Exceptional Utilizer regarding the purpose, and appropriate use, of the EMS system.
4. The Exceptional Utilizer will be provided a copy of this policy. This policy will be discussed with the Exceptional Utilizer, and questions will be answered by EMS Agency staff or their designee.

### E. Modification of EMS Response and Transport

1. During the initial counseling period, the Exceptional Utilizer will be given a first written warning of impending modification of EMS response ("First Warning"). This warning will be mailed by certified mail or hand delivered.

2. After 7 days, if the trend of use of the EMS system continues to meet Exceptional Utilizer criteria per Section IV(B)(2), of this policy, a second written notice shall be mailed by certified mail or hand delivered ("Second Warning"). Exceptional Utilizer specific EMS response modification(s) which take into consideration input from stakeholders listed in Section IV(D)(1) shall be developed and approved by the EMS Agency Medical Director.
3. After 14 days, if the trend of use of the EMS system continues to meet Exceptional Utilizer criteria, Section IV(B)(2) of this policy, a third and final written notice shall be mailed by certified mail or hand delivered ("Final Demand"). The Exceptional Utilizer specific EMS response modifications shall be communicated at that time.
4. After a minimum of 21 days (or 7 days after the Final Demand is delivered), if the trend of use of the EMS system continues to be excessive and meets Exceptional Utilizer criteria, Section IV(B)(2) of this policy, a written notice shall be mailed by certified mail or hand delivered advising the Exceptional Utilizer that EMS response has been modified and ambulance transport privileges will be as described in the Exceptional Utilizer Prehospital Care Management Plan.

## **V. NOTIFICATION TO PREHOSPITAL PROVIDERS OF EXCPTIONAL UTILIZER CARE PLAN**

When the EMS Agency Medical Director determines that actions must be imposed upon an Exceptional Utilizer in accordance with this policy, the EMS Agency shall issue a special memorandum to ambulance providers, first responder agencies and law enforcement that will specifically identify the Exceptional Utilizer and provide the Exceptional Utilizer Prehospital Care Management Plan.

## **VI. PREHOSPITAL EMS PROVIDER RESPONSIBILITY**

- A. Upon contact with a person who is specifically determined to be an Exceptional Utilizer by the EMS Agency Medical Director, a paramedic will perform an initial assessment.
  1. If the Exceptional Utilizer is not ambulatory, cannot sit unassisted, meets 5150 criteria, meets Trauma, STEMI or Stroke activation criteria, or the paramedic recognizes a medical condition that requires immediate medical treatment, normal policies, procedures and protocols for patient assessment, treatment and transport shall be initiated. The EMS Agency Medical Director may modify these criteria on a case-by-case basis.
  2. If the Exceptional Utilizer does not meet the criteria in Section IV(A)(1) of this policy, the paramedic who performed the initial assessment will advise the individual of the following:

*“You have been identified as “Patient’s Name” in San Mateo County’s 9-1-1 emergency medical services system. The San Mateo County EMS Agency Medical Director has implemented an Exceptional Utilizer specific care plan for you. If you want to bypass this plan you must utilize alternative transportation. If you feel this is in error, you can contact the San Mateo County EMS Agency. We are following a specific Care Management Plan designed to optimally serve you and can only transport you by ambulance as directed by this Plan.”*

- B. An electronic health record (“EHR”) shall be completed by each EMS provider agency for each encounter with an Exceptional Utilizer served under this policy.

## **VII.EXCPETIONAL UTILIZER APPEALS PROCESS**

- A. The EMS Agency must be notified in writing by the Exceptional Utilizer, or their representative, that EMS services should be continued without modification. These requests can be made at any time; however, no more than two requests for appeal will be heard in any six-month period.
1. For the request for appeal to be found credible, the Exceptional Utilizer must provide evidence that they no longer meet the any of the criteria outlined in Section IV(B)(2) of this policy for a period of 1 month.
  2. If the request for appeal is found to be credible by the EMS Agency Medical Director, the EMS Agency will schedule an Appeals Panel conference within 15 days where the Exceptional Utilizer, or their representative, will present their evidence as to why unmodified EMS services should be re-instated.
  3. The Appeals Panel will be comprised of three members appointed by the EMS Agency. The panel members must have substantial EMS experience and will be chosen from local EMS system hospital emergency departments and/or provider agencies that have had the least contact with the Exceptional Utilizer.
  4. The decision of the Appeals Panel will be advisory to the EMS Agency Medical Director, who shall make the final determination if EMS services should be reinstated.
- B. Reinstatement of EMS Response and Transport
1. If the EMS Agency Medical Director reinstates any or all EMS response services, the Exceptional Utilizer will not be exempt from this policy.
  2. After reinstatement, a probationary period of 180 days will begin wherein the EMS Agency Medical Director can implement an immediate modification of EMS response, including but not limited to ambulance privileges, if the use of the EMS system continues to meet Exceptional Utilizer criteria, Section IV(B)(2) of this policy.
  3. After 180 days without abuse, monitoring of EMS system use will be reset for purposes of Section IV(B)(2) of this policy.