

LEGISLATIVE RETURN

SUBMITTED BY: Hon. John Streicker



On April 19, 2018, Brad Cathers, Member for Lake Laberge

- asked the following question during the Oral Question Period at page(s) _____ of *Hansard*
- submitted the following written question – WQ No. _____
- gave notice of the following motion for the production of papers – MPP No. _____

RE: _____

OR

This legislative return relates to a matter outstanding from discussion related to: Budget debate on vote 51, department of Community Services

“...there was a 12-percent increase in the medevac costs compared to the year before...
 “...I’m interested not only in how much of that increase is due to it, but overall, what the total cost was and the number of times Whitehorse operations had to deploy staff, primary care paramedics or other paramedic levels from Whitehorse via air to provide on-the-ground services in rural communities.”

“...there was a 19-percent increase in medevac calls — what the volume is due to, and whether any of it is due to changes in practices...”

On April 19, 2018, at page(s) 2677 and 2678 of *Hansard*

The response is as follows:

The Department of Health and Social Services (HSS) administers financial matters relating to the “air carrier” contract that provides aviation services to the Medevac program, paying for all costs related to aircraft operation such as fuel, pilot wages, basing fees, aircraft maintenance and flight service expenses. The Department of Community Services administers the Yukon Emergency Medical Services (EMS) – the government branch that employs, trains, equips, supports and coordinates deployment of all specialty-trained, critical care providers who take care of the patient in the back of the aircraft. This cost-sharing arrangement has been in place since before 2007, when Yukon EMS was housed within HSS.

Yukon EMS, as a whole, saw an overall increase in service use last year, with a 17percent increase in ambulance usage across the territory. Ground medevac responses increased at a similar rate to in-territory flights. There were 140 ground medevacs in 2017; a 31percent increase over 2016. Only twelve of these responses were linked to non-availability of local responders in the communities. None had a negative impact on patient outcome.

The main driver for increases to medevac (air ambulance) costs are that Yukon citizens are using these services more often. Although the Department of Health and Social Services identified a 12 percent increase in medevac costs, Yukon EMS actually responded to 19 percent more medevac calls in 2017 than in 2016. The department was able to absorb this cost within its budget without the requirement for increased supplemental funding to the program’s operating budget.

The increases in call volume in 2017, appear mainly to have been in the area of in-territory patient movement, most notably a 37percent increase in the movement of less acute care patients among Yukon health care facilities. Although there have not been significant changes to Yukon EMS practices, one contributing factor seems to be increased air ambulance use when moving patients among the three territorial hospitals.

Signature

1-Oct 2018

Date