REGIONAL EMS

Proposed Transition Framework

Starting framework for partner discussion of a Regional EMS agreement

DISCUSSION OBJECTIVE

Preserve the regional service while modernizing how the eight communities share readiness, new labor cost, capital, and future governance.

Gardiner EMS Working Group | For consideration, not a final contract or appropriation

The service is already regional

The operating facts support a stronger regional financial and governance framework.

2023–2025 incidents	Outside Gardiner	Hospital transports	Population served
10,255	65.5%	7,289	25,742

Why the current structure is reaching its limit

- Permanent unionized workforce and 24/7 readiness
- Ambulances, medical equipment, and multi-year capital obligations
- Eight jurisdictions using one Gardiner-hosted enterprise
- 2,532 calls dispatched within 30 minutes of another call, signaling readiness pressure

Core regional reality

Gardiner is currently the employer, asset owner, and enterprise administrator. Partner municipalities collectively generate most calls and contribute most partner assessment dollars.

The financial and governance architecture do not match the current regional reality.

Why act now: the FY28 cost baseline

The base service is increasing before proposed staffing expansion or new capital funding.

FY28 base request

$2.782M

Change from FY27

+9.4%

Wages + benefits

$2.335M

Billing held steady

$1.800M

Three different investment levels

Regional municipal support	Total	Per resident
FY27 signed assessment pool	$908,079	$35.28
FY28 baseline-only model	$1,147,055	$44.56
FY28 full staffing + capital scenario	$1,682,055	$65.34

Important distinction

The $3.317M full model is a planning scenario. It adds four positions and a $175K capital contribution to the $2.782M base.

Partners should decide what level of service and long-term readiness they want to purchase.

The proposed three-part framework

One package: term, allocation, and future cost growth.

1

THREE-YEAR COMPACT

Replace annual contracting with an FY28 – FY30 agreement. Lock in assessment methodology, uncollectibles, capital, reporting, staffing-change process, and legally reviewed entry/exit rules.

2

REGIONAL COST SHARING

Negotiate membership + readiness/population + usage. Use 15/55/30 as a model; test and agree on the final percentages.

3

FUTURE COSTS ON A REGIONAL FOOTING

Honor the existing 74/26 → 77/23 → 80/20 schedule for current labor. Apply 80/20 immediately to newly approved EMS labor. Treat EMS capital as 100% Ambulance Fund responsibility.

Mutual predictability: stronger regional commitment in exchange for clear rules and a shared commitment forward.

Assessment methodology: same regional requirement, different distribution

The policy question is how to recognize shared standing capacity, community size, and actual usage.

Community	Current 50/50	15/55/30 model	Shift
Chelsea	$99,997	$111,944	+$11,947
Farmingdale	$191,815	$192,431	+$616
Gardiner	$494,640	$436,042	−$58,598
Litchfield	$209,172	$216,499	+$7,327
Pittston	$153,841	$167,919	+$14,078
Randolph	$115,892	$127,492	+$11,600
Richmond	$224,582	$224,828	+$246
West Gardiner	$192,116	$204,901	+$12,785
Regional total	$1,682,055	$1,682,055	$0

What 15/55/30 means

15% equal membership
55% population / readiness
30% three-year usage average

The total regional requirement does not change. The model reduces the share driven by usage and adds an explicit common membership component.

This table illustrates allocation effects.

Capital and staffing: put new commitments on a regional footing

The agreement should distinguish current baseline cost from deliberate investments in readiness.

Four-position model	Ambulance share at 80%	FY28 capital contribution	FY32 modeled reserve
$450,000	$360,000	$175,000	–$52,376

Recommended treatment

Existing workforce	Honor previously approved transition to 80/20 by FY30.
New EMS positions	Apply 80% Ambulance / 20% Fire immediately if positions are approved.
Capital assets	Fund through a documented recurring Ambulance Fund capital line tied to the replacement schedule.

New costs should be visible, documented, and agreed regionally before they are committed.

The three-year term is the transition to shared governance

The compact should move the consortium from provider/client relationships toward a regional partnership.

YEAR 1

STANDARDIZE

Finances, operating metrics, reporting, assessment rules and capital plan.

YEAR 2

EVALUATE

Governance models, additional members, deployment, assets, administration and demand reduction.

YEAR 3

DECIDE

Bring a successor governance structure to all participating governing bodies.

No governance model is predetermined. The commitment is to make the decision intentionally before the next contract cycle.

November 9: proposed outcomes

The meeting should produce direction for drafting, not attempt to finalize the contract.

Three-year compact	Work toward FY28–FY30 rather than another one-year contract.
Current labor	Preserve the existing phased path to 80/20.
New EMS labor	Use 80/20 immediately for newly approved positions.
Capital	Establish a recurring contribution tied to the replacement schedule.
Assessment	Negotiate membership/population and readiness/usage, using 15/55/30 as the initial model.
Governance	Include a formal three-year work plan and bring a successor model to all governing bodies.

Requested outcome: agreement on principles, partner feedback by early December, and a draft term sheet for legal/finance review.

The partnership has already carried the transition together

The next compact should recognize the history without turning it into a claim for reimbursement.

65 / 35	→	68 / 32	→	71 / 29	→	74 / 26	→ 80 / 20
FY22–FY25		FY26		FY27		FY28	FY30 target

Gardiner estimates that carrying the larger local Fire share during the negotiated phase-in will represent approximately $700,000 through FY30. This is not presented as a receivable from partner towns. It is context for why new EMS labor, capital, and governance should begin on a clearer regional footing.

Honor the existing transition. Use the new agreement to establish durable rules for the future.