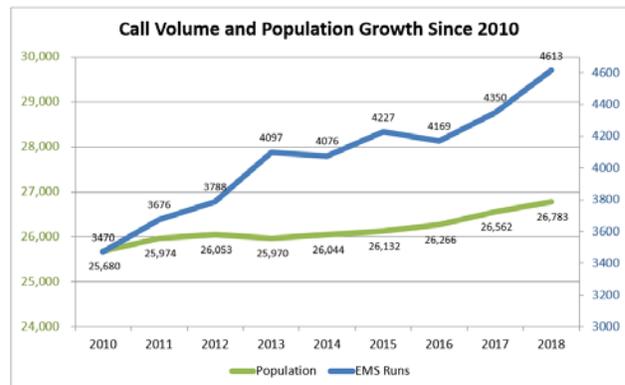
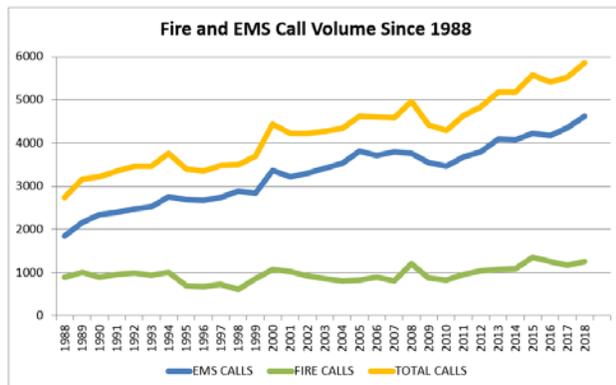


**XENIA CITY COUNCIL  
SPECIAL SESSION  
MEETING MINUTES  
JULY 11, 2019**

**1. CALL TO ORDER:** President Engle called the July 11, 2019, Special Session to order at 6:50 p.m. in the Conference and Training Room, City Administration Building.

**2. ROLL CALL:** Vice President Edgar Wallace, Councilman Will Urschel, Councilman Dale Louderback, Councilman Wesley Smith, Mayor Sarah Mays, and President Michael Engle were present. Councilman Levi Dean was absent.

**3. DISCUSSION:** Mr. Merriman said the purpose of the Special Session was to discuss Emergency Medical Service and Policy Issues. He said both the Council Budget and Finance Committee and City administration have been talking about this for some time due to growing concerns with the increase in call volume and stagnant revenue growth. They also need to discuss the EMS billing collection process, core policy changes, and the impact the increased call volume has had/is having on Fire Division staff. He presented the following charts, noting the growth from 1988 through 2018, with EMS calls far outnumbering fire calls.

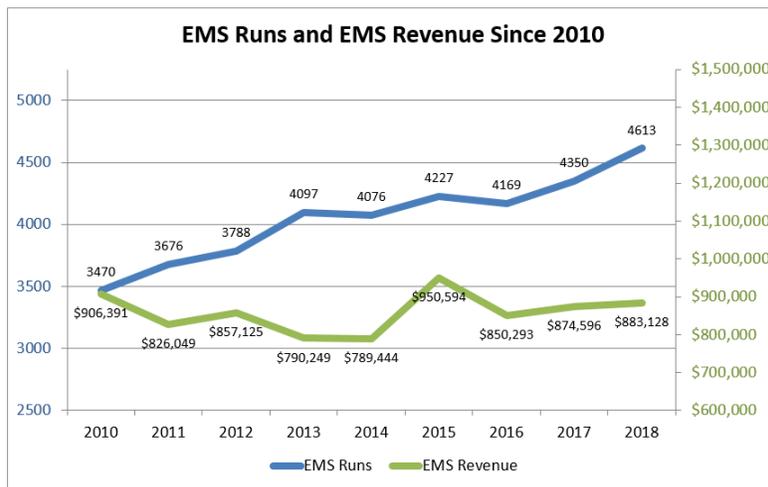


Fire Chief Ken Riggsby explained the difference between fire calls vs. EMS calls. He said fire calls involve hazmat calls, car accidents, structure and vehicle fires, fire alarms, Public Service calls, etc., and EMS calls includes anything the medic units respond to and involve transporting patients to hospitals.

Councilman Louderback asked about those who repeatedly call 911 for EMS services. Mr. Merriman said in 2018, 10 individuals were responsible for 249 runs (aka frequent flyers). Councilman Louderback asked how they could address that issue and if social service agencies could get involved. Chief Riggsby said they are already working on a solution. Deputy Fire Chief Joe Mullikin said the individuals on the “frequent flyer list” must meet certain criteria to be added to the list, the list is reviewed by the XFD’s Medical Director, and they are transported to GMH only—if they meet the criteria to be transported. Councilman Louderback asked if one person could respond to assess the situation. Deputy Chief Mullikin said the EMS unit must respond no matter what. Mayor Mays asked if 911 operators are using the same protocol to filter through the criteria. Chief Riggsby said the communication (911) operators must follow Emergency Medical Dispatch (EMD) protocol. They ask a series of specific questions, and each question leads them to another question based on the answer provided. He cautioned they must be careful when

developing a program to deal with those who call often because some of them are really sick. However, some abuse the system due to mental health issues and other factors. Vice President Wallace asked if the frequent flyers are part of The Community Network (TCN) and if those with mental health issues are referred back to their case managers. Chief Riggsby said some of them are TCN patients, and those responding to the call have asked them if they contacted their case managers. Many times, they say yes but the case manager did not help. As Deputy Chief Mullikin stated, their Medical Director reviews the list, which is currently only 5 or 6 people, and certain criteria have to be met to be added to the list.

Chief Riggsby said regarding EMS call volume, he believes the numbers continue to rise because people are using the ER as their doctor’s office and calling 911 to get them there. Further, 81% of EMS billing revenue comes from Medicare and Medicaid and only 19% are insurance or self pays. Mr. Merriman said EMS calls continue to rise, as shown on the chart below:



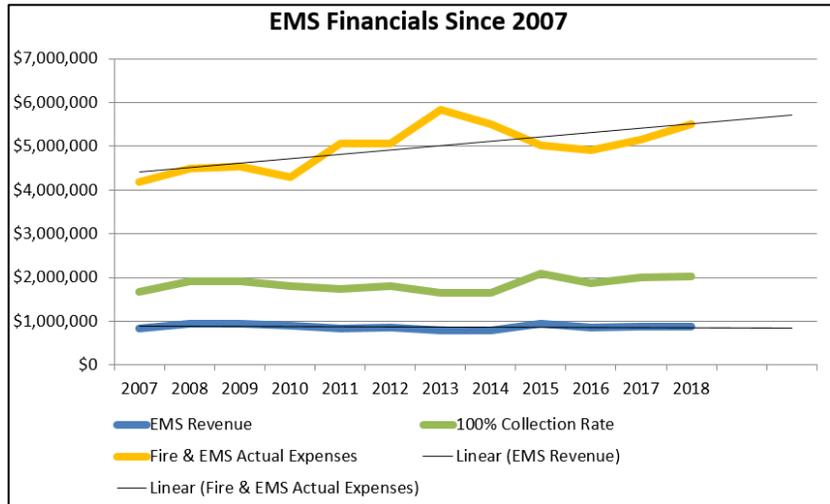
Councilman Louderback asked if the increase in EMS calls was due to the opioid crisis. Mr. Merriman said there are many factors including an aging population, a breakdown and overload of the social services/mental health services system, drugs, a furthering of poverty conditions, or any combination of those things. Chief Riggsby said opioids are a small part of the problem. There have been changes in nursing homes and assisted living facilities, noting there are about 7-8 facilities in Xenia. He explained that when Medicare and Medicaid changed their rules a few years ago and would only pay a \$5 stipend per day, the run volume decreased. Something must have changed again recently because the calls have gone back up again. Mr. Merriman agreed. In addition, private transport services are limited, so they call 911 for something that is not a true emergency.

Councilman Louderback asked if they make any money from Medicare. Mr. Merriman said no; the reimbursement rate is pennies on the dollar. Chief Riggsby shared the following:

	<i>City's Fee</i>	<i>Medicare Reimbursement</i>	<i>Medicaid Reimbursement</i>
Basic Life Support (BLS) Run	\$519.17	\$356	\$85
Advanced Life Support 1 (ALS1) Run	\$830.67	to	to
Advanced Life Support 2 (ALS2) Run	\$1,038.34	\$613	\$165

Mr. Duke said the Medicare reimbursement rate is very similar to what a negotiated rate would be with private providers, but the Medicaid reimbursement rate is terrible. Councilman Louderback asked for a breakdown of Medicare vs. Medicaid. Chief Riggsby shared estimated numbers as follows: 48.9% are Medicare, 31.1% are Medicaid, 7.3% are self-pay, and 21.8% are commercial payers. Councilman Smith believed that most people in nursing homes are on Medicaid.

Mr. Merriman said while fire and EMS expenses are increasing, EMS revenue has remained fairly flat since its inception in the early 2000s, which is not sustainable financially or with regard to wear and tear on staff. This is a very complex problem, and they will need very creative solutions. Vice President Wallace asked who was on the task force. Mr. Merriman said the task force included Chief



Riggsby, Deputy Chief Mullikin, a Fire Captain, a Fire Lieutenant, and a Firefighter, the Assistant City Manager, Mr. Duke, and himself. The group will be expanding as they look at various service delivery partners. Vice President Wallace felt that the Health Department should also be involved. Mr. Merriman agreed; he said as the conversation evolves, they would include Kettering Health Network, the Health Department, the Council on Aging, TCN, etc.

Mr. Merriman said there are two tracts they need to focus on: 1) call volume and 2) enhancing revenue. Regarding revenue, the City has been with the current EMS billing vendor for a number of years, and after the fourth consolidation and company name change, there are some issues and concerns, including billing compliance. Staff recently completed an RFP process, and 14 vendors responded. He and staff interviewed three companies and settled on one, which is Image Trend. He felt it would be an easy transition because they already have an established relationship with the company. He would be bringing forward a recommendation to award the new contract to Image Trend at the next Council meeting. He noted the percentage they will be keeping is lower than the current vendor, so collection revenue will increase right away. Councilman Smith asked if the vendor bills everything and keeps a percentage of everything. Chief Riggsby said yes; the company is paid based on what they collect, so the more that is collected, the better. Mr. Duke said the company does not just “send a bill” ... they review the data and narratives for every call, they know how to bill runs (BLS vs ALS1 vs ALS2), and they ensure proper coding. Chief Riggsby explained that the current vendor’s encoding was done in India. The paperwork was color coded, and calls with black codes were ALS and calls with red codes were BLS. The documents were copied in black and white; therefore, everything was billed as an ALS, which was a huge problem. He noted one of the companies interviewed based on the recent RFP submittals was the current provider, now called Change Healthcare. However, the company the City initially contracted with was HealthServe, which was a very small, Dayton-based company, and after four consolidations, it has grown to be a very large company. At the interview with Change Healthcare, they did not hear anything different to change how they are doing business, and frankly, staff does not have any confidence in them.

Councilman Smith said 4,600 calls is an average of 12 EMS runs per day. He asked if they have considered bringing the billing in house. Mr. Duke said he did not know of any City that has done that due to compliance standards. Further, the EMS billing cost per the contract is currently only \$55,000, and it would cost much more to hire an employee. Image Trend has been providing another service to the City, and staff is confident with their services. He noted that other vendors interface and also use Image Trend, which is the standard in EMS reporting. Vice President Wallace said by contracting directly with Image Trend, they are cutting out the middleman. Mr. Duke said to a certain extent, yes.

Mr. Merriman said when looking at the revenue side, Council needs to take a close look at EMS billing policies in terms of requiring any payment—either a portion or all of the bill. Councilman Urschel said they are only collecting 20% of the expenses. Mr. Duke concurred. Councilman Urschel asked how that number would improve with the new vendor. Mr. Duke said Image Trend has stated that collections will improve by 10% based on the current policies. Councilman Urschel said Medicaid covers only \$165 for an ALS2 run and asked if another bill is sent for the \$873 balance or any amount at all. Mr. Duke said no; bills are not even sent for co-pays. He explained that someone on Medicare may have a \$40 co-pay, but the City is not sending a hard bill to collect that co-pay. The City is writing off \$1.8 million in billable charges due to the soft billing policy. Chief Riggsby said when the City started soft billing, everyone was sent three bills. However, he was not certain what the current provider is doing because when his wife went to the hospital, they did not receive any bills. Councilman Urschel said residents currently expect their water to be shut off if they don't pay their bills, they expect to be issued a citation if they don't mow their lawns, and they expect to go to court if they don't pay their income taxes. EMS service is expensive, but if residents don't pay their bills, then it's no problem. They need to change that expectation.

Mr. Duke and Mr. Merriman agreed the current EMS billing policy is far too lenient. Mr. Duke said balance billing is the most aggressive option, or they can balance bill based on a negotiated rate. Staff is proposing a solution somewhere between soft billing and hard billing for the balance and suggested coming up with a negotiated rate between \$700 and \$800, which is in line with Medicaid/Medicare rates. Currently, the City does not hard bill, so if a patient has a high deductible insurance plan, the patient will receive the bill. In some instances, the insurance company will send a check (or credit) to the patient with the expectation that the patient will pay the bill with the funds (or credit) provided. However, sometimes the patient keeps the money and ignores the soft bills.

Mr. Merriman said financials are important, but another policy element is about acceptable behavior and use of services. They need to look at increasing standards of accountability and discourage abuse. They need to send the message that residents should not be calling 911 for small things or things that are not true emergencies.

Mayor Mays asked for an explanation of 'hard billing.' Mr. Duke said from the first letter to the final notice, if the bill is not paid, it would be sent to collections. Right now, they do not send anything to collections. Councilman Urschel said they just need to turn up the harassment level, which is similar to sending a citation for tall grass or sending a water shut off notice. Mr. Duke agreed they needed to take it to the next level and take that extra step. Mayor Mays asked if the vendor would handle the collections. Mr. Duke said no; a collection agent would be a separate party, who would collect a higher percentage of the revenue. Councilman Urschel said people know what they can and cannot get away with in Xenia. Mr. Merriman agreed, which is why

Council has some tough policy decisions to make. Councilman Urschel said many residents do not have a “medical home,” and Five Rivers is trying to be a medical home for those in need regardless of income level. He suggested City EMS providers share information for Five Rivers when they go on runs. Mr. Merriman said they also need to figure out how to prevent some calls in the first place, and they need to engage other service providers.

Chief Riggsby said they currently soft bill (three bills are sent by the vendor). If the bill is not paid, it is not paid—payment is not pursued. He summarized the options to determine a way forward:

- Hard bill non-residents (an adjusted amount or full amount), which is what Fairborn does.
- Hard bill up to a negotiated rate (RECOMMENDED).
- Hard bill for 100% of the balance.

Mr. Merriman said Council also needs to afford the Public Safety Director the right to adjust the fees based on Medicare/Medicaid rate increases. He did not think they should keep the billing amounts in the Codified Ordinances/Fee Schedule because it is a lot of work to change the fees including holding a public hearing and developing legislation for passage. They also need to talk about what to do with non-transporters because currently those runs are not billed at all. Mr. Duke said 1,200 non-transporters were not billed in 2018. They could send a hard bill, but he did not know if Medicare/Medicaid would pay for a non-transporter. He noted false fire alarms are also not billed.

Councilman Smith asked when the current contract expires. Mr. Duke said it expires at the end of the year, but they need to send a 90-day cancellation notice by October. Councilman Urschel said he would like to see a written recommendation that explains how changes will affect the numbers. Mr. Duke said he could provide his best estimate as to what the changes would mean for the City’s bottom line. For now, his best estimate ‘ballpark’ figure is an additional \$500,000 in EMS collections if they hard billed and billed for non-transporters.

Deputy Chief Mullikin explained the new ET3<sup>1</sup> non-transporter model (aka treating in place), which is new and is anticipated to start in January 2020. They are still looking at the rules for implementation, and there is an application process for municipalities. Mr. Duke asked if the City could be reimbursed by Medicare and Medicaid under the ET3 model. Deputy Chief Mullikin said yes.

Councilman Urschel said he assumed the City was billing for false fire alarms. Chief Riggsby said the City has a false alarm policy, but it needs to be updated. It currently states that if there are three false alarms in six months, the City could send a bill. However, he felt it was impossible to collect anything based on the current fee schedule.

---

<sup>1</sup> ET3 = Emergency Triage, Treat, and Transport Model is a voluntary, five-year payment model that will provide greater flexibility to ambulance care teams to address emergency health care needs of Medicare beneficiaries following a 911 call. Under the ET3 model, the Centers for Medicare & Medicaid Services (CMS) will pay participating ambulance suppliers and providers to 1) transport an individual to a hospital emergency department (ED) or other destination covered under the regulations, 2) transport to an alternative destination (such as a primary care doctor’s office or an urgent care clinic), or 3) provide treatment in place with a qualified health care practitioner, either on the scene or connected using telehealth. The model will allow beneficiaries to access the most appropriate emergency services at the right time and place. The model will also encourage local governments, their designees, or other entities that operate or have authority over one or more 911 dispatches to promote successful model implementation by establishing a medical triage line for low-acuity 911 calls. As a result, the ET3 model aims to improve quality and lower costs by reducing avoidable transports to the ED and unnecessary hospitalizations following those transports.

Mr. Merriman said they also need to discuss transport services. There is a lack of private transport services, and there is currently no transport fee in the billing structure. So, EMS is being called to transport for a non-emergency. Chief Riggsby said they are called BLS Non-Emergency and ALS Non-Emergency fees. Councilman Smith asked if a nursing home could be sent a bill. Chief Riggsby said they know there are issues with nursing homes, and they need to do more research with regard to what they can and cannot do, how they can bill, etc. One option could be having the nursing homes call a different number (other than 911) when they just need a transport. Mr. Merriman asked how often they get transport calls and why a transport was needed. Councilman Urschel said some County-level services should be providing those transports. Chief Riggsby said per the numbers shown below, Elmcroft has the highest number of runs for the last three years because they have a policy that patients go to the hospital after a fall no matter what, even if the patient is not injured and did not want to be transported.

2017	
Facility	# of Runs
Elmcroft	146
Xenia Towers	132
Central State	128
John Sale	77
Hospitality Homes East	74
Greenwood Manor	61
Wright Place Senior Community	61
Pristine Senior Living	58
Harmony Center for Rehab	52
Greene County Jail	37
Walter Sellers Apartments	34
Hillside Assisted Living	29
Legacy Village Assisted Living	28
GC Adult Detention Center	22
Kettering Urgent Care	20
Xenia Country Inn	16
Xenia Meadows	15
Family Violence Prevention Center	10
Maggie McKnight	10
Hometown Urgent Care	9
Juvenile Detention Center	5
<b>Total</b>	<b>1024</b>
<b>Percentage of Yearly Call Volume</b>	<b>23.1%</b>

2018	
Facility	# of Runs
Elmcroft	138
Central State	113
Xenia Towers	98
Hospitality Homes East	94
John Sale	92
Harmony Center for Rehab	87
Pristine Senior Living	73
Wright Place Senior Community	51
Walter Sellers Apartments	47
Greene County Jail	46
Greenwood Manor	40
Family Violence Prevention Center	32
Legacy Village Assisted Living	32
GC Adult Detention Center	30
Xenia Country Inn	26
Maggie McKnight	24
Kettering Urgent Care	22
Xenia Meadows	17
Hometown Urgent Care	11
Hillside Assisted Living	8
Juvenile Detention Center	8
<b>Total</b>	<b>1089</b>
<b>Percentage of Yearly Call Volume</b>	<b>23.4%</b>

2019 (As of 3/25)	
Facility	# of Runs
Elmcroft	42
Harmony Center for Rehab	39
Central State	37
Xenia Towers	28
John Sale	28
Hospitality Homes East	24
Wright Place Senior Community	24
Pristine Senior Living	16
Walter Sellers Apartments	14
Maggie McKnight	12
Greene County Jail	9
Greenwood Manor	8
Xenia Meadows	7
Family Violence Prevention Center	6
Kettering Urgent Care	6
Hometown Urgent Care	5
Legacy Village Assisted Living	4
Xenia Country Inn	3
Hillside Assisted Living	2
GC Adult Detention Center	0
Juvenile Detention Center	0
<b>Total</b>	<b>314</b>
<b>Percentage of Yearly Call Volume</b>	<b>23.2%</b>

Hospital	2019			2018			2017				
	Dispatch to in service*	Transports to	%	Dispatch to in service*	Transports to	%	Dispatch to in service*	Transports to	%		
Greene Memorial	42.11	738	85.71%	51.51	3144	86.49%	53.55	2858	84.61%		
Soin	74.05	44	5.11%	77.85	185	5.09%	81.65	180	5.33%		
Miami Valley	66.42	35	4.07%	90.37	118	3.25%	88.69	158	4.68%		
Dayton Childrens	79.33	17	1.97%	81.04	63	1.73%	84.82	48	1.42%		
Miami Valley South	72.78	14	1.63%	106.07	52	1.43%	80.57	46	1.36%		
Kettering Medical	93.36	10	1.16%	95.59	55	1.51%	92.85	72	2.13%		
Grandview	64	1	0.12%	91	3	0.08%		0	0.00%		
Southview	89	1	0.12%		1	0.03%	87.33	3	0.09%		
VA	91.2	1	0.12%	74.1	4	0.11%	86	1	0.03%		
Miami Valley Jamestown		0	0.00%	86.5	7	0.19%	67.03	11	0.33%		
WPafb		0	0.00%	87	1	0.03%	124	1	0.03%		
<b>Total Transports</b>		<b>861</b>	<b>100.00%</b>		<b>3635</b>	<b>99.94%</b>		<b>3378</b>	<b>100.00%</b>		
As of 3/25/19				Total Calls			5855	Total Calls			5549

Councilman Louderback asked about runs to Central State. Mr. Duke said the City has a contract with Central State for EMS services; in addition, bills are being sent to those who are transported. Chief Riggsby noted that Mr. Duke’s monthly financial reports includes CSU’s call volume and revenue.

Mr. Merriman said per the list above, facility runs are 25% of the City’s EMS call volume. Vice President Wallace said the City is not collecting \$1.8 million. If they begin to collect 15% more, that would bring EMS revenue up to over \$1.2 million per year. Councilman Louderback asked if

it was possible to increase revenues by \$500,000. Mr. Duke said the total charges for 2018 was \$2.7 million, and they collected \$883,000, which is just over 30%. If they can get the collection rate up to 50%, that would net about \$500,000 extra per year. Councilman Urschel said if the City provides unbounded emergency medical services, then they need to hire more people. Councilman Louderback felt they should reconsider health insurance ratios and consider going back to 80/20 in an effort to keep and attract public safety workers. He asked how many positions are available right now. Chief Riggsby said there are currently two vacancies and one person on extended sick leave. By June 2020, there will be an additional 3-4 vacancies through attrition. He noted Washington Township is hiring nine full-time firefighters and nine XFD employees applied for those jobs. The Civil Service Commission just certified the Firefighter list, and there is only one paramedic on the list of 19. When he took the test back in 1983, over 200 people took the test. When Deputy Chief Mullikin took the test, over 120 people took the test. This time, 24 people signed up to take the test and only 19 showed up. Councilman Louderback asked Chief Riggsby to what he would attribute those results. Chief Riggsby said he has been told that people do not want to work for Xenia due to too much time on the medic, insurance benefits, and call volume. Mr. Merriman said professional firefighters/paramedics have very marketable skills, and they have many choices with regard to places to work. It is simple ... they look at the economics. Pay and insurance benefits—both cost per month and max out of pocket—and less work/more pay vs. more work/less pay. Chief Riggsby said even with making amendments to the salary with the last contract negotiation, Huber Heights pays 100% of an employee's health insurance—they cannot compete with that.

Chief Riggsby briefly touched on the span of control for XFD staff. He said Fire Captains are now in a staff vehicle to oversee the shift to give them the flexibility to respond to any call in the City and allow more time to do their daily duties to support the XFD. With a minimum manning of 10 per shift, they used to run three employees on each engine and two employees on each medic. Now with the Captain in a staff vehicle, they run three employees on one engine, two employees on another engine, and two employees on each medic. Sometimes, the third employee on the engine gets pulled off and put on the medic. He did not wish to tie minimum manning to the union contract, but he would like a minimum manning of 10, excluding the Captain. When the Captain is off, the acting Captain is assigned to fire apparatus. Even though they are currently short three employees (two vacancies and one on extended leave), overtime expenses could be significantly reduced if they hire two firefighters. Mr. Merriman reminded Council that the Fire Division Secretary position was eliminated in 2009, so Fire Division staff have to make up for that loss. They now get some clerical support from City Administrative staff, but they went without any support for quite some time. When they hire a non-certified paramedic, it is a two-year program to become a paramedic with continuing education expenses to maintain those certifications every year thereafter.

Councilman Smith asked if non-emergency transports could be privatized. Mr. Merriman said he was not certain that service exists. Chief Riggsby said the service might exist in much larger cities. He commented that just that day, Medic 31 took three calls in an hour and ten minutes. They do a good job with turnaround, but it puts them behind with their paperwork.

Mayor Mays said the Police Division puts employees through the Police Academy, and she asked if the Fire Division would do the same for firefighters who need their paramedic certificates. Mr. Merriman said yes, they have begun to allow non-certified paramedics to take the test and be certified on the eligibility list. If hired and the City puts them through paramedic school, they could

require them to sign a two-year commitment to stay here or they would have to reimburse the City for those expenses. Chief Riggsby said the Civil Service Rules have not changed, and they have had the luxury of hiring fully certified firefighter/paramedics in the past but not now. Mr. Merriman said the issue with hiring EMT-Basics is they need a certain number of paramedics on shift; otherwise, the level of service would be reduced.

Vice President Wallace asked about the City's 70/30 ratio for health insurance. Chief Riggsby said the ratio (85/15, 80/20, and 70/30) is based on hire dates. Those in the 70/30 category (paying 30% of their health insurance) are new hires. Mr. Merriman said any changes to health insurance are predicated on what the City can afford.

President Engle summarized the evening's conversation as follows, noting that anything less would net less:

1. Begin hard billing vs. soft billing
2. Establish a non-transport fee
3. Create a pay-share structure for Medicare and Medicaid
4. Contract with the recommended new vendor
5. Focus on eliminating or reducing abuse
6. Focus on policy changes

Mr. Merriman agreed they needed to reduce the demand for services, which could be done with paramedicine/proactive care. He asked what they could do to alter the service delivery model to change it from reactive to proactive. Mayor Mays asked if Five Rivers was part of that conversation. Mr. Merriman said they had an initial conversation with the Health Department. Mayor Mays asked if the Director of Five Rivers was part of that conversation. Mr. Merriman said not yet, but the conversation is still very ungrounded. Eventually, they will need various partners to step in and chip in. However, he realized that professional services need to be paid. Chief Riggsby said Kettering Health Network is a partner, and he has taken the discussion a lot further with them. Currently, patients go to Greene Memorial, but Medicare/Medicaid only pay once during a 30-day period. Therefore, if a Medicare/Medicaid patient goes more than once during that 30-day period, the hospital does not get paid. Councilman Smith suggested they talk to Elmcroft to see if they would change their policy.

Councilman Louderback asked about creating a joint fire district with Xenia Township. Mr. Merriman said Mr. Holloway has regular meetings with Xenia Township and the subject has come up several times. Chief Riggsby said he was all for a joint fire district, and they have talked to Xenia Township many, many times over the years. They have even presented them with a proposal. They take about 1,000-1,100 calls per year. Councilman Louderback assumed Xenia Township must be struggling to get Fire Division employees the same way Xenia has been struggling. Chief Riggsby said they are because they have part-time employees, and nobody wants to work part time. The Township currently has three full-time employees, and the Township is struggling financially. Mr. Holloway said Xenia Township is against a joint fire district even though their current Fire/EMS services are creating a financial liability.

Councilman Louderback asked how many Xenia firefighters are currently paying 30% of their health insurance. Mr. Duke said about 10. However, if the rate was changed for fire personnel, all other union groups would expect the same. Financially, if the resources are not available to sustain

certain changes moving forward, such as with health insurance and minimum manning, then those changes cannot be made.

Vice President Wallace said as far as collections go, someone in the City needs to have the power to forgive a bill because there was no reason to go after a payment if the person did not have the resources to pay. Councilman Louderback noted a collection agency’s average is only 15%.

Mr. Merriman said he would bring back to Council at their next meeting a recommendation to award the EMS Billing contract to Image Trend. He would also come back to Council by the end of the year with a list of recommended policy changes, so those changes would coincide with the new contract starting in 2020. He will also continue the conversation to look at ways to reduce call volume.

Chief Riggsby reviewed staffing and call numbers. In 1989, (then) Commissioners increased staffing to 14 per shift due to an increase in call volume. They will break 6,000 calls in 2019, which is double the calls from 1989, with the same 14 per shift. They need 15 per shift. If they increase revenue, they need to change the way they operate.

1989	3,166 calls	increased staffing to 14 per shift
2003	4,270 calls	decreased staffing to 13 per shift due to funding
2010	4,289 calls	increased staffing to 14 per shift with first SAFER Grant
2013	5,174 calls	decreased staffing to 13 per shift through attrition (no layoffs)
2017	5,526 calls	increased staffing to 14 per shift with second SAFER Grant (thru 2020)
2018	5,860 calls	
2019	as of today, they have already surpassed last year’s numbers by 130 calls	

Councilman Louderback suggested a Police and Fire levy to increase staffing to 15 per shift. Mr. Merriman said Xenia is not the only city facing the need to reduce the call volume and increase revenues. Chief Riggsby agreed. He said Fire Station 32 needs to be relocated, which was budgeted for 2020, but the project may need to be delayed again. Mr. Merriman agreed that Station 32 needs to be replaced and relocated due to new residential construction in that area of town. They have been talking about it for years, and they cannot keep putting the project off.

Chief Riggsby said retention of firefighters is a huge issue. Beaver creek Township takes about 200 more calls each year than Xenia, but they have double the staffing and double the population. Fairborn takes the most runs in Greene County (7,000 annually), which has similar demographics to Xenia.

**4. ADJOURNMENT:** President Engle entertained any additional comments. Hearing none, he made the following motion.

Motion by President Engle, seconded by Vice President Wallace, to adjourn the Special Session at 8:42 p.m. No discussion followed. The Roll on this was the following:

Ayes: Wallace, Urschel, Louderback, Smith, Mays, Engle  
 Nays: None motion carried.

Michelle D. Johnson  
 City Clerk

Michael D. Engle  
 President, Xenia City Council