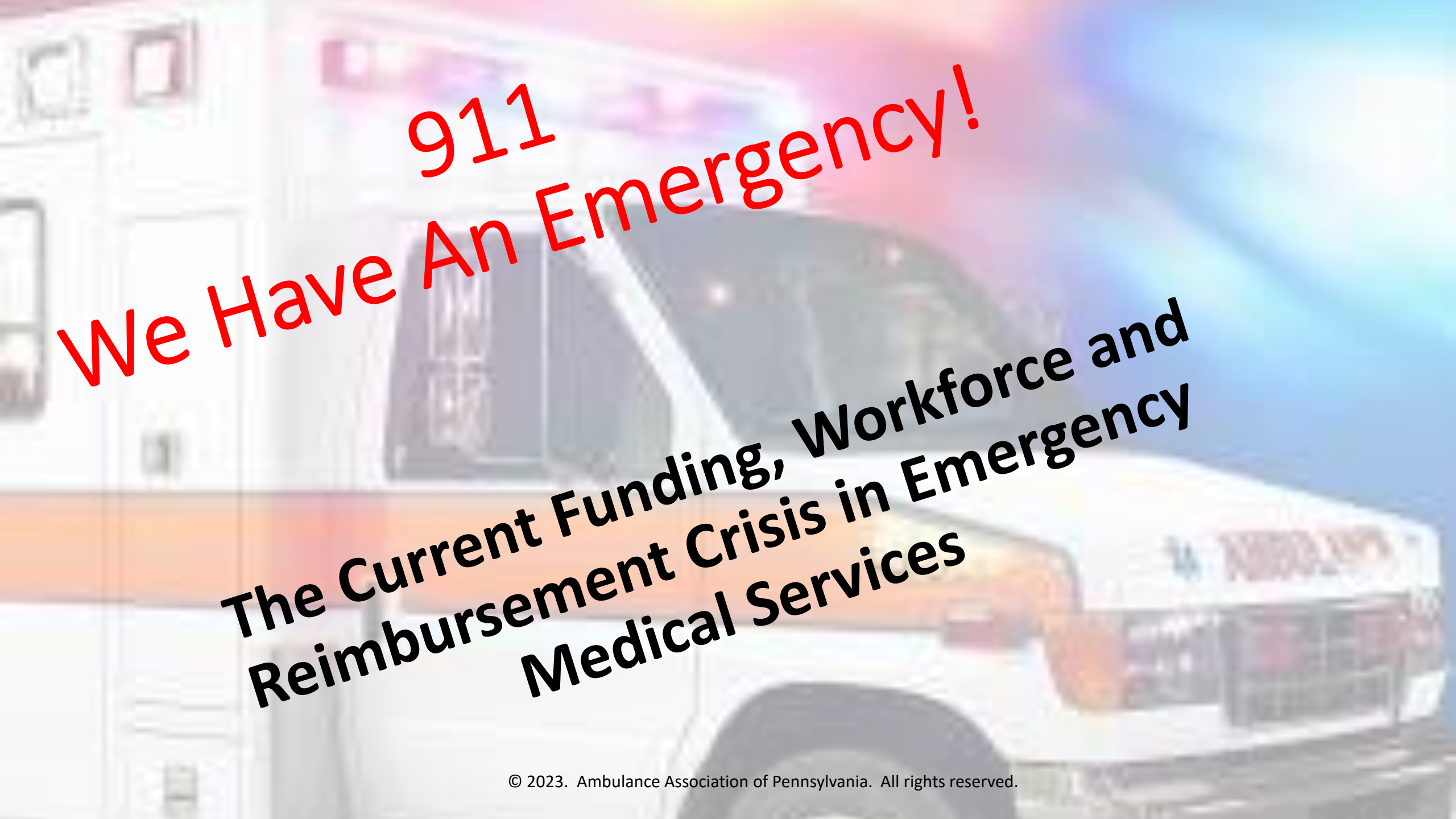


# Republican Policy Committee

Public Safety and First Responders  
February 15, 2023





**911  
We Have An Emergency!**

**The Current Funding, Workforce and  
Reimbursement Crisis in Emergency  
Medical Services**

# THE EMS SYSTEM IS BROKEN

- **Medical Assistance**
- **Sustainable Funding**
- **Recruitment, Retention and Workforce Development**
- **Statewide Fee Schedule**
- **Community Health Plan**
- **Insurance Reimbursement**

# THE EMS SYSTEM IS BROKEN



# Medical Assistance

- **Medical Assistance is 80% of Medicare rate**
- **Reimbursement for mileage “after 20 miles” is not consistent with Medicare or any other insurance reimbursement or transportation program**
- **No review procedure for annual adjustment relative to inflation**
- **Medicaid regulations for payment and medical necessity for ambulance transportation are four decades old**

**BELOW COST REIMBURSEMENT**

# Sustainable Funding

- **There is NO sustainable statewide or municipal funding mechanism to support EMS delivery**
- **All current funding mechanisms are “optional”**
- **Funding must be provided directly to EMS Agencies – not solely to the EMS “System” administration**
- **EMS is “an essential service” as designated by the General Assembly in the Emergency Medical Services System Act of 2009**

**EMS AGENCIES ARE FAILING FINANCIALLY**

# Recruitment, Retention and Workforce Development

- **30% national turnover rate of EMTs and paramedics annually**
- **Fixed poor reimbursement and financial distress hinder wages**
- **Sunset of minimum staffing waiver for basic life support in 2027**
- **Better oversight and assistance for state licensed EMS Education Institutes**
- **Department of Labor and Industry – critical workforce**

**WORKFORCE SHORTAGE – LACK OF STAFFED AMBULANCES**

# Statewide Fee Schedule

- **Explore the implementation of a “reasonable” statewide ambulance fee schedule with ALL insurers**
- **Mechanism for annual review based on consumer price index**
- **Prohibit co-pays for emergency ambulance service**
- **Average EMS cost \$550 – Average EMS reimbursement \$350**

**PREDICTABLE REVENUE - ALL PROVIDERS “IN NETWORK”**



# Community Health Plans

- **Evaluation of payment for Community Health Choices**
- **Unique clientele**
- **Increase in bariatric patients**
- **Residential site evaluations**
- **Extra personnel for safe transportation and movement of patient and EMS workforce**

**PAYMENT FOR SERVICES BEYOND TYPICAL WORK**

# Insurance Reimbursement

- **Require insurers to pay base level of service provided for claims related to treatment without transport**
- **Investigate insurance reimbursement for paramedic intercept to alleviate private pay burdens of your constituents**
- **Investigate the elimination of medical co-pays and/or deductibles for 911 emergency ambulance treatment and/or transportation**

**ADEQUATE REIMBURSEMENT FOR CARE PROVIDED**

# Contacts

- **Heather Sharar, Executive Director** [hsharar@aa-pa.org](mailto:hsharar@aa-pa.org)
- **Don DeReamus, Legislative Chair** [ddereamus@suburbanems.org](mailto:ddereamus@suburbanems.org)
- *The Ambulance Association of Pennsylvania (AAP) is a member organization that advocates the highest quality patient care through ethical and sound business practices, advancing the interests of our members in important legislative, educational, regulatory and reimbursement issues. Through the development of positive relationships with interested stakeholders, the AAP works for the advancement of emergency and non-emergency medical services delivery and transportation and the development and realization of mobile integrated healthcare in this evolving healthcare delivery environment.*
- *Our membership includes all delivery models of EMS including not-for-profit, for-profit, municipal based, fire based, hospital-based, volunteer and air medical. Our members perform a large majority of the 2 million annual EMS patient contacts reported to the Department of Health.*