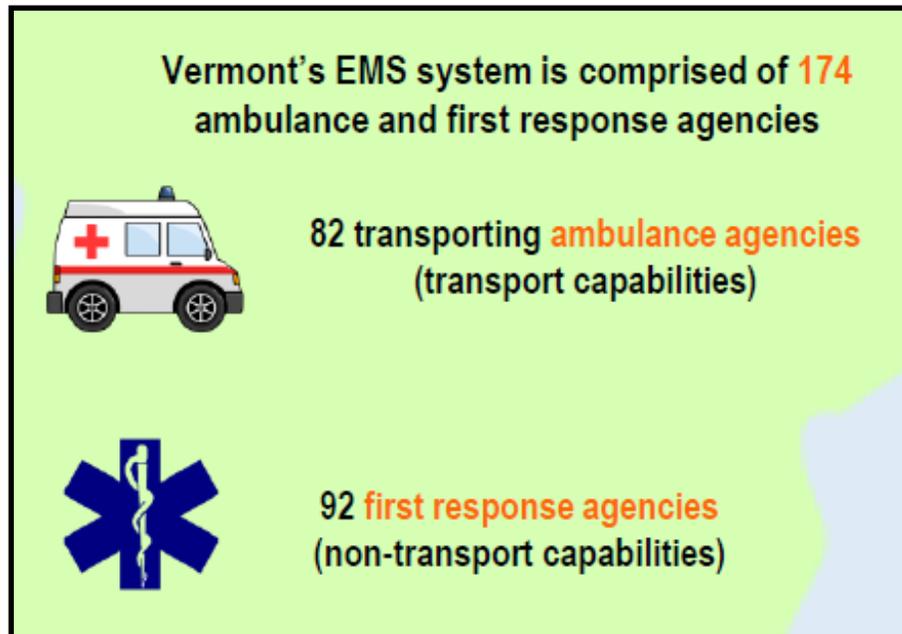


EMS & COVID  
House Government Operations  
4/28/2020  
Funding and Education

- Most ambulance services are not municipal
- The majority of EMS in Vermont is volunteer!

*93% of transporting agencies and 97% of first response agencies in Vermont report using volunteers to support EMS.*



## Fire Department (Full Time)

Common Strengths:

- Cross trained/dual role
- Provide paramedic intercept to neighboring community

Common Challenge:

- Increasing EMS call volume and expense of providing service

## Example Department: Springfield FD

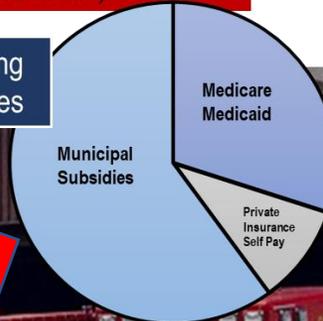
Annual Call Volume: 2,300 (combined fire and EMS)

Annual Budget: 1.2 million (including cross trained fire and EMS)

Active Roster: 13 paid, 28 volunteer (3 EMS trained)



Funding Sources



Lost Community Education \$\$

Increased Costs: Personal Protective Equipment, Station Controls, Disinfection, Overtime

Delays in Training classes

Loss in billable call volume!

# COVID-19 Impacts on EMS Services

Lost Fundraising Opportunities

Loss of workforce

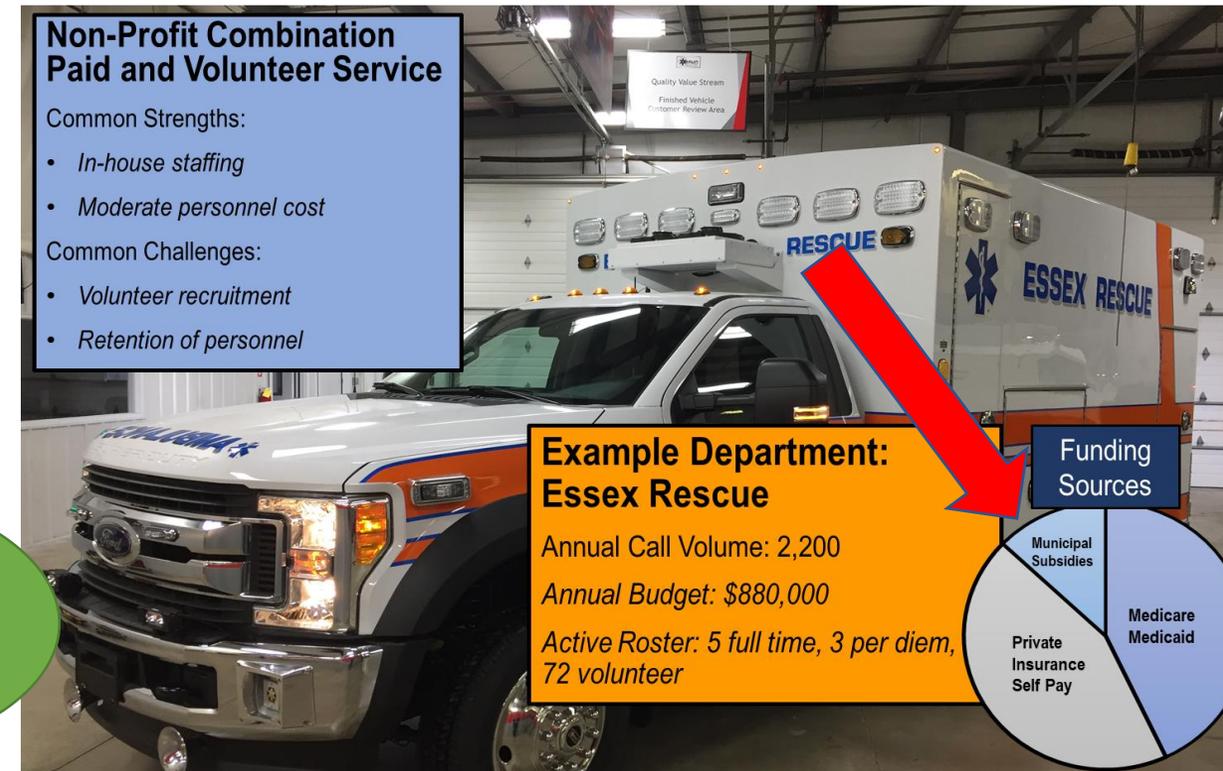
## Non-Profit Combination Paid and Volunteer Service

Common Strengths:

- In-house staffing
- Moderate personnel cost

Common Challenges:

- Volunteer recruitment
- Retention of personnel



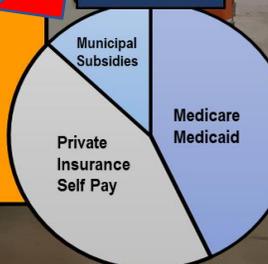
## Example Department: Essex Rescue

Annual Call Volume: 2,200

Annual Budget: \$880,000

Active Roster: 5 full time, 3 per diem, 72 volunteer

Funding Sources



# COVID-19 Ambulance Revenue Simplified

Example: 1000 call service

Call Volume x Billing Rate = Revenue

$$1000_{\text{calls}} \times \$500 = \$500,000$$

Every Day

(Call Volume – Non transports) X Billing Rate = “Revenue”

$$(1000_{\text{calls}} - 180_{\text{calls } 18\%}) \times \$500 = \$410,000 - \$73,800 \text{ 18\% Bad debt } \$336,200$$

\$163,800  
Free Care

COVID

(Call Volume – Non transports ) X Billing Rate = “Revenue”

$$(581_{\text{calls } 42\%} - 133_{\text{calls } 23\%}) \times \$500 = \$224,000 - \$40,320 \text{ 18\% Bad debt } \$183,680$$

\$152,520  
Loss Due to  
COVID

Based on actual call volume numbers comparing 2019 and 2020, Rescue Inc, Brattleboro VT  
Billing rate in this example is used for illustration only, billing rates are variable

We expect this to increase!

Direct funding to ambulance services is necessary to get through the COVID-19 Crisis!



# EMS Education

## 2800 EMS Providers

Year	New Licenses	Expired Licenses	Net
2015	341	340	(+) 1
2016	336	463	(-) 127
2017	396	334	(+) 62
2018	383	456	(-) 73
<b>Total</b>	<b>1456</b>	<b>1593</b>	<b>(-) 137</b>

\*2019 EMS Advisory Report

- **Workforce Development**

- 80% of services are currently reporting difficulty with recruitment and retention based on our 2018 survey.
- Access to educational programs and EMS testing sites is considered a contributing factor to poor workforce development. The cost of education and training is a contributing factor to poor recruitment. (based on previous survey data)
- The total number of Vermont EMS providers remains unchanged after increased recruiting efforts. \*2019 EMS Advisory Report

Pre-COVID  
Work Force

20%  
Turnover

## Weekly District COVID Report

Full Report Available at [www.healthvermont.gov/emergency/ems](http://www.healthvermont.gov/emergency/ems)

“Yes the Pandemic has had an affect on Rosters. Hardwick has a reduction in available AEMT's after approx 6 of them backed away”

“Stowe has had 3 members step back from active call taking”

District 3, “Of the volunteer services, many have had members resign or take a leave”

Additional Education Funding Is Needed!