## H.622 Talking Points Senate Government Operations – 04/23/2024

- Good afternoon Madam Chair, and members of the committee. I thank you for the opportunity to speak before you today.
- The Department appreciates the attention this committee and others are devoting to these important topics.
- We support the policies outlined in this bill but note that the funding included in this bill were not in the Governor's recommended budget.

Reimbursement for Emergency Medical Services Providers

- The bill includes common sense enhancements, such as what is proposed in Section 3, Reimbursement for Emergency Medical Services Providers.
- Not all requests for EMS response necessitate hospital level care. On scene assessment, treatment, and resolution of a medical complaint is an alternative and, in some cases, preferable outcome, as admission to an emergency department may not be clinically necessary.
- In a treatment without ambulance transport scenario, EMS clinicians are providing basic and advanced patient assessments and medical care, often in consultation with physician medical direction. Medicaid beneficiaries benefit from receiving high quality care in their home, and the Medicaid program benefits by avoiding a costly admission to an emergency department. Reimbursing EMS for this medical service is the right thing to do, and...
- This change is long overdue. The long-term financial viability of the EMS system depends on closing these historical reimbursement gaps.

## **EMS Special Fund**

• Section 2 outlines modifications to the EMS Special Fund and how it is to be utilized and prioritized to support entry level training. The EMS Special Fund has served as an important source of funding for the training of EMS personnel. Recent changes to how the EMS Special Fund is administered has rapidly accelerated the pace at which state funding is benefiting recipients. Since June of 2022, approximately \$585K has been paid out or obligated to EMS training courses and programs.

- As a member of the EMS Advisory Committee, I am committed to working with my colleagues on the committee to identify additional strategies, or modify existing strategies, to maximize the effectiveness of state funding to support the training of EMS personnel.
- The rate of utilization of the EMS Special Fund, and one time funding, suggests that an increase in the annual EMS Special Fund allocation would do more to deliver entry level training, and reduce access to training inequalities.

## The EMS Study

- Section 6 outlines a proposed framework for an EMS Study and represents an opportunity to better understand and make recommendations on how to enhance our EMS system. Some Vermont communities have expressed a sense of urgency to reevaluate how EMS services are delivered, balancing various factors such as level of care, operational performance, and cost. Other communities have and continue to make the necessary investments to support and sustain local EMS service providers and personnel. The Emergency Medical Services system was established nearly 70 years ago. While many aspects of our EMS system have evolved over time, other aspects have not, and reform is needed. We agree there is value and more important insights to be learned by carefully and thoughtfully studying various aspects of the EMS system.
- Today, EMS resides at the intersection of health care, public health, public safety, and emergency management. Structural and other changes such as system financing reform are necessary so to ensure the public continues to have timely access to prehospital emergency medical care, and the system can flex during a medical surge event, mass casualty incident, or a disaster response.