

## **Emergency Medical Services**

### **Challenges Facing Iowans**

**Ric Jones, PS, EMSI**  
**IEMSA Public Policy Chair**

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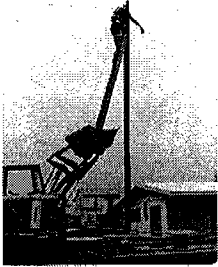
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IOWA EMERGENCY MEDICAL SERVICES ASSOCIATION



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**OBSTACLES TO GREATNESS**

- Funding
- Recruitment and Retention of the Volunteer Work Force
- Arcane Districts
- Lack of Clear Identity
- Lack of Physician Engagement
- Access to Training
- Not a Mandatory Service

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**FUNDING**

- EMS is currently funded with what's left of Federal Public Health & Human Services grant dollars that are shrinking and somewhat restricted
- After mandatory programs are fully funded, EMS gets a share of the leftovers
  - In 2006 the Legislature did appropriate an additional \$180,000 to help fill the gap.

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**FUNDING**

- Activity needing dedicated funding:
  - Bureau of EMS, including regional support staff
  - Restoration of a State Medical Director
  - Restoration of the AED Coordinator position
  - Increased Grants for training
  - Restoration of grants for EMS equipment
  - Restoration of funding for Regional EMS Councils

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**THE REIMBURSEMENT SYSTEM**

- Medicare
- Medicaid
- Private Insurers and HMOs
- Patient Responsibility

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
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**THE REIMBURSEMENT SYSTEM**

- Payer: pā'-ēr n. d: A mythical creature in ambulance reimbursement lore.
- Cost Shifting
- Bottom Line: Fees for service do not cover cost of service

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**THE VOLUNTEER WORK FORCE**

- About 80 % of Iowa's population is served by full-time, paid EMS services
- The other 20% of the population cover 90 % of Iowa's geography, and are served by volunteer EMS services
- Volunteers are:
  - Hard to get
  - Hard to train
  - Hard to keep

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
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**THE VOLUNTEER WORK FORCE**

- Hard to Get?
  - "We'd like to have you do this job where we can call you to work at all times of the day and night, in every conceivable kind of weather, to get your hands dirty, hurt your back doing impossible lifts, maybe catch a fatal disease, die in a collision, be run over working at a scene or shot, regularly have your heart broken . . . And by the way . . . There is no pay."

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**THE VOLUNTEER WORK FORCE**

- Hard to Train?
  - It takes 50 hours to become an Iowa First Responder (\$200-350)
  - It takes 120 hours\* to become an Iowa EMT-B (\$650-800)  
(This is the **MINIMUM** level **REQUIRED** for ambulance service)
  - It takes an additional 54 hours\* to become an EMT-Intermediate
  - It takes an additional 280 hours\* to become an Iowa Paramedic
  - It takes an additional 600 hours\* to become an Iowa Paramedic Specialist (\$5,000-7,500.00)
  - It takes an additional 80 hours\* to earn a Critical Care Transport endorsement
    - \* plus field and clinical hours to meet all objectives

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
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**THE VOLUNTEER WORK FORCE**

- If you are a volunteer provider, odds are that
  - You are not being paid to take any of the classes on the previous slide
  - You are also not home with your family while you are taking the classes
  - You probably paid out of your pocket for a portion of, or all of, the tuition and book costs

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
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**THE VOLUNTEER WORK FORCE**

- In addition to the certification training you need:
  - Incident Management System (including NIMS) Training X
  - OSHA training including Bloodborne and Airborne Pathogens X
  - Bi-annual CPR Training
  - Mandatory Abuse Reporting Training
  - Hazardous Materials Awareness Training
  - Emergency Vehicle Operations Training
  - Class 'D' Chauffeur's license

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**THE VOLUNTEER WORK FORCE**

- Uniforms
  - Frequently another out-of-pocket expense
- Tools
  - Also often out-of-pocket
    - Stethoscope
    - Scissors
    - First Response kit

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
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**THE VOLUNTEER WORK FORCE**

- How can the State of Iowa help?
  - HF 236 from the last session would have provided an Iowa Income Tax credit for active volunteers
  - Taking more of the funding burden off of the individual volunteers would be a big help
  - A state-funded pension system for public safety volunteers would be a great incentive

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**ARCANE DISTRICTS**

- Some EMS response districts are the same as fire districts (many of which are also arcane)
- Some follow township lines
- Some follow City Limits
- Some follow County Boundaries
- Some follow boundaries of political subdivisions that no longer exist

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
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**ARCANE DISTRICTS**

- Some follow the lines of the territory solicited by members in the "subscription service" days
- Many do not facilitate the closest capable unit to respond to the call
- Many cause the responding unit to drive through another service's district to get to the call . . . Sometimes going past a closer unit's station.

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**LACK OF CLEAR IDENTITY**

- We are EMS: Emergency Medical Services
- We MAY be part of a Fire Department
- We also MAY NOT be affiliated in any way with a Fire Department

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**LACK OF CLEAR IDENTITY**

- EMS has only really been around since the 1960's
  - 1966 National Academy of Sciences Paper:
    - "Accidental Death and Disability: the Neglected Diseases of Modern Society"
  - United States Congress passed the National Highway Safety Act of 1966 positioning the DOT to oversee EMS training and curriculum development

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**LACK OF CLEAR IDENTITY**

- Iowa passed the Advanced Emergency Care Act in 1979 - Chapter 147A
- Iowa certified her first Paramedics in 1980

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**LACK OF CLEAR IDENTITY**

- EMS is provided in Iowa by:
  - Fire Departments
  - Hospitals
  - Private Operators
  - Cities
  - Counties
  - Law Enforcement Agencies
  - Funeral Homes

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**LACK OF CLEAR IDENTITY**

- Public EMS Employees covered by IPERS do not enjoy the same benefit level as other Public Safety Employees.
- EMS Employees covered by IPERS deserve inclusion in the "Protection Class," that the legislature specifically created for public safety employees

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**LACK OF CLEAR IDENTITY**

- "We believe that job number one for every elected official is to keep Iowans safe and healthy in their homes, at work at leisure and in transit. This includes fully funded, well-trained, and dedicated law enforcement, fire and EMERGENCY MEDICAL SERVICES resources throughout the state."

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**LACK OF PHYSICIAN ENGAGEMENT**

- It can be very difficult to get physicians to assume the duties and risks of being a Medical Director
- Physician Medical Directors that are truly engaged in the EMS entity are the exception, not the rule
- Medicolegal exposure is a big obstacle

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**ACCESS TO TRAINING**

- Iowa's Community Colleges are charged with the responsibility to provide EMS training – and they do a great job – but
  - They have suffered funding cuts in recent years that translate into increased costs to participate in their programs. Many of the “canned” national programs are too expensive for even the best funded full-time services to partake of.

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**ACCESS TO TRAINING**

- Time is running out!
  - No one has all the time they need to do all the things they'd like to do
    - So – How about some State-funded Internet-based EMS Continuing Education programs that can be taken on demand at any time from any place
  - This would require a rule change from the Bureau that recognizes this type of training as “formal”

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**Not a Mandatory Service**

- Code of Iowa requires that Cities and Townships provide fire protection
- Code of Iowa requires that Cities and Counties provide law enforcement
- Code of Iowa requires that the Iowa Department of Health EMS Bureau regulates and oversees EMS . . But . . . it does not require anyone to provide EMS

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**So . . .**

- EMS needs a dedicated funding stream
- EMS needs meaningful rewards for volunteer EMS providers
- EMS response districts need to be realigned to put the closest capable unit on the call
- Cities and Townships should be required to provide EMS
- Volunteer Physician Medical Directors should be shielded from liability

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- Please continue to support the Law Enforcement and Fire Departments across the State - but -
- Don't think that by doing so you have completed your public safety mission!!!
- EMS is the third segment of the Public Safety Triangle

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**On behalf of the  
thousands of IEMSA  
members, We thank  
you for inviting us here  
today!**

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