



# **Emergency Medical Services (EMS) Sustainability Task Force**

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Bureau of EMS & Preparedness**

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- Key Issues impacting volunteer EMS personnel recruitment and retention:
  - No consistent stable funding for local EMS
  - Idaho code does not identify EMS as an essential service
- Knowns:
  - EMS personnel numbers have stayed relatively stable over the past 10 years but have not kept pace with Idaho's rapid population growth
  - Rural communities have the greatest need for the highest level of EMS care (paramedic) due to longer transport times and health disparities
  - Rural communities typically rely on volunteer, basic-level EMS (EMT) personnel
  - The cost to provide paramedic level service is prohibitive for most rural communities
- Challenges in recruiting and retaining EMS personnel are well documented
- Solutions have been identified but need support and funding from policy makers



- Kick-Off – June 10, 2022
- Monthly Meetings Continue





- EMS Day at the Capitol
- Resolution (SCR101)
  - Statement of Legislative Support
- Work Groups Evolution
- Drafting Legislation
- Planning - Summer Communications





- Governance
- Coverage
- Personnel

- Communications
- Rules & Coverage
- Wages & Benefits
- Billing & Reimbursement
- Funding
- Innovation



- Essential Service
  - EMS is required
  - Counties are Accountable
- Cost Share Funding Model
  - Grant Process?
  - Source?
- Levy Rate Reset
- Billing Required
- Benefits
  - Health Insurance
  - Retirement
- Compensation
- CHEMS
- Others?



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## **56-1011. EMERGENCY MEDICAL SERVICES — STATEMENT OF INTENT.**

It is the purpose of the legislature of the state of Idaho in the adoption of sections 56-1011 through 56-1023, Idaho Code, to recognize ~~the importance of the delivery of~~ emergency medical services as an essential service and to provide reasonable regulation of the same. For this purpose, the provisions of section 54-1804, Idaho Code, shall not be so construed as to prohibit or penalize emergency medical services rendered by a person authorized to render emergency medical services by sections 56-1011 through 56-1023, Idaho Code, if such emergency medical service is rendered under the responsible supervision and control of a licensed physician.





## **56-1011A. COUNTIES ACCOUNTABLE**

Counties have the authority and accountability to ensure that EMS is reasonably available throughout the county.

FOR DISCUSSION ONLY



## **56-1018C. EMERGENCY MEDICAL SERVICES FUND IV.**

(1) There is hereby created in the dedicated fund of the state treasury a fund known as the emergency medical services sustainability fund. Subject to appropriation by the legislature, moneys in the fund shall be used for personnel, and costs associated with assuring the performance of planned coverage and ambulance response, including ambulance response to motor vehicle accidents.



(2) The bureau of emergency medical services shall be responsible for distributing moneys from the fund to qualifying entities that submit an application for EMS Sustainability funds. The bureau shall approve applications based on the following criteria:

FOR DISCUSSION ONLY



(a) The requesting entity holds a current license as an ambulance service issued by the state of Idaho;

FOR DISCUSSION ONLY



(b) The application clearly defines the agency's service area;

FOR DISCUSSION ONLY



(c) The requesting entity certifies that it has billed health insurance carriers for at least 80% of eligible ambulance transports provided in the previous year. If the entity is newly licensed and does not have a year of historical billing information, the entity must certify that it will bill health insurance carriers for at least 80% of eligible ambulance transports;



(d) The county endorsing the application must have submitted to the bureau of emergency medical services a county ambulance coordination and coverage plan that has been approved by the bureau of emergency medical services that specifies how ambulance responses will be covered and coordinated throughout the entire county;

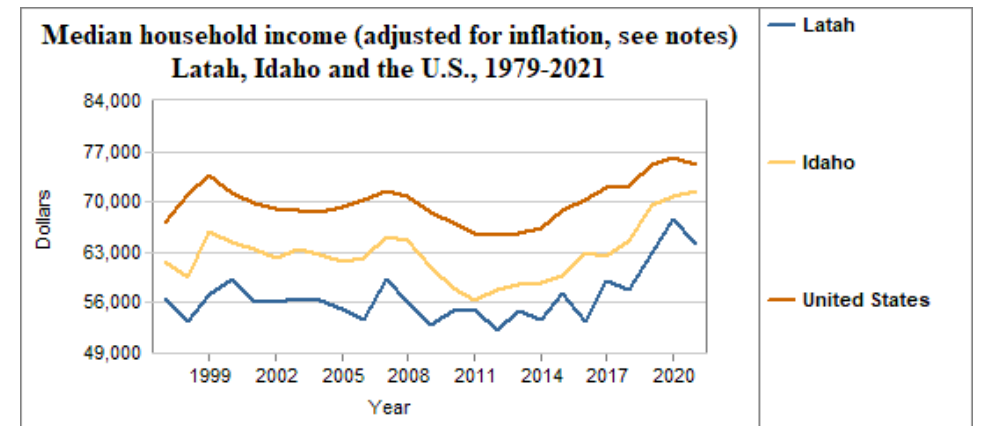
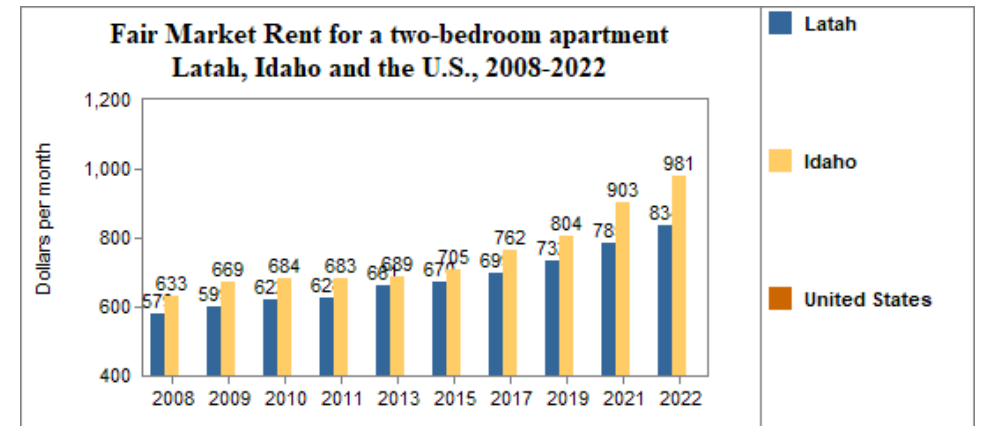


## Executive Summary

- Summary of Qualitative Data Collected
- Perception of Sustainability and Support

## County Overview

- Demographic data and geography that impacts EMS Delivery
- Workforce participation, Housing cost, Cost of living and Community Health Factors
- Impact of Community factors on EMS workforce and sustainability







## EMS System Demand

Call volume, response time, total call time, transport time to definitive care, call types



## EMS System Resource Assessment



EMS Agency overview, including staffing model, compensation, and licensure level



Financial data, including operating cost, tax revenue, billing revenue, and grant support.



Overall cost of personnel, benefits, facilities, vehicles, equipment, supplies, and training.



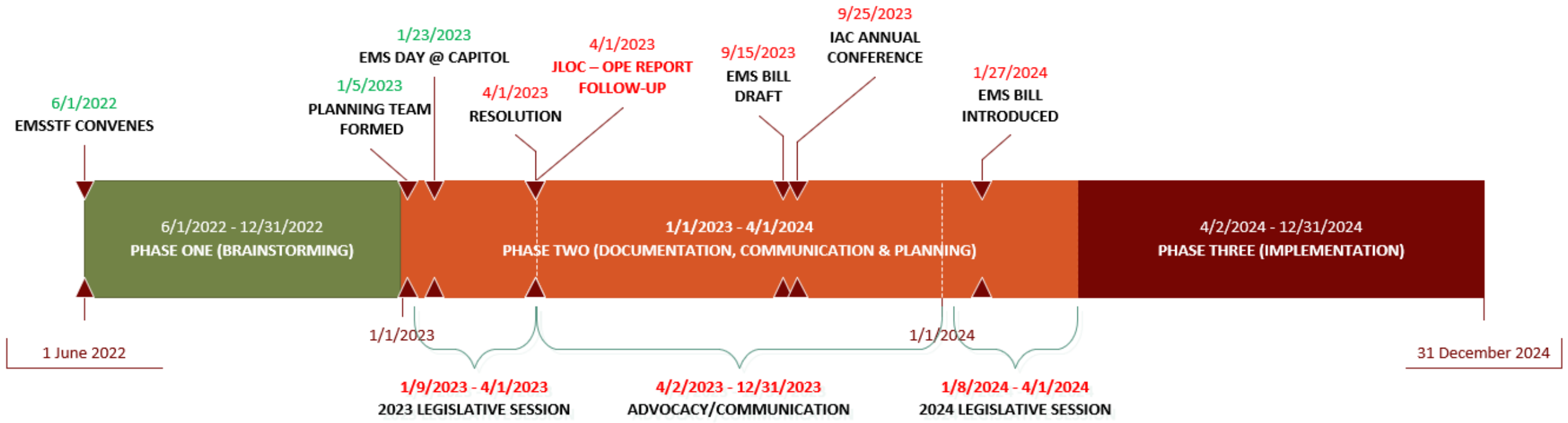


# County Report Content

## Data Reporting

- Gap Identification from financial data
- Triggers for transition to alternative models
- Identified solutions within each county
- Opportunities for System Performance Improvement or Efficiencies
- Overarching statewide trends and issues reported by EMS providers

# Timeline





- Welcome to attend meetings
- Thank you!
- Questions?

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