



New York State Volunteer Ambulance and Rescue Association, Inc.

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STATEMENT OF SUPPORT

S3503 Hinchey /A1561 Santabarbara

Support Establishment of the New York State Rural Ambulance Service Task within the Department of Health

NYSVARA strongly supports establishing an executive level task force to study the unique challenges facing New York State's rural ambulance services and to propose long-term solutions to these challenges. NYSVARA also supports including the proposed \$50 million stabilization fund in the State budget to help implement the recommendations of the task force.

Rural emergency medical services (EMS) face daunting challenges that directly impact health care outcomes and quality of life in rural communities. There is often a lack of awareness of the critical condition of EMS services in rural communities and the need for policymakers to facilitate action.

WHY IS RURAL EMS IN TROUBLE?

- The number of EMS volunteers in rural communities is decreasing at the same time that we see an increased demand for service due to the COVID-19 pandemic, aging communities, chronic care needs, drug and alcohol abuse, and behavioral health challenges.
- Rural EMS services entered 2021 in a perilous fiscal condition, having suffered significant financial losses and incurred many new mandatory safety expenses as a result of the COVID-19 pandemic.
- While volunteerism is the bedrock of rural EMS and needs to be encouraged and supported through investments in our volunteers, it may not be the sole EMS sustainability solution when rural communities are losing population and encumbered by economic woes.
 - Volunteerism can be encouraged through tax credits, student loan repayment, property tax relief, and subsidized training and continuing medical education.

NYSVARA is the voice of volunteer and not-for-profit EMS in New York State.

- Many rural ambulance squads are turning towards hybrid models that employ EMTs or Paramedics to supplement the volunteers. That makes sense, but is expensive for agencies and their local government partners that have limited financial ability and many competing priorities. How can we make that cost sustainable?
- Medicaid pays well below the cost of delivering ambulance service and every Medicaid ambulance call is being subsidized by the not-for-profit ambulance squad.
- There is also a shortage of paid EMTs, primarily due to the low wages for such highly skilled work.

This task force can make recommendations that can lead to multi-faceted actions that ensure the sustainability of EMS in rural New York. Now is the time to engage policymakers in this growing crisis so all New Yorkers can be confident if they call 911 there will be a timely ambulance response.

EMS responders reported to shifts around the clock, when other New Yorkers were urged to stay at home for safety, and continue to be at the ready to assist the ill and injured, as well as care for community members stricken by COVID-19.

It is unfortunate that EMS was not a major part of New York's DSRIP program. Better patient-centered care in the pre-hospital setting means better patient outcomes and improved health status. When a patient arrives at the hospital having received quality pre-hospital care, the hospital is getting a patient who is in better condition than in the absence of that care. A patient that arrives in better condition due to good pre-hospital care will be less resource intensive to treat. So, better pre-hospital care should reduce hospital treatment costs, benefiting both hospitals and risk-bearing health insurers.

If you look at DSRIP and the New York State budget, hundreds of millions, and perhaps billions, of dollars have been dedicated to infrastructure development for large health care providers. **Rural EMS needs a funding stream to finance innovation and modernization in staffing, technology, and equipment. We applaud Senator Hinchey and Assemblymember Santabarbara for their NYS budget funding request that compliments this legislation and urge its inclusion in the budget.**

NYSVARA requests your active SUPPORT for passage of S3503 and A1561.