EMS WORKSHOP NOTES

EMS Costs

- Many communities are in the same dilemma as Ticonderoga.
- Costs vary with the region and call volume.
- Expect anywhere from \$300,000 to \$600,000 for EMS costs.
- Previous town subsidies of \$30,000 to \$70,000 were band-aids...not actual cost for service.
- Why did Ti EMS request go from \$70,000 in 2022 to \$140,000 in 2023?
 - Cost of medication, supplies
 - o Insurance increased at least 9% this year.
 - All mandated costs by DOH.
- If residents want EMS, it will cost something.
- Question is how do residents want to pay the cost?

EMS Options

- 1) Town funds no entity. Rely on existing 911 services.
- 2) Town creates an EMS District and funds through levy.
- 3) Town funds cost through budget appropriations.

Why Does EMS Cost So Much? What Changed?

- 80% of 911 calls are EMS based, not fire or police.
- Volunteerism used to be standard and adequate in rural America.
 - People had one job and could allocate their time out of work to taking care of others.
 - Average household job is now 2.5 vs. 1. Not as much time for volunteering.
- Change in health care industry.
 - EMS is now at a point where nursing was 25-30 years ago when it was mostly volunteer.
 - Licensed professionals held to competency standards so don't see volunteer nurses any longer.
 - Most EMS volunteers transitioned to EMS providers as a career. Moving from volunteer days.
- Change in Requirements.
 - o Justified National push for more education and certification in this field.
 - o Increased time requirements for training and support.
 - Mandatory DOT and DOH regulations now apply.
- Change in Service.
 - The only thing that used to matter in an ambulance was the size of the engine.
 - Load and Go was the service long ago.
 - Brought patients to medical professionals at hospital for treatment.
 - Job now takes the task of saving lives outside the emergency rooms and into the field.
 - A lot of technology, initial training, and ongoing training in ambulance to treat patients in route (formerly done at hospital).
 - Associated cost of equipment and maintenance of that equipment have increased.
 - Cost in most communities \$600 to \$1000 to roll an ambulance (equipment, vehicle, bldg., staff. Insurance, wages).

Cost changes from community to community.

What about Billing, etc. to Reduce Costs?

- Billing revenue helps reduce burden on taxpayers.
- Important to understand difference between direct costs and indirect costs (equipment, supplies) associated with EMS services.
- Call volume in our area is not enough to support agency on billing revenue alone.
- On average, 20% of calls not reimbursed.
- Types of calls that have no reimbursement.
 - Lift Assist: Some charge for lift assist but comes out of the patient's pocket.
 - o Fire calls when EMS on standby.
 - o Medical alarms even accidental.
 - Medicare looks at ambulance as transport benefit.
 - Must put patient in ambulance and transport to hospital to get paid except for 2 scenarios.
 - Cardiac arrest. Ambulance arrives and patient expires after time of dispatch, can get some reimbursement.
 - Some commercial and no-fault carriers are paying for treat and release.

Laws Affecting Billing

- Many laws in NYS determine how one can do medical billing.
- NYS no balance billing law.
 - o Prohibits surprised medical billing (balanced billing).
 - If ambulance cost \$1400 and Medicaid only pays \$653, cannot bill difference to patient.
- Governor passed law that prohibits medical debt being applied to credit bureaus.
 - o Prohibited to going to collections.
 - Allows insurance companies to use 3rd party to analyze what ambulance call costs is in location.
 - O Uses this data to pay for service. Must accept that under law.

Medicare/Medicaid Specifics

- Health care billing must participate in Medicare and Medicaid programs.
- Reimburse from 45%-65% below cost of service.
- 45%-50% patients encountered by EMS are Medicare/Medicaid.
- All who provide health care insurance for employees (municipal or private based) are subsidizing the Medicare/Medicaid programs under reimbursement.
 - o Inflated charges because of attempts to subsidize under reimbursement.
 - Healthcare is in difficult situation because Medicare/Medicaid reimburses so little, and must be made up somewhere.
 - Added burden placed on commercial insurance carriers and private pay to help subsidize for government programs.
 - o Inherently builds in tremendous shortfall of funding especially in areas of low call volume to help shift subsidy to the commercial no fault and workers comp payers.
- You cannot challenge Medicaid.
 - o In NYS, Medicaid costs are shared with the county.

- o NYS is one of the few states in country that shares this burden with county.
- o County shares a big burden with set rates.
- Challenging basically challenges the county to pay more.
- Protracted Formula for figuring out Medicare patient cost for ambulance ride in Ti vs. same in Lake George. All based on zip codes.
- Large immigrant population in NYS that receive Medicaid.
 - Strains state budget and further strains counties.

Future of EMS

- EMS service can include 3 possible elements and you can only pick 2 good, fast, or cheap.
- Some areas have gone the tax district route for funding such as Lake George and Warrensburgh.
- Consider the following before moving forward (Peter Barry):
 - o Ti has an organization that has provided good quality service for a long time.
 - O Ask yourself has the community complained about the service?
 - Has there been any complaints or concerns about the service?
 - o There is a commercial for-profit option.
 - Significant burden to start ambulance from scratch after losing assets currently have.

What about Medical Transports?

- ECH goals in future for transport.
 - Not enough staffing currently to do in-house.
 - Does save cost if they do it.
- Call center controls where patients go.
 - Depends on the acuity of the patient.
 - Match level of care needed w/available crews.
 - Usually call the nearest agent Lamoille, Ti EMS.
 - Always err on the side of patient.
- Base rate plus mileage rate (\$28 per loaded mile).
 - o Insurance company only pays for shortest distance.
 - Medicare pays less than \$9/loaded mile even though rate charged is \$28.
 - Medicaid pays nothing for the first 9 miles.

Budget Information

Ticonderoga EMS

- Staffing: 2 paramedics, 3 critical care techs, 3 AMT, 9 EMTs.
- Ti EMS added second volunteer crew hours of 8-6, 7 days/wk.
- Ti EMS is currently paid 24/7 now.
- Loss of volunteers will not affect.
- Ideas for fundraising and applying for equipment grants.
- Approximately on average \$41,000/month to keep lights on.
- Unknown how much revenue will result from serving Crown Point?
- How does Ti EMS determine how much other towns must pay?

- Set amount from Putnam. Not willing to increase amount.
- Set amount from Crown Point. Would increase if necessary.
- At some point, cost percentage would be based on volume and travel costs.
- Base costs should be split between communities supported (Ti, Crown Pt, Putnam).

Lamoille Ambulance Service

- Lamoille only supporting transports or mutual aid in Ti when called.
 - 3 transport calls/day. Avg length 4hr/call.
- Staffing: 16 staff in Ti for Lamoille.
- Lamoille \$1.9M for company to keep lights on.
 - o No separate budge for Ti costs.
 - \$5,205/day to operate.
- Lamoille proposal. Concerns on low cost.
 - o Concern: May be good for this year and put Ti EMS out of business and cost would then go up.
- Proposed \$25K based on cost of readiness.
 - o Putting on a 3rd crew strictly for 911 calls.
 - Also used to buy new equipment for Ti.
 - o Don't see an increase based on current infrastructure.
 - Can afford \$25K for 5-10 years w/potential for multi-year contract with limits on increases.
 - Same cost regardless of # calls.
- If Lamoille private, for-profit business, why do they need Town funding?
 - Response was they do not need town funding just paying for readiness.
 - "Paying for operating outside existing corporate structure."
 - o Understand some amount of revenue based on their infrastructure.
 - o Earning \$2.1M to \$2.5M a year corporate-wise.
 - Would not lose any \$ in Ti because cost of operations same and already established.
- Difference between Ti and Lamoille in cost according to Lamoille.
 - o Ti maintains readiness to answer 911 calls.
 - o Picking up transports would offset that revenue.
 - Lamoille established as transport company.
 - Already have building, staff, and infrastructure around that business.
 - Can take the burden of an additional part time crew.

What about Forming an EMS District?

- Former County EMS Coordinator
 - District is better option for taxpayers because you pull in all county property that is exempt.
 Instead of paying \$350K or \$400K on people who are already paying a significant portion in taxes you are able to pull in a bunch of properties and land that is not paying any taxes to help ease burden on individual taxpayer.
 - Spreads burden off taxpayer by pulling in exempt property.
 - EMS district would be like water or sewer district.
 - o Town Board (board of commissioners) has total control over budget.
 - Control of pay rates in district and salaries of staff.

- Schroon Lake has district.
 - o Gives quarterly report to town board.
 - $\circ\quad$ Budget time comes in with all of their books and itemized budget.