



## TASC 90 Highlights

**Date:** April 9, 2003

**Topic:** Emergency Medical Services (EMS)

**Facilitator:** Terry Hill, TASC

**Guests:** Gary Wingrove, EMS Representative on the TASC Advisory Committee; Evan Mayfield, ORHP; John Vose, Upper Valley Ambulance Service Director in Fairlee, VT; Denny Behrens, Nebraska Office of Rural Health; Mary Hedges, Minnesota State EMS Director

### Opening Comments and Introduction – Terry Hill & Forrest Calico

Announcements:

- The Flex grant applications are being reviewed
- A recent congressional issue is the H-care (Health Care Access and Rural Equity) legislation of 2003 that would modify current CAH components to increase the number of acute care beds from 15 to 25 and eliminate the 35 mile ambulance rule as well as other provisions

### Gary Wingrove - Current & Expected EMS Legislation in Congress

- See Appendix A (2003 EMS-Related Bills Introduced in Congress)
- The “35 mile survey” was administered by TASC and included two questions: (1) How many of your CAHs own and operate ambulance services? And (2) of those that do, how many have an ambulance service in the same town? Responses were received from 37 of the 47 participating states. Of approximately 600 facilities, about 125 CAHs (21%) own their own ambulance service; only 12 of that 125 have more than one service within 35 miles. This information will be presented to CMS in hopes of reducing their resistance to eliminating the 35 mile rule.
- Check [www.congress.gov](http://www.congress.gov) and type “ambulance” as a key word for quick updates regarding EMS.

### Evan Mayfield - Update on EMS Activities at ORHP

- The AED Program - Applications will be reviewed
- National Rural EMS Technical Assistance Center
  - Begins this upcoming fiscal year with approximately \$500,000 for Year One
  - Main purposes are to (1) disseminate best practices information (recruiting and retention, reimbursement, disseminate research findings on rural EMS, etc.), (2) develop rural EMS quality/performance improvement indicators, and (3) integrate EMS into current grant programs (Flex, Networking, Outreach).

### Denny Behrens - Update on the NOSORH EMS Task Force

- Consists of approximately 12 SORH that have been working with partners since 09/2000 to craft a focus, a set of goals and activities to help rural-frontier EMS. This group produced the 3Rs of EMS document which focuses on: reimbursement, recruitment/retention, and restructuring. They have now consolidated those two documents and are seeking the acceptance of the NOSORH and NASEMSD boards of directors for this consolidated document.
- EMS 12: A group of 6 SORH and 6 NASEMSD appointed members who have worked together to identify the top priorities for rural - frontier EMS. This group has produced the 8 Priority document that is part of the above #1 consolidated document. The group has worked to ensure the creation of the Rural - Frontier EMS agenda for the future.
- Both groups are focused on the creation of a technical assistance center that would act as a clearing house and research center for all rural - frontier EMS activities to be ready by September 1, 2003.

### **John Vose - Progress on Forming EMS Insurance Captive**

- See Appendix B (*EMS Organizations Explore Self-Insurance*)
- A project that began a year and a half ago because ambulance services in Vermont could not acquire worker's compensation coverage.
- Vermont, Maine, and Minnesota created this captive to pool resources and obtain more favorable rates. Surveys have been sent to about 30 services within the three states. A business plan will be developed from this information.
- Contact John Vose at [john.vose@valley.net](mailto:john.vose@valley.net) for more information or articles

### **Mary Hedges - Formation of the "Advocates for EMS"**

- See Appendix C (*Advocates for EMS Established, Elects Founding Officers*)
- A joint organization started in the fall of 2003 by the National Association of EMS Doctors and the National Association of State EMS Directors
- The intent is to educate elected and appointed officials on public EMS issues as well as monitor and influence EMS legislation and raise awareness among federal decision makers, legislators, and others; work to represent the public perspective vs. the industry perspective of EMS
- There are monthly conference calls the first Friday of each month at 9:30 a.m. CST. For more information see [www.naemsp.org](http://www.naemsp.org) or [www.nasemsd.org](http://www.nasemsd.org).

### **Closing comments - Gary Wingrove**

- State Flex directors are encouraged to send responses from the CAH EMS Survey to TASC
- A request was made that states receiving cost-based reimbursement for ambulance services send information to Tami Lichtenberg at TASC
- A question was asked as to whether or not AED grants can be used for other equipment or just AEDs. The answer is that the money is only for AEDs.

### **Closing comments - Terry Hill**

- Please send agenda suggestions for the National Flex Conference on August 18, 2003, to TASC
- The call was adjourned at 3:40 pm CST

Next call: **Wednesday, July 9, 2003, 2:00pm – 3:30pm CST, 12:00 PCT, 1:00 MT, 3:00 EST**

For further information, please contact TASC at 218-727-9390 or [tasc@ruralresource.com](mailto:tasc@ruralresource.com)