

Continually improving the care delivered to EMS patients by discovering, developing, and promoting the best EMS management practices.

Position Statement Regarding

The Field EMS Quality, Innovation and Cost-Effectiveness Improvement Act H.R. 3144

The National EMS Management Association (NEMSMA), on behalf of its members who are managers, chief officers and executives serving in the leadership of Emergency Medical Services (EMS) systems throughout the United States, supports H.R. 3144 (*The Field EMS Bill*) introduced by Representatives Tim Walz and Sue Myrick. The NEMSMA membership includes over 1,600 EMS leaders and represents all provider types including volunteer and career, public municipal, fire-based, community-based, hospital-based, private-for profit and private non-profit providers of EMS and/or ambulance services.

The Field EMS bill recognizes the vital role of emergency and non-emergency medical services across the United States. We are pleased that the bill takes steps to further integrate and elevate EMS leadership and coordination at the federal level while also recognizing the key role of local communities, regions and states in the delivery of high quality EMS care. We further appreciate and fully support the designation of the U.S. Department of Health and Human Services (HHS) as the lead federal EMS agency.

The majority of EMS functions are healthcare related and NEMSMA believes strongly that EMS is an essential component of our overall healthcare system that also maintains strong connections to public safety, public health, transportation, emergency preparedness, and homeland security. As such, we appreciate the fact that the bill establishes an appropriate federal lead agency while also maintaining the Federal Interagency Committee on Emergency Medical Services (FICEMS) coordination mechanism. NEMSMA also supports the current EMS offices in DOT and DHS and the fact they are not negatively affected by the bill. These offices must remain engaged in regard to the homeland security and transportation functions of EMS.

We further hope this designation of a lead agency, combined with established federal roles and coordination mechanisms, will continue to support EMS at the local level and will foster accountability and dialogue between all levels of government in support of effective EMS care.

(Over)

While NEMSMA feels strongly that EMS should be an independent, identifiable and sustainable component of local emergency response and healthcare delivery, our association agrees that the establishment of an Office of EMS and Trauma at HHS is an effective mechanism to ensure EMS is provided a voice at the federal level. NEMSMA also believes that developing and fostering a partnership between the EMS and trauma care communities, a partnership that already exists in many states, will serve EMS organizations well.

NEMSMA further supports the grant programs proposed in the bill. While we are concerned that the voluntary funding mechanism will likely result in unpredictable funding levels, we understand this approach as it relates to the current economy and federal fiscal climate. We are quite pleased however, that significant emphasis has been placed on grants to innovative EMS services. NEMSMA believes strongly that the identification and implementation of best practices will likely originate from EMS services directly, many of whom are members of our association. NEMSMA also supports the grant programs that will allow state agencies to explore improved EMS structural and oversight opportunities. Our association believes that state-level programs of this type have not been in place since the 1970s and should once again be encouraged.

Finally, NEMSMA recognizes that the proposed legislation was the product of a number of discussions and compromises that led up to the bill as introduced by the sponsors. Like all legislative initiatives, we further recognize the bill may be imperfect in some ways. Regardless of these imperfections, NEMSMA cannot ignore that the components of this legislation will significantly advance the current state of EMS in the United States. While the bill does not address every concern, nor does it address each concern perfectly, we must advance this field EMS conversation, and believe it is important to stand with other national EMS associations in this endeavor.

As leaders in the EMS community, we cannot allow minor disagreements and internal division on the particulars of this legislation to distract us from the historic opportunities it presents. Furthermore, we encourage all members of the EMS community to stand with us, lest we lose this opportunity for years, or perhaps generations, to come.

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President