**EMS ON THE HILL REPORT 2023**

Since I was the only EMS personnel attending from South Dakota I was asked if I would join the North Dakota delegation in visiting with our legislators together. So on Thursday March 30, I joined Corey Johnson, Director of Williston, ND service and Christopher Mahoney, the training officer for Williston. We met in four Senator Offices and two Representative Offices. We did not see any of the elected officials but met in their respective offices with a representative of their staff. It was a productive day of meetings and gaining new friends and colleagues from North Dakota.

 The topics we discussed were as follows:

 **Pleases save the EMS Workforce**. Insufficient reimbursement for EMS care and lack of federal investment in EMS are long-term problems that have been building for decades. The shortage of EMS personnel threatens to undermine our emergency 9-1-1 response infrastructure. We are asking Congress to: 1. Expand the Hospital Preparedness Program authorized by the Pandemic and All Hazards Preparedness Act to include $50 million to fund EMS Preparedness and Response Workforce Shortage Program. (For example Grants for firefighters has $380 million for them to apply for. Law enforcement grants are at $400 million. It is asked that EMS has its own grant program.) 2. Make EMS eligible for federal grants offered through the Department of Labor and other agencies for apprenticeship programs to spur workforce development. 3. Support the EMS Count Act of 2023 this legislation would require the Secretary of Labor to revise the Standard Occupational Classification System to accurately count the number of EMT’s and paramedics who are also firefighters. (The way they count personnel nom is if you are listed as a Firefighter/EMT or Firefighter/ Paramedic you are counted as a firefighter with no reference to EMS personnel so it is not an accurate count of EMS personnel.) 4. Asking them to hold congressional hearings on workforce crisis and causes for the exodus of the EMS workforce from the profession.

 **Fund and Reauthorize the Supporting and Improving Rural EMS Needs (SIREN) Law.** Asking our lawmakers in the Senate and the House to share their support with the Senate and House Appropriations to fund SIREN ACT grants at $20 million and to authorize S. 265 for 5 more years to 2028.

 **Support H.R. 1666. Protecting Access to Ground Medical Services Act of 2023.** This legislation would extend the current temporary increases under the Medicare ambulance fee schedule of 2% urban, 3% rural, and 22.6% super rural for another three years through December 31, 2027. This will cover the time that the Medicare cost reporting is to be completed and analyzed so that a long-term solution to the chronic underfunding of the ambulance fee schedule can be adopted. The 22.6% encompasses basically the whole State of South Dakota.

 **Reimburse EMS for Treatment in Place (TIP) and Transport to Alternate Destination** **(TAD).** Under COVID-19 Public Health Emergency authorized waivers that allowed EMS agencies to be reimbursed for caring for patients in their home in lieu of transport and transporting patients to alternative destinations for care. These waivers will expire when the PEH ends on May 11, 2023. Reimbursing EMS agencies for TIP and TAD will: 1. Shorten task times for EMS agencies struggling with workforce shortages and help decompress busy hospitals, which often have challenges with transitioning care from the EMS agency to the hospital emergency department. Currently, many hospitals hold EMS personnel for hours waiting for an available bed in the emergency department, which limits resources available to the community. 2. Support patient-centric care by facilitating referral of care to the patient’s own caregivers, who know the patient and their medical history, as opposed to an emergency department staff who typically do not know much about the patient. 3. Save the hospital and EMS resources, both of which are in short supply.

 **We encouraged our Senate and House legislatures to join the EMS Caucus,** so they will have a better understanding of the problems we endure as EMS personnel.