



MEASURE: HB 3678
EXHIBIT: F
HOUSE REVENUE COMMITTEE
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SUBMITTED BY: WILL BAUSCHER

EMS SECTION – OREGON FIRE CHIEFS ASSOCIATION
727 CENTER STREET N.E. SUITE 300
SALEM, OR 97301

To: Honorable Co-Chairs Phil Barnhart & Vicki Berger – House Revenue Committee
Honorable Members of the Revenue Committee

From: Will Bauscher, Director, EMS Section - Oregon Fire Chiefs Association;
Mark Stevens, President, EMS Section - Oregon Fire Chiefs Association

Regarding: Testimony regarding HB3678

Date: May 26, 2011

Co-Chairs Barnhart and Berger, members of the committee, on behalf of the EMS Section of the Oregon Fire Chiefs Association I would like to thank you for the opportunity to address the committee in support of HB3678. The provision of out of hospital emergency care and ambulance transport of those injured in motor vehicle collisions encompasses a multitude of resources, working in concert, in order to provide the best positive patient outcomes. With Oregon's fire service deploying a majority of the state's emergency medical responders, volunteer and paid - covering regions of our state from urban to frontier, our ability to sustainably provide these services rests heavily upon re-imburements for ambulance transport services.

Fees associated with ambulance services not only support and sustain this important transport component of the EMS system, but in many cases, helps to support first response providers through re-supply of disposable items, training, and etc. Unfortunately, when combined with other recent changes to ambulance reimbursements, the inclusion of ambulance services in the PIP schedule would constitute yet another significant financial impact on Oregon's ambulance providers.

Supporting HB3678 will provide substantial relief for ambulance providers and help maintain vital EMS services. For example, removing ambulance services from the PIP fee schedule will afford retention of approximately \$10,000 (Keizer Fire District) to \$25,000 (Corvallis Fire Department) in ambulance revenues. In turn, these revenues will be used to offset comparable reductions resulting from Medicare/Medicaid mileage changes which took effect in January 2011.

In closing, we would like to emphasize our support for the pursuit of reimbursable alternative EMS transport destinations and the appropriate utilization of all Emergency Health Care services. However, to sustain current levels of ambulance service requires adequate reimbursements. We believe HB3678 is an appropriate and necessary means of support for Oregon's ambulance providers, and encourage to committee to support it with a 'do pass' recommendation. Thank you for the opportunity today, and we would be happy to answer any questions you may have.

Respectfully submitted,

Will Bauscher, Director
EMS Section, Oregon Fire Chiefs Association
Division Chief – EMS Corvallis Fire Department

Mark Stevens, President
EMS Section Oregon Fire Chiefs Association
Division Chief – EMS Tualatin Valley Fire and Rescue