

House Bill 4030

Ground Emergency Medical Transport (GEMT)

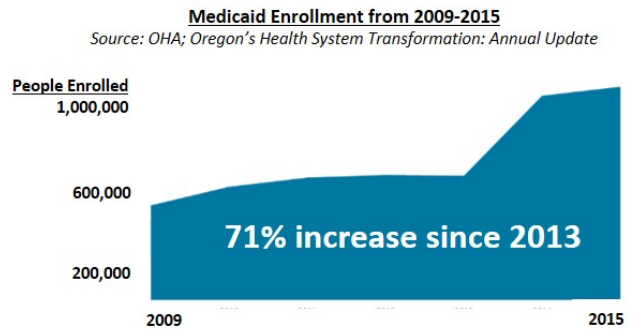
EMS providers are integral to Oregon’s healthcare system

Oregon’s Emergency Medical Services (EMS) system ensures quality medical care and ambulance transport for every individual. This care is administered by public sector EMS providers (such as fire departments/districts) and/or private sector ambulance companies. Demand for medical care continues to grow, to the point that approximately 80% of fire department/district calls for service are medical in nature. At the same, many departments, especially those in rural communities, struggle to maintain services in light of declining budgets.

Oregon Medicaid Patients and Ambulance Transport

Today, more than 1 million Oregonians receive care through the Oregon Health Plan (OHP), Oregon’s Medicaid program. The Oregon Health Authority has reported that since the Medicaid enrollment expansion in January 2014, approximately 436,000 Oregonians have gained coverage, a 71 percent increase since 2013.

Like all Oregonians, Medicaid patients rely on Oregon’s EMS system when they need emergency medical care and transport to a medical facility. The following highlights the number of Medicaid patients transported by three Oregon public EMS providers in 2014.



Sample of Medicaid Patients Treated Transported by Public Providers in 2014		
Oregon Public EMS Provider	Ambulance Transports	Medicaid Patients Treated Transported
Eugene Springfield Fire Department	19,070	4,777
Hermiston Fire & Emergency Services District	2,552	545
Redmond Fire & Rescue	2,821	360

The Growing Burden on Oregon’s Public EMS System

The reimbursement rate for the care and transport of Medicaid patients is far below the cost of providing these services. This places an increasingly greater financial burden on the EMS system, and ultimately taxpayers.

For example: If a public provider’s cost of advanced life support (ALS) emergency transport is \$1,295 and the state Medicaid ALS transport reimbursement rate is \$421, local taxpayers are covering the uncompensated Medicaid transport cost in the amount of \$874.



**The transport rate used in this illustration is an average of the actual rates from the three public providers referenced above.*

GEMT is Viable Funding for Oregon’s Public EMS System

GEMT draws funds from the federally-backed Medicaid entitlement program, allowing public EMS providers the ability to collect a percentage (64%) of their uncompensated costs for providing care to Medicaid patients. This would assist the public EMS system by ‘filling the gap’ in the cost of these services now being shouldered by local fire departments and districts. **GEMT will not only help small rural areas have the potential to realize additional revenues to deliver emergency medical response, it will position the fire service to continue to be an integral role in finding ways to deliver timely, effective and the appropriate medical services needed for all Oregonians.** Note: Medicaid offers many ‘cost sharing’ programs for providers (i.e., Oregon’s facility provider tax). Oregon’s hospitals and health care facilities currently participate in these programs; Oregon’s public EMS providers do not.

Preliminary benefit estimates to Oregon’s public ambulance transport providers indicate up to \$75 million in additional dollars per year, with the State of Oregon receiving at least \$15 million in new revenue annually – with no increase in overall costs at the state or local levels. The ability to receive funds from GEMT is not likely to change unless Congress makes changes to the entire Medicaid system.

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Can Private EMS Providers Participate in GEMT?

In compliance with federal law and regulations, “Emergency medical services provider” or “provider” means an entity, owned or operated by local government, a state agency or a federally recognized Indian tribe, that employs or contracts with individuals who are licensed by the Oregon Health Authority under ORS chapter 682 to provide emergency medical services. With that said, private-partnerships are allowable under GEMT, with certain stipulations.

GEMT legislation (House Bill 4030) is the first step to engaging stakeholders

GEMT legislation (like that passed in California and Washington) is required for Oregon’s public EMS providers to be eligible for federal reimbursement. If House Bill 4030 is enacted, it would allow Oregon’s EMS system to work with the State on the creation of a State Plan Amendment (SPA). The SPA would assist public providers with:

- Participation in Certified Public Expenditure (CPE) programs currently providing assistance to other Oregon public health programs;
- Allowing for the creation of an ambulance provider cost report for approval by Centers for Medicare and Medicaid Services(CMS) to determine reimbursement rate;
- Including a provision for development of an Intergovernmental Transfer program (IGT) that will allow further reimbursement of OHP Managed Care Organizations;
- Allowing for the inclusion of pre-hospital stabilization at both the basic and advanced life safety support (BLS/ALS levels) to the extent allowed by CMS
- Stipulate that all associated costs with this program will be done with no impact to the State General Fund, Oregon Health Plan, or local government; and
- Potentially including a provision in the IGT that will create a State administration fee of up to 20% of the amount submitted for the transfer of funds – providing additional revenue to the State General Fund, with the approval of CMS.

The Following Associations Support House Bill 4030



For More Information and Updates on House Bill 4030: www.oregongemt.com

The Oregon GEMT Coalition thanks you for your careful consideration of House Bill 4030.