



To: Members of the House Committee on Behavioral Health and Healthcare

From: Chief Amy Hanifan
McMinnville Fire District
Oregon Fire Chiefs Association & SDAO Fire Districts

Date: February 27, 2025

Re: HB 3243 - Support to Ban Balance Billing for Ground Emergency Medical Services

Chair Nosse and members of the Committee,

On behalf of the Oregon Fire Chief's Association (OFCA) and as chair of the OFCA EMS Section I encourage the passage of HB 3243 and the forthcoming amendment.

Protecting patients from balance billing is crucial, but it is equally important to ensure that they have access to critical emergency resources. This can only be achieved by ensuring that the prescribed reimbursement rates are appropriate and sufficient for emergency medical services (EMS).

Ground EMS is unique compared to nearly every other kind of healthcare and Oregon has specific oversight to assigned areas of coverage for those services. Providers of EMS transport are selected and appointed through Ambulance Service Area (ASA) committee processes, overseen at the county level throughout the state. Also, through public process, local governments and public bodies are able to set rates based on cost of transport. This often occurs during the provider selection/contracting process.

The rates set by local governments do not just apply to certain patient populations, they are an across-the-board rate that applies to the entire area. These locally established rates are set through a public process and are based on the cost to provide care in the area being served.

The cost of providing care varies significantly based on the service area and the types of services and/or metrics required by the body that selected the EMS agency to provide services. Examples of these metrics and standards include response times, the number of paramedics/staffing requirements, number of licensed transporting ambulances, and expectations of care provided. Specifically in Yamhill County each ambulance service provider is expected to maintain minimum numbers of ambulances, meet specific response times at least 90% of incidents responded to, and will begin providing metrics on patient outcomes to the Yamhill County ASA committee with an updated agreement quickly approaching. These standards are common across the state and do not come without fiscal impacts.

Local leaders who set EMS rates must balance the reimbursement rate needed to maintain access to emergency services with the local dollars that are already supporting these services and the need to keep costs down for their constituents. This formula is adjusted based on local needs and emphasizes the importance of local control.

Another factor to consider is whether EMS services are supported by local public funding, such as levies or bonds. Some localities provide this kind of funding to offset costs, while others do not. Many entities find they supplement the cost of providing EMS with funds initially meant for providing fire services.

Conversations are taking place throughout the state about the challenges in providing EMS services, largely due to funding gaps. We are working hard to identify sustainable funding mechanisms, to ensure that the critical services that provide emergency medical access to all who may need it do not waver. Local rates reflect the local cost of providing care and are a critical piece of the reimbursement structure in this bill.

Please support HB 3243 and support a reimbursement rate that accounts for the local cost of providing care.

A handwritten signature in black ink, appearing to read 'Amy Hanifan', with a long, sweeping flourish extending to the right.

Amy Hanifan
2nd Vice President OFCA
Operations Chief – McMinnville Fire District