

Testimony before the Assembly Committee on Health State Representative Jesse Kremer August 2, 2017

#### Good morning,

Thank you committee members, and especially you, Chairman Sanfelippo, for holding a hearing on this bill within our "Rural Fire & EMS Reforms" package.

Assembly Bill 310 is one of several ideas that were discussed and vetted in the 2016 Legislative Council Study Committee on Volunteer Firefighter and Emergency Medical Technician Shortages. As the vice chair of that committee, I am pleased to introduce this proposal that reforms essential Emergency Medical Services (EMS) funding without the need for an increase in taxpayer support.

The Emergency Medical Services Financial Assistance Program, or FAP, is a product of 1989 Act 102 to provide nearly \$2 million in annual funding to ambulance services that provide first-in 9-1-1 patient transport ambulance response to a particular geographic area. This is the only state funding that EMS providers receive.

Under current law, FAP dollars must be used exclusively for EMT Basic initial or refresher training, but can be escrowed from year to year and used to assist new or existing EMT Basic staff. This bill, which was included in Governor Walker's budget proposal, will allow even more rural services to utilize FAP for the purpose of training and recertifying lower level EMR, or Emergency Medical Responder/First Responder staff. It should be noted that many agencies with EMT Basics are also staffed with EMRs. This flexibility will not only alleviate cumbersome regulations on local EMS administrators to ensure that state dollars are only used for one type of lower level EMS responder, but also allow additional rural EMS services to access the funds.

Thank you again for the opportunity to testify this morning and I encourage you to support Assembly Bill 310.

### STATE REPRESENTATIVE DEBRA KOLSTE



44TH DISTRICT

WISCONSIN STATE ASSEMBLY

To:

Assembly Committee on Health

From: Representative Debra Kolste

Re: Testimony on Assembly Bill 310

Date: August 2, 2017

Chairman Sanfelippo, Vice-Chair Bernier, and fellow committee members, thank you for holding a public hearing today on Assembly Bill 310.

This legislation is the byproduct of the 2016 Legislative Council Study Committee on Volunteer Firefighter and Emergency Medical Technician (EMT) Shortages. I had the pleasure of serving on this committee along with the bill's author, Representative Kremer.

AB 310 passed the study committee unanimously, 15-0, and was included in Governor Walker's 2017-19 biennial budget before being removed as a non-fiscal item by the Joint Finance Committee.

Ambulance service providers are currently only able to spend their allotment of EMS Funding Assistance Program (FAP) dollars on training and examinations for EMT-basics. AB 310 would expand the FAP to include first responders as individuals authorized to receive funds for training or continuing education.

Rural fire and EMS departments throughout the state are struggling to recruit and train personnel. By enabling ambulance service providers to cover the cost of first responder training and examinations, this bill provides an additional recruitment tool for both volunteer and professional EMS departments in Wisconsin.

The nearly 3,000 first responders currently serving in Wisconsin are an entry point in the EMS pipeline. Many current EMT's and paramedics started out as first responders. Their passion for medical care and public service was fostered over many hours of exposure to the duties of emergency medical personnel.

This bill would help maintain that pipeline and ease the financial burden of both service providers and personnel. With that, I ask you to please consider the passage of AB 310 and thank you for the opportunity to submit testimony.

Debra Kolste



## State Senator Sheila Harsdorf

Date: August 2, 2017

To: Assembly Committee on Health

From: Senator Sheila Harsdorf

RE: Assembly Bill 310 relating to funding for first responder and emergency medical technician training and certification

Dear Chair Sanfelippo and Committee Members:

Thank you for holding a public hearing on Assembly Bill 310 which allows the Department of Health Services (DHS) to pay for first responder training and examinations.

Currently, through the Emergency Medical Services – Funding Assistance Program (EMS-FAP) at DHS, funds are available for volunteer fire departments, ambulance services that are public agencies, and nonprofit corporations with funding for certain qualifying expenses. These expenses include purchases of ambulance vehicles, equipment, supplies and training for EMT-basic level personnel. AB 310 would expand the use of these funds for training or continuing education for first responders. Additionally, this bill will allow an ambulance service provider to escrow any unused funds in the year it is distributed for use in subsequent years.

Our volunteer EMT and fire departments are dedicated to the communities they serve, often with limited resources. AB 310 will go a long way to ease some of the cost burdens that many first responders and EMTs bare and help with the retention and recruitment for service providers as well as giving some stability from year to year.

I urge your support and prompt action for this legislation.

# Wisconsin EMS Association

Your voice for EMS



To:

Representative Joe Sanfelippo, Chair

Members of the Assembly Committee on Health

From: Forbes McIntosh, Lobbyist

Date: Wednesday, August 2, 2017

Re:

Testimony in Support AB-310 and AB-311

Requesting Amendment to AB-311: EMS Upgrade of Service

Good morning and thank you Chairman Sanfelippo and members of the Assembly Committee on Health for the opportunity to testify before you today. I am Forbes McIntosh, and as the lobbyist for the Wisconsin EMS Association (WEMSA), and on behalf of our Board of Directors, and the members we represent throughout the State of Wisconsin, we are we are here today to urge your support for Assembly Bills 310 and 311, authored by Representative Jesse Kremer.

First, I would like to take a moment to extend our appreciation to Representative Kremer and his leadership and work on issues affecting Wisconsin EMS.

Over the past two sessions there has been a noticeable increase in legislative focus on Wisconsin's emergency medical services (EMS) and first responder system. The increased legislative activity is a symptom of the issues facing EMS – the increased challenge of funding EMS and finding willing and qualified EMTs and first responders. And, when you consider that approximately seventy-five (75) percent of all Wisconsin EMS services are volunteer based – you can understand why the situation is only exacerbated.

Please keep these statistics in mind as you consider EMS issues. Seventy-five percent of Wisconsin's EMS services and the municipalities they serve rely on volunteers. significant. Think about it. EMS is the only area of healthcare where on a continual basis there is an expectation that majority of the healthcare professionals are to commit hours of education, training, requirements to undertake continuing education and training programs for re-licensure (refreshers) and then volunteer their time to cover a shift(s) on a reoccurring and regular schedule. This has tremendous benefit to the lives directly impacted, tremendous benefit to the local taxpayers and to the state as a whole. However, with the funding challenges and staffing shortages facing EMS we need state and local government to invest more money and resources to maintain high quality emergency healthcare services that not only saves lives - but provides a significant tax savings for Wisconsin residents.

The Wisconsin EMS Association, as the "Voice of EMS in Wisconsin," and which represents over 7,000 members and 450 services who provide tens of thousands of life saving calls throughout our state. According to Department of Health Services - Wisconsin EMS System Statistics, annual calls for all services statewide totaled more than 640,000 in 2015.

**AB-310** EMT Training Funding. Funding for first responder and emergency medical technician training and certification and making an appropriation.

The Wisconsin EMS Association urges your support for this proposal. As the summary analysis states, "this bill allows the Department of Health Services to pay for aid for first responder training and examinations." As discussed, Wisconsin's EMS and first responder system is largely based on volunteers. And while this system provides high quality emergency care and significant tax savings for Wisconsin residents, EMS is faced with challenges of adequate funding and shortages of qualified professionals. Investments like these are necessary to help maintain a functioning quality system.

AB-311 Rural Ambulance Service Upgrades. Upgrading service levels for ambulances in rural areas.

The Wisconsin EMS Association along with other emergency service organizations have been working with the author, Representative Kremer, on an amendment. Based on those discussions WEMSA can support Assembly Bill 311 with an amendment to restrict the staffing limit at the Advanced Emergency Medical Technician (AEMT) and not extend it to IV-99 or Paramedic levels.

### **BLAINE WERNER, EMS DIRECTOR**

#### RANDOM LAKE FIRE DEPARTMENT

I AM HERE TO SUPPORT THE 3 BILLS PENDING REGARDING EMS CARE IN WISCONSIN.

THE FIRST BILL, RELATING TO UPGRADING OF SERVICES TO THE HIGEST LEVEL OF LICENSURE OF ANY EMT STAFFING.

I AM BLAINE WERNER, AND AM THE EMS DIRECTOR FOR THE RANDOM LAKE FIRE DEPARTMENT. THE RANDOM LAKE FIRE DEPARTMENT AMBULANCE SERVICE SERVES A POPULATION OF 5374 IN THE SOUTHWEST PART OF SHEBOYGAN COUNTY. RANDOM LAKE IS THE LARGEST COMMUNITY WITH A POPULATION OF 1500. I JOINED THE RANDOM LAKE FIRE DEPARTMENT IN 1977 AND WAS HIRED BY THE CITY OF SHEBOYGAN FIRE DEPARTMENT IN 1989. I BECAME AN EMT-BASIC IN 1977, EMT IMMEDIATE IN THE 1980'S AND AN EMT PARAMEDIC IN 199? I HAVE ALSO BEEN AN EMS INSTRUCTOR FOR LAKESHORE TECHNICAL COLLEGE FOR LAST 25 YEARS.

THE FOUNDER OF THE RANDOM LAKE AMBULANCE WAS AN EMPLOYER IN OUR COMMUNITY. UP UNTIL 5 YEARS AGO, THIS COMPANY EMPLOYED 13 MEMBERS OF SERVICE, INCLUDING 6 OF HIS OWN FAMILY MEMBERS. HE ALLOWED ALL OF THE EMTS TO LEAVE WORK FOR EMS AND FIRE CALLS. HIS PRINTING BUSINESS LOST BUSINESS DUE TO INDUSTRY MOVE TO NON-PRINT MATERIALS AND 2 YEARS AGO WAS PURCHASED BY ANOTHER COMPANY. THE COMPANY HAS NOT CLOSED, HOWEVER ONLY ONE OF THOSE 13 MEMBERS IS STILL EMPLOYED BY THE COMPANY. THIS HAS LEFT A HUGE HOLE IN OUR DAY TIME STAFFING.

ALTHOUGH AT THIS POINT IN TIME WE HAVE NEVER HAD A CALL THAT WE COULD NOT PROVIDE AN AEMT LEVEL OF SERVICE, THE DAY WILL BE COMING SOON THAT WE WILL ONLY HAVE EMT-BASICS AVAILABLE FOR A CALL. MANY OF OUR AEMTS ARE NEARING RETIREMENT AND THE YOUNGER CREW ARE EMPLOYED OUTSIDE OF THE COMMUNITY.

I KNOW THAT SOME CONCERNS HAVE BEEN RAISED THAT SOME SERVICES HAVE PARAMEDICS ON THEIR SQUADS WHO COULD PRACTICE AT A HIGHER LEVEL. I SUPPOSE THAT THIS COULD BE POSSIBLE. HOWEVER, WITH THE DEPARTMENT OF HEALTH'S STRINGENT REQUIREMENTS TO ACT AS AN EMT-P ON A SQUAD, AND THE FEDERAL REQUIREMENTS FOR CONTROLLED SUBSTANCES ACCOUNTABILTY, I THINK THAT ANY MEDICAL DIRECTOR WOULD BE HESITANT TO ALLOW ANY INDIVIDAL TO PERFORM AT THE EMT-P LEVEL. THE MEDICAL DIRECTOR IS RESPONSIBLE FOR QUALITY CONTROL OF THE NARCOTICS ON THAT AMBULANCE.

EIGHT MEMBERS OF THE RANDOM LAKE SQUAD ARE LICENSED EMT-PARAMEDICS AND I DON'T KNOW OF ANY MEDICAL DIRECTOR IN OUR AREA THAT WOULD GIVE HIS OR HER APPROVAL TO ALLOW ONE OF US TO ACT AS A PARAMEDIC ON THE AEMT AMBULANCE.

WHEN I REVIEWED OUR AMBULANCE CALLS OVER THE LAST 2 YEARS, I FOUND THAT NEARLY 2/3 OF OUR REQUESTS FOR A PARAMEDIC LEVEL INTERCEPT WAS FOR PAIN CONTROL ONLY.

IN THE LATE 1990-2000'S ALMOST ALL OF THE MEMBERS THAT BECAME AN EMT-B CONTINUED ON THROUGH THE EMT-I CLASS WITH A NEARLY 100% PASS RATE AND LICENSURE. NOW, WITH AN

ADDITIONAL 100 PLUS HOURS OF REQUIRED EDUCATION AND A HIGH NATIONAL REGISTERY FAIL RATE, WE HAVE HAD ONLY 2 MEMBERS TAKE THE AEMT CLASS IN THE LAST 5 YEARS. VOLUNTEERISM IS CHANGING. MORE AND MORE YOUNG MEN AND WOMEN ARE SPENDING TIME WITH THEIR FAMILIES (RIGHTFULLY SO), AND CAN'T SPEND AS MANY HOURS IN TAKING THE COURSE, REFRESHER COURSE, AND CONTINUAL TRAINING TO BE AN AEMT.

THE SECOND BILL THAT I SUPPORT IS REGARDING THE FUNDING FOR ADDITIONAL MEMBERS OF MEDICAL FIRE RESPONDERS UNDER THE FUNDING ASSISTANCE PROGRAM. MOST SERVICES THAT RUN AS A FIRST RESPONDERS, ARE NON-TRANSPORTING SERVICES AND THUS THEY ARE UNABLE TO BILL FOR SERVICES. THESE SERVICES FUND THEIR UNIT MAINLY THROUGH FUND RAISING EVENTS. THE EMT BASIC OR HIGHER AMBULANCE SERVICE RECEIVE AN ALLOWANCE FOR TRAINING THROUGH THE FAP PROGRAM AND ADDITIONAL DOLLARS ARE AVAILABLE THROUGH THE INCOME FOR AMBULANCE TRANSPORTS. PROVIDING FUNDS FOR FIRST RESPONDER EDUCATION IS KEY IN RURAL AREAS. FIRST RESPONDERS MAY BE FIRST ON SCENE AND CARING FOR PATIENTS FOR A LONG TIME BEFORE THE AMBULANCE ARRIVES.

I ALSO SUPPORT CHANGING THE REQUIREMENTS FOR RE LICENSURE FROM EVERY 2 YEARS TO 3 YEARS AS LONG AS THE SERVICE MEDICAL DIRECTOR SIGNS OFF ON LICENSURE. I BELIEVE THAT THIS WILL HELP US TO RETAIN OUR VOLUNTEER MEMBERS.

I ATTENDED ONE OF THE AD HOC SESSIONS WHERE A NUMBER OF PEOPLE TESTIFED ON THE STATE OF WISCONSIN EMS. TWENTY YEARS AGO, THE SAME PEOPLE TESTIFIED AND STATED THE SAME THINGS THAT ARE BEING SAID TODAY. WHAT HAS CHANGED ARE OUTCOMES FOR THE OVERDOSE PATIENTS WITH THE UTILIZATION OF NARCAN BY ALL LEVELS OF LICENSURE. I ALSO AM CONCERNED ABOUT THE QUALITY OF MEDICAL DIRECTORS/ MEDICAL CONTROL AVAILABLE FOR OUR RURAL SERVICES. THIS TOO NEEDS TO BE ADDRESSED IN THE FUTURE.

I WOULD LIKE TO THANK YOU FOR TAKING THIS NEXT STEP TO KEEP THE STATE OF WISCONSIN PRE HOSPITAL CARE AT A HIGH LEVEL OF SERVICE.