

Emergency Medical Services Task Force

Draft Report to the Legislature

July 25th, 2024

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Executive Summary

The Emergency Medical Services Task Force (“Task Force”) was established in 2023 following the release of the [Emergency Ambulance Services evaluation report](#) by the Office of the Legislative Auditor (OLA) in 2022. The Task Force was charged to review the OLA report, host meetings in Greater Minnesota locations to receive public and stakeholder testimony on current and future emergency medical services (EMS) needs, and review the delivery of and challenges facing the EMS system in Minnesota. The Task Force is required to submit a report of its findings and recommendations to the Legislature in August 2024.

The Task Force hosted field meetings around the state to facilitate engagement with stakeholders and local EMS systems. These meetings were held in Mountain Iron, Elbow Lake, Mankato, Winona, and Saint Paul. Testimony and discussion repeatedly highlighted that the current structure of EMS administration and reimbursement model in Minnesota is flawed. Furthermore, testimony emphasized that investments are needed for workforce recruitment and retention, and that aid is required for struggling EMS systems in greater Minnesota, many of which are losing hundreds of thousands to millions of dollars per year. Furthermore, testimony and Task Force discussion covered the need to work with federal partners to provide sustainable federal and state reimbursement for EMS, particularly in Greater Minnesota.

From this review of Minnesota’s EMS systems, the Task Force co-chairs introduced HF4738/SF4835 during the 2024 legislative session, which restructured the Emergency Medical Services Regulatory Board, created a pilot program for a sprint medic model, and provided aid to eligible ambulatory services. Additionally, the Task Force recommends the following steps be taken by the Legislature: ***INSERT RECOMMENDATIONS WHEN FINALIZED BY TASK FORCE.***

Task Force Membership and Background

House Members

Representative John Huot, Co-Chair

Representative Jeff Backer

Representative Jeff Brand

Representative Dave Lislegard

Representative Natalie Zeleznikar

Representative Tina Liebling, Ex-Officio Member

Senate Members

Senator Judy Seeberger, Co-Chair

Senator Grant Hauschild

Senator Robert Kupec

Senator Andrew Lang

Senator Jordan Rasmusson

Senator Melissa Wiklund, Ex-Officio Member

The EMS Task Force was established by the Minnesota Legislature in 2023 to review the state's EMS system, identify barriers to sufficient delivery of EMS services, and provide recommendations to the Legislature to sustain and enhance the EMS system to ensure that all Minnesotans, regardless of where they reside, have reliable access to emergency medical services.

The Task Force was created following the release of the Emergency Ambulance Services Evaluation Report by the Office of the Legislative Auditor in February 2022. This report outlined several key findings, including the inability of the Emergency Medical Services Regulatory Board (EMSRB) to alter primary service area (PSA) boundaries without cooperation of the PSA's ambulance services, and that EMSRB has not used its authority to create performance requirements for ambulance services (AS) nor has the authority to set standards for key elements of practice. EMS systems, particularly in Greater Minnesota, are facing ongoing funding and staffing challenges, and the OLA also concluded that the EMSRB has been ineffective in its regulation and support of EMS and has fallen short in providing adequate

oversight of the agency's activities. Finally, the OLA found that the EMSRB's board composition and responsibilities create risks for conflicts of interest.

The OLA offered several recommendations, many of which involve legislative action. These include the Legislature restructuring how PSAs are created, overseen, and modified; adopting stricter statutory requirements for EMS license renewal; directing EMSRB to create and enforce performance standards for EMS; identifying options to improve EMS sustainability; and making structural changes to the EMSRB board, along with defining conflicts of interest for EMSRB board members.

The Task Force held four field hearings around the state, in Mountain Iron, Elbow Lake, Mankato, and Winona. These meetings were conducted to facilitate public and stakeholder testimony on the challenges facing Minnesota's EMS system. Testifiers were given around 2-3 minutes to convey their concerns about challenges EMS is facing. Issues that were identified through public and stakeholder testimony included reimbursement rates, recruitment and training, workforce retention, non-emergency medical transportation, staffing shortages, the necessity for reforming federal reimbursement, and overreliance on volunteers.

Many EMS systems in Greater Minnesota highlighted that they were losing hundreds of thousands to millions of dollars per year due to the gap between reimbursement and service costs. City officials and AS staff at all four field meetings spoke to how their EMS systems are losing money due to the insufficient Medicare and Medicaid reimbursement for the runs they make.

Several cities testified that they were utilizing money from their general funds to subsidize their EMS systems to ensure they remain available to their communities. EMS workforce retention and recruitment is also falling. Dylan Ferguson, Executive Director of the EMSRB, reported that from 2022 to 2023 expirations of EMS certifications were up 21%, and EMS providers went down 26%. The EMS workforce is also failing to recruit new, younger providers. Of 1,360 EMTs that let their licenses expire in 2023, 50% were under the age of 30, and 68% were under the age of 40. Minnesota's EMS systems are also heavily supported and subsidized by a volunteer workforce at an estimated labor cost of \$55.8 million. In 2022, seven out of the eight EMS regions reported a combined \$66 million loss when comparing expenses to insurance revenues. According to the OLA, 30% of EMS directors lack confidence that their systems will be able to meet the needs of their communities in 5 years.

Task Force Recommendations
TO BE ADDED WHEN FINALIZED

EMS Legislation in the 2024 Session

During the 2024 Legislative Session, members of the Task Force introduced legislation to address concerns about Minnesota's EMS system that arose throughout the Task Force field hearings. HF4738 (Huot)/SF4835 (Seeburger) was introduced and passed into law, and contained the following provisions:

- Established the Office of Emergency Medical Services to replace the Emergency Medical Services Regulatory Board and transfer duties and authority to the new Office and its Director, effective January 1, 2025.
- Appropriates \$6,000,000 in fiscal year 2025 from the general fund to the EMSRB for an alternative EMS response pilot program.
- Changes EMS personnel requirements.
- Appropriates \$24,000,000 in fiscal year 2025 from the general fund to the Commissioner of Revenue for aid payments to eligible ambulance service providers.

Overview of Task Force Meetings

The Task Force was provided specific topics to review when it was enacted: to review the state of EMS in Minnesota, to review the OLA Emergency Ambulance Service Report, and to host field meetings around the state to facilitate public and stakeholder input. The Task Force has met six times. Video or audio of each Task Force meeting as well as minutes, agendas, and materials are available on the [Task Force's website](#).

Meeting One – December 8, 2023

The Task Force reviewed the OLA Emergency Ambulance Services Report, an overview of Minnesota's EMS systems and the EMSRB, and heard testimony from stakeholders and public members.

Meeting Two – December 13, 2023

The Task Force convened in Mountain Iron, Minnesota, to receive testimony from EMS providers, city officials, and members of the public. Recurring concerns identified included insufficient Medicare and Medicaid reimbursement, necessary financial assistance for non-billable runs and non-emergency medical transport, and missed calls because of the EMS workforce shortage. Furthermore, cities that run their own AS are being required to cover large areas that include municipalities that do not put funds towards the service. Testifiers also emphasized the importance of increasing EMS recruitment.

Meeting Three – January 9, 2024

The Task Force convened in Elbow Lake, Minnesota, to receive testimony from EMS providers, city officials, and members of the public. EMS challenges that were highlighted included insufficient Medicare and Medicaid reimbursement, and that smaller municipalities contribute very little to the region's AS. Additionally, the EMS systems and other health care services in these areas were concerned about competing for staff, contributing to recruitment and retention problems. Several city officials requested emergency aid for their EMS systems to remain in service, and that lagging response times are a result of inadequate staffing and funding.

Meeting Four – January 22, 2024

The Task Force convened in Mankato, Minnesota, to receive testimony from EMS providers, city officials, and members of the public. Speakers addressed the gap between Medicare reimbursement rates and cost of services that contribute to struggling EMS systems. Adequate staffing was another issue raised to the Task Force, and discussion focused on pathways to increase recruitment.

Meeting Five – February 3, 2024

The Task Force convened in Winona, Minnesota, to receive testimony from EMS providers, city officials, and members of the public. Testifiers identified insufficient Medicare and Medicaid reimbursement and acknowledged that previous reliance of the EMS system on volunteers is no longer sustainable with rising call volumes. Speakers also addressed the need for emergency aid to struggling EMS systems. Several testifiers highlighted rising costs of EMS classes and difficulty paying a livable wage as barriers to workforce recruitment.

Meeting Six – February 16, 2024

The Task Force held a meeting for member discussion on testimony that was heard at the field hearings, and to highlight Task Force recommendations and possible legislative solutions to be introduced in the 2024 session. Recommendations included engaging federal partners to update Medicare reimbursement rates for EMS, as well as policies that were later introduced in the 2024 legislative session as HF4738 (Huot)/SF4835 (Seeburger): the need for emergency aid to struggling EMS systems; restructuring EMSRB; and creating a sprint medic pilot program.

Appendices