Colleagues:

I am writing to ask for your help.

Recently, news articles have appeared in local newspapers by fire service organizations advocating that fire districts should be permitted to bill for EMS service. Let me be clear about our grave concern.

We have no objection to anyone billing for EMS service. There was an agreement reached many years ago with Medicare that they would pay ALS services for ALS Intercept in rural counties in New York (over 20 counties). The stipulation was that fire districts would not bill for EMS service. This prohibition is in General Municipal Law Section 209-b. Bills have been introduced in the Legislature, S363B/A07717B, that will change one word … prohibit to permit. Should these bills be enacted, and fire districts are permitted to bill, the Medicare patients in rural counties will lose this Medicare benefit. There are tens of thousands of senior citizen Medicare patients who can least afford it, and who need it the most, will have to pay for ALS service out of their pockets, or worse, not call EMS.

What the fire service is not telling anyone is that there is a way they can bill. They can change their governance and separate out their EMS administratively and they can bill. Many fire services have done this already. They are billing and the Medicare benefit is not affected. It takes a little bit of time and there is some cost for an attorney. The Bureau of EMS can provide assistance.

Again, it does not matter to us who bills. It DOES matter who is hurt in the process. I have included our Press Release. I am asking that you contact your State representatives and ask them NOT to approve this legislation. Please feel free to pass this information along to them.

If you have any questions or I can provide any assistance, please do not hesitate to contact me at legislative@nysvara.org. Thank you very much for your help with this very important issue.

Michael J. Mastrianni, Jr.
Immediate Past President and Director of Legislative Affairs
PRESS RELEASE

For Immediate Release: February 22, 2018

MEDICARE BENEFITS FOR RURAL RESIDENTS IN JEOPARDY


The provision of Emergency Medical Services (EMS) to include Advanced Life Support (ALS) has a long time proven track record of saving hundreds of thousands of lives in our great state over the past three decades and our organizations believe every resident in New York State is entitled to timely Basic Life Support (BLS) and ALS.

There are many different types of BLS and ALS providers across New York State. For the most part, the members of United New York Ambulance Network (UNYAN) and the New York State Volunteer Ambulance and Rescue Association (NYSVARA), as well as, other providers work cooperatively to protect the lives of the residents we are entrusted to care for in all types of pre-hospital emergency care.

Over the past three decades, the Medicare Program has approved reimbursement for ALS intercept responses in New York State only, because New York State fire districts are prohibited from billing ambulance transports provided by fire district ambulances under General Municipal Law 209-b.

Residents primarily in upstate New York in rurally designated areas (over 20 counties), have Medicare benefits to help cover the cost of ALS intercepts. This makes the difference of life or death in many of these patients calling 911 for EMS response. Unlike urban or suburban 911 calls, rural EMS agencies travel many more miles to transport patients to area hospitals. In rural emergency cases, it is even more critical for patients to receive ALS care in order to survive until they arrive at local emergency departments.

Unfortunately, the initiative by the Fireman’s Association of the State of New York (FASNY), The New York State Association of Fire Chiefs (NYSAFC), The New York State Conference of Mayors (NYCOM), and the New York State Association of Fire Districts (NYSAFD) initiative to change GML 209-b with bills S363BA/7717B will instantly remove the ability of rural residents to take advantage of the Medicare benefit for Advanced Life Support intercept services.

The unintended consequences of the initiative to amend GML 209b by changing one word in the bill, from “prohibited” to “authorized”, allowing fire districts to now bill their community tax payers, will cost many rural lives. Medicare patients will be without an ability to receive sorely needed Medicare benefits for ALS intercept services. During the time before the Medicare benefit was approved by the Federal Centers for Medicare and Medicaid Services, serious to critical patients would tape a sign to their front door stating, "No Paramedics Allowed". They knew they could not afford to pay for the service, even though advanced paramedic care was needed for their stability and survival to reach an area hospital.

Further it needs to be said, the UNYAN and NYSVARA are not opposed to fire districts billing for EMS. We are, however, opposed to the unintended consequence of Medicare recipients losing their Medicare benefits when there is a fairly inexpensive way for fire districts to change the governance of the EMS portion of the District Fire Department. It’s happening in several fire departments across New York State successfully. We encourage the news media and other interested parties to contact the New York State Department of Health Bureau of EMS and Trauma Services (1-518-402-0996) for a better understanding of the process. The caller should request a list of the Fire District Departments converting their EMS and are now billing for ambulance transports without negatively impacting the rural Medicare benefits.

UNYAN is comprised of proprietary ambulance owners from across New York State who operate solely on a fee for service basis. NYSVARA represents the volunteer and not-for-profit ambulance services in New York State. Over the past several years, many volunteer services have had to move to fee for service in order to insure that they can continue to staff their ambulances, often employing staff to supplement their volunteer rosters.

UNYAN members provide EMS to most upstate urban communities, employs over 5000 people across NYS, receives no tax district funds, and relies solely on a Fee for Service business model.

Until and unless there can be a way to insure upstate Medicare recipients maintain their Medicare Benefit for rural ALS intercept services, UNYAN and NYSVARA cannot support the proposed changes to General Municipal Law 209-b.

We sincerely request readers become more informed about this issue and stand up in support of rural residents maintaining their Medicare Benefits. This will result in a savings of several hundred dollars in out of pocket expenses when needing this life saving benefit. Should S363B/A07717B become law, rural EMS will take a 30 year step back in time and ALS intercept services will go away.

For additional information contact Michael J. Mastrianni, Jr. at legislative@nysvara.org or cell (845) 416-5528.