



# **Strengthening Oklahoma's EMS Safety Net During the COVID-19 Public Health Crisis**

Prepared by the Oklahoma Ambulance Association

September 18, 2020

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Oklahomans trust emergency medical services (EMS) agencies and ground emergency medical transport (GEMT) systems to respond in their times of need. Our paramedics and EMTs serve on the frontline of the COVID-19 public health crisis. We have proven our value when it matters most, but Oklahoma's EMS safety net has been stretched to the breaking point. **Respectfully, the Oklahoma Ambulance Association (OKAMA) requests that State leaders use available federal funding to sustain our operations and help offset our necessary, pandemic-related costs.**

OKAMA is the organized and unified voice for ambulance services in Oklahoma. Formed in 2000, our membership includes urban, rural, and super-rural EMS and GEMT providers operating across our state.

Oklahoma EMS/GEMT providers have suffered many devastating blows during the pandemic. Expanded utilization of personal protective equipment (PPE) has greatly increased our costs. To protect our frontline caregivers and patients, we must completely decontaminate our ambulances and equipment



after every single response. The time this takes has reduced our efficiency, caused our readiness costs to skyrocket, and increased the frequency and time that ambulances are unavailable. Reducing staffing in order to balance finances could greatly extend ambulance response times and have dire consequences in the communities we serve.

At the same time, emergency and non-emergency medical transports have decreased in direct correlation to citizens isolating at home, the cancellation of elective surgeries and services, and public fear over entering hospitals. The drop in volume has eliminated

vital funding for the services we provide because ***we are not reimbursed for our 24/7 readiness, our response, or even for care provided to patients on scene unless we also transport the patient.***

Revenue streams related to sporting and other special events, where many GEMT systems provide standby ambulance coverage, have disappeared as these events have been canceled or postponed. Also, higher pandemic-related unemployment in Oklahoma will result in higher rates of uncompensated emergency ambulance care. While many Oklahoma GEMT providers are privately owned businesses, they along with city and county-run agencies have a legal duty to respond to emergency requests for service regardless of a patient's ability to pay.

The impact on our frontline heroes has been significant, too. Personnel must approach every patient as potentially infected because point-of-contact testing is not possible nor practical. Donning full PPE on every call is uncomfortable and exhausting in the best of times; during the course of a 12- to 24-hour shift in Oklahoma heat, it is almost unbearable. Along with other healthcare professionals, our team members face increased anxiety, depression, fear, and secondary trauma. They carry the burden of protecting their patients, their families, and themselves from COVID-19.

Please protect Oklahomans' access to ambulance service and the state's EMS safety net. **Specifically, OKAMA requests you allocate available Coronavirus Aid, Relief and Economic Stability (CARES) Act funds to offset Oklahoma GEMT providers' uncompensated readiness costs.**

Oklahoma GEMT providers cannot adjust to pandemic-related business impacts like other businesses. Simply eliminating staff or cutting hours – like a restaurant or other business might do – would jeopardize our readiness capabilities and public health and safety.

The American Ambulance Association (AAA) conducted an analysis of industry revenue losses during the pandemic. The AAA analyzed data from 19 GEMT providers that varied in size (from two to hundreds of ambulances per provider), region of the country served, and population density of area served. Based on the total number of ambulances of the organizations surveyed, the AAA sampling represented 10% of the ambulances currently registered in the U.S. The AAA determined that America's GEMT providers would lose an average of \$43,872.43 per licensed ambulance between March 1 and June 30 alone.

OKAMA has conducted its own analysis to determine Oklahoma-specific uncompensated GEMT provider readiness costs during the pandemic. We analyzed data from the Oklahoma State Department of Health (OSDH) Oklahoma Emergency Medical Service Information System (OKEMSIS) for 17 providers participating in the Oklahoma Health Care Authority's supplemental reimbursement/certified public expenditure (CPE) program for GEMT providers. Based on the CPE participants' total number of ambulances, the sampling represents 32% of Oklahoma GEMT providers. OKAMA calculated that the statewide uncompensated readiness cost from March 1, 2020 to December 31, 2020 is \$37,151.28 per registered ambulance. Our allocation request uses this more conservative, Oklahoma-specific number as opposed to the AAA data as the basis of our calculation.



Disbursing requested funds to each individual GEMT provider could prove onerous for OSDH and other state agencies during this declared disaster period. Thus, we propose that OKAMA be named the recipient of the funds and, in return for a modest administration fee, OKAMA will make direct payments to GEMT providers and complete all related reporting requirements. **The total requested allocation is \$27,813,303.**

It is important to note that OKAMA is not asking the State to come up with “new” dollars to fund these requests. Rather, we seek distribution of federal dollars that have already been provided to Oklahoma to support local and rural communities. OKAMA’s total allocation request comprises just 2.2% of Oklahoma’s relief funds.

Recently released federal guidance<sup>1</sup> states that CARES Act funds may not be used to fill government budget deficits. The guidance specifies that relief dollars may be used only to cover the cost of necessary expenditures incurred due to the COVID-19 public health emergency. Costs incurred between March 1, 2020 and December 30, 2020 that were not previously accounted for in the state budget are eligible for funding. “Emergency medical response expenses, including emergency medical transportation, related to COVID-19” is specifically included by the Department of the Treasury as an example of an eligible expenditure.

To date, no Oklahoma GEMT providers have received CARES disbursements from municipal or county governments. Should our requested allocation be funded, OKAMA will complete a reconciliation to ensure that no GEMT provider receives more than \$37,151.28 per ambulance from municipal, county, and state government sources, combined, to cover uncompensated readiness costs incurred the COVID-19 public health emergency.



We realize that many other healthcare providers and essential businesses are seeking financial support during this unprecedented time. That said, please consider the importance of Oklahoma’s EMS safety net, particularly in rural Oklahoma where an ambulance response may be the difference between life and death for a citizen in need of medical treatment.

Oklahoma EMS/GEMT agencies are critical to our state’s pandemic response, but we have also been made more vulnerable by it. Please help us and our frontline providers continue our important work during this public health emergency and beyond by disbursing the requested CARES funds.

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<sup>1</sup> (<https://home.treasury.gov/system/files/136/Coronavirus-Relief-Fund-Guidance-for-State-Territorial-Local-and-Tribal-Governments.pdf>)