Congressional Fire Services Institute · International Association of Fire Chiefs International Association of Fire Fighters · National Association of Emergency Medical Technicians · National Volunteer Fire Council

May 28, 2019

The Honorable Frank Pallone Chairman Committee on Energy and Commerce U.S. House of Representatives 2125 Rayburn House Office Building Washington, DC 20515 The Honorable Greg Walden Ranking Member Committee on Energy and Commerce U.S. House of Representatives 2322 Rayburn House Office Building Washington, DC 20515

Dear Chairman Pallone and Ranking Member Walden:

On behalf of the Congressional Fire Services Institute, International Association of Fire Chiefs, International Association of Fire Fighters, National Association of Emergency Medical Technicians, and National Volunteer Fire Council, we thank you for the opportunity to provide additional information to the House Committee on Energy and Commerce on the need to address balance billing without impacting the sustainability of ground ambulance services. Our organizations urge the Committee to develop policy solutions which continue to support the ability of fire departments and emergency medical services (EMS) agencies to provide prehospital emergency medical care in their communities.

Fire departments and EMS agencies serve a crucial role in the overall healthcare continuum by providing pre-hospital emergency medical care to critically ill and injured patients. As the Committee continues to develop policy solutions to minimize unexpected bills that patients may receive, we appreciate your continued exemption of ground ambulance agencies from the latest draft of the *No Surprises Act*. We believe that your decision not to include ground ambulance agencies in this draft is reasonable. Fire departments and EMS agencies are in the unique position of having to respond around the clock whenever and wherever the public calls them. The realities of providing primarily 911 ground ambulance service under these operational and economic frameworks make it unlikely that fire departments and EMS agencies that respond primarily to 911 responses call volume will gain economic or operational efficiencies through increased call volume as a result of being in network, or adjust expenses by developing more efficient business hours. The effects of these frameworks are all the more apparent when considering that fire departments and EMS agencies' reimbursements from both government and individual patients without insurance coverage are typically below the actual costs of providing service.

Below are our organizations' thoughts on the issues which the committee identified:

- 1) Increasing Transparency for Consumers: Fire departments and EMS agencies remain committed to full transparency for the communities they serve. Fire departments and EMS agencies typically either publicly publish their rates or provide them upon request. Furthermore, these agencies typically publish publicly accessible budgets that invariably allow community members to easily see the misalignment of reimbursements received with the actual costs incurred providing ground ambulance service to their communities.
- 2) Ensuring Network Adequacy: Our organizations believe that commercial insurers should consider all claims filed by ground ambulance agencies responding to 911 calls to be in-network charges and subject to the standard co-pay amounts and policies of each insurance policy. Fire departments and EMS agencies responding to emergency calls for service rarely know the identity of their patient or their payor status prior to arriving on scene and initiating care. Furthermore, all patients requesting EMS and ground ambulance service are provided any medically-necessary treatment regardless of their insurance status. In cases when a private company is contracted to provide EMS, the governmental entity overseeing their contract will identify allowable charges.
- 3) Protecting Consumers from Surprise Air and Ground Ambulance Bills: Providing air ambulance service is a highly complex initiative which requires a different skill set and expertise than ground ambulance. Almost all air ambulance service is provided either by national or regional corporations or large hospital systems. Very few fire departments and EMS agencies provide air ambulance service. When looking at the enormous balance bills patients receive after an emergency medical incident, air ambulances are involved in virtually all of them. Generally, ground ambulance bills are less than \$1,500 for even the most critical of patients. Our organizations strongly urge the Committee to recognize the significant differences between air and ground ambulance services when developing policy solutions related to balance billing of patients.

Thank you again for your attention to this important issue and for your exclusion of ground ambulance agencies from the *No Surprises Act*. Our organizations urge you to maintain the exemption of ground ambulance agencies from this draft legislation.

Sincerely,

Congressional Fire Services Institute
International Association of Fire Chiefs
International Association of Fire Fighters
National Association of Emergency Medical Technicians
National Volunteer Fire Council