

A MATTER OF LIFE AND DEATH PART 2

Iowa EMS leaders say they need support from taxes



West Des Moines EMS Assistant Chief Dave Edgar answers a medical call April 7. The state lets individual counties decide whether to designate EMS work as an essential public service. PHOTOS BY BRYON HOULGRAVE/THE REGISTER

Squads lack the dedicated funding streams police, fire departments get

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Second of two parts

During his 23 years as a paramedic and emergency medical technician, Mark McCulloch and his colleagues have asked the Legislature to enact this principle as law: Iowans have a right to expect that a call for medical help will be answered in time to make a difference, no matter where they are.

Inarguably, he said, emergency medical services are something people can't do without.

"In most services that we seek, we have choice," said McCulloch, deputy chief of EMS for West Des Moines. "Literally, we can choose our physicians.

We can choose our dentists, our lawyers. We can choose where we eat. But as a citizen we don't have any choice who shows up in a time of need when we're most vulnerable."

But McCulloch, who leads the patchwork industry's advocacy efforts at the Iowa Statehouse, said the Legislature — no matter the party in control — hasn't had any interest in legally designating emergency medical response as an essential public service. That would guarantee service statewide, the same as law enforcement and firefighting.

Instead, at a time when the COVID-19 pandemic has placed even more demands on the already fragile emergency medical network in Iowa, the

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EMS

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Legislature decided last year to leave it to individual counties to decide whether to take that step — and find a way to pay for it.

Across the state, many EMS systems, both urban and rural, are struggling to maintain staffing, a Des Moines Register investigation has found. They don't have the sort of tax-supported, dedicated funding source that finances police and fire departments. As a result, pay is low for emergency medical technicians and paramedics, despite specialized training requirements that can cost thousands of dollars to fulfill.

Is the day coming when, somewhere in Iowa, a call to 911 could get no response?

"Depending on where you are and when you're there, I think that could happen now," said McCulloch, the former head of the Iowa Emergency Medical Service Association and its current legislative chair.

In Iowa, EMS is viewed as 'essential,' but also optional

A key step to improved service, not just in Iowa but nationwide, would be to designate EMS as an essential service, according to a 2014 report from the National Academy of Public Administration.

Emergency medical response is a public service that can't cover its own costs. In turn, the providers — whether public or private contractors — can't provide service guarantees without knowing that someone will pay, the report concluded.

The call for public support is not a controversial idea among the general public, a recent study shows. Some 92% of Americans view EMS as an "essential government service," and 77% said it should receive the same public funding as fire services, according to a large-scale study released in 2020 by the National Highway Traffic Safety Administration.

Yet as of 2019, only 11 states had made that designation, according to the International Association of EMTs and Paramedics. Those states require local governments to ensure residents have access to emergency medical services and set, follow or track performance



Dave Edgar fills up his paramedic truck. Pay is low for emergency medical technicians and paramedics, despite specialized training requirements that can cost thousands of dollars to fulfill. BRYON HOULGRAVE/THE REGISTER

measures.

Under a 2021 law, Iowa made an initial move to address EMS funding. The law allows Iowa counties and other local governments to voluntarily designate emergency medical care as an essential service and ask voters to create, raise and dedicate taxes to cover the expense.

In other words, EMS in Iowa can be deemed essential if people decide they're willing to pay for it.

McCulloch believes statewide EMS is essential.

"This certainly isn't the utopic thing we were looking for," he said of the legislation. "But this is certainly a big step in the right direction," although "it's too soon to say how well this will or how well this won't work."

To date no county has created an EMS fund under the law, although several have begun the lengthy process, McCulloch said.

If county boards of supervisors want to create a new EMS taxing district — through property taxes or local income tax surtaxes — they must at two meetings consider a resolution declaring EMS essential and vote on it at a third. If a majority of the board of supervisors approves it, "Local EMS agencies must then work with the county to establish an Emergency Medical Services System Advisory Council to assist in researching and assessing the service needs of

the county," according to the bill.

Then the EMS System Advisory Council must recommend to the board of supervisors the amount of funding to be specified on the ballot.

Sixty percent of voters must approve of the measure for the EMS tax to take effect. With the exception of the top 11 most populous counties in Iowa — Polk, Linn, Scott, Johnson, Black Hawk, Woodbury, Dallas, Dubuque, Story, Pottawattamie and Warren — the law specifies that the EMS tax shall last for a maximum of 15 years.

In the 11 most populous counties, its maximum lifespan, without reauthorization, is 10 years.

Some rural EMS providers say they have little hope local elected officials will declare the service essential and impose a tax without someone forcing their hand.

"It was lip service. That's all it was," Julie Scadden, director of the ambulance service in rural Dysart, said of the legislation.

No funding leads to inadequate service — and surprise bills

EMS users in communities that haven't designated it an essential service, or made it a part of their fire departments, already pay for some support. But the money comes from a fund-

ing source that can be uneven, unpredictable and inadequate: bills sent to insurance providers and individual users.

Because so many people assume EMS already is an essential public service, the bills can come as a shock. More than 70% of all ambulance rides are considered out-of-network for health insurance purposes, and costs can reach hundreds or thousands of dollars, according to research published in the academic journal Health Affairs.

Since providers aren't required to negotiate prices with health insurers, the fees are simply "made up," study co-author Dr. Karan Chhabra told National Public Radio.

"It often is the municipalities that are sending some of the most staggering bills and often pursuing them in really aggressive ways," he told NPR.

Another challenge is that some policymakers have come to view ambulance services more as rides to hospitals than a source of lifesaving care, said Matt Zavatsky, an executive at MedStar Mobile Healthcare, an intergovernmental EMS provider for 15 Texas counties and past president of the National Association of Emergency Medical Technicians.

The industry's image as a sort of medical taxi service is one reason driving its low pay, said Dave Edgar, West Des Moines' assistant EMS chief and a member of the boards of both the National Association of Emergency Medical Technicians and national Commission on Accreditation of Ambulance Services.

"The level of care and equipment and preparedness ... is just about \$300,000 in an ambulance. A cardiac monitor is probably \$40,000," Edgar said. "Then compare it to what a CT scan would cost in the (emergency room). But insurance won't pay what the actual cost (of ambulance care) is."

When EMS crews roll on a 911 call that doesn't require a trip to the hospital, they typically get nothing. And most 911 calls are false alarms.

Canada, Australia and European countries with single-payer health care systems pay EMS practitioners to assess patients, develop care plans that may not require transportation to hospitals and sometimes treat patients at home, Zavatsky said.

"When we do those things, we don't get paid for that," he said. "So we can't

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