AMERICAN AMBULANCE ASSOCIATION

New York EMS In Crisis!

Unsustainable reimbursement for life-saving emergency medical services coupled with rising costs have put a substantial strain on ambulance providers, America's public health safety net. Support EMS access through fair reimbursement for first responders!

How Legislators Can Help EMS Today

US Congress		Federal & State Officials	State Legislature & Medicaid Office
Renew Medicare Add-Ons	Preserve Veterans Access to Care	Inclusive EMS Grants	Support Medicaid-Medicare Parity in Your State
Cosponsor H.R. 1666 / S. 1673 to extend the bonus payments for EMS providers beyond 12/31/24. Time is running out!	Cosponsor S. 2757 / H.R. 5530 to ensure that EMS continues to be fairly compensated for VA transports.	Ensure that workforce and equipment grants from the federal and state governments are open to all provider types.	Reimbursement for caring for Medicaid patients can lag even behind Medicare. Support sustainability efforts in your state!

Skyrocketing Costs for EMS Providers in New York

Although reimbursement from Medicare and other payers remains stagnant, ambulance mobile healthcare providers are facing skyrocketing costs. Many ambulance services struggle to keep their doors open.

Rising Wages		Fuel	Medical Supplies
17%↑ EMT	**13%↑** Paramedic	**34%↑**	**12%↑**

Avg. Hourly Wage	EMTs	Paramedics
2021 Rate	$19.77	$27.56
2023 Rate	$23.06	$31.20

EMS faces a chronic staffing shortage as reimbursement shortfalls have not allowed ambulance services to pay emergency medical technicians (EMTs) and paramedics competitive wages. We cannot stop the flow of first responders out of this profession without sustainable funding. SOURCE: DEPARTMENT OF LABOR

# of EMS Professionals 60,970
SOURCE: NATIONAL ASSOCIATION OF STATE EMS OFFICIALS

In the Central Atlantic (PADD 1B) of the United States, which includes New York, the average cost of regular gasoline rose from $2.66 per gallon in 2019 to $3.56 per gallon in 2023, representing a 34% increase. SOURCE: US ENERGY INFORMATION ADMINISTRATION

EMS agencies report an increase in costs of 12%, on average, for supplies 2019–2022, with no end in sight. SOURCE: NATIONAL ASSOCIATION OF EMTS EMS ECONOMIC & OPERATIONAL MODELS EXECUTIVE SUMMARY Ambulance Chassis costs are also up 25–50% over the same time period.

Ambulance Reimbursement Remains Flat

Access to care is threatened as Medicare rates remain stagnant despite rising costs. EMS needs YOUR support to keep services rolling.

Medicare Reimbursement	BLS Emergency (A0429)	ALS Emergency (A0427)
2019 Rural Rate	$417.57	$495.87
2024 Rural Rate	$487.70	$579.15
Average Annual Inflation Adjustment	3.4%	3.4%

Medicaid Reimbursement	BLS Emergency	ALS Emergency
2019 Rate	$164.01	$217.50
2023 Rate	$194.83	$312.64
% of 2024 Medicare Rate	39.95%	53.98%

Medicare Add-Ons are Essential

The Medicare Ambulance Add-Ons are critically important to ambulance suppliers/providers in New York. The map shows that while there are urban areas in the state, a substantial number of ambulance providers are in rural areas and super rural areas. All ambulance providers in New York rely upon these add-ons.

	Super-Rural	Rural	Urban
Medicare Add-Ons Through 12/31	22.6%	3.0%	2.0%
H.R. 1666 proposed	22.6%	3.0%	2.0%
S. 1673 proposed	26.7%	4.3%	3.4%

| Map Legend	
Urban areas	Red
Rural areas	Dark Blue
Super Rural	Blue
Data Unavailable	Light Blue
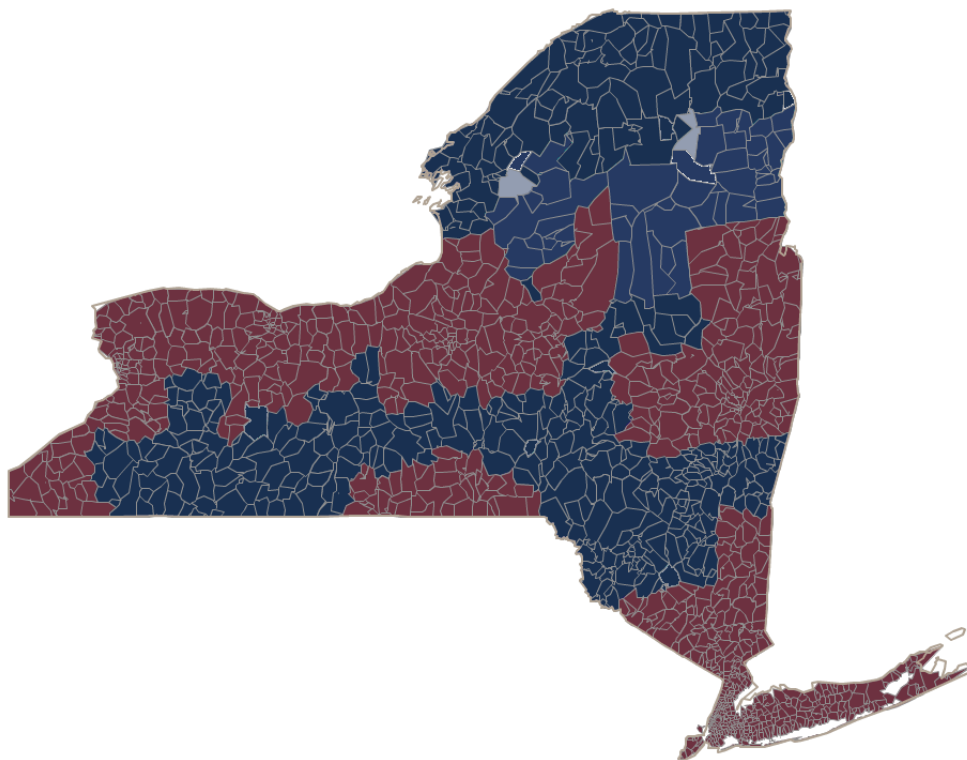
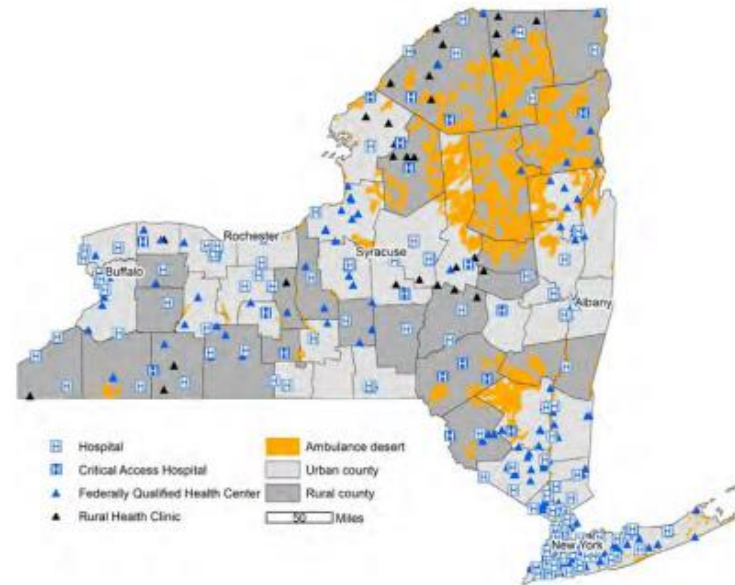## Ambulance Deserts: 82.3% of New York Counties Impacted

51 of New York's 62 counties (82.3%) have an ambulance desert, which is defined by places or people that are 25 minutes or more away from an ambulance station. SOURCE: MAINE RURAL HEALTH RESEARCH CENTER

NEW YORK

Ambulance Locations and Deserts
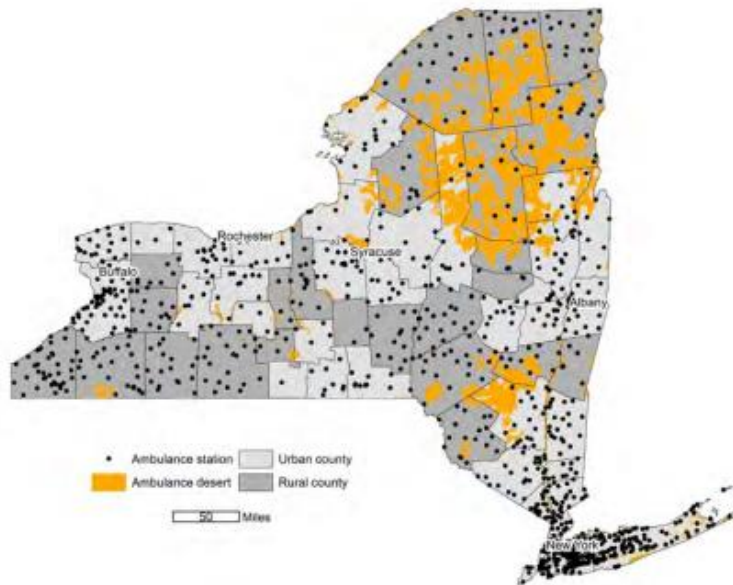
Health Care Facilities and Ambulance Deserts

Ambulance stations	Ambulance desert population		Rural county ambulance desert population		
n	n	% of state pop.	n	% of rural county pop.	% of total desert pop.
980	64,069	0.3%	27,046	2.0%	42.2%

Data sources: New York Department of Health, Bureau of Emergency Medical Services; Esri; US Census Bureau; Health Resources & Services Administration; USDA Economic Research Service.