



National Registry of  
Emergency Medical Technicians®  
THE NATION'S EMS CERTIFICATION



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

November 24, 2014

The President  
The White House  
1600 Pennsylvania Avenue, NW  
Washington, DC 20500

The Honorable Sylvia Burwell  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

The Honorable Jeh Johnson  
Secretary  
U.S. Department of Homeland Security  
Nebraska Avenue Center, NW  
Washington, DC 20528

The Honorable Anthony Foxx  
Secretary  
U.S. Department of Transportation  
1200 New Jersey Avenue, SE  
Washington, DC 20590

Dear President Obama, Secretary Burwell, Secretary Johnson, and Secretary Foxx,

Promoting an emergency medical and trauma care system that works well on a day-to-day basis is fundamental to establishing a system that will work well in the event of a natural or man-made disaster, as well as other public health emergencies. Unfortunately, key components of the emergency, EMS and trauma systems have been marginalized and underfunded in terms of disaster preparedness planning, training and implementation. We urge the Administration to work with Congress to quickly rectify that oversight so that our nation's emergency care system can adequately respond to current and future crises.

There are several federal organizations, such as the Office of Emergency Medical Services and National 9-1-1 Office in the National Highway Traffic Safety Administration; the Office of Health Affairs and FEMA in the Department of Homeland Security; CDC, the Assistant Secretary for Preparedness and Response, and the Emergency Medical Services for Children Program in the Health Resources and Services Administration that work to support our emergency medical services system. Unfortunately, current funding streams at the federal level are extremely limited to help “boots on the ground” providers and state EMS offices.

The recent Ebola threat in our country reinforces the need to improve preparedness and response for public health emergencies. Our ability to effectively respond to infectious diseases, bomb blasts, mass shootings and hurricanes, to name a few recent examples, is only as effective as the available personnel and resources.

The emergency care system is only effective if all of the component parts of it are each working efficiently. For this reason, it is imperative that our emergency care practitioners – physicians, nurses, paramedics, and EMTs – who put their lives on the line to care for their fellow Americans are appropriately supported. It also means that the supporting system – emergency departments, trauma centers, ambulance agencies and poison centers – must have sufficient resources to care for everyday patients with emergency conditions, as well as the ability to provide surge capacity during public health emergencies.

As we approach 2015 and the beginning of a new Congress, we urge the Administration to work in a coordinated effort with Congress to ensure the following programs are effectively operational and funded:

**Trauma Systems Planning Grants** – Support state development of trauma systems.

**Regionalization of Emergency Care Pilot Projects** – Used to design, implement and evaluate innovative models of regionalized systems of emergency care.

**Trauma Care Center Grants** – Provide operational funds to maintain their core missions, compensate for unfunded services and deliver assistance to centers at risk of closure.

**Trauma Service Availability Grants** – Address shortfalls in trauma services and improve access to trauma care.

**Hospital Preparedness Program (HPP)** – Improve surge capacity and enhance community/hospital preparedness for public health emergencies.

**Modernize and Improve Field EMS** – Establish essential programs to foster improvements in quality, medical oversight, innovation and preparedness, as well as strengthen accountability among states, EMS agencies and educational entities.

**Emergency/Trauma/EMS Research** – Improve/coordinate quality and outcomes for patients with emergency conditions.

**Emergency Medical Services for Children (EMSC)** – Reduce child and youth mortality and morbidity caused by severe illness or trauma.

**Poison Control Centers** – Prevent and treat poison exposures through in-home treatment.

**Good Samaritan Liability Protections** – Legal protections for health care providers who volunteer during a nationally declared disaster.

Thank you for your consideration of our request and for your support of our nation’s emergency medical care system and the patients we serve.

National Association of Emergency Medical Technicians  
National Association of Emergency Medical Services Physicians  
National Association of Emergency Medical Services Educators  
National Registry of Emergency Medical Technicians  
Association of Critical Care Transport  
Association of Air Medical Services  
American Ambulance Association  
American College of Emergency Physicians  
International Academies of Emergency Dispatch