

2018 EMS on the Hill Day Talking Points

H.R. 1876/S. 781, the Good Samaritan Health Professionals Act of 2017

Introduced by Representative Marsha Blackburn (R-TN) and Senator Bill Cassidy (R-LA), this bill would shield health care professionals, including EMS practitioners, from liability under federal or state law when they volunteer their services during a federally declared disaster. This bill offers the needed protections for EMS practitioners in response to catastrophic events.

Currently, **federal law** does not provide good Samaritan protection to healthcare professionals who spontaneously volunteer their medical services when disasters are unfolding, nor does it protect those volunteers who cross state lines to treat victims of disasters.

H.R. 1876/S. 781 would provide narrowly-tailored, civil liability protection to licensed health care professionals, including EMS practitioners, who volunteer during federally declared disasters by:

- Ensuring healthcare volunteers' ability to provide timely, high-quality health care services to victims of these disasters anywhere in our country without the fear of losing their license or being sued;
- Enhancing clarity and consistency regarding the patchwork of state laws that encourage medical volunteerism;
- Promoting coordination between state and federal agencies and licensing boards following a disaster when utilizing volunteers and encouraging the verification of medical volunteers' licensure as soon as possible.

Please ask your House and Senate lawmakers to support H.R. 1876/S. 781 to provide the needed protections for EMS practitioners in catastrophic events. If your lawmakers are co-sponsors, please thank them for their support.

H.R. 1445, the Veterans Reimbursement for Emergency Ambulance Services Act (VREASA)

Introduced by Congressman Mike Coffman (R-CO), this bill would direct the Department of Veterans Affairs to approve emergency ambulance services for reimbursement when a “prudent layperson” would have reasonably expected that a delay in seeking immediate medical attention would have been hazardous to the individual or could reasonably expect the absence of immediate medical attention to result in placing the individual in serious jeopardy. Such individual would be transported to the closest and most appropriate medical facility capable of treating such emergency medical condition.

Currently, veterans are faced with out of pocket expenses for emergency ambulance services because the VA denies emergency ambulance claims due to the interpretation of their regulation. The VA is the only major payor that does not adhere to the “prudent layperson” standard.

Please ask your House lawmaker to support H.R. 1445 to direct the VA to reimburse these needed transports as well as save veterans undue cost and safety burdens. Please thank your lawmaker if he/she is a co-sponsor.

H.R.5429 The Supporting and Improving Rural EMS Needs Act (SIREN Act)

Introduced by Representatives Greg Gianforte (R-MT) and David Loebsack (D-IA), this bill would create a grant program for EMS agencies in rural areas, many of which are at the forefront of the opioid epidemic, to support recruitment, retention, education, and equipment for EMS personnel in rural areas.

H.R.5429 reauthorizes the Rural Emergency Medical Service Training and Equipment Assistance Program of the Public Health Services Act and calls for \$10 million in grants to rural EMS agencies to be distributed in fiscal years 2018 through 2022.

Please urge your House lawmaker (in those districts with rural areas) to support the SIREN Act to provide these grant opportunities for their communities.

Congressional EMS Caucus

The EMS Caucus is chaired by Congressman Tim Walz (D-MN). The Caucus is a bipartisan effort to promote the role of EMS in our communities through policies that:

- improve the ability of agencies and practitioners to provide life-saving emergent, urgent and preventive medical care;
- promote EMS integration within federal agencies with jurisdiction over EMS;
- encourage cost savings in care management in both emergent and emergent situations; and
- support appropriate level preparedness for disaster and tactical response 24/7.

The EMS Caucus provides a platform to promote, educate, and increase awareness around the federal policy issues impacting EMS and serves as a resource for policy questions.

Please ask your House lawmaker to join the EMS Caucus. For those House representatives that are current members of the Caucus, please thank them for their support.

The EMS Drug Shortage Issue

Certain medications are required to respond to a variety of the situations considered by the Pandemic and All Hazards Preparedness Act (PAHPA). For example, in the event of pandemic influenza, copious amounts of IV fluids to combat dehydration as well as antiemetics would be required. Similarly, in a multi-casualty incident such as a bomb blast, airway management and pain control medications would be required in large amounts.

EMS agencies face daily shortages of critical medications, including normal saline for IV treatments, sedative drugs for airway management, antiemetic medications, and pain control agents. We do not have sufficient reserves of these critical medications for daily activities, much less for response to a major incident.

The EMS industry will be seeking Congressional support to ensure that the ongoing critical drug shortages do not impede our nation's ability to respond to disasters and public health emergencies through the renewal of PAHPA, and other remedies.