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April 18, 2023

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

Dear Secretary Becerra,

On behalf of the National Association of Emergency Medical Technicians (NAEMT), we are pleased that the Advisory Committee on Ground Ambulance and Patient Billing (GAPB) will be convening meetings on May 2 and 3<sup>rd</sup> as required by statute.

Founded in 1975 and over 90,000 members strong, the National Association of Emergency Medical Technicians (NAEMT) is the only national association representing the professional interests of paramedics, advanced emergency medical technicians, emergency medical technicians, emergency medical responders and other professionals providing prehospital and out-of-hospital emergent, urgent or preventive medical care.

NAEMT members work in all sectors of EMS, including government service agencies, fire departments, hospital-based ambulance services, private companies, industrial and special operations settings, and in the military. They also work in hospitals, clinics and other healthcare settings.

We remain concerned with the composition of the GAPB Advisory Committee. In convening the Committee, the Center for Medicare and Medicaid Services (CMS) failed to identify appointees who can represent the major aspects of the ground ambulance service industry. We fear that this missed opportunity to convene a broad group of representatives, as required by the No Surprises Act (P.L. 116-260) will render the GAPB unable to promulgate informed, accurate, or objective recommendations for Congress. Furthermore, we are concerned that when examining the non-Federal appointees to the GAPB, nearly one-third (a plurality of the GAPB) originate from private-for-profit ambulance companies, a single segment of the EMS industry. Only one representative has experience managing a fire-based EMS agency. No appointees to the GAPB originate from third-service or volunteer EMS agencies.

We are further concerned that CMS did not select several nominated appointees who can represent the ground ambulance services sector for which they are assigned. Such apparent mismatches impact at least five appointees to the GAPB (38% of the non-Federal GAPB members). In fact, some appointees are employed in roles that directly conflict with their GAPB assignment. The misrepresentation, and denied representation, of important industry sectors may cast doubt on the validity of the GAPB's future recommendations.

Additionally, we are concerned about the ability of several GAPB appointees to maintain their impartiality while they continue to work as paid consultants to assist predominantly private EMS agencies. These appointees' apparent conflicts of interest, combined with a lack of equal representation for the major segments of the industry, prompt our continued concern about the recommendations that the GAPB will provide to Congress.

The ground EMS industry is diverse and comprised of multiple EMS agency types that are generally organized as fire department-based, governmental third service, private nonprofit, volunteer, private for-profit corporations, and hospital-based. NAEMT shares Congress' intent to develop billing practices that properly reimburse EMS agencies while minimizing financial burdens on patients. Given this diversity of agency types, we strongly supported the No Surprises Act's requirement for the secretaries of HHS, USDT, and DOL to appoint GAPB members who are representative of the various types of EMS agency types and from all stakeholder groups will significantly limit the ability of the GAPB to develop informed and impartial recommendations. This deviation from the No Surprises Act denies a voice to more than two-thirds of the ground ambulance industry and must be corrected. We urge you to follow Congress' intent by appointing additional GAPB representatives who have experience in all types of EMS agencies.

Additionally, each state maintains an EMS office that regulates their respective state's EMS agencies. State EMS officials play a critical role in ensuring all EMS agencies and practitioners, regardless of organization type, maintain compliance with regulatory requirements. Congress recognized the importance of state EMS officials by clearly requiring a representative of state EMS officials be appointed to the GAPB. However, CMS failed to appoint a state EMS official to serve as this representative.

Thank you very much for your consideration of our ongoing concerns. We welcome the opportunity to share our objection to the GAPB's membership and work towards remedying the situation.

Sincerely,

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Susan Bailey, MSEM, NRP President, NAEMT

CC: The Honorable Ali Khawar, Principal Deputy Assistant Secretary, Department of Labor The Honorable Lily Batchelder, Assistant Secretary, Department of Treasury The Honorable Chiquita Brooks-Lasure, Administrator, CMS The Honorable Ron Wyden, Chairman, Senate Committee on Finance The Honorable Michael Crapo, Ranking Member, Senate Committee on Finance The Honorable Richard Neal, Ranking Member, House Committee on Ways and Means Dr. Shaheen Halim, Designated Federal Official, HHS