



ST. LAWRENCE COUNTY EMERGENCY MEDICAL SERVICES ADVISORY BOARD

St. Lawrence County Community,

We, the St. Lawrence County Emergency Medical Services Advisory Board and the St. Lawrence County Office of Emergency Services, find it necessary to keep the St. Lawrence County community informed regarding the current state of Emergency Medical Services (EMS) in our area. We feel it important that local legislators, town and village officials, and the general public have an understanding of the root causes of the issues at hand. Our EMS system is actively collapsing. EMS is in crisis.

2021 endured the most EMS calls in St. Lawrence County History at 18,864; 3,525 calls above the previous year. In addition, the amount of serious calls, such as unconsciousness, difficulty in breathing, and cardiac issues, have also increased drastically straining local Advanced Life Support agencies and providers. On 1,956 occasions, an ambulance service that was requested to respond to a call was unable to do so, requiring other ambulance services significantly farther away to provide mutual aid and respond. This results in a 90% overall call coverage rate, with 10% of calls requiring mutual aid. On 290 cases, three or more ambulance services were paged to cover a single call. In addition, 2021 average ambulance response times have increased by 5:13 from 2019, with 232 occasions having a response time greater than 60 minutes. The longest response time of 2021 was 1 hour and 43 minutes, requiring two county-wide requests for any ambulance to respond. These statistics are due to a multitude of reasons.

In St. Lawrence County, most of the current EMS agencies were started in the 1960's and 1970's; like most of rural America these agencies were staffed by volunteer members. Nation-wide volunteerism began to decline starting in the 1970's and 1980's. In his book "Bowling Alone", Prof. Robert Putnam cites that from 1974 to 1985 civic volunteering in America dropped by 25% to 50%, depending on the civic organization. This trend has been evident in both EMS agencies and Fire Departments across rural America. This can also be seen in the number of people enrolling in EMT classes. In the 1990's and early 2000's, St. Lawrence County would typically run two EMT classes a semester with a combined enrollment of 72. In 2021, the two original EMT certification courses has a combined enrollment of 39.

In 1999, New York State updated Article 30 of the Public Health law which requires a Certified EMT to be attending to a patient in ambulances. During that same period, they increased the minimum hours of Basic EMT education. To attend EMT class and receive certification, volunteers are required to drive to and attend class two nights a week and several Saturdays for 4 months, totaling 150 hours of instruction. In 2017 New York State began to phase out the AEMT-CC program, which many rural areas relied upon to provide advanced-level care which includes narcotic administration, intubation, cardiac monitoring, and advanced level cardiac arrest management. Currently, the only comparable alternative to the AEMT-CC scope of practice is that of a Paramedic, which educational requirements are similar to that of an Associate's Degree requiring over 2,000 hours of classroom, clinical rotations, and significant tuition payment. These barriers to EMS education result in less people willing to become certified EMT's or paramedics and who receive no remuneration.

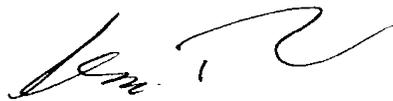
The nation is also experiencing an EMS manpower shortage; St. Lawrence County is not immune to this. In a recent study conducted by New York State, of the 60,000 certified New York State EMS providers affiliated with ambulance agencies, less than half responded to at least one call in the year of 2021. St. Lawrence County has 269 certified providers; it is estimated that only 100 are active within our EMS system. In addition, the median age of active providers is increasing due to the lack of new interest and entrance into the field.

The COVID-19 pandemic also created an exodus of personnel from EMS especially in the volunteer setting. Volunteers responding to ambulance calls during the COVID-19 pandemic were asked to risk both the health of themselves and family members by exposing themselves to the virus. COVID-19 also affected the paid EMS workforce. As the pandemic slowed and other industries began to open up, they were forced to increase their wages to recruit employees due to staffing shortages. Traditionally, career EMS providers leaving the field chose to go into healthcare-related fields such as nursing or PA school; now we see career EMS leaving to work at fast food or retail chains for similar or increased wages.

Finally, EMS is historically underfunded. Ambulance agencies that bill insurance see about 80% of Medicare or Medicaid patients. Medicare admitted in 2016 that they underfund EMS by 8% nationwide, which most industry experts believe is 20% in rural settings. A New York Medicaid report from 2017 admitted that it underfunds the entire system by \$31.4 million annually; in rural settings with low volume Medicaid covers roughly 40% of the cost if the agency has payroll. Other insurance companies pay at varying rates, typically more than the Medicare rate, however they routinely send the payment directly to the patient, who then in turn is supposed to mail the check to the ambulance service. Unlike hospitals and other medical practices, there was no increase in insurance reimbursement, however supply costs, paid time off, overtime, fuel, repair and maintenance, and other costs continue to skyrocket.

We have heard the pleas from both volunteer and paid EMS agencies who are struggling to stay afloat and provide medical care to their community in need. We cannot turn a blind eye to this issue anymore. It is time to act and determine the best route to ensure our residents and visitors of our County are protected and safe in their most vulnerable time. In response, the Office of Emergency Services has been in the process of meeting with EMS agencies and municipal leaders around the County to examine these issues and discuss avenues to improve the EMS system. EMS improvement plans and proposals have been, and will continue to be drafted using the feedback obtained by the EMS agencies, municipal leaders, and general public.

While the current situation may cause a delay in response, St. Lawrence County Emergency Services is dedicated to ensuring that an ambulance responds to every call for assistance



Mark Deavers, EMT-P
Chair

St. Lawrence County EMS Advisory Board



Jonathan Mitchell, AEMT-CC
County EMS Coordinator

St. Lawrence County Emergency Services