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Testimony
Committee on Corrections & Juvenile Justice
HB 2064

Chairman Rubin and members of the committee, my name is Terry David and I am the EMS Service Director in Rice County and also represent the Kansas EMS Association. Thank you for allowing me the opportunity to speak today.

The proposed change to the statute is to require Ambulance Services to be required to accept payment in the amount of the current Medicaid Rate vs. the current method of using the pre-determined customary charges by the local ambulance provider.

KEMSA is opposed to the change for the following reasons:

- Medicaid patients deserve the same level of medical care as any other citizen in the State of Kansas; however transporting these patients by ambulance is not financially sustainable without local tax support.
- Local detention facilities often “house” inmates from other jurisdictions and we would suspect that they are not doing so without covering the cost of carrying for those inmates, thus medical care should be considered in the negotiated rate when allowing inmates from other jurisdictions to be accepted.
- Often local detention facilities do not have 24 hours medical coverage contracted and use EMS as a primary source of initial health care.
- Current Medicare rates have not been adjusted for over 18 years and from a business standpoint is a huge loss leader for Kansas EMS Systems. It costs Rice County over \$700.00 to roll an ambulance out the door and yet Medicaid reimbursements are \$40.00 for the response and \$1.50 per mile. (if they even allow the charge) We charge \$400.00 for a basic call and \$10.50 per mile.
- With the majority of EMS systems in the State of Kansas owned and operated by local government entities, the proposed change will only result in a cost shift from the ambulance provider to the detention facility.

The Kansas EMS Association represents 95 ambulance services and 1120 EMS attendants across the State and we do not feel that any change at this time is in the best interest of our constituents.