

Emergency Medical Services Reimbursement for On-scene Care and Support (EMS ROCS)

- Emergency Medical Services (EMS) are a crucial part of the healthcare system. EMS providers are the frontline and, frequently, the first point of contact for patients.
- Medicare does not reimburse EMS for services provided unless the patient is transported to the hospital via ambulance yet, EMS providers are obligated to respond to 911 calls and to deliver vital services on-scene to persons who do not require or who refuse to be transported to a hospital.
- Many people rely on EMS to provide healthcare services, including after a fall or for minor medical emergencies. CMS provides definitions of the levels of services provided by EMS on-scene¹ however, to be reimbursed by Medicare for these services, the patient must be transported to the hospital.
- The demand for on-scene treatment, without transport to a hospital, continues to increase, especially for Medicare beneficiaries in rural communities.
- Medicare beneficiaries make up about 40% of patients treated by EMS and data from 2005 -2009 showed that around 16% of 911 calls to EMS involved medical conditions that would not require transport to a hospital.²
- Inflationary pressures, coupled with the increasing volume of services that are ineligible for reimbursement, pose a serious threat to EMS, particularly those serving our rural and older communities. These challenges are forcing EMS providers to curtail service and, in some areas, go as far as shutting down their services entirely.
- The EMS ROCS Act would amend title XVII of the Social Security Act to provide Medicare reimbursement for care provided by EMS when no transportation to the hospital is provided.
- The bill will benefit Medicare beneficiaries who rely on EMS by aligning the reimbursement model with the services performed. The bill will also provide crucial reimbursement for EMS providers for their integral role in bringing essential healthcare services to where people need it most.

¹ Billing and Coding: Ambulance Services, <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=56468&ver=11>

² Alpert A, Morganti K, et al. Giving EMS Flexibility in Transporting Low-Acuity Patients Count Generate Substantial Medicare Savings, 2013. Health Affairs, The Future of Emergency Medicine, <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2013.0741>