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Testimony of J. Sam Hurley, MPH, EMPS, NRP

Director, Maine Bureau of Emergency Medical Services (Maine EMS)

Department of Public Safety

Neither For Nor Against LD 1832

“An Act to Require Reimbursement of Fees for Treatment Rendered by Public and Private Ambulance Services”

Presented by Representative Cyrway of Albion

BEFORE THE JOINT STANDING COMMITTEE ON HEALTH COVERAGE, INSURANCE
AND FINANCIAL SERVICES

Public Hearing: May 15, 2023, at 10:00 AM

Senator Bailey, Representative Perry, and honorable members of the Joint Standing Committee on Health Coverage, Insurance, and Financial Services:

My name is Sam Hurley, and I am the Director of Maine Emergency Medical Services, Maine EMS, within the Department of Public Safety. I am testifying on behalf of Maine Department of Public Safety and Maine EMS neither for nor against LD 1832, *“An Act to Require Reimbursement of Fees for Treatment Rendered by Public and Private Ambulance Services.”*

While Maine EMS wholly agrees that there are significant concerns with ambulance reimbursement. We are unsure that this legislative vehicle is the appropriate pathway to achieve those ends. In the 130th Legislature, Maine EMS was directed to empanel a Financial Health Stakeholder Group who proposed several recommendations that were incorporated into LD 1602.¹ We are supportive of the changes that LD 1602 will bring about in the reimbursement

¹ P.L. 2021, ch. 241, §6

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space but understand that one of the biggest hurdles facing EMS reimbursement in the United States is federal policy set by the Centers for Medicare and Medicaid Services (CMS).

Additionally, while we are immensely appreciative of the intention behind this legislation, we have some concerns about the language included in this bill where, “an ambulance service may charge the same amount as a hospital charges to treat a person in the emergency department without admitting the person.”² As was recommended by the Financial Stakeholder group, it is important that we begin exploring cost reporting to better understand the true cost of EMS in the State of Maine.³ If you were to ask a hospital exactly how much it costs for them to treat a patient who has a non-complicated arm fracture, I can imagine that most hospitals can detail the average cost almost down to the penny. In EMS, we cannot tell you exactly how much it costs to manage and treat the same arm fracture if they activate the 9-1-1 system. Therefore, it seems premature to expect payers; public, private, and self-pay; to be charged the same amount as hospitals charge without those same cost analyses. We are optimistic that the recommendations from the financial health committee will be implemented and provide some additional insight. That said, we are not sure that this specific piece of legislation is best at this time.

Please don't hesitate to contact us if you have any additional questions, comments, or concerns that we may be able to address. We appreciate the opportunity to present to the committee.

Thank you.

² L.D. 1602 (131st Legis. 2023)

³ *Id.* §3