



Senate Bill 389: Maryland Medical Assistance Program Emergency Services Transporters – Reimbursement

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

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MIEMSS Position: Support

Bill Summary: SB 389: (1) modifies existing law to remove the Medicaid requirement that EMS medical services must be provided “while transporting the Program recipient to a facility” in order for EMS to be reimbursed for care provided to a 9-1-1 patient who is a Medicaid enrollee; and (2) requires Medicaid to increase reimbursement for EMS medical transportation / medical services by \$25 for each fiscal year until the reimbursement reaches at least \$300;

Rationale:

- **SB 389 requires Medicaid to reimburse EMS for Medicaid patients who are treated but not transported**
 - EMS often encounters patients who call 9-1-1, receive EMS treatment and then refuse transport to the hospital.
 - Currently, Medicaid requires that EMS must transport the patient to a hospital in order to be reimbursed.
 - EMS receives no reimbursement for the services, medications and supplies used to treat patients who refuse to be transported – a form of uncompensated care.

- **SB 389 increases Medicaid payment to EMS by \$25/year to reach at least \$300**
 - **Current Maryland Medicaid reimbursement for EMS is a flat \$100 which has remained unchanged since 1999.** EMS receives a flat \$100 fee regardless of the costs to EMS for the care and transport provided to the 9-1-1 patient. The Medicaid reimbursement amount to EMS is the same, whether the care provided is at the advanced life support (ALS) or basic life support (BLS) level. Services, medications, and supplies provided by EMS at a scene or during transport are currently not eligible for separate reimbursement, and Medicaid does not reimburse EMS for mileage.
 - Operating costs for EMS jurisdictions include personnel salary and benefits, facilities, equipment, and supplies (including pharmaceuticals provided to patients) – all of which continue to increase. In 2019, EMS unit response costs averaged \$640 in Baltimore City; \$500 in Montgomery County; and \$664 in Prince George’s County. *See “Coverage & Reimbursement for Emergency Medical Services New Care Delivery Models and Uncompensated Care Costs. Report required under SB 682.” January 2019.*
 - Medicaid reimbursement to EMS should be increased to more appropriately compensate EMS for care and to account for the costs that EMS incurs in responding to and treating Medicaid enrollees who call 9-1-1 for emergency care.

- **SB 389 will permit Medicaid reimbursement for medical services EMS provides to 9-1-1 patients who are Medicaid enrollees regardless of whether the patient is transported.**

- **SB 389 will provide modest increases of \$25/year – the first increases since 1999 – to EMS for medical services provided to Medicaid enrollees.**

MIEMSS Supports SB 389 and Requests a Favorable Report