



Maine Ambulance Association

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The MAA is a 501(C)(6) non-profit corporation devoted to improving conditions for individuals, groups, and companies involved in EMS. Our mission is to provide vision, leadership, and advocacy for Maine's EMS system and provide a unified voice to represent and support the broad interests and common positions of Maine's EMS providers. We carry out this mission by advocating for the professionalism, education, training, and social standing of members; and promoting cooperation between MAA members, the legislature, the state EMS authorities, allied professionals and organizations.

The MAA represents EMS organizations of all types and corporate structures (e.g. municipal, fire departments, hospital, private, etc.). Current membership is ~ 25% of all ambulance services (n=55) who respond to over 150,000 calls annually.

Goals for 2019

- Help strengthen the statewide EMS system by
 - Providing technical assistance to EMS services
 - Conducting training on issues affecting EMS services (administration, operations, regulation)
 - Serving as a liaison with licensing agencies and legislature
 - Pursuing adequate reimbursement for EMS services

MaineCare reimbursement (currently 65% of Medicare rates, which translates to 40-45% of actual costs) which:

- Threatens business stability
 - Two Maine services closed in 2018; many others seriously struggling
 - Near crisis in some areas
- Strains equipment
 - Inability to maintain and update essential equipment
 - Ambulances (\$200k), Stretchers (\$30k); Cardiac Monitors (\$25k)
- Affects ability of services to provide competitive personnel wages, which impacts
 - Recruitment & retention
 - Fatigue – providers working long shifts and for multiple services
 - Patient safety
 - Provider safety

Unlike doctor's offices, ambulance services must be available and ready to respond 24/7 to any emergency.

Unlike hospitals, ambulance services do not have other (potentially) profit-making departments to offset losses.

Community Paramedicine (reimbursed by some 3rd party payers, but not MaineCare)

CP is provided by about a dozen services around the state who work with local primary care providers to identify patients who may benefit from a non-emergency home visit by specially trained EMS personnel. These calls are typically for wellness checks, post hospital discharge follow up, medication reconciliation, etc. Services are coordinated with home health agencies to fill an unmet health care need.

Initially started as a series of pilot projects in 2011, the benefit of these projects was proven over the course of several years and became permanently authorized in 2017 (32 MRS §84.4). While some third-party payers (e.g. Anthem and Humana) do reimburse for CP, MaineCare does not. In 2017, the Joint Standing Committee on Health and Human Services requested that

“...the Department [of Health and Human Services] and the Board of Emergency Medical Services to collaborate with ambulance service providers and home health agencies on the best way to implement Medicaid coverage of community paramedicine, including the scope of community paramedicine services that should be covered and identifying the health care needs that could be addressed by community paramedicine. We also request that you report to the Committee with the information you have gathered and your recommendations by January 31, 2018.”

However, that work has not yet been conducted.