



# Frequently Asked Questions

## For EMS Providers

<p><b>IDPH &amp; the Bureau of EMS are just trying to take my department away from me.</b></p>	<p>Iowa EMS System Standards was debated, written and applied in investigative studies, by over 40 EMS and allied professionals. Iowa EMS Systems Standards recognizes "...advancing technology and increasing national standards for training and certification are increasing the standard of patient care<sup>1</sup>," which results in an immense administrative burden for volunteer services. The effectiveness of reducing administrative burden was illustrated when one of the pilot studies was approached by two nearby EMS services, to ask permission to reproduce several of the "system documents and policies."</p>
<p><b>Things are just fine (in my jurisdiction), so why are we even talking about Iowa EMS System Standards?</b></p>	<p>The current system is working in many places, both in Iowa and nationally, but there is a high potential for service failure in some areas. In 1996, the EMS Agenda for the Future by published by the National Highway Traffic Safety Administration (NHTSA) and the Health Resources and Services Administration (HRSA) noted this weakness among many others, and began seeking a solution.</p> <p>In 2005, the Iowa Department of Public Health, Bureau of EMS published the Iowa Agenda for the future which focused on how Iowans would be affected by the conclusions of the 1996 NHTSA report. In the summary of this document, it is noted "Health care is changing rapidly and EMS care is no exception. Volunteerism [is struggling to] sustain a full time ambulance service...." Recent changes to federal healthcare law have abruptly reminded the public of the rapid pace of change.</p>
<p><b>Ambulance service is part of public safety and government has to provide it, don't they?</b></p>	<p>As an increasingly vital link, EMS plays a significant role in both Public Safety and health care. In Iowa, access to Emergency Medical Services, is NOT required by any government agency. The only government body, even mentioned is township trustees, who MAY elect to provide coverage. (9 IC §356.42), but many do not.</p> <p>Since EMS is not a required service, cities or counties may choose not to provide for EMS.</p>
<p><b>EMS doesn't need this money because they bill for reimbursement by insurance and Medicare.</b></p>	<p>The misperception is to lump EMS with ambulances, but not all EMS agencies own/operate vehicles for the purpose of patient transport. In Iowa, the majority of services are non-transport agencies that operate at the First Responder or EMT-Basic, although advanced level non transport agencies do exist.</p> <p>Current insurance and Medicare reimbursement practices, only reimburse transporting agencies. If more than one transport agency is involved, only one is reimbursed. Even when reimbursement occurs, it is not sufficient to cover costs, especially the cost to maintain readiness.</p>

<p><b>Why would we want the county to run our EMS?</b></p>	<p>Iowa EMS System Standards intends to involve elected officials for the specific purpose of financial accountability.  Iowa EMS System Standards recommends decisions regarding policy be directed to a representative EMS board.  Providing medical care and protocols shall be left to the experts (system medical director and the providers he/she is overseeing) to ensure delivery of quality patient care.</p>
<p><b>Is this an attempt to conserve money at the state level?</b></p>	<p>Iowa EMS System Standards is not a result of a budget debate, but rather a result of overcoming continuously increasing demands placed on EMS providers, service directors and medical directors in nearly all aspects of operating an EMS program. The volunteer model, which saves labor cost over a career model, is being victimized by and succumbing to these increasing demands. An unexpected discovery by the pilot studies was increased efficiency and lower cost over the current model of delivery.</p>
<p><b>Iowa EMS System Standards is just another one of those “unfunded state mandates.”</b></p>	<p>Currently, EMS is primarily being paid for via tax dollars, reimbursement for services and/or donations. This will not change. Iowa EMS System Standards specifically asks for a funding mechanism that is proprietary and unique to EMS, for the purpose of being able to fiscally respond to increasing preparedness requirements as well as rapidly rising demand for and expectation of services from the public.</p>
<p><b>How long will it take me to become operational on all of these standards?</b></p>	<p>Many people view Iowa EMS System Standards as unobtainable, but based on pilot studies, the opposite was observed. Pilot studies found that they met 45%<sup>ii</sup> of the standards prior to making any changes. After 18 months the number of standards met doubled on average.<sup>iii</sup> Iowa EMS System Standards understands that local needs may be unique and in no way intends to dictate or limit how a system is designed or operated as long as the basic expectation is met, as outlined in Iowa EMS System Standards.</p>
<p><b>What is in this for me?</b></p>	<p>Within each skill level, every EMT in Iowa has to meet the same requirements to be certified. Therefore, we are all professionals and are expected to provide the same level of care to the patient, regardless of our career path. EMS services, especially their directors, will experience reductions to their paperwork, saving time. Time is better spent developing skills and communicating with other departments &amp; agencies so when disaster strikes, your community can benefit from a quality, coordinated response. Your time is best spent doing what you are in EMS to do..... Being there to provide your neighbors with quality pre-hospital healthcare when they need it most.</p>

For more information, visit [www.idph.state.ia.us/ems/ems\\_system\\_standards.asp](http://www.idph.state.ia.us/ems/ems_system_standards.asp)  
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<sup>i</sup>Iowa’s EMS Agenda for the Future, September 2005

<sup>ii</sup> IA System Standards Project Final report pg 6; 40/80,27/80,39/80,37/80

<sup>iii</sup> IA System Standards Project Final report pg 6; 72/80,47/80, 58/80, 36/80