

2023 NATIONAL SURVEY

EMS ECONOMIC AND
OPERATIONAL MODELS
EXECUTIVE SUMMARY



Overview

The pandemic and EMS workforce shortage have forced EMS leaders to re-imagine their current economic and service delivery models without sacrificing patient care. In October 2022, The National Association of Emergency Medical Technicians (NAEMT) conducted a survey to gather national data on how EMS agencies are now funding and operating their services compared to 2019 to better understand how agencies have responded to changes in available funding and workforce shortages. 450 respondents from 47 U.S. states, 2 overseas territories (Northern Mariana Islands & U.S. Virgin Islands), and 1 Indian Reservation participated in the survey. Respondents represented all types of providers from the full spectrum of delivery models, call volumes, demographic regions served, staffing models, and number of personnel.

Overall, respondents reported a net increase in overall costs, averaging 8% across all cost categories. The greatest increase in costs was reported for supplies and equipment, with an average increase of 12% between 2019 and 2022. Respondents also projected similar cost increases for the next three years. Most agencies report experiencing increasing turnover rates, from 8% on average in 2019 to 11% in 2022, and a decrease in applications for paramedic/ EMT positions, down on average 13% compared to 2019. Agencies also reported an average increase in fee for service revenue per transport of 5%, and an average increase in revenue generated from public sources of 9.4%.

Respondents reported significant changes to system delivery and staffing configuration. Nearly one-half (49%) of agencies reported they lengthened response times. Over one-third (36%) of agencies reported implementing alternate response to low-acuity calls. Over one quarter of agencies reported moving from all ALS to tiered deployment (28%) and transitioning from dual paramedic to single paramedic deployment (23%).



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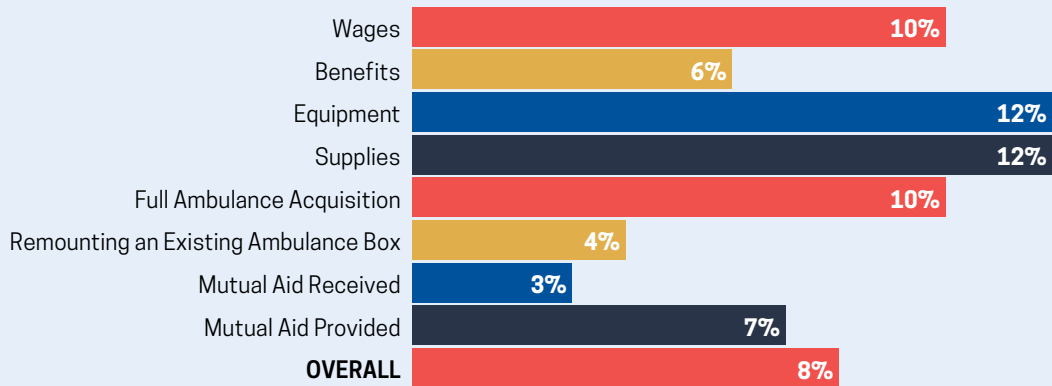
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Key Insights

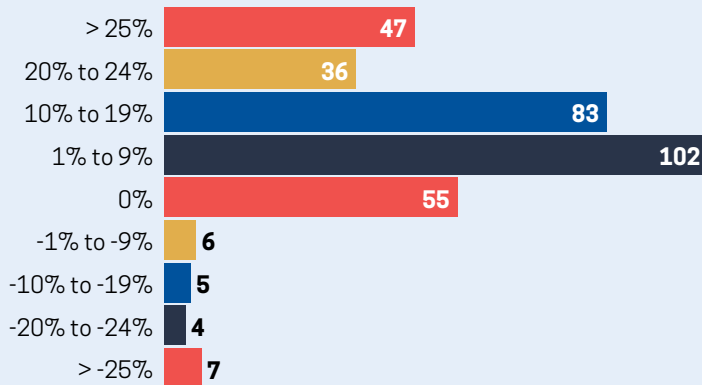
SURVEY HIGHLIGHTS

Cost Changes

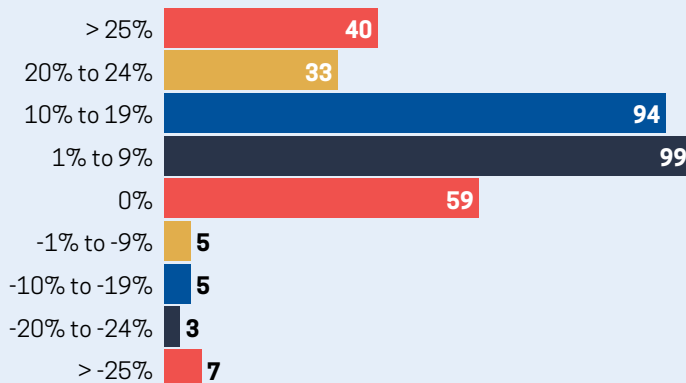
INCREASE IN COSTS BY CATEGORY 2019-2022



AGENCIES REPORTING CHANGES TO WAGE COSTS 2019-2022



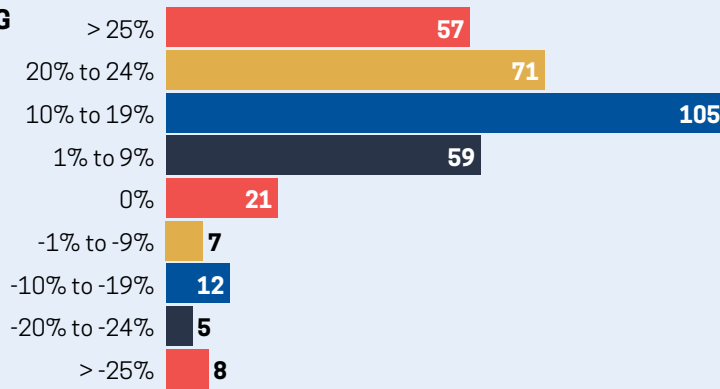
AGENCIES PROJECTING CHANGES TO WAGE COSTS 2023-2026



WAGES

Over 93% of respondents reported experiencing increased wage costs between 2019 and 2022, and 94% of respondents projected increased wage costs for 2023-2026. Nearly half - 48% - of respondents have experienced wage cost increases of 10% or higher between 2019 and 2022, and projected similar increases for the next few years. Nearly 14% of respondents experienced wage cost increases over 25%.

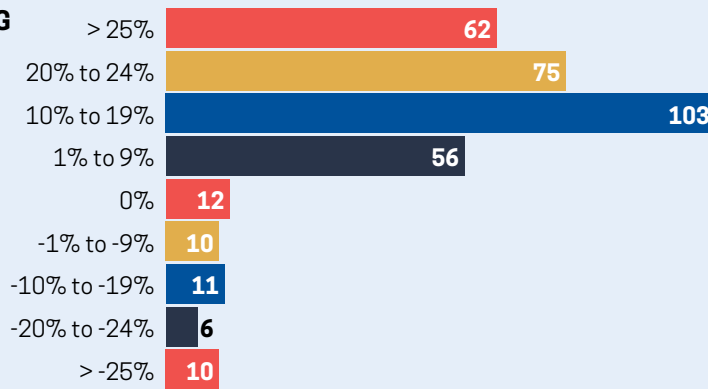
AGENCIES REPORTING CHANGES TO EQUIPMENT COSTS 2019-2022



EQUIPMENT AND SUPPLIES

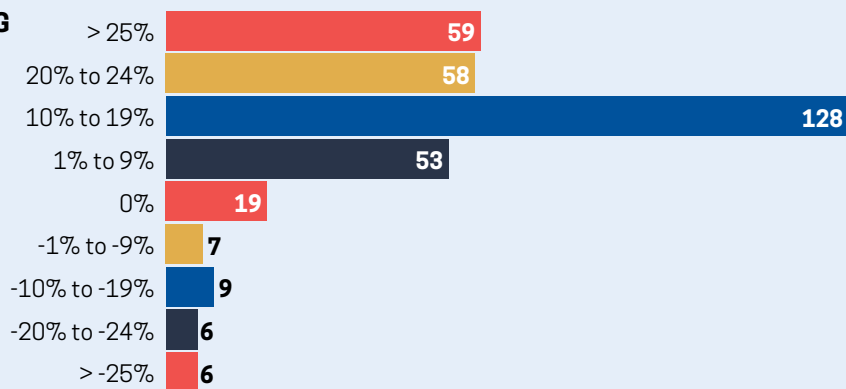
85% of respondents reported experiencing equipment cost increases between 2019 and 2022, and 83% reported increases in supply costs. Over 68% of respondents reported increases of more than 10% for equipment costs, and 70% reported increases over 10% to supply costs.

AGENCIES REPORTING CHANGES TO SUPPLY COSTS 2019-2022

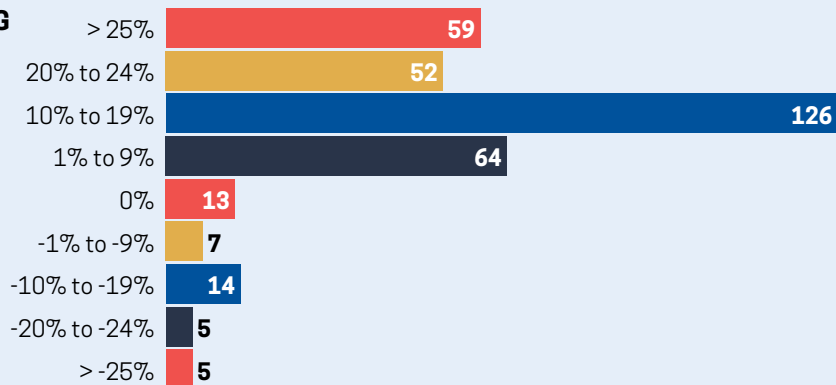


Respondents projected similar cost changes for the next three years.

AGENCIES EXPECTING CHANGES TO EQUIPMENT COSTS 2023-2026



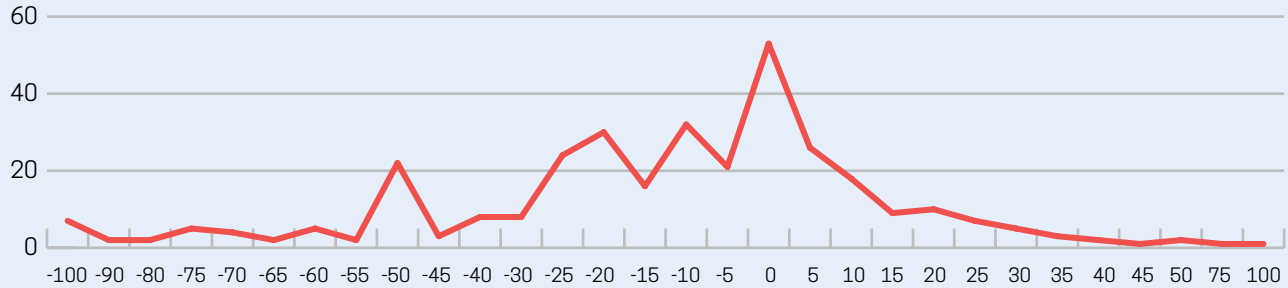
AGENCIES EXPECTING CHANGES TO SUPPLY COSTS 2023-2026



SURVEY HIGHLIGHTS

Recruiting and Retention

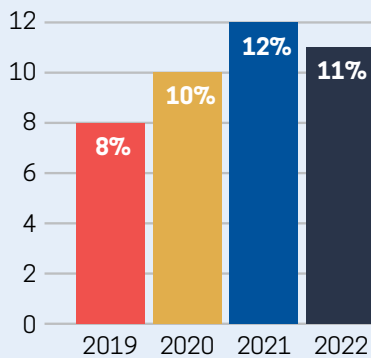
PERCENT CHANGE OF PEOPLE APPLYING FOR PARAMEDIC/EMT POSITIONS 2019 TO PRESENT



RECRUITING

Compared to 2019, agencies reported that applications for paramedic/EMT positions are down an average of 13%. Nearly two-thirds (65%) of agencies reported a decrease in applications, and over one-quarter (27%) of agencies reported a decline in applications of more than 25%.

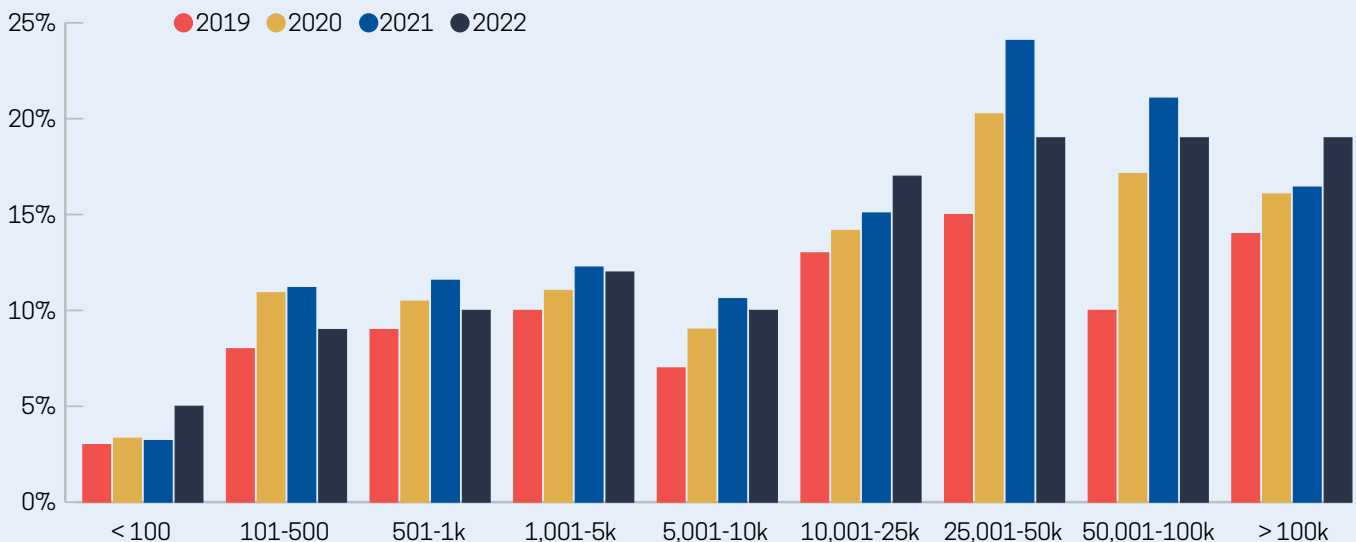
AVERAGE ANNUAL TURNOVER RATE FOR FIELD PRACTITIONERS 2019 TO PRESENT



RETENTION

Respondents reported that the annual turnover rate grew from 8% in 2019 to 11% in 2022. The turnover rate was highest in 2021, at 12%. Turnover rates were reported highest among agencies responding to a higher call volume, with agencies responding to over 25,000 calls annually experiencing double the turnover rate of those responding to fewer than 1,000 calls.

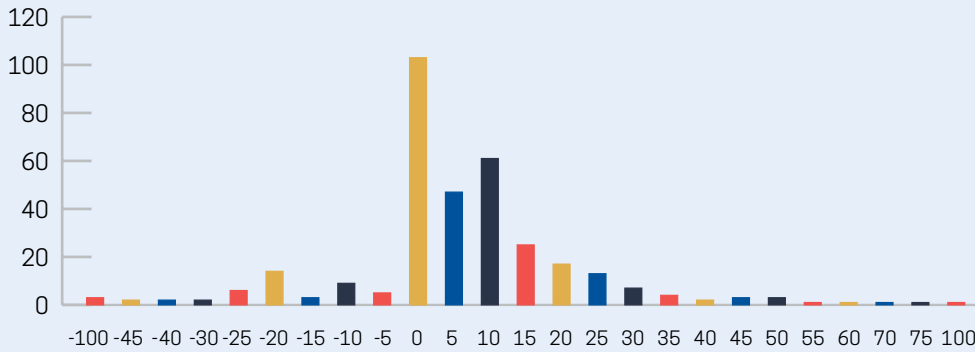
ANNUAL TURNOVER RATE BY RESPONSE VOLUME 2019-2022



SURVEY HIGHLIGHTS

Revenues

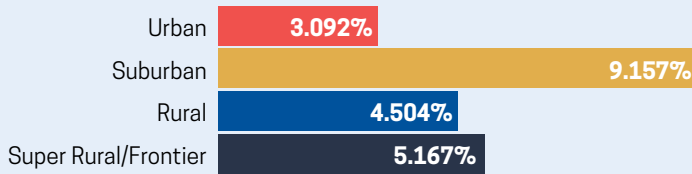
PERCENTAGE CHANGE IN FEE FOR SERVICE REVENUE PER TRANSPORT
2019 TO PRESENT



FEE FOR SERVICE PER TRANSPORT

Agencies reported a modest increase in fee for service revenue per transport between 2019 and 2022, averaging 5%. Nearly one-third (30%) of agencies reported no increase in fee for service revenue, and 13% reported a decrease in fee for service revenue over the same time period.

AVERAGE PERCENT CHANGE IN FEE FOR SERVICE PER TRANSPORT



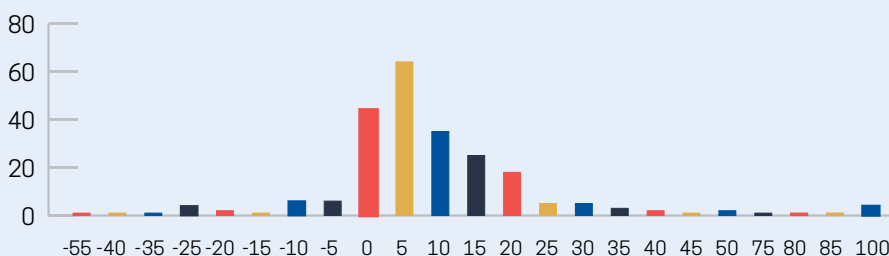
FEE FOR SERVICE PER TRANSPORT BY DEMOGRAPHIC SERVED

While the average increase in fee for service per transport has increased by about 5% overall, agencies serving urban demographics have experienced the lowest percentage increase of all demographic regions at just 3% between 2019 and 2022.

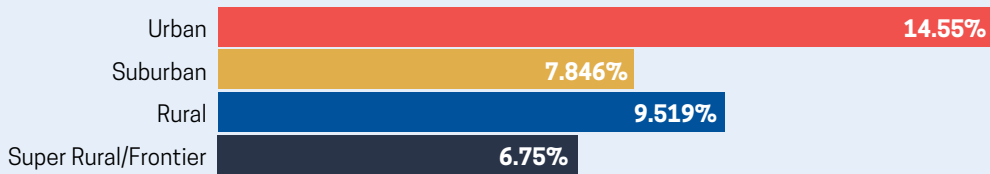
REVENUE FROM PUBLIC SOURCES

70% of respondents reported receiving some form of public funding (tax subsidy). These respondents reported an average of 9.4% increase in revenue generated from public sources between 2019 and 2022. Over one-half (56%) of respondents reported an increase of less than 5%, and over one-quarter (28%) of respondents reported no increase or a decrease in revenue from public sources. Respondents from Alaska, Wisconsin, Minnesota, Illinois, and North Carolina reported an average decrease in revenue from public sources.

PERCENT CHANGE IN REVENUE FROM PUBLIC SOURCES 2019 TO PRESENT



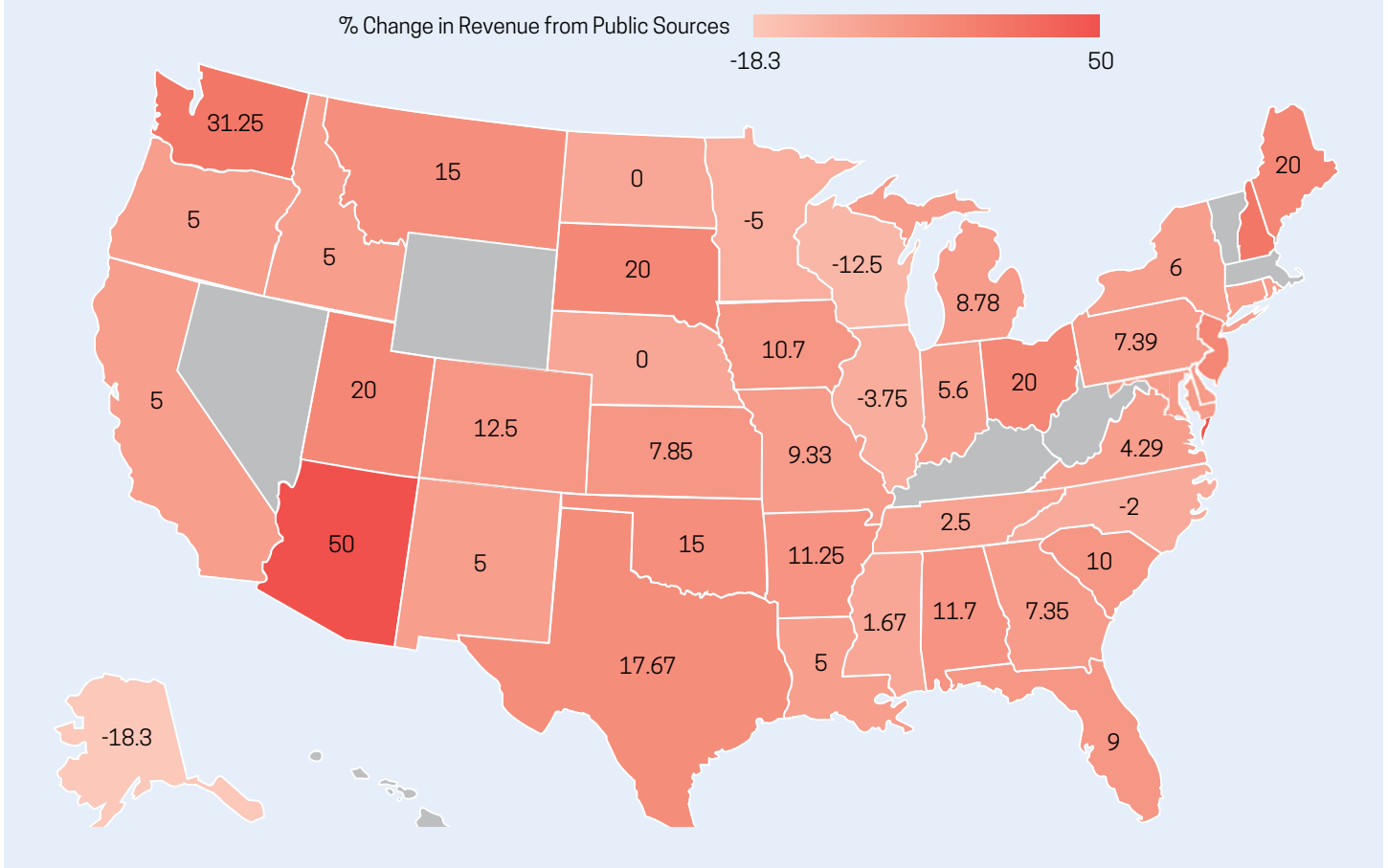
AVERAGE PERCENT CHANGE IN REVENUE FROM PUBLIC SOURCES



REVENUE FROM PUBLIC SOURCES BY DEMOGRAPHIC SERVED

While the average increase in revenue from public sources across all agencies is reported at 9.4% from FY19 to FY22, agencies serving suburban, rural, and super rural/frontier demographics have experienced a lower percentage increase than their urban counterparts. Those serving super rural/frontier demographics have seen an average increase in revenue from public sources at just 6.75%. Half of all agencies serving super rural/frontier demographics report an increase of less than 5%; and one-quarter of these agencies report no increase or a decrease in revenues from public sources.

MAP OF PERCENT CHANGE IN REVENUE FROM PUBLIC SOURCES BY STATE



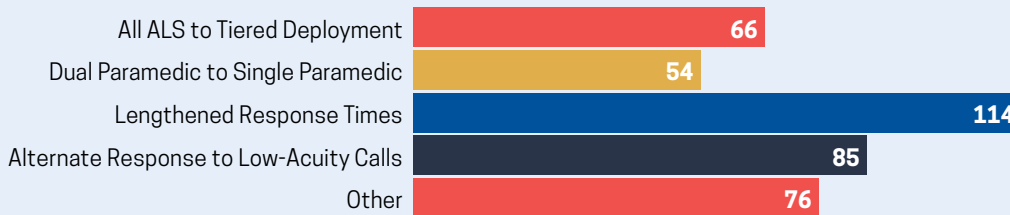
SURVEY HIGHLIGHTS

System Delivery Changes

Nearly three-quarters (72%) of respondents reported changes to system delivery, deployment, or staffing between 2019 and 2022. Of these agencies, nearly half (49%) reported they lengthened response times; over one-third (36%) reported alternate response to low-acuity calls; and over one-quarter of agencies reported moving from all ALS to tiered deployment (28%) and transitioning from dual paramedic to single paramedic deployment (23%).

Other changes to delivery, deployment, and staffing included alternate staff schedules, 24-hour shifts, discontinuation of interfacility transfers, reduced ambulance coverage, reduced backup coverage, and inability to answer calls.

SYSTEM DELIVERY CHANGES



All ALS to Tiered Deployment	66	28.33%
Dual Paramedic to Single Paramedic	54	23.18%
Lengthened Response Times	114	48.93%
Alternate Response to Low-Acuity Calls	85	36.48%
Other	76	32.62%

Key Insights

- The survey results document the rising costs of providing EMS, which are not being offset by commensurate increases in reimbursements from Medicare, Medicaid or commercial insurers or from increases in local and state funding. The greatest imbalances are being experienced by agencies outside of major urban centers.
- The absence of an adequate tax base in rural communities to support EMS, which increasingly serves as these communities' sole healthcare safety net, is leaving many of these communities without emergency medical services.
- Wage increases to recruit and retain personnel are not sustainable without commensurate increases in revenue to offset higher personnel costs.
- EMS personnel serving in urban and suburban agencies are experiencing higher turnover rates than in demographic areas serving a lower call volume.
- Ongoing workforce shortages have driven agencies to make changes in deployment, crew configurations, and call response reprioritization to maximize workforce resource- but have also led to reductions in services to respond to the most pressing needs.
- Local and state governments must assure EMS delivery is funded at a level that assures community expectations for essential EMS service delivery.

ABOUT NAEMT

Formed in 1975 and over 90,000 members strong, the National Association of Emergency Medical Technicians (NAEMT) is the only national association representing the professional interests of all emergency and mobile healthcare practitioners, including emergency medical technicians, advanced emergency medical technicians, emergency medical responders, paramedics, advanced practice paramedics, critical care paramedics, flight paramedics, community paramedics, and mobile integrated healthcare practitioners. NAEMT members work in all sectors of EMS, including government agencies, fire departments, hospital-based ambulance services, private companies, industrial and special operations settings, and in the military.

