



March 19, 2021

The Honorable Xavier Becerra  
Secretary  
Department of Health and Human Services  
200 Independence Avenue SW  
Washington, DC 20201

Dear Secretary Becerra:

On behalf of the American Ambulance Association, Congressional Fire Services Institute, International Association of Fire Chiefs, International Association of Fire Fighters, National Association of Emergency Medical Technicians and National Volunteer Fire Council, we urge the Department of Health and Human Services (HHS) to expeditiously exercise the emergency waiver authority for ground ambulance services that Congress provided through the American Rescue Plan Act of 2021 (P.L. 117-2). This waiver authority would permit Medicare to reimburse ground ambulance providers and suppliers for providing treatment in place (TIP) services to beneficiaries during the public health emergency (PHE) when there is no transport of a patient pursuant to a community-wide emergency medical services (EMS) protocol.

America's fire departments and EMS agencies are in a fiscally precarious position as the COVID-19 PHE has forced them to shoulder the burdens of ever-increasing amounts of TIP care without receiving any reimbursement for this care since the pandemic began in March 2020. Our organizations urge HHS - through the Centers for Medicare & Medicaid Services (CMS) – to exercise this waiver authority that the Congress passed and the President signed into law to address this specific problem.

In guidance issued in 2020, CMS wrote that Section 1861(s)(7) of the Social Security Act, which defines ambulance services, prohibits Medicare from reimbursing ground ambulance providers and suppliers for the health care services provided unless the beneficiary is also transported to a designated facility. During the COVID-19 PHE, state and local authorities and public health professionals have called for ground ambulance service agencies to limit transportation of certain patients suffering from COVID-19, minor cuts, low blood sugar, and other low acuity conditions. This has placed ground ambulance agencies in an untenable position since the start of the PHE. Because ground ambulance agencies are required to respond to all 9-1-1 calls and to provide patient assessment and care, the inability of CMS to respond to this new reality has forced fire departments and EMS agencies to provide care with no opportunity for reimbursement. These financial pressures and others associated with the PHE have led to the closures of some agencies and the curtailing of services in others. Fire departments and EMS agencies desperately need to be reimbursed for all of the care that they provide.

Congress recently passed the American Rescue Plan Act of 2021 (P.L. 117-2) on March 10. Section 9832 of the legislation provides HHS with the authority to issue an emergency waiver to allow reimbursement for the health care services provided by ambulance service agencies when transportation does not occur pursuant to a community-wide EMS protocol in place during the public health emergency. As with the other COVID-19 waivers, the Congress did not restrict the timing of the waiver, so it can, and should, be implemented retroactive to March 1, 2020, as CMS has done when implementing similar waiver authorities. We encourage CMS to also recognize that in some areas “community-wide EMS protocols” are defined at the local level, while others are governed by statewide protocols, but both types constitute community-wide EMS protocols that fire and EMS organizations responding to emergency calls must follow.

Once exercised, this waiver authority will provide ground ambulance agencies with the needed reimbursement for the services already provided and support their ongoing work to caring for all emergency patients in their communities. To maintain the country’s pre-hospital emergency medical response system, we urge HHS to exercise this waiver authority as soon as possible. Doing so will prevent the immensely dangerous service disruptions that are associated with the closures or service curtailments of ground ambulance service agencies.

Thank you for the opportunity to highlight this vitally important issue. Providing reimbursement for treatment in place services under the limitations of the waiver authority will align financial reimbursement and doing what is right for the patient with the overall health care system. Our organizations urge you to quickly exercise this newly authorized emergency power and provide much-needed relief to ground ambulance service agencies across the United States.

Sincerely,

American Ambulance Association  
Congressional Fire Services Institute  
International Association of Fire Chiefs  
International Association of Fire Fighters  
National Association of Emergency Medical Technicians  
National Volunteer Fire Council

CC: Elizabeth Richter, Acting Administrator, Center for Medicare & Medicaid Services