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October 17, 2025

Mr. Stephen Astle, Director, Defense Industrial Base Division
Office of Strategic Industries and Economic Security, Bureau of Industry and Security
U.S. Department of Commerce
1401 Constitution Avenue, NW
Washington, DC 20230

Submitted via Regulations.gov

RE: Department of Commerce, Bureau of Industry and Security; Section 232 National Security Investigation of Imports of Personal Protective Equipment, Medical Consumables, and Medical Equipment, Including Devices; Docket No. 250924-0160; XRIN 0694-XC134

Dear Mr. Astle:

I am writing on behalf of the National Association of Emergency Medical Technicians (NAEMT) and the 110,000 Emergency Medical Services (EMS) professionals we represent in response to the request for comments about the ongoing Section 232 investigation into Personal Protective Equipment (PPE), medical consumables, and medical equipment and devices. I am deeply concerned about the impact of tariffs on emergency medical services (EMS) and welcome the opportunity to provide additional information about what these tariffs mean for our ability to serve our communities.

When Americans dial 9-1-1, they expect a rapid, appropriate emergency response. Unfortunately, EMS is facing significant headwinds in maintaining operations and many EMS agencies have been forced to close their doors in recent years. The cost of medical supplies, equipment, fuel, and medications has increased significantly, and EMS agency budgets have not kept pace.

EMS still relies heavily on many imported items such as PPE, cleaning and sterilization products and equipment, airway and oxygen delivery systems, IV and drug delivery equipment, and infection control supplies that are not produced in adequate volume in the US to meet demand. Tariffs on any of these items will further increase prices for EMS, and could result in product shortages, additional supply chain complexity, and other challenges that EMS simply cannot afford.

Please find below NAEMT's input on some of the issues covered by the notice for public comment.

The current and projected demand for PPE, medical consumables, and medical equipment, including devices, in the United States

According to a recent market analysis[1], the US healthcare PPE market size was valued at $3.27 billion in 2022. The expected compound annual growth rate (CAGR) is 4.4% between 2023-2030. Rising safety standards and increased prevalence of infectious diseases, and especially respiratory diseases, are driving demand[2] for healthcare PPE.

EMS is only a portion of the market, and has to compete with hospital systems, primary care practices, and other medical and healthcare services for the same PPE. Many EMS agencies, especially those in rural areas, are small and cannot use economies of scale to negotiate better prices or purchase large quantities of PPE ahead of time. Further, PPE and consumables have an ongoing, recurring demand; in a time of flat or even shrinking EMS agency budgets, increased costs for these items will have an outsized impact on these agencies' bottom line.

On the medical equipment and device side, a September 2025 report[3] projected that the US medical device market will grow from $199.06 billion in 2025 to $314.96 billion by 2032, a CAGR of 6.8%. Of particular relevance to EMS are devices such as monitors, ventilators, defibrillators, and other equipment designed for use outside the hospital or primary care setting. As the population continues to age and chronic conditions become more acute, EMS will rely more and more on these devices to provide care.

The extent to which domestic production of PPE, medical consumables, and medical equipment, including devices, can meet domestic demand

Domestic production of PPE, medical consumables, and medical equipment and devices remain inadequate to meet domestic demand. The US still relies heavily on foreign sources for these items. According to the American Medical Manufacturers Association[4], efforts to reshore healthcare supply chains in the wake of the COVID-19 pandemic have largely faltered, meaning that domestic capacity has not grown enough to keep pace with domestic needs. Even where there is US-based supply, the price for those US-produced goods has to be competitive, or cash-constrained EMS agencies will have to choose a less expensive imported alternative.

The US medical device industry is growing but is still reliant on a global supply chain. While estimates differ on the number of devices that are fully produced overseas, critical components such as semiconductors are still largely produced outside the US, making these devices subject to tariff pressures.

The role of foreign supply chains, particularly of major exporters, in meeting United States demand for PPE, medical consumables, and medical equipment, including devices

Foreign supply chains play a significant role in meeting US demand for PPE, medical consumables, and medical equipment and devices. Many of the medical consumables used by EMS personnel are primarily sourced overseas[5]. Examples include: nitrile and latex gloves, which are primarily imported from Malaysia, Thailand, and Indonesia; syringes and needles,

primarily imported from India, China, and South Korea; and wound care products, such as gauze and dressings, primarily imported from India, China, and Turkey.

Estimates vary on how many devices are produced outside the US; Advamed estimates[6] that only 30 percent of devices used in the US are imported, while another analysis[7] estimates that 69% of available US-marketed devices are manufactured solely outside the US. What is clear is that a significant number of medical devices would be subject tariffs, which will affect price and availability.

Any other relevant factors

EMS agencies across the country are struggling to keep up with the cost of patient care, as costs increase and reimbursement remains flat. For example, according to data released in 2024 by the Centers for Medicare and Medicaid Services (CMS), Medicare under-reimburses ambulance service by $2,344 per transport.[8] This puts an incredible strain on EMS agencies and has a direct impact on their ability to pay their staff – a challenge not faced by other first responders. As one expert noted, "Unlike police and fire services, which are primarily funded through municipal budgets and taxpayer support, EMS uniquely relies on a reimbursement-based model, financed largely through billing patients or their insurers for transport and care… As a result, EMS systems are often forced to balance patient care with financial viability. This creates ethical and logistical tensions that their police and fire counterparts do not encounter."[9]

In addition, EMS professionals routinely face the threat of physical or verbal abuse, exposure to infection, physical exhaustion, and other uncertainty and risk in the performance of their duties. Facing these dangers day after day can result in physical, emotional, and psychological injury, and combined with the chronic exposure to stress, these challenges are fueling a mental health crisis among EMS personnel.[10] The rate of death by suicide is significantly higher for EMS professionals than for the general population.[11]

Incredible progress is being made and there is an increasing number of resources available to support the physical and emotional health of EMS. These tariff policies directly threaten not only their safety and security, but their physical and emotional health as well. A recent literature review found that for EMTs and Paramedics, inadequate PPE availability can lead to "heightened moral distress, psychological strain, and ethical dilemmas, affecting their well-being and the quality of care they can provide."[12] Increasing the price of PPE, medical consumables, and medical equipment and devices will also decrease the funding EMS agencies have available to pay staff, further diminishing EMS practitioners' well-being.

Regardless of the public policy goals that may be achieved by applying tariffs to imports, any action that results in reduced pay for EMS practitioners and/or price increases or preventable shortages of PPE and the other equipment first responders require to safely do their job is completely unacceptable.

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Thank you for your careful consideration of these comments. We stand ready to work with the Administration to support the EMS workforce and strengthen and advance EMS care in the US. We would be happy to discuss these concerns further at your convenience.

Sincerely,

Chief Christopher Way
President, NAEMT

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[6] "The U.S. Medtech Industry: A Pillar of American Manufacturing and Medical Innovation," AdvaMed, July 2025, https://www.advamed.org/wp-content/uploads/2025/07/7.16.25-Medtech-manufacturing-fact-sheet.pdf

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