



SUMMER 2024

NAEMT NEWS

A quarterly publication of the National Association of Emergency Medical Technicians

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EMS Treatment in Place Momentum Builds NAEMT Freedom of Information Act Request Reveals Savings of Up to \$537 For Each Intervention

Paramedics and EMTs know the drill. A call comes in for a patient experiencing diabetic hypoglycemia, or an asthma attack. Or an elderly patient has fallen and injured an ankle. You provide glucose, a breathing treatment, or help your patient back up, wrap the ankle and get them settled into a chair or bed.

Should they go to the ER? If vital signs are good, medics know emergency physicians probably won't do much for these patients. Instead, they need to follow up with their primary care doctor, or other specialist.

But many will end up in the ER anyway. EMS practitioners are taught to advise patients to go. If patients decline, out comes the liability waiver. "Our medical advice is to go to the emergency room. If you elect not to go, it's against medical advice and you need to waive liability against us if you die," said Matt Zavadsky, vice president of PWW Advisory Group.

"That alone is enough to get some people to change their minds and agree to go."

Zavadsky is formerly chief transformation officer at MedStar Mobile Healthcare in Fort Worth, Texas.

Payment fuels clinical decisions

The push to transport stems largely from the way EMS is reimbursed. Under the Centers for Medicare & Medicaid Services (CMS) ambulance fee schedule, EMS is reimbursed as a transport supplier. EMS agencies are paid for taking patients to hospital emergency departments, plus mileage. They're not paid for the response, or for the care provided.

There are growing signs that may change. NAEMT and other EMS organizations have come together to strongly advocate for state and federal legislation allowing EMS payment for treatment in place (TIP). In November 2023, three Vermont legislators introduced



**1 Day. 195 Meetings.
220 EMS Advocates.**

At a pivotal moment, EMS On The Hill Day makes a difference for our workforce and patients.

SEE PAGE 16

the Emergency Medical Services Reimbursement for On-scene Care and Support (EMS ROCS) Act. EMS ROCS would provide Medicare **SEE PAGE 6**



PRESTIGE



ELITE



PREMIER



DIAMOND



PLATINUM



GOLD



SILVER



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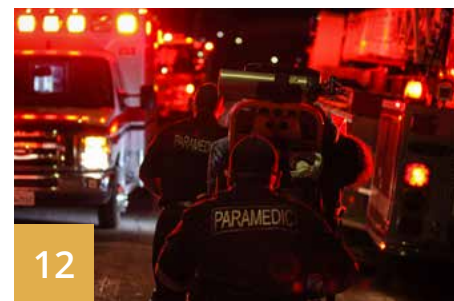
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WORLD TRAUMA SYMPOSIUM



EMS ON THE HILL DAY



MEMBER SPOTLIGHT: LEROY GARCIA JR.

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Feeling Energized by the Enthusiasm for TIP, MIH-CP and SIREN

By Susan Bailey, MSEM, NRP

Although it's been a few weeks since I arrived home in Louisiana from

Washington, D.C., I'm still feeling the energy and excitement from all of the EMS advocates who came to support our profession at EMS On The Hill Day.

It was thrilling to be among so many fellow EMS advocates who had taken time out of their busy schedules and made the trip to our nation's capital to speak to members of Congress and their staff about the issues facing our workforce and our patients. We had a busy day: 195 meetings in total! It was wonderful to sit down with our Senators, Representatives and their aides to continue our tradition of educating them about EMS needs.

It was thrilling to be among so many fellow EMS advocates who had taken time out of their busy schedules and made the trip to our nation's capital.

On Capitol Hill, we advocated for the SIREN grants, also known as the Rural EMS Training and Equipment grants. This important program is helping to shore up EMS agencies in our rural areas that are under tremendous financial strain. This year, we requested \$32 million in funding, and we're hopeful Congress will see why rural agencies need support so that they can continue to provide excellent service to their communities and visitors.

EMS On The Hill Day participants were also enthusiastic to advocate for legislation for treatment in place (TIP)

and mobile integrated healthcare-community paramedicine (MIH-CP). We asked members of Congress to show their support for TIP by co-sponsoring S. 3236/H.R. 6257, the Emergency Medical Services Reimbursement for On-scene Care and Support Act (EMS ROCS). This law would ensure that EMS is reimbursed for treatment in place, without transport to a hospital. This fairly compensates EMS for the response and the care provided, even if a patient opts to remain at home or if the condition is minor and would not be well served in an emergency department.

We also asked for their support on H.R. 8042, the Community Paramedicine Act of 2024, which would create a \$25 million a year grant program for five years to support MIH-CP programs.

To continue to build momentum, we could use your help! Please use our Online Legislative Service to send an email asking your Senators and Representative for their support. Find it at naemt.org > Advocacy > Online Legislative Service. We've already had nearly 1,000 emails sent to support TIP reimbursement and nearly 1,500 in support of the Medicare ambulance fee bonus payments. We're grateful to all of you who took a moment to make your voice and the voice of EMS heard.

Promoting safety in EMS

Another issue that NAEMT has long been a proponent for is safety in EMS. June was National Safety Month. Even if you missed it, it's always a good time to consider offering one of NAEMT's safety courses to your staff.

EMS Safety is the only national, comprehensive safety course that teaches students how to protect themselves and their patients while on

the job. It promotes a culture of safety and helps reduce the number of on-the-job fatalities and injuries. Having personally taken this course twice, I appreciate the real-life case studies, and activities that encourage students to apply critical thinking and best practices to scenarios.

Our safety courses also include EMS Vehicle Operator Safety (EVOS), which features case studies and analyses of both common and catastrophic collisions. EVOS challenges EMS practitioners to reconsider their preconceptions about safe vehicle operations. Instructors can easily incorporate local laws, rules and policies into the curriculum.

EMS Safety is the only national, comprehensive safety course that teaches students how to protect themselves and their patients while on the job.

We're also very proud to have launched EMS Safety Officer, a 5-hour online course that prepares EMS personnel to serve as their agency's EMS Safety Officer (ESO). This course is giving EMS agencies the tools and training to put safety at the heart of EMS operations and patient care.

Supporting EMS mental health and resilience

Supporting the mental health of practitioners continues to be a priority for NAEMT. Research has shown that EMS practitioners are at heightened risk of depression, anxiety, fatigue, sleep disorders, post-traumatic stress disorder and suicide. Many of us



personally know someone in EMS who has died by suicide. We may wonder if there was something we could have done to prevent it.

We know there is no one magical way of preventing these tragedies. But we encourage EMS agencies to appoint a mental health resilience officer, who can be a champion within your organization in prioritizing the mental wellness of responders. NAEMT's Mental Health Resilience Officer (MHRO) is a 6-hour online course that prepares EMS personnel to serve in this vital role.

Coming up - NAEMT Annual Meeting

If you haven't already, it's time to register for EMS World Expo and start planning your trip to Las Vegas for the 2024 NAEMT Annual Meeting. We have an exciting array of events planned, including the not-to-be-missed World Trauma Symposium, preconference workshops and of course, the member reception. We'd love to see you! Please join us!

What Is EMS? Updated NAEMT Publication Explains EMS to the Public and Decision-Makers

NAEMT has published an updated advocacy brochure, "What is EMS?"

The brochure provides an introduction to EMS and is designed to help our communities, elected officials, and stakeholders better understand our profession. The brochure covers key aspects of EMS operations, services, staffing, regulations, and finances.

Written for a non-EMS audience, please share this brochure in your community to quickly and easily explain key concepts such as:

- What medical skills can EMTs and paramedics perform?
- Why are there so many types of EMS delivery models?
- What are the biggest challenges facing EMS?
- How are NAEMT and other EMS organizations working to change antiquated EMS reimbursement models?

View the brochure at [NAEMT > Advocacy](#).



Thinking of earning your EMS degree?

Apply for the NAEMT Scholarship

At Columbia Southern University, NAEMT members receive a **15% tuition discount** and are eligible to apply for the **NAEMT Scholarship**. Applications for the summer scholarship open July 30.

Visit our website to apply.



ColumbiaSouthern.edu/NAEMT » 877.347.6050



Aaron Rhone, Ph.D.
EMS Administration Professor
and Graduate



reimbursement for care provided by EMS on-scene, without transportation to a hospital.

A second bill, sponsored by Rep. Mike Carey (R-OH), is also in the works. It will create funding for a pilot program to test a treatment in place program for Medicare beneficiaries.



NAEMT revved up the effort to build support in Congress for passage by publishing a cost analysis from CMS on a previous treatment in place pilot program called ET3. ET3 is short for the Emergency Triage, Treatment and Transport Program.

The cost analysis found that the average savings per Medicare beneficiary per intervention was \$537. That's \$537 in savings every time a patient was treated in place rather than taking an ambulance ride to the emergency department.

The cost analysis, which NAEMT received through a Freedom of Information Act (FOIA) request, will be given to the Congressional Budget Office (CBO), said Zavadsky, chair of NAEMT's EMS Economics Committee. The CBO provides independent, nonpartisan analyses of the cost of proposed legislation. And no surprise – laws that result in cost savings are often viewed as more favorable by members of Congress.

"The data was amazing and very positive and showed significant cost savings to Medicare to implement a treatment in place model for EMS," Zavadsky said.

EMS clinical care grows more complex

Payments for transport to EMS from CMS go back to the passage of the Social Security Act of 1965. In it, "ambulance

services" was included as a right of Medicare and Medicaid beneficiaries. Ambulance services was interpreted to mean transportation.

In 2002, the ambulance fee schedule replaced those earlier payment calculations. But even as the medical care EMS practitioners delivered grew more complex, EMS was still categorized in payment schemes as a transportation supplier.

Frustrated by the status quo, and knowing EMS could do more for their patients, innovators in EMS developed community paramedicine and mobile integrated healthcare programs. EMS agencies sought out partnerships with insurers and healthcare providers such as hospitals, and home health, hospice and mental health agencies. Paramedics and EMTs provide services such as navigating "frequent fliers" to social services or primary care, and provided follow-up care in the home after hospital discharge to prevent hospital readmissions.

In the quest to establish these programs, which came to be known as MIH-CP, EMS innovators scored some important victories. Some EMS advocates successfully changed state laws that required EMS to take patients only to the hospital. In other states, Medicaid agreed to reimburse EMS for community paramedicine services. Some commercial insurers contracted with EMS to help their patients manage conditions such as asthma, diabetes, and congestive heart failure.

Reimbursement remains a sticking point

But a sticking point in growing and sustaining MIH-CP was always reimbursement. A 2023 survey by NAEMT of EMS agencies offering MIH-CP found 38% of such programs had been terminated because of a lack of funding. Grant programs that had been used to launch them ran out, or the champions that had spearheaded them moved on or found it too difficult to continue without reliable funding.

Although some MIH-CP programs continue, the EMS financial model remained dependent on billing a fee for driving patients to the hospital.

Enter ET3 (and COVID-19)

In 2019, CMS's Center for Medicare and Medicaid Innovation (CMMI) announced a five-year payment model for ambulance services, ET3. Participating EMS agencies could provide treatment in place (TIP), or transport the patient to an alternate destination (TAD), such as a primary care doctor's office, urgent care, rural health clinic, or behavioral health facility. To do this, they needed to work with a "qualified health care practitioner," which was generally a physician who was available via telehealth.

ET3 was met with much excitement. But the problems were apparent almost immediately. Participating agencies had to offer both TIP and TAD. Some struggled to find urgent care clinics or behavioral health facilities willing to take patients at a moment's notice, arriving by ambulance, Zavadsky said. (Even at MedStar, a national leader in establishing these partnerships, 94% of their claims during ET3 were for treatment in place.)

Some agencies balked at the extensive requirements for sharing patient care records. And the timing of the launch couldn't have been worse.

CMS announced the 205 agencies selected to participate on February 27, 2020 – right around the time the first cases of COVID-19 were showing up on U.S. shores. The pandemic sent EMS agencies scrambling to find a supply of PPE, keep ambulances staffed and keep their crews safe from a novel virus that led to the deaths of dozens of EMS practitioners during its first year.

EMS adapts and impresses

Amid the stress and awfulness of the pandemic, EMS practitioners demonstrated their commitment to serving the community, and ability to adapt. Faced with the prospect of emergency departments overflowing with patients with COVID-19, the Centers for Disease Control and Prevention (CDC) asked EMS to start taking care of patients in the home.

CMS issued a temporary waiver, to last as long as the official public health emergency. The waiver allowed EMS to provide treatment in place and transport to alternate

destinations. EMS efforts to take care of communities and help hospitals deal with the crisis was celebrated by elected officials, physicians and the public. "The American people owe a debt of gratitude for the heroic work they have done," stated an editorial in *JAMA Cardiology* in June 2020.

But when the public health emergency was declared over in May 2023, the waiver expired, and along with it, so did Medicare reimbursements for TIP and TAD. "One of the only great things that happened as a result of the pandemic is that EMS proved we are more than just a method of conveyance to an ER," Zavadsky said.

And then, in December 2023, CMS abruptly pulled the plug on ET3, two years before its scheduled end date. CMS said the reason was lower than expected participation and claims.

In the end, CMS reported that 147 ambulance services had participated, with only 73 actually billing for ET3 interventions. A total of 2,964 individuals were treated using an ET3 intervention – 3,397 claims were for treatment in place, and 253 were for transport to alternate destinations.

Bright spots

Despite the disappointing end, Zavadsky, who had sat on the ET3 Model's Quality Workgroup, knew there were bright spots. An independent economic evaluation conducted for CMS by the consulting firm Booz Allen Hamilton had revealed remarkable savings.

When CMS declined to release the report, NAEMT didn't take no for an answer. It submitted a Freedom of Information Act (FOIA) request, and then a second when the first one was denied. Finally, CMS agreed to make public the consulting firm's findings.

The results of the cost analysis showed that savings ranged from \$527 to \$570 for each ER visit averted, with an average savings of \$537. That figure was arrived at by calculating the national average cost of an ER visit (about \$690) with the average base rate paid by Medicare for a BLS transport (about \$380).

Prior research has shown about 15% of ER visits are for minor ailments. If TIP



and TAD were applied nationwide, the savings could be up to \$2 billion annually. "Now we can say, 'The real savings is \$537 per intervention. That is almost \$2 billion in savings. Let's do this.'"

Is there any risk to EMS's bottom line?

Before ET3 and the COVID-19 waivers, a few pilot programs had experimented with reimbursing EMS for treatment in place. But they often reimbursed EMS less than what they'd be paid for a normal response – one was as low as \$75 per response. That doesn't work, Zavadsky said, because EMS remains financially incentivized to transport to the hospital.

Now we can say, 'The real savings is \$537 per intervention. That is almost \$2 billion in savings. Let's do this.'

"The payments for treatment in place have to match the payments for transports," he said.

It's starting to happen. In 2023, Tennessee started reimbursing EMS for treatment in place and transport to alternate destinations for TennCare beneficiaries, the state's Medicaid program. EMS can charge either an ALS or BLS Medicaid rate, depending on the procedures done.

In May, Mississippi Gov. Tate Reeves signed into law a bill requiring insurers and health plans to reimburse EMS for transport to alternate destinations and for providing treatment in place. Insurers must pay either the contracted rate for a response involving transport, or 325% of what Medicare pays, whichever is greater.

"They need to be reimbursed for the care that they're rendering and the cost of that care, which includes running an

ambulance and doing all the things it takes to have an ambulance ready to go," Mississippi State Health Officer Dr. Daniel Edney told *WLBT News*.

Zavadsky predicts once treatment in place payments become available at a rate that makes sense economically for EMS, the practice will become widely adopted – much like what happened with telemedicine.

Before the pandemic, physicians were mostly unwilling to offer telemedicine to patients in their home because they couldn't get reimbursed. The availability of telehealth exploded in 2020 when CMS agreed to start paying for telehealth services for patients in their home setting.

In 2019, 15% of physicians offered telemedicine. By 2021, 86.5% did. One quarter of medical specialists use telemedicine for upwards of 50% of their patient visits.

"Payment policy influences service delivery and clinical practice," Zavadsky said.

Best of all, treatment in place is good for the healthcare system, good for EMS, and good for patients.

EMS crews will be empowered to do what they know is right for their patients, and avoid waiting for hours for beds at overcrowded ERs. Patients with minor ailments won't be unnecessarily sent to emergency departments, which can bring high co-pays, exposure to infectious diseases, and long wait times.

"Medicare is the key. Once Medicare says that they will pay for non-transport, almost all commercial insurers will follow," Zavadsky said. "Then we can implement a global medical protocol that says, 'If you have a minor medical complaint and the crew says it's safe for you to be treated in place, we're going to do that.'"

By Jenifer Goodwin

"Asphalt City" Star Tye Sheridan on Prepping to Play Rookie Paramedic in New Film

"Asphalt City" is an intense film focusing on the lives of two New York City paramedics: grizzled veteran Gene Rutkovsky (played by Sean Penn) and struggling rookie Ollie Cross (played by Tye Sheridan).

Released in theaters this spring and streaming now on Amazon Prime, the film depicts medics trying to save the lives of victims of violent crime and drug overdoses, often in chaotic scenes made more so by unruly bystanders.

The screenplay is based on the book "Black Flies" by Shannon Burke, a medic in Harlem in the '90s, though what's seen on the screen has evolved, said Sheridan.

In the film, both characters are also dealing with personal turmoil. Penn's character grapples with burnout, emotional scars from years on the job, and the breakdown of his marriage. Sheridan's character struggles financially, is unprepared for the tragedies he's about to witness, and searches for meaning in his work.



Reviewers have called the movie grim, blood-soaked, and bleak, but also hyperreal and authentic.

Viewers will need to decide what they think of the film's dark themes – whether it makes EMS seem like an unattractive field, or if the depiction shows the power of EMS practitioners to save lives that will help the public appreciate the heroes in their midst.

You might recognize Sheridan from his previous roles in "X-Men: Apocalypse," and "Ready Player One." He spoke with *NAEMT News* about doing months of ride-alongs with crews from Wycoff Heights Medical Center in Brooklyn to prepare for the role, working with Sean Penn, and what he learned about EMS in the process.

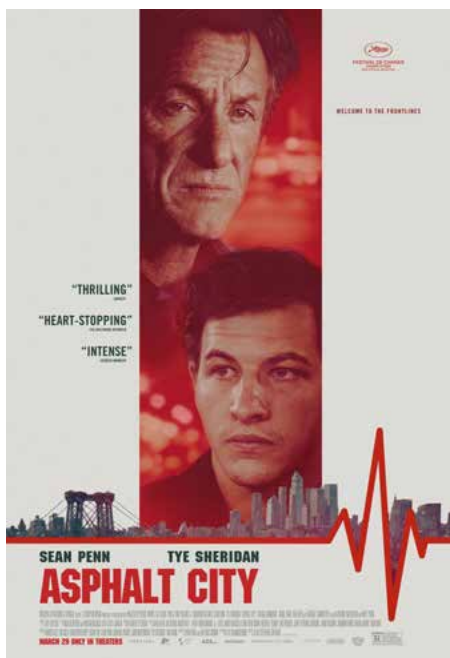
What made you interested in telling this story of paramedics?

We've been trying to make the film since 2018. It's been a labor of love for many years. Part of the drive that we had for the project is because we got to know the EMS community and got to know how unique they are, and how special they are.

Being a paramedic is the type of job I would probably never do in my personal life because I'm a bit squeamish when it comes to broken bones and blood. So it was a cool opportunity for me to learn about people who are such crucial members of our society. They're the people that you call in your worst moments, so they carry a big responsibility. I admire them for many reasons, but mostly for their ability to continue doing the job every day, from call to call, even when there is a lack of understanding from the general public. The EMS community knows they are doing something special, and that's why they're doing it. It's not for the thanks they get, although that would be nice.

Speaking of that, in one of the scenes, a medic remarks that it's been 17 days since anyone had said "thank you." What did you learn about the toll the job can take on EMS practitioners?

Over the years, I got really close with the EMS community. I heard a lot of stories,



and a lot of those stories made their way into the film. We wanted to make sure that we were conveying the lives of medics in the most authentic way. For us to make it look real, we were doing ride-alongs three or four nights a week, spending hours in the classroom learning how to do CPR, give IVs, learning how to intubate, and learning about this community.

One of the things I was most interested in as an actor was, how are they when they're off a call? What are they talking about? How are they with their patients? Different medics have different styles. So it was interesting to witness that. The guys that I would do ride-alongs with would tell me, "Oh, yeah, this is my third 12-hour shift, back-to-back."

Being a medic is definitely a job that is largely misunderstood and potentially undervalued. They are really important people. They should have more respect. They should definitely be paid more. And I think they should have more support for their mental health. And that's largely what this film explores.

While riding out with crews, did anything surprise you?

The most shocking things are when medics show up to certain calls, sometimes they're getting yelled at, they're getting distracted, or people are pushing them. The movie touches on some of these things. That's wild. The last thing I would think to do is to give them grief while they're trying to save someone's life.

The other shocking thing was that you never know whose house you're walking into. That was one thing that I found



beautiful about the job. No one ever plans for an accident. You show up and you walk into somebody's house. There are five kids running around. The TV's blaring. They're in the middle of cooking dinner. You can smell all the smells, and grandma's lying on the floor, underneath all the portraits of the entire family. So you get a really intimate look at people's lives, sometimes in their worst moments. That's fascinating.

Being a medic is definitely a job that is largely misunderstood and potentially undervalued. They are really important people. They should have more respect.

What was it like working with Sean Penn?

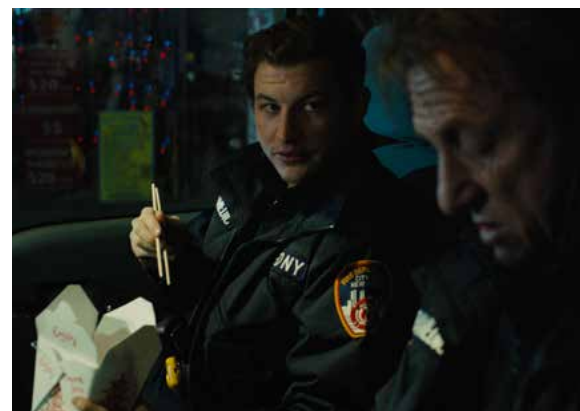
Sean is a very intense guy, in a great way. He's very engaged in whatever he's doing. And I think he was especially engaged in the process of the research and the preparation for this role. We were doing a lot of classroom sessions and working with medics together to learn how to be partners.

Have you gotten feedback from medics about whether they found the film authentic?

Oh yeah, and that is the biggest compliment you could ask for. That was the goal, to shine a light on the community and to give the general public a closer look at their lives and what they endure on a day-to-day basis, and why they're so important and why we should respect them more and be grateful for the role that they play in society.

This May was the 50th anniversary of EMS Week, the national observance celebrating EMTs and paramedics and everyone in EMS who gives so much to their communities. Having made "Asphalt City," do you have a message for EMS?

Thank you so much for all that you do. I appreciate you. We appreciate you. In the New York EMS community, we had 11 or 12 suicides since 2020. Mental health is an issue for folks in this community. It's normal if you get down while you're doing this job. We need to come together and support medics and their mental health. It's really brave what they do, and the more support we can provide the better.



NAEMT MEMBERS

Please Join Us at the **2024 NAEMT Annual Meeting** In Las Vegas

Attending the NAEMT Annual Meeting is a great way to get more involved with your association, hear association updates, meet our leadership, network with your EMS colleagues and make new connections.

NAEMT's Annual Meeting is held in conjunction with EMS World Expo in Las Vegas. You may want to take time out to enjoy the city's exceptional dining, entertainment and nightlife. You won't want to miss this!

General Membership Meeting and Awards Presentation

Tuesday, Sept. 10
5:30 p.m. to 6:45 p.m.

We'd be delighted to see you! NAEMT members are warmly invited to attend, at no cost. Association leadership will recap the year's major initiatives and honor recipients of the National EMS Awards of Excellence.

NAEMT Member Reception

Tuesday, Sept. 10
6:45 p.m. to 8:30 p.m.

Immediately following the awards presentation, please join us for refreshments and a relaxed evening with your EMS colleagues and friends.



Other Events

NAEMT members are also invited to attend meetings of:

- ✓ **NAEMT Board of Directors**
Monday, Sept. 9
8 a.m. to 11 a.m.
- ✓ **Regional European Education Committee**
Wednesday, Sept. 11
8 a.m. to 9:15 a.m.
- ✓ **Latin American Education Committee**
Wednesday, Sept. 11
11 a.m. to 12:15 p.m.
- ✓ **Mideast Education Committee**
Wednesday, Sept. 11
12:30 p.m. to 1:15 p.m.
- ✓ **Asia Education Committee**
Wednesday, Sept. 11
12:30 p.m. to 1:15 p.m.

Some Annual Meeting events are by invitation only. They include the National EMS Leaders Meeting and Luncheon hosted by the Affiliate Advisory Council, the International Reception, the Lighthouse Leadership Class of 2024 Graduation, and the NAEMT Faculty Meeting and Reception.

NAEMT Members Save \$125 on the 3-Day EMS World Expo Registration

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For a full schedule of events, visit naemt.org > Events > NAEMT Annual Meeting.

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NAEMT's preconference workshops at EMS World Expo showcase three of NAEMT's internationally respected, evidence-based courses.

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➔ **REGISTER TODAY!** hmpglobevents.com/emsworldexpo/preconference-workshops

ONE-DAY COURSES

All Hazards Disaster Response (AHDR) 2nd Edition Provider Course

Monday, Sept. 9
8 a.m. to 5 p.m.



AHDR teaches students how to respond to many types of disaster scenarios, including natural disasters, infrastructure failings, fires, radiological events, pandemics, active shooter incidents, and other mass casualty incidents. AHDR educates participants on:

- Elements of an Incident Command System
- Crew resource management
- Communicating effectively during disasters
- PPE and infectious diseases
- Mutual aid and interoperability
- Triage and transport strategies and challenges
- Patient tracking and evacuation
- Hazmat disasters

Content is presented in the context of case studies and disaster simulations. Course activities reinforce key concepts of disaster response.

Participants receive 8 hours of CAPCE-approved credit. Course manual included.

Mental Health Resilience Officer (MHRO)

Tuesday, Sept. 10
8 a.m. to 5 p.m.



Due to the difficult environments EMS personnel encounter every day, and the impact of both direct and vicarious trauma, our EMS workforce has long faced a disproportionate challenge in maintaining their mental health resilience.

MHRO assists EMS agencies in building and supporting the mental health resilience of their personnel. MHRO prepares EMS personnel to serve as their agency's mental health resilience officer. MHRO's engage with peers to develop an understanding of mental health issues and resilience, identify peers who are experiencing mental health stressors and crises, navigate peers in need to the right services for help, and support the development of a culture of mental health resilience and emotional wellness within the agency.

Participants receive 8 hours of CAPCE-approved credit.

TWO-DAY COURSE

Advanced Medical Life Support (AMLS) 4th Edition

Monday, Sept. 9 and
Tuesday, Sept. 10
8 a.m. to 5 p.m.



Endorsed by the National Association of EMS Physicians, AMLS emphasizes the use of the AMLS Assessment Pathway to best manage patients in medical crises. The AMLS 4th Edition includes all new case-based presentations and patient simulations.

Participants learn to recognize and manage common medical crises through realistic case-based scenarios that challenge them to apply their knowledge to highly critical patients. Topics include pharmacology, respiratory disorders, cardiovascular disorders, shock, sepsis, women's health, neurologic disorders, endocrine/metabolic disorders, environmental emergencies, infectious diseases, abdominal disorders, and toxicologic emergencies.

Participants receive 16 hours of CAPCE-approved credit. Textbook and course manual included.

Trauma Innovations – Transforming Prehospital Care

Register Now for the World Trauma Symposium 2024

Please join us for the World Trauma Symposium: Trauma Innovations– Transforming Prehospital Care on Tuesday, Sept. 10! The event provides a day of thrilling presentations and panel discussions on prehospital trauma care, presented by global experts in civilian and military trauma response.

The event will be offered both in-person at EMS World Expo in Las Vegas and livestreamed.

Event moderators are Col. (Ret.) Warren Dorlac, FACS, USAF, and CAPT Margaret Morgan, MD, FACS, MC (FS/FMF), USNR. Dorlac is medical director for NAEMT's Prehospital Trauma Committee and Morgan is associate medical director.

Some speakers are still being finalized, but here is a preview. *Look for more info in your email and at naemt.org > Events > World Trauma Symposium.*



Register Today at
emsworldexpo.com

NAEMT members: Select NAEMT Member Passes to get your \$125 discount on a 3-day Main Conference Pass.

Advanced registration: \$225 for the in-person event/\$130 virtual*

*Physician rate is \$255 for the in-person event/\$160 virtual

Challenging the Dogma in Trauma Resuscitation: What We Should and Should Not be Doing

Zafir Qasim, MD, FRCEM, EDIC

Turning the Tables on Active Shooter Events: Proven Strategies that Save Lives

Kevin Mackey, MD

Falls in the Elderly: The Gravity of This Epidemic for EMS

Douglas Kupas, MD

Prehospital Ultrasound for Traumatic Resuscitation

Rudy Cabrera, RN, BSN, EMT-P

Don't Panic: EMS Essentials of OB Trauma Emergencies

Rickquel Tripp, MD, MPH, LCDR, USNR

Freeze-dried Plasma: The Golden Ticket for EMS?

Andrew Cap, Col. (Ret.), MS, MD, PhD, FACP

Traumatic Stress in Prehospital Clinicians

Caitlin L. Castle, Capt., USAF, MC

Traumatic Brain Injuries: Updates from the EPIC Study

Bruce Barnhart, MSN, RN

Noncompressible Truncal Hemorrhage

David King, MD

Lessons Learned from MCI Response

Jennifer Wyatt, Dep. Fire Chief of EMS, Clark County

YOUR **STORY** MATTERS

Held in partnership with NAEMT, EMS World Expo returns to the Las Vegas Convention Center, this September 9–13. Join fellow NAEMT members and EMS colleagues from around the world for 5 days of hands-on training, networking, exhibits, and more.

2024 HIGHLIGHTS

- 200+ Available CE Credits
- 300+ Exhibitors spread across more than 100K sq. ft.
- 230+ Speakers—the best EMS educators all in one place!
- Exclusive workshops and special events, like the Wellness Hub, Ambulance Marketplace, and more

Register Today!
emsworldexpo.com/rates

NAEMT MEMBERS

Save \$125* on registration with the NAEMT member rate! Registration rates increase July 27.

3-DAY CONFERENCE NAEMT MEMBER RATE

Early Bird Pricing: \$450
(Expires 7/26/24)

Regular Rate: \$505
(Begins 7/27/24)

*NAEMT discount applies to a 3-day conference pass only.





Joint Position Statement on EMS Performance Measures Beyond Response Times

The NAEMT Board of Directors and 14 other EMS organizations adopted a joint position statement encouraging EMS systems and community leaders to prioritize patient-centered care and use a broad, balanced set of measures to evaluate EMS system effectiveness.

Performance measures should go beyond response times and include clinical, safety, experiential, equity, operational, and financial domains.

The majority of 911 EMS responses do not require a response in under 10 minutes, the statement says. "Reliance solely on response time performance increases the cost of EMS and the risk of EMS vehicle crashes. It also prevents communities from evaluating other EMS system quality measures that demonstrate system effectiveness for patient care, experience, and outcomes."

Letters to Congress: Fund SIREN Grants, Protect Add-On Payments

NAEMT and eight other EMS and fire organizations asked Senate and House Appropriations Committee leaders for \$32 million in Rural EMS Training, Equipment and Assistance Grant (REMSTEA) funding in fiscal year 2025. Also known as the SIREN grants, the program was funded to \$10.5 million in fiscal year 2023. The grants can be used for recruitment or retention of EMS personnel, training and education, or purchasing equipment and supplies. NAEMT President Susan Bailey also provided written testimony requesting that Senate and House Appropriations Subcommittees on Labor, Health and Human Services, Education and Related Agencies fund the SIREN grants to \$32 million.

NAEMT, the American Ambulance Association, and the National Rural Health Association sent a joint letter to U.S. Reps. Brad Wenstrup (R-OH), Terri Sewell (D-AL), Earl Carter (R-GA), and Paul Tonko (D-NY) to thank them for their support for the Protecting Access to Ground Ambulance Medical Services Act of 2023 (H.R. 1666). The four representatives introduced the bipartisan bill in 2023. The bill extends the Medicare ambulance add-on payments for another three years.

Twenty-nine members of Congress signed on to a letter to the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies on behalf of EMS. The letter requests

Welcome New Advocacy Coordinators!

Do you have an interest in having an impact on the issues facing EMS in your state? Consider applying to become an NAEMT advocacy coordinator.

NAEMT advocacy coordinators support NAEMT's advocacy efforts in their state. Advocacy coordinators help NAEMT build a network of grassroots supporters, and communicate NAEMT positions to elected officials and other policymakers.

If you're interested in becoming more involved with NAEMT, becoming an advocacy coordinator is a great place to get started. Advocacy coordinators also attend monthly virtual briefings hosted by NAEMT with their colleagues from around the nation, helping to build your professional network and connect with others who are also interested in making an impact.

NAEMT is pleased to welcome our newly appointed advocacy coordinators:

- Francine Giono Janik, Montana
- Kevin Miller, Iowa
- Diana Osborn, Vermont



Several states have open advocacy coordinator positions. To learn more or apply, visit naemt.org > Advocacy > Advocacy Coordinators.

that the subcommittee's 2025 appropriations bill include language directing the Administration for Strategic Preparedness and Response (ASPR) and the National Highway Traffic Safety Administration (NHTSA) to address EMS readiness challenges and the workforce shortage.

House Ways and Means Committee Holds Hearing on Ambulance Deserts

Congressional members of the House Ways and Means Committee held a hearing in Denton, Texas, this spring on ambulance deserts and rural EMS.

NAEMT Director Matt Zavadsky and Dr. Ed Racht, chief medical officer for Global Medical Response, provided expert testimony.

We are incentivized to transport every patient to the emergency room because that is the only way we are paid by CMS

Zavadsky discussed the success of mobile integrated healthcare programs in navigating frequent 911 callers to

alternate sources of care. He also spoke about the need to support treatment in place legislation to strengthen access to emergency care and ensure EMS remains viable.

"We are incentivized to transport every patient to the emergency room because that is the only way we are paid by CMS," Zavadsky told the committee, which was held in a GMR air medical hangar.

Racht spoke about cost of 24/7 EMS readiness. "We've made tremendous strides in being able to decrease morbidity and mortality from out-of-hospital acute illness and injury," Racht said, pointing to advances in stroke, heart attack, and trauma care.

He noted that training, equipping and staffing EMS agencies to respond at a



moment's notice is costly, and EMS needs more resources to face those challenges.

"We struggle with recruiting. We struggle with retention. Many critical access hospitals have closed their doors. We are the front of the front lines of medicine," he added.

PROTECT Your Team

Become an EMS Safety Officer

NAEMT's **EMS Safety Officer (ESO)** course teaches EMS personnel to put safety front and center. From taking care of patients to taking care of crews, vehicles and facilities, ESO advances your safety knowledge and helps you protect your workforce.



- Online course available at your convenience
- Learn scene, patient and personal safety, infection control, and injury prevention best practices
- Enhance your career – become your agency's EMS Safety Officer
- 5-hours CAPCE-approved credit



LEARN MORE AT [NAEMT.ORG/EDUCATION](https://naemt.org/education)



EMS

On The Hill Day

NAEMT HOSTED A SUCCESSFUL EMS ON THE HILL DAY ON APRIL 18 IN WASHINGTON, D.C.

The event drew 220 EMS professionals from 44 states and the District of Columbia for a day of sit-down meetings with elected officials and their staff to build support for vital EMS legislation.

Shannon Watson, NAEMT director and regional practice administrator for BJC Corporate Health Services, has attended three times. Calling the experience “incredibly rewarding,”

Watson said the interactions with members of Congress “are invaluable to advancing our profession and ensuring that the voices of EMS professionals are heard and considered in legislative decisions.”

“Joining this effort has shown me the power of our collective voice in advocating for the EMS profession and influencing legislative change,” Watson said.

EMS advocates shared their experiences in the field and educated members of Congress on why the EMS

workforce, patients and communities need their support on the SIREN grants, reimbursement for treatment in place (TIP), and mobile integrated healthcare and community paramedicine.

The evening before heading to Capitol Hill, participants met at the Crystal Gateway Marriott in Arlington, Virginia, for a briefing and welcome reception. After the Hill Day meetings, participants met up at the host hotel to debrief, unwind, and enjoy refreshments with their colleagues from around the nation.



2024



195
Meetings



THANK YOU to Sen. Peter Welch and Rep. Mike Carey, NAEMT's **EMS Legislator of the Year Award** Recipients



NAEMT thanks and congratulates Sen. Peter Welch (D-VT) and Rep. Mike Carey (R-OH), who were selected as this year's NAEMT EMS Legislator of the Year Award recipients.

The awards recognize members of Congress who demonstrate outstanding support for EMS and the professionals who dutifully serve their patients and communities.

"We are fortunate to have two Congressional champions advocating for the EMS profession and our future. EMS agencies, paramedics and EMTs provide medical treatment and preventive care services in their communities every day and often without being reimbursed. They provide care in the home, in remote rural areas, and in precarious environments where their own safety may be at risk to ensure every patient receives the care they need," said NAEMT President Susan Bailey. "Sen. Welch and Rep. Carey recognize the imbalance between the funding and service provided and are supporting legislation to bring those points into alignment. They have our sincere gratitude."

Welch introduced S. 3236, the Emergency Medical Services Reimbursement for On-Scene Care and Support Act (EMS ROCS), which directs the Medicare program to reimburse EMS for providing care on scene without transport.

Carey has educated members of the House Ways and Means Committee on the importance of treatment in place (TIP) legislation. He also plans to introduce the Improving Access to Emergency Medical Services Act, which would create a pilot program to test a treatment-in-place model for Medicare beneficiaries.



44
States
Represented



220
EMS
Participants



Congratulations to the 2024 NAEMT EMS Advocate of the Year Award Recipients

EMS Advocate of the Year Awards recognize EMS professionals whose volunteer efforts advance EMS through educating and engaging elected government leaders, the EMS community, the wider healthcare community, and the public. Recipients were honored on April 17 during the EMS On The Hill Day briefing.



Michael Loiz
Paramedic/EMT-P

Michael Loiz has served EMS and public safety for over 34 years. He is chief of Stratford EMS, a paramedic, and EMS instructor. He is also a public safety consultant and expert witness through his company, The Public Safety Consulting Group. He is the NAEMT Advocacy Coordinator for Connecticut and serves as the Connecticut EMS Advisory Board legislative chair. Two recent advocacy achievements were garnering support for EMS practitioners with post-traumatic stress disorder (PTSD) and obtaining increased reimbursement for EMS agencies from Medicare and Medicaid. Loiz uses social media to inform and engage his advocacy network. He created templates to make it easier for EMS practitioners to offer testimony on bills, and includes legislative overviews in the courses he teaches to nurture EMS advocacy in his students.



Scott Willits
NRP, BS, CPC

Scott Willits is a seasoned EMS advocate and leader. He is dedicated to advancing patient-centric healthcare delivery through mobile integrated healthcare and community paramedicine (MIH-CP). Willits has traveled to Washington, D.C., to advocate for paramedics providing on-scene care and coordinated scenarios for members of Congress and their staff to experience receiving such care. Willits has built relationships with elected officials and industry leaders, and has participated in many workgroups, organizations, and local/regional advisory groups to build support for MIH-CP. He has contributed to the success of key legislation, such as increased Medicaid rates for MIH-CP services and a new pathway for reimbursement of public MIH services. As NAEMT Advocacy Coordinator for Oregon, he encourages others to get involved with EMS advocacy.

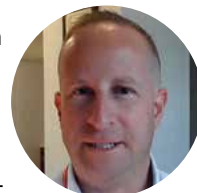


Cathryn "Catie" Holstein
BA, Paramedic

Catie Holstein is the State EMS director for Washington. She began her EMS career as a firefighter-EMT and then became a paramedic. She regularly responds to inquiries from legislative staff, aggregating input from stakeholders to provide an issue assessment and potential solution. She educates elected officials about EMS issues and ways they can support the EMS profession. Holstein has built strong relationships with elected officials and their staff through networking, attending events such as town halls and committee meetings, and engaging in meaningful communication. Local officials turn to her as an expert on EMS policy. Holstein motivates others in the EMS profession to engage in grassroots advocacy by highlighting the impact of their work. She provides accessible resources, encourages stakeholders to connect with their elected officials, and stresses the importance of collective action.



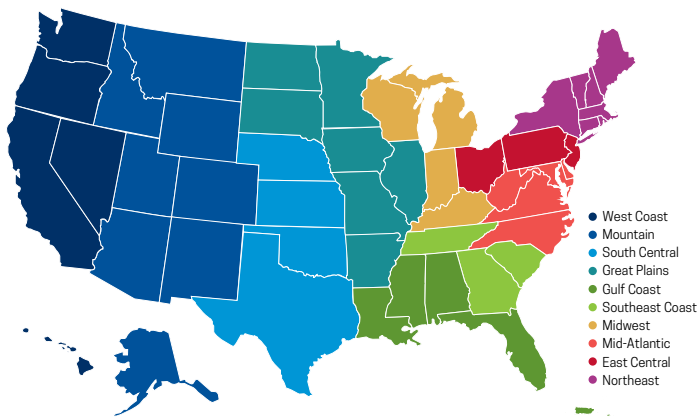
“Most departments struggle with getting their EMS clinicians time off the street to come in and do traditional education. We need an efficient way to deliver content. Recert is an example of an outstanding platform that delivers evidence-based prehospital medical content that can be consumed by emergency responders any time of day.”



David Vitberg, MD
Assistant Medical Director, Washington, D.C.
Fire & EMS / Recert Medical Director

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psglearning.com/recert

Call for Candidates for the 2025-2026 NAEMT Board



NAEMT is seeking candidates for the NAEMT Board of Directors for the 2025-2026 term. Volunteer leaders fulfill a vital role in guiding and overseeing NAEMT activities, and ensuring its mission and goals are achieved.

NAEMT Board members provide strategic direction, assist with governance, provide financial oversight, and represent the association and its members to stakeholders, partners, elected officials, regulators and the public. Board members also advocate for the organization's interests and build relationships to support its mission.

Open Positions

NAEMT has five open director positions and three open officer position for the 2025-2026 term:

Officers

- President-elect
- Secretary
- Treasurer

Directors

- **Region 1 Northeast**
CT, MA, ME, NH, NY, RI VT
- **Region 5 Gulf Coast**
AL, FL, LA, MS, PR, USVI
- **Region 7 Great Plains**
AR, IA, IL, MN, MO, ND, SD
- **Region 8 South Central**
KS, NE, OK, TX
- **Region 10 Mountain**
AK, AZ, CO, ID, MT, NM, UT, WY

Who is qualified to run for the board?

To serve as a director, you must be an active NAEMT member for at least two consecutive years immediately preceding the election; demonstrate commitment to the association by participating in association programs or activities; and reside in the region that you will represent.

Find full eligibility details at naemt.org > About NAEMT > Board of Directors > Elections.

Election Timeline

July 15 to Aug. 15 – Candidate submissions accepted.

Oct. 1 to 28 – Candidate statements posted online along with each candidate's responses to questions posed by the NAEMT Candidacy and Elections Committee.

Oct. 15 to 28 – Online voting is open.

Please Vote!

We urge active NAEMT members in regions with open seats to cast their vote in the NAEMT Board elections.

To receive notice when online voting is open, please make sure your membership is up to date, and that your member profile includes current information, including a valid email address.

Paper ballots are available by written request to NAEMT no later than Oct. 1.

Need to renew your membership?

To renew or upgrade your membership, or update your member profile? Login to the Member Portal at naemt.org. Or contact membership@naemt.org or call 1 (800) 346-2368.

Notice of Proposed Change to NAEMT Bylaws

The NAEMT Board of Directors has proposed a change to our association bylaws. To be enacted, a majority of NAEMT active members must approve them.

The proposed bylaw change will be included in this fall's election ballot, which will be accessible to active members from October 15 to 28. Members eligible to vote will receive an email announcing that voting is open on October 15. If approved by members, this change will become effective on January 1, 2025.

Section 5.2.1, "Qualifications for Directors"

This section defines the qualifications for serving on the NAEMT Board of Directors. The change removes the requirement of serving "an average minimum of 15 hours per week" in a capacity as an EMS practitioner, EMS manager, or EMS instructor of continuing education as defined in the Operational Policy for Candidacy and Election of Officers and Directors.

Reason for the change:

After the 2023 election, it was determined that the changes made to the bylaws the previous year were too restrictive. This change will allow more members to run for positions on the NAEMT Board.

Visit naemt.org > About NAEMT to view NAEMT bylaws.

New Episodes: NAEMT Radio

NAEMT's podcast series – NAEMT Radio – continues with new episodes twice a month. Host Rob Lawrence welcomes EMS thought leaders and innovators for conversation and debate on topics in EMS clinical practice, operations, finance, and more.

Find these episodes and more at naemtradio.podbean.com.

- ✓ **Lights and Sirens Reduction** – North Carolina's Mecklenburg EMS Agency reduced lights and sirens use by 70% and decreased medic-involved traffic incidents by 78%. Steve Wirth, Esq. and John Peterson, executive director of Mecklenburg EMS Agency, explore the risks, liability, benefits, and outcomes of lights and siren reduction.
- ✓ **EMS On The Hill and NAEMT Legislative Issues** – NAEMT President Susan Bailey and President-elect Chris Way discuss treatment in place, the SIREN Grants, the Community Paramedicine Act of 2024, and other bills and issues advocated for during EMS On The Hill Day.
- ✓ **EMS Apprenticeship Programs** – Henry Lewis, South Carolina EMS Association executive director, and Lt. Joseph Coley of Tazewell EMS in Virginia, explain funding, startup, candidate selection, and results for apprenticeship programs.
- ✓ **Prehospital Antibiotics for Open Fractures** – Dr. Douglas Kupas, EMS physician and NAEMT medical director, and Dr. Joey Johnson, associate professor of orthopedic surgery at University of Alabama at Birmingham, present research on the benefits of early systemic antibiotic administration by EMS to reduce infections.
- ✓ **Community Population Health Needs Through MIH-CP Programs** – Melinda Wilson, community paramedic for a hospital-based EMS system in Tennessee, and Justin Duncan, CEO for Washington County Ambulance District in rural Missouri, share insights from their mobile integrated healthcare-community paramedic programs.
- ✓ **Prehospital Obstetric Care: The Rise in U.S. Maternal Morbidity/Mortality** – Dr. Emily Nichols, who has board certifications in adult and pediatric emergency medicine, addresses the rise in maternal morbidity and mortality and the role of prehospital obstetric care in improving outcomes.



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NAEMT Webinars

Free CE for NAEMT Members

Take advantage of one of NAEMT's most valuable member benefits! Earn free CE while learning about essential topics in EMS clinical care and operations with NAEMT webinars.

NAEMT webinars are presented by leading experts. Topics range from managing difficult airways to preparing for EMS disaster response to cybersecurity readiness for EMS agencies.

To earn free CE, NAEMT members must attend the *live* webinars. Recorded webinars are available for on-demand viewing at any time in the NAEMT Member Portal at naemt.org.



RECORDED Redesigning Your Emergency Medical System for Financial Sustainability

Staffing shortages and funding gaps are creating an opportunity to redesign EMS delivery models based on clinical evidence and economic realities. This fast-paced webinar provides EMS agency leaders and local officials with the tools to critically evaluate the economic value of EMS, so they can re-tool models for future sustainability – and we'll bust some long-held myths along the way! Join presenters Dr. Douglas Kupas, NAEMT medical director and president-elect of the National Association of EMS Physicians (NAEMSP); Thomas Wiczorek, director of the Center for Public Safety Management (CPSM); and Matt Zavadsky, chair of the NAEMT EMS Economics Committee as you learn:

- Five key metrics to benchmark the performance of your EMS system.
- The four most common myths about EMS delivery.
- Three major system redesign strategies to improve your EMS system's clinical, operational, and financial performance.

RECORDED Leadership Webinar Series: Professionalism – A Study of Workforce Behaviors

EMS agencies are facing critical shortages of personnel. The solutions for finding and keeping more of the right people seem unreachable when reimbursement or tax support for EMS agencies is decreasing, expenses are increasing, and many organizations are asking more and more from their personnel. As the war for talent heats up, what role does culture and employee engagement play? Can building an amazing culture, that people want to engage in, provide a possible solution to attracting and retaining personnel? Join Aaron Reinert, NRP, MAOL, SafeTech Solutions partner, as he defines maturity and how it differs, according to research, based on generations. Learn how to identify actions and behaviors that are consistent with an immature versus a mature response, and tools to aid others in developing and strengthening their own maturity. and poses questions to get you thinking about whether your approach really is best for your community. The webinar covers patient access to care and community-focused EMS system of care designs, the individual components of equal coverage/response versus equitable coverage/response, and elements of crew resource management with respect to EMS agency/system coverage and response operations.

Leadership Webinar Series

Professionalism is Part 2 of a four-part webinar series, sponsored by SafeTech Solutions and presented by Aaron Reinert.

Parts 1 and 2 Organizational Culture and Employee Engagement, and Professionalism, are available for viewing in the NAEMT Member Portal.

Look for registration info for upcoming webinars in *NAEMT Pulse* and in your email. Mark your calendars!

Part 3 Influence – How to Help Others See What You See
August 27, 11 a.m. CT

Part 4 Crucial Conversations – Mastering the Art of Difficult Conversations
November 19, 11 a.m. CT

Deb Lally Joins NAEMT to Advance Advocacy, Education and Membership Initiatives

NAEMT was pleased to welcome Debra L. Lally, CAE, as its new executive director, effective July 1. Lally will draw from her nearly 20 years of association leadership and work with the NAEMT Board to strengthen NAEMT's foundational pillars of EMS advocacy, education, and membership. Lally will bolster NAEMT's relationships with federal leaders, state EMS affiliates and other key stakeholders to advance our mission of representing and serving paramedics, EMTs, and support personnel at all levels.

NAEMT President Susan Bailey, MSEM, NRP, commented: "Deb's expertise will complement existing association resources and knowledge to propel NAEMT's mission in the future. Her ability to build and reinforce relationships, and

nurture new pathways for collaboration, will help position NAEMT's programs and initiatives for success. We look forward to seeing how Deb's contributions translate into the next level of service and support for our members."

Based in Massachusetts, Lally most recently served as executive director/CEO of ACE International, a professional engineering association. She has also held executive leadership roles at the Massachusetts League of Community Health Centers and AHRA: The Association for Medical Imaging Management. Prior to that, she spent a decade in the scientific and medical publishing industry. Lally earned the Certified Association Executive (CAE) credential in 2017 and has extensive experience in member engagement, edu-

cation development, strategic partnerships, and fiscal and resource management.

"I am excited and humbled to serve members who dedicate themselves to meeting the health and medical needs of their communities," said Lally. "Having first responders and public health professionals in my family, I understand why NAEMT members need more support in overcoming the challenges they face. My goal will be to empower and engage the NAEMT Board, staff, members, and industry stakeholders in order to build relevant and sustainable programs and services. I look forward to helping further integrate EMS into the broader healthcare continuum and grow with the changing needs of the communities that paramedics and EMTs serve."

In Memoriam James B. Allen and Nathan Williams Jr.



James B. Allen



Nathan Williams Jr.

The NAEMT family was deeply saddened by the passing of two of our past-presidents, James B. Allen and Nathan Williams Jr.

James B. Allen was NAEMT president from 1996-1998. A gentleman of the South who made friends everywhere he went, Allen loved the EMS profession and helped to build momentum for it. Serving just after NAEMT's 20-year anniversary, he initiated the development of NAEMT's pediatric course and explored a new course focused on assessing and treating emergency

medical problems that became Advanced Medical Life Support. He also spearheaded the launch of NAEMT's first website.

Allen was a career firefighter and paramedic in Clinton, Mississippi. He retired as a captain. In the mid-1980s, Allen, a pioneer in EMS, was instrumental in bringing a paramedic program to central Mississippi.

"Jim was not only a leader but a beacon of kindness and integrity in the EMS community. With a heart as vast as his vision for the profession, he consistently placed patients and their care at the forefront of his efforts. Under his leadership, initiatives aimed at improving patient care saw remarkable advancements, echoing his belief that at the heart of EMS is the welfare of those in need," said Dan Limmer, a colleague.

Nathan Williams Jr. was NAEMT president from 2000-2002. A man of integrity and stature, Williams guided NAEMT through

one of our nation's darkest periods – the 9/11 terrorist attacks. His unwavering commitment to the EMS profession and passion for improving patient care persevered, and under his leadership, NAEMT rolled out what would become Emergency Pediatric Care (EPC). He also solidified the partnership for the NAEMT Annual Meeting to be co-located with EMS World Expo.

Williams began his career as an EMT at University of Missouri Hospital. In 1979, he joined the Columbia Fire Department as a firefighter. He retired as a division chief in 2004. In addition to NAEMT, he was also deeply involved with MEMSA (Missouri Emergency Medical Services Association).

"Nathan was a great leader and an all-around good person," said NAEMT Immediate Past-President Bruce Evans. NAEMT President Susan Bailey called him a "true advocate for NAEMT."

Unlock Your Potential

Apply for an NAEMT Scholarship

NAEMT scholarships help support EMS professionals seeking to advance in their education and careers. We offer Active members a variety of scholarship opportunities. Scholarships are generously sponsored by NPPGov and Page, Wolfberg & Wirth.

- First Responders (to become an EMT-Basic): Up to \$500 each.
- EMT-Basics (to become a paramedic): Up to \$5,000 each.
- Paramedics (to advance their education in the realm of EMS): Up to \$2,000 each.

Applications accepted: July 15-Sept. 15

We're also thrilled to announce that Columbia Southern University will now offer NAEMT members two annual scholarships. The NAEMT-CSU scholarships cover up to 60 credit hours toward an online degree program.

Applications accepted: July 30-Oct. 31

To learn more or apply, log in to the Member Portal at naemt.org and select "Scholarships."

EMT-Basics



Lisa Pratt
Wareham, MA



Kathryn Henze
Kansas City, MO

Paramedics



Sarah Brann
Winfield, AL

Hear from Our Past Scholarship Recipients

We checked in with a few of our past scholarship recipients to see the impact the scholarship has had on them.

I want to become a paramedic and help my patients on an advanced level. Having said that, the NAEMT scholarship gives me the opportunity without having to stress about the financial part of it. My husband works three jobs to support myself and son. Without this scholarship and support from my family, going back to college would not be possible.



Amanda Nikolaidis

Volunteer EMT, Pompton Lakes Riverdale First Aid Squad and EMT, Morris County Office of Emergency Management, Parsippany, NJ

I sat down with my family after getting my advanced EMT about going on finish as a paramedic. They were 100% on board. With two grown sons and both special needs this was a blessing. More so of a blessing after my husband passed away midway through school. I soldiered on and hope to graduate in about three months with my husband cheering on from heaven. He was my biggest cheerleader, and I want to do him proud.



Barbara Jackson-Haney

Advanced EMT, Pafford Medical Services, Faulkner County, AR



In Case You Missed It!

2023 ANNUAL REPORT

The 2023 NAEMT Annual Report is available at naemt.org/about-naemt. The report highlights our association's accomplishments and activities, as well as the contributions of the volunteers and partners who help make NAEMT a success.

The theme of the report is "Empowering the EMS Profession – Advocacy. Education. Connection."

Thank you for your continued support as we work together to advance EMS for our workforce, patients and communities!



JenaLu Simpson (far right), NAEMT's Membership Coordinator for Oklahoma, and friends at State EMS Association Networking Meeting.



Charles Geary of Twin District Volunteer Fire District shows off his raffle win with NAEMT's Tammie Patterson at FDIC 2024.



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NAEMT Welcomes New Board Member

NAEMT President Susan Bailey has appointed Howard R. Schwartz, NRP, CP-C, to the NAEMT Board to fill a vacancy in the East Central Region.

Schwartz is a nationally registered paramedic and a board-certified community paramedic with 38 years of experience. He has worked in hospital-based, nonprofit, and municipal EMS systems. Along with serving as a paramedic in Pennsylvania and New Jersey, he worked as a flight paramedic in Arizona on both rotor and fixed-wing aircraft. While in Arizona, he was a regional coordinator/program manager for the Arizona Department of Health Bureau of EMS, where he worked with many of the state's EMS training programs and hospitals.

In 2003, he and his wife Joan returned to Pennsylvania, where he spent many years serving the community where he grew up and his EMS career began. After volunteering as a board member for a local nonprofit EMS agency, in 2023 he became operations director for Northern Valley EMS near Allentown, Pennsylvania.

Schwartz's diverse career has provided him with experience and insight into many different aspects of EMS. He has been a member of NAEMT and served on the Membership Committee for many years and has been a frequent participant at EMS On The Hill Day. He has also been asked to testify many times in front of state and federal elected officials regarding a variety of EMS issues.

His wife Joan is a radiation-oncology RN. They have two dogs, Henry and Dixie (yes, a reference to Emergency!). After participating in his first National EMS Memorial Bike Ride more than 15 years ago, he became an avid long-distance cyclist. In 2016, he was part of a group that organized Pennsylvania's first annual EMS Memorial Bike Ride. Since then, he has been instrumental in planning each year's ride, which culminate at the state capital with the annual EMS Memorial Service.

Welcome New Agency Members

NAEMT warmly welcomes our newest agency members:

- Norwood Fire Protection District, Norwood, CO
- Superior Mobile Health, San Antonio, Texas

Special offer! Sign up to become an NAEMT agency member to receive complimentary access to NAEMT's Mental Health Resilience Officer (MHRO) course. MHRO is an online course that prepares EMS personnel to identify peers experiencing mental health stress, navigate them to the right services for help, and support a culture of mental health resilience and emotional wellness in their agency.



COME SEE US

We love meeting our members in person! If you're attending one of these conferences, please drop by the NAEMT booth to renew your membership, pick up a copy of our latest publications, and receive a warm welcome from our team.

JULY 31-AUG 4	Arkansas EMT Association Hot Springs, AR
AUG 5-7	National Conference of State Legislatures (NCSL) Legislative Summit Booth 740 Louisville, KY
AUG 12-17	National Association of EMS Educators (NAEMSE) EMS Educator Symposium Pittsburgh, PA
SEPT 9-13	EMS World Expo - Booth 2629 Las Vegas, NV
OCT 14-16	Mississippians for EMS Biloxi, MS
NOV 24-27	Texas EMS Conference Fort Worth, TX

Are you using your Member Benefits?

Take advantage of the terrific member benefits available to you. Log in to the Member Portal at naemt.org to see more on these benefits and more!

- \$125 off EMS World Expo registration
- Educational webinars and NAEMT Radio podcasts
- Scholarship opportunities from Columbia Southern University and NAEMT
- Free access to Amazon Business Prime



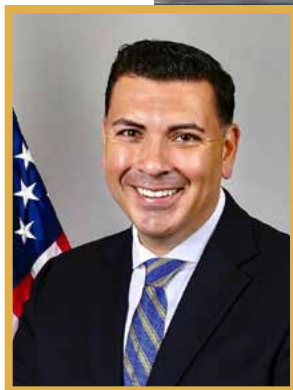
MEMBER SPOTLIGHT

Leroy Garcia Jr.

Leroy Garcia Jr. has worn many hats. Paramedic. EMS educator. Colorado state senator. Special assistant to the assistant secretary of the Navy. And today, chief of staff at the U.S. Department of Agriculture's Rural Business Cooperative Services.

His path has taken him from his hometown of Pueblo, Colorado, to Iraq, to the Pentagon. He says the lessons he learned as a young EMT have guided him each step of the way.

"So much of my success in life has been because of my training as an EMT. Watching paramedics in challenging situations. Never losing their focus. Prioritizing what needs to happen next. Figuring out how you get your team focused, even when bystanders are amplifying the chaos. Interfacing with so many different personnel," Garcia said. "That skillset can be applied in a number of situations."



Enlisting in the Marines

After high school, Garcia enlisted in the U.S. Marine Corps. While serving a six-year commitment, an EMT course at Pueblo Community College ignited a passion for prehospital care. "I absolutely loved every bit of it. The excitement and the adrenaline and all that was associated with being in EMS," Garcia said.

Plans to become a paramedic were put on hold when the U.S. invaded Iraq in 2003. Garcia's reserve artillery unit was deployed to Iraq. He was assigned to be mortuary affairs specialist, doing search and recovery to bring the bodies of Marines killed in action home to their families. "It gave me a deep appreciation for the sacrifices that our service



members might pay," Garcia said.

Back in civilian life, Garcia finished his paramedic education. He worked for American Medical Response (AMR) and as a medical supervisor for the Pueblo County Detention Center. For 15 years, he was also paramedic faculty at Pueblo Community College. Along the way, Garcia continued pursuing his own education. He earned an Associate of Applied Science in EMS, a Bachelor of Science in Management and a Master of Arts in Organizational Management.

So much of my success in life has been because of my training as an EMT... That skillset can be applied in a number of situations.

Running for office

In 2010, Garcia launched his political career when he ran for Pueblo City Council. Three years later, he was elected to the Colorado House of Representatives. By 2019, he was president of the Colorado State Senate.

His peers in both parties unanimously chose him to lead the chamber.

In 2022, Garcia was appointed by President Biden as special assistant to the assistant secretary of the Navy for Manpower and Reserve Affairs. In that role, he advised Navy command on issues related to recruitment, retention, deployment and benefits for active duty, reserve and civilian Navy personnel. Earlier this year, he was appointed as chief of staff for the USDA's Rural Business Cooperative Services.

Garcia spoke with *NAEMT News* about how his EMS training became the foundation for a career in public service, and why he will always stay connected to EMS.

What prompted you to run for office?

I have always been a person who believes if you can help make a difference and you can contribute then you should. My son will graduate from the U.S. Airforce Academy as an officer. My two brothers were Marines. One is now a firefighter-paramedic with the city of Pueblo and the other works as a federal law officer with the Bureau of Prisons.

The community raised me. I love it. I had mentors in EMS and in the community who encouraged me to get more involved. Former Congressman Ray Kogovek was one. He was born and raised in Pueblo, and was well respected and liked by both sides. We met when I came back from Iraq. He was good counsel. He taught me soft skills about working with people, and meeting them where they are, rather than where you wish they'd be. You need to be respectful of why they bring a certain view set that might be different from yours. He taught me it's important to be grounded in your community and don't get stuck in the bubble.

EMTs and paramedics should always be encouraged to be part of the solution. That can be running for office. Or, it can be being more vocal with a local issue that will affect your department or your fire district.

How did you juggle serving in the Colorado legislature with teaching EMS and working on the ambulance?

The Colorado legislature meets part-time, 120 days a year. I'd teach at the college in the fall. In the spring, when the legislature was in session, I'd go to Denver. In the summer, it was all of the above. I'd spend a few days in Denver, and then go home to teach or pick up a graveyard or a weekend shift. This allowed me the best of all worlds. I could teach. I could be practicing, and I could also serve in the legislature. I did this until my appointment in 2022 by the



Biden Administration, when I moved to Washington, D.C., to serve at the Pentagon.

Why was it important to you as an EMS educator to continue working in the field?

I wanted to be able to walk into the classroom and share stories or give case studies about what I saw in the field, what well went and what didn't, and what could be learned in these situations. This is a dynamic profession where you are interfacing with a number of other professions. I wanted to know what changes were happening in emergency medicine, and bring that back to the classroom in real time, or know what new operational procedures they might encounter on on-scene.

As a Colorado representative and senator, how did you advocate for EMS?

In 2013, I authored and advocated for a bill that endorsed critical care paramedic as a level of practice in the state. In 2015, our State Legislature was the first to enact EMS Compact legislation. In 2016, I co-sponsored and advocated for a law that established standards and competencies for community paramedics.

Why is it important to you to be a friend of EMS in your State Legislature and now in the federal government?

We expect that when we call 911 or have a medical emergency someone is there for us. I believe in the mission and the job EMS providers are doing. Sometimes with good pay, and sometimes way below what they should be paid. We experience tough working hours, and working holidays. EMS needs friends. I think there are a number of people out there who are their friends. I'm just fortunate to be one of them.

Do you still maintain your EMS license and certification?

I have maintained my National Registry certification. I'm also licensed as a paramedic in Colorado and Maryland.



I love serving in this administration at the Department of Defense and now at the USDA. But I really do miss patient care and my colleagues who are working every single day to make a difference, and sometimes just being there to support someone in the hardship they are going through in their medical journey.

Would you encourage EMTs and paramedics to get more involved with local politics or even run for office?

Yes. You're already an action person, someone who rolls up your sleeves and helps to solve problems. You bring a perspective of 'Let's accomplish this. Let's triage this.' I look at EMTs and paramedics as being so vital to the conversations we're having, not just in the healthcare arena. They have a skillset that can be applied in many different arenas.

EMTs and paramedics should always be encouraged to be part of the solution. That can be running for office. Or, it can be being more vocal with a local issue that will affect your department or your fire district.

You spoke at the EMS On The Hill Day briefing as chief of staff of the USDA's Rural Business Cooperative Services. What did you share?

At USDA, we work with state, local and tribal leaders, nonprofits and others to help fill gaps in rural areas. We provide grants and loans for rural businesses that EMS may be eligible for to improve healthcare access, capital, training, education, and entrepreneurial skills that can help those living in rural areas. EMS On The Hill Day was a chance to share potential opportunities for collaboration and to be back with my fellow EMS colleagues who I love being around and hearing what they are advocating for.



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