

## The Changing Face of Healthcare: An Update

By Matt Zavadsky, MS-HSA, EMT, Director of Public Affairs, MedStar Mobile Healthcare; and NAEMT Board At-Large Director

Last summer, NAEMT collaborated with 15 other member organizations of the Joint National EMS Leadership Forum (JNEMSLF) to conduct a survey on Community Paramedicine (CP) and Mobile Integrated Healthcare (MIH). This collaborative effort marks the first time in history that so many national organizations, from such diverse segments of EMS, have participated in the development and distribution of a survey on our profession.

Key results of the survey are included in this article. For the full *2013 Community Paramedicine/Mobile Integrated Healthcare Survey Summary*, visit the Community Paramedicine page (under the “About EMS” tab) on [www.naemt.org](http://www.naemt.org).

It is truly an exceptional time in our EMS profession to have national interest and widespread support of a single initiative. Equally impressive is the number of organizations interested in learning more and developing the means to gather more information on CP/MIH trends. The better our profession understands these trends, the better able we will be to develop strategies and policies to support them. NAEMT will continue to work through the JNEMSLF and our CP/MIH Committee to understand and respond to these trends.

As a member of NAEMT, I am proud of the leadership that our Board of Directors and association staff has displayed. Their tireless efforts are a true testament to their ongoing support of all EMS, and their continued leadership in bringing EMS stakeholders together to collaborate in common interests. We should all be proud of the work being done here!

As Chairman of the CP/MIH Committee, I am also grateful for the contributions of the committee members: Rod Barrett, NAEMT Director; Dr. Jeff Beeson, American College of Emergency Physicians; Jim DeTienne, National Association of State EMS Officials; Dr. James Dunford, National Association of EMS Physicians; Troy Hagen, National EMS Management Association; Dr. Paul Hinchey, NAEMT Medical Director; Dr. Doug Kupas, National Association of EMS Physicians; Scott Matin, NAEMT Director; Connie Meyer, NAEMT Immediate Past President; David Newton, National Association of EMS Educators; Mark Rector, International Academies of Emergency Dispatch; Gary Wingrove, NAEMT Advocacy Committee, and Tom Judge, Association of Critical Care Transport. Thank you all for your common vision!

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Join us for a “Mobile Integrated Healthcare Summit: Policy & Payer Update” on March 25th in Washington, D.C.

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NAEMT  
P.O. Box 1400  
Clinton, MS 39060-1400

Via e-mail: [news@naemt.org](mailto:news@naemt.org)

Membership information: [membership@naemt.org](mailto:membership@naemt.org)

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# Happy 2014 to Everyone!



**Don Lundy**  
B.S., NREMT-P  
NAEMT President

I hope everyone had a great time with your family during the holidays – and for those who had to work, I hope you were safe and able to return to your homes to celebrate as all of us do on shift work. I can't believe the time has flown so fast and we have accomplished so much – with so much more work to do!

In 2013... we led the effort, working with many other national EMS organizations, to recognize and better understand Community Paramedicine and Mobile Integrated Healthcare. Through the second World Trauma Symposium, we reinforced our position as the global leader in prehospital trauma education, and we hosted a unique Summit for Latin American EMS educators so we can better understand the education needs of this emerging part of our world.

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**None of this could be happening without YOU, our members!... I am thankful to each and every one of you for your support.**

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One of the most exciting projects we are working on is the Model Interstate Compact for EMS Personnel Licensure. This project, directed by the National Association of EMS State Officials (NASEMSO), is developing a model interstate compact for states' legislative use to solve the problem associated with day-to-day emergency deployment of EMS personnel across state boundaries. We believe that this project will create a framework to help states, and ultimately EMS agencies and practitioners, address the license requirements when working across state borders.

Let's not forget our education programs, where our members serving on committees have been busy developing, writing, and editing course materials, including the 8th edition of Prehospital Trauma Life Support (PHTLS), and the new Principles of Ethics and Personal Leadership (PEPL), which launched in Ft. Worth, Tex., in November, as well as

the NAEMT Instructor Course, which launches this month. Our committees are also preparing for the next editions of Advanced Medical Life Support (AMLS), Emergency Pediatric Care (EPC), and EMS Safety course materials. We continue to listen to you – our members – to develop and present projects that will make all of our lives better in EMS.

There are so many other projects and partnerships I could tell you about, but I really want to focus on one of the most important, long-term, **history-making** commitments that NAEMT has made, and how you can help to shape your future.

The **Field EMS Bill (H.R. 809)** is perhaps the biggest and most historic change in EMS that has come along, since the original white paper. This legislation will change the way EMS is financed and recognized by our elected government leaders and fellow EMS professionals. Through this legislation, one federal agency will serve as the primary voice of EMS for whatever federal help can be given.

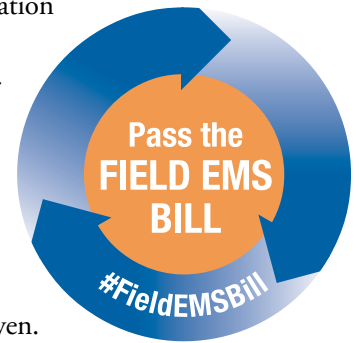
The bill also includes grant money –for **all delivery models of EMS** – to assist large and small agencies in obtaining much-needed equipment and training.

This proposed legislation has gained tremendous state and national support, from state EMS associations and national emergency medical organizations, as well as Congressional support. As far as I can tell, this is the first time EMS has written its own history, much like many professions have done.

None of this could be happening without **YOU**, our members! Membership has increased at a tremendous rate, which helps us in this drive to make EMS better. I am thankful to each and every one of you for your support.

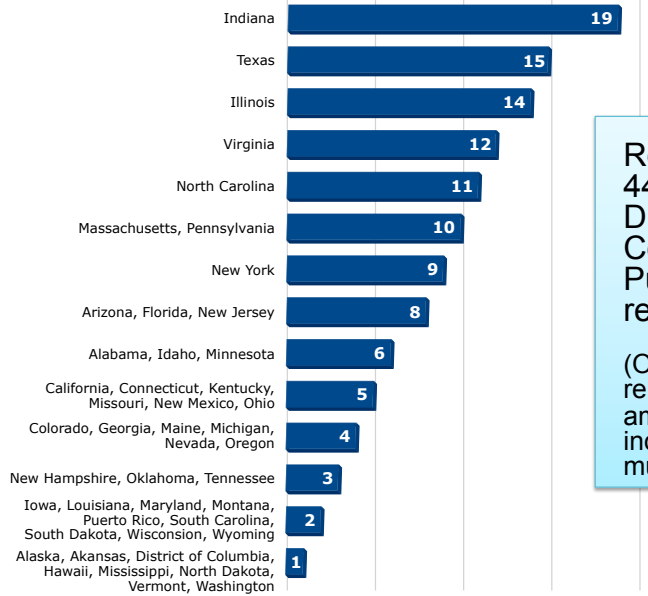
NAEMT and our members have never been stronger, and it is because of you that we are able to do what we can to help EMS. I have read letters and met hundreds of you who are engaged and encouraged by the many support positions NAEMT has taken and how – for probably the first time in a while – local, state and national governments are listening to us!

**It is an exciting time to be in EMS!!**



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### States reporting CP/MIH programs in place



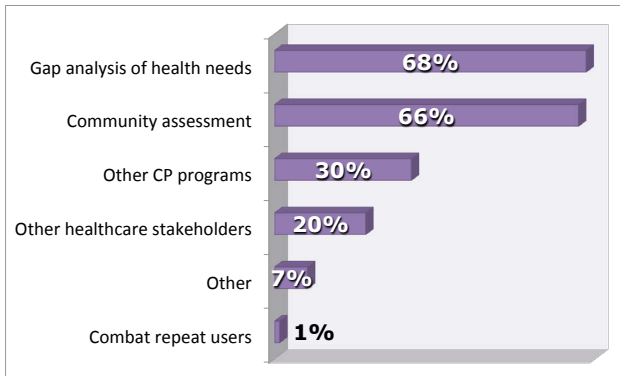
Respondents from 44 states, plus the District of Columbia and Puerto Rico, reported programs.  
(One respondent, representing an ambulance company, indicated programs in multiple states.)



### Survey Results At-A-Glance

- 3,781 total responses were received - primarily from EMS practitioners, EMS managers, medical directors, and CP/MIH program administrators.
- Total responses were evenly dispersed across all types of EMS delivery models.
- Survey results identified 232 unique CP/MIH programs (6% of responses).
- 566 respondents (15%) indicated that their EMS agencies were in the process of developing a CP/MIH program.

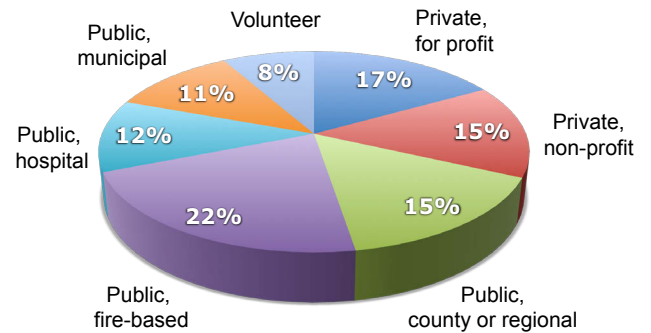
### Catalyst for starting a CP/MIH program



Respondents were able to select more than one response, resulting in a percentage total greater than 100%.



### Programs represented – all delivery models





**From the President** > > continued from page 4

As we start the year, I am asking for your help to get your Congressional representative to sign onto the Field EMS Bill. If you can, make an appointment to visit your members of Congress in Washington D.C. – or better yet, make an appointment to visit with your Representative when he/she returns to your home district. **You don't need to go to Washington to meet with them!!** Talk to them about the important EMS issues affecting you in your community. Tell them about the importance of H.R 809, the Field EMS Bill. Tell them how it is not only a positive step in supporting EMS, but it also is unlike other budget issues in that it **does not** affect the budget in any way!



There is another way to help – by using the new online tool on our website, called “**ENGAGE!**” (pretty catchy, if I do say so myself). From there, you can write and send a message to your House Representative to ask for support of the Field EMS Bill, or whatever other item you wish to talk with them about.

And, don't forget **EMS On The Hill Day** is coming up on **March 26th**. If you have never gone to this event, this is the year to do so. Not only will we have meetings already set up

for you with your representatives, we will partner you with other participants from your state or region to carry out your visits as part of a team.

If that isn't enough, we are developing a pre-conference program to be held on March 25th, just before EMS On The Hill Day, to further explore and discuss Community Paramedicine/Mobile Integrated Healthcare (CP/MIH). This program will focus on the CP/MIH from the payer perspective to help you understand what “payers” (insurers, hospitals, and other healthcare institutions) are looking for from CP/MIH programs. Listen for more to come – I believe it will be an once-in-a-lifetime opportunity!

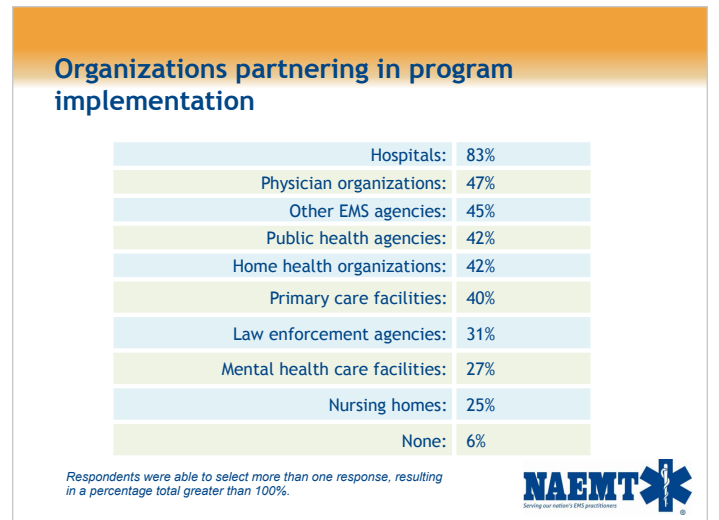
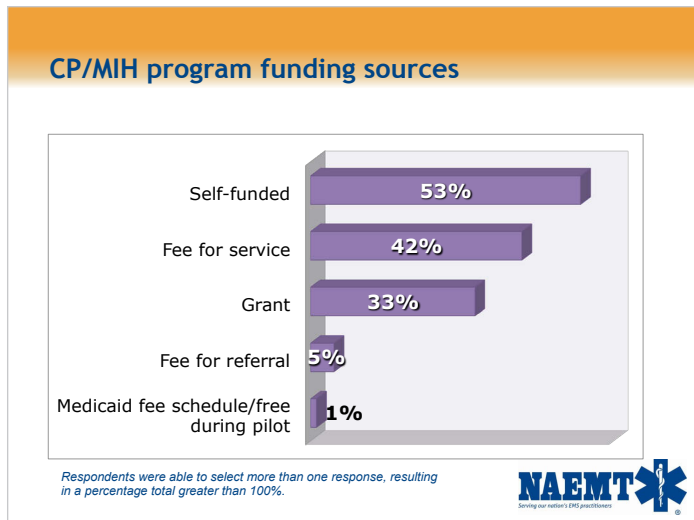
Ask anyone who has gone to EMS On The Hill Day and they'll tell you that it is an energizing experience. It's time for all of us to speak up and tell those we hired (our elected folks) what EMS needs and how we can improve care.

I hope to see you at EMS On The Hill Day – and if not, I look forward to seeing you at one of the many courses, meetings and opportunities that NAEMT holds for its members.

Be kind to one another and be safe!



**The Changing Face of Healthcare: An Update** > > continued from page 5



# Is EMS Poised to Take Financial Hits?

By Doug Wolfberg, Esq., attorney and founding member of Page, Wolfberg & Wirth

As 2014 dawns, so does a year of uncertainty and likely belt-tightening across the EMS industry. The uncertainty surrounding much of healthcare under the Affordable Care Act (ACA or “Obamacare”) is adding to the angst being felt by many EMS agencies.

First, let’s start with Medicare. Although ambulance services will receive a whopping 1% inflation increase starting in January, the rest of the news consists primarily of negative numbers. Currently, ambulance services receive a “bonus” added on to their Medicare reimbursement, depending upon where the patient transport originates. For transports that originate in urban areas, that bonus is 2%; for transports originating in rural areas, that bonus is 3%; and for transports originating in so-called “super-rural” areas (i.e., those areas of the United States in the bottom quarter of population density, or “people per square mile”), that bonus is 22.6%. Unfortunately, those bonuses expire as of December 31, 2013, unless Congress passes a new law extending them. In addition to the pending expiration of these bonuses for ground ambulance services, a temporary bonus for air ambulance services provided in rural areas expired in June of this year.

Another change that was implemented in October of this year was an across-the-board reduction of 10% in Medicare reimbursement for BLS non-emergency transports involving end-stage renal disease (ESRD) patients receiving transports for dialysis. The medical necessity of using ambulances to transport dialysis patients has long been under close scrutiny by the Office of Inspector General (OIG), Medicare and other federal agencies, and these agencies are on record saying they believe ambulances are greatly overused for this purpose.

Keep in mind that these reductions are on top of a few other hits that have already happened over the past couple years. In 2011, Medicare stopped allowing ambulance services to “round up” their mileage to the next whole number; this change, though seemingly minor on the service, took upwards of \$40 million out of the industry. In addition, the ACA incorporated something called the “multifactor productivity index,” which has the net effect

of greatly reducing the annual ambulance inflation factor (without the ACA, the 2014 inflation adjustment would be 1.8% instead of 1.0%). In addition, Medicare, like most other federal programs, took an across-the-board 2% reduction due to the so-called “sequestration” law that took effect last spring.

Federal agencies have also signaled their intent to crack down on the ambulance industry in the coming months. A recent OIG report, titled *Utilization of Medicare Ambulance Transports (2002-2011)*<sup>1</sup>, looked at data pertaining to ambulance transports of Medicare beneficiaries based on claims filed and paid during this 10-year period. With Medicare comprising the single largest payer in the mix for most ambulance services, the data provides a critical glimpse into utilization patterns – and provides clear lessons for where the OIG believes that improved compliance and enforcement are necessary.

Medicare ambulance transports increased 69% from 2002-2011. There were over 14 million total ambulance transports paid by Medicare in the year 2011 alone. Between 2002 and 2011, Medicare spending on ambulance services increased 130%, even though spending on Medicare services generally rose only 74%. In other words, the growth in ambulance service spending by Medicare far outpaced the rate that spending grew on all Medicare services generally. However, during this same period, the total number of Medicare beneficiaries increased only 7%. This means that a much greater percentage of Medicare beneficiaries are being transported by ambulance today, than ten years ago. The number of transports per beneficiary increased 26%. In 2011, 4.8 million Medicare beneficiaries received ambulance services.



<sup>1</sup>OEI-09-12-00350. Available at <https://oig.hhs.gov/oei/reports/oei-09-12-00350.asp>

## Is EMS Poised to Take Financial Hits? >> continued from page 7

It is probably not a coincidence that during the same 10-year span, the number of ambulance services enrolled with Medicare increased by 26%. As of 2011, there were 17,776 enrolled ambulance services providing transportation to Medicare beneficiaries. It was interesting that some states experienced marked decreases in the numbers of ambulance suppliers (Mississippi experienced a drop of 25%), while others posted large increases (207% in Virginia).

As mentioned above, dialysis transports have long been a concern of the OIG. But according to this report, the increase in dialysis transports was indeed shocking. Between 2002 and 2011, transports related to dialysis increased 269% — just so you know it wasn't a typo, I'll repeat that: 269%. In some states, the trends were downright startling: South Carolina experienced an increase in dialysis transports of 6,920%, and in California, it was 2,727%. In 2002, dialysis transports comprised 9% of all ambulance trips nationally, and in 2011, they represented 19% of all transports. The OIG makes no secret of its disdain for the fact that Medicare covers these types of services at all. On page 4 of the report, the OIG asserts: “[a]lthough dialysis facilities are a covered destination, transports to them do not usually meet coverage requirements under Medicare.”

Overall, this data paints a picture of ambulance utilization that defies demographic changes in the population over the past decade. In other words, the increase in utilization cannot be attributed just to an increase in the number of people on Medicare. Therefore, the OIG *believes* that these increases are driven in large part by fraud and abuse on the part of ambulance suppliers. Whether this is true or not isn't really the point. The point is that the OIG believes it to be true, and will target its enforcement activities accordingly.

With the financial, regulatory and enforcement outlook as bleak as it is, what are EMS agencies to do? These changing times will require that close attention be paid to several critical areas.

EMS agencies will need to work closely with their EMTs, Paramedics and other practitioners to ensure that the quality of their prehospital care documentation is vastly improved. The quality of EMS documentation is consistently one of the top challenges that EMS managers face. EMS practitioners are going to have to redouble their efforts to improve documentation

in areas, such as medical necessity — in other words, documenting precisely why a patient requires transport by ambulance. This is particularly the case for non-emergency transports. Medicare doesn't cover ambulance services when transport by other means is contraindicated. Therefore, if a patient can safely be transported by car, wheelchair van, or some other means, then the transport isn't reimbursable by Medicare.

EMS practitioners need to become more precise and descriptive when documenting patient conditions. *What specific reason(s) require transport by ambulance? What is the patient's ambulatory status? Are they able to sit in a chair or wheelchair? Can they get out of bed without assistance?* These are just some of the criteria Medicare examines when making

### NAEMT continues to actively address the issues surrounding Medicare reimbursement and provider payments. Our actions in 2013 include:

- ✓ Submitting a comment to the Centers for Medicare and Medicaid Services (CMS) on a proposed rule for the collection of reimbursement data. Our comment requested CMS to hold a stakeholders meeting to examine the overall approach to provider payments, and consider a patient-centered reimbursement model.
- ✓ Supporting S. 1405, Medicare Ambulance Access Act of 2013, to provide one-year extension on payment add-ons for ambulance providers.
- ✓ Leading the effort to help practitioners and agencies understand Community Paramedicine and Mobile Integrated Healthcare as alternative approaches to delivering patient care, which offers an opportunity for new revenue streams.
- ✓ Leading the effort to pass H.R. 809, the Field EMS Bill, which includes provisions for examining alternative models of delivering emergency medical care.



medical necessity determinations, and these need to be addressed in a well-documented PCR.

In addition to documenting the medical necessity for the use of an ambulance, practitioners need to be attentive to documenting the reason for the transport itself. This is particularly true for inter-facility transports. The PCR should document the precise nature of the test or procedure that the patient requires at the destination facility, and which cannot be provided at the origin facility. Medicare does not pay to transport patients to another facility when they are already in one that is capable of meeting their needs.

Capturing the signature of the patient at the time of service is another critical area where EMS practitioners can help improve the quality of their EMS documentation. Medicare and other payers require signatures for the purpose of filing claims, and the best opportunity to obtain them is at the time of service. If the patient is physically or mentally incapable of signing at the time of service, the crew should document the reason why and then obtain the signature of an authorized representative who can sign on the patient's behalf, such as a legal

guardian, family member, caregiver or someone of that nature.

EMS agencies must go above and beyond when it comes to demonstrating – and documenting – their commitment to compliance. EMS agencies should be able to document that they 1) have appointed a compliance officer; 2) regularly perform internal claim audits; 3) promptly refund overpayments to Medicare and Medicaid; 4) perform appropriate background checks and OIG exclusion checks on their EMS practitioners, billers, managers, supervisors and other staff members; and 5) provide role-specific training and education to staff to be able to properly do their jobs; and much, much more.

The days of paying lip service to compliance are over. The numbers are in, and they paint a remarkable picture of explosive growth in the use of ambulance services by Medicare patients over the past decade. When coupled with the real-dollar reductions from Medicare, which is the single largest payer for ambulance services, it is time to tighten the belt and step up the game when it comes to compliance, documentation and other key areas.

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## ★ Target Audience: \*

- Paramedics
- EMTs *That's me!*
- Medics

### Required to have:

- Enthusiasm ✓
- Dedication ✓
- Strong work ethic ✓
- Willingness to work overseas *That sounds cool!*

### Objective:

- delivering quality solutions around the world

### Experience:

- 3+ years as an EMT-P required *yep*
- BLS & ACLS required
- NREMT preferred ✓

*I think I'll sign up!!*



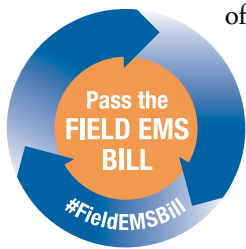
## NAEMT ADVOCACY UPDATE

“They always say time changes things, but you actually have to change them yourself.” – *Andy Warhol, American artist*

Our nation’s changing healthcare environment is an added incentive for all in EMS to “speak up” in support of the important role we, as practitioners, fill in determining positive and cost-effective patient outcomes. Quality patient care in emergency settings begins with EMS, and so it will take all of us to speak up to our Congressional leaders – those who *we* have elected – to create awareness of the challenges that we face in responding to the needs of our communities.

### Where Do We Stand?

Our top national legislative priority – H.R. 809, the Field EMS Bill – continues to gain support and momentum, but it is going to take the effort of all of us to obtain passage of this bill. Sponsored by Rep. Larry Bucshon (IN-8), this bill has co-sponsor support from 15 U.S House Representatives (as of December 13, 2013). Our Co-sponsor Campaign goal is to obtain 100 co-sponsors by EMS On The Hill Day, March 26th. We also have received 36 official letters of support from EMS organizations across the nation.



*The success of the Campaign depends on each of you speaking up for our profession and our patients.*

### What Can You Do To Support EMS?

Members of Congress and their staff need to hear from you on the challenges you face in delivering quality care, and how H.R. 809 will address those challenges. **ENGAGE!** your U.S. House Representative today through our new online legislative service (*replacing Capwiz*). You can also follow the progress of our efforts, by visiting the Field EMS Bill page at [www.naemt.org](http://www.naemt.org). Be sure to share the information contained on these pages with your EMS peers. There is strength in numbers and the more we speak out on behalf of EMS, the louder our voice will be in Washington DC.



The screenshot shows the NAEMT website interface. At the top is the NAEMT logo with the tagline "Serving our nation's EMS practitioners". Below the logo is a navigation menu with links for Home, Key EMS Issues, Action Center, Elected Officials, and NAEMT.org. The main content area features a large image of an EMT and a video player. The video player has a title "SPOTLIGHT: HOW TO HAVE A SUCCESSFUL MEETING WITH YOUR ELECTED OFFICIALS" and a video thumbnail showing a man in a suit. Below the video player is a section titled "Field EMS Bill" with a "READ MORE" button. Further down is a "Welcome to ENGAGE hosted by NAEMT" section, followed by a paragraph about the National Association of Emergency Medical Technicians (NAEMT) and its role in providing access to Capitol Hill through ENGAGE. Below that is another paragraph about the strength in numbers and a call to action to get engaged today. At the bottom, there is a "Latest News" section and a "Find your elected officials" section with a search bar and a "GO" button.

## What Else Can You Do To Support EMS?

Make plans to attend EMS On The Hill Day on Wednesday, March 26th, with a briefing on Tuesday, March 25th. Your Congressional representatives need to hear from you on how the changes in healthcare are impacting EMS. Never before has EMS had an opportunity to secure a recognized place in the delivery of quality medical care. Never before has it been more important for all of EMS to speak up for our profession... and our patients!



EMS On The Hill Day is an excellent forum to speak one-on-one with Members of Congress, and we are there to support you every step of the way. Registration is open! Visit our website ([www.naemt.org/advocacy](http://www.naemt.org/advocacy)) and go on to the “EMS On The Hill Day” page for information and to register.

## What Should You Know About Community Paramedicine/Mobile Integrated Healthcare?

Join us for a “Mobile Integrated Healthcare Summit: Policy & Payer Update” on March 25th in Washington, D.C. Held prior to EMS On The Hill Day, attendees will explore the payer’s perspective and learn how the Field EMS Bill (H.R. 809) can help further the CP/MIH mission. Contact [info@naemt.org](mailto:info@naemt.org) to learn more.

## Field EMS Bill Co-Sponsors

Rep. Joe Heck (NV-3); Rep. Andre Carson (IN-7); Rep. Dave Loebsack (IA-2); Rep. Rich Nugent (FL-11); Rep. Michael Michaud (ME-2); Rep. John Duncan (TN-2); Rep. Steve Stivers (OH-15); Rep. Collin Peterson (MN-7); Rep. Phil Roe (TN-1); Rep. Holt Rush (NJ-12); Rep. Tim Walberg (MI-7); Rep. John Carney (DE); Rep. Blaine Luetkemeyer (MO-3); Rep. Raul Ruiz (CA-36); and Rep. Stephen Fincher (TN-8)

## Why Speak Up For EMS?

1. To ensure quality and effective patient care.
2. To obtain direct funding for EMS agencies (all delivery models), based on community need.
3. To access the important training and education that is needed to respond to the full scope of emergent needs.
4. To educate legislative leaders that EMS is the starting point in directing patients to an appropriate path of care (hospital, home care, etc.)
5. To help your community transition to a mobile integrated healthcare system.
6. To reinforce field EMS as an integral component of emergency medicine.



## EDUCATION NEWS



### AMLS

#### AMLS Hybrid Now Available!

Advanced Medical Life Support is now available in “hybrid” format! AMLS hybrid is a 16-hour course, which includes eight hours of

online content, followed by eight hours of face-to-face skill-building stations. The hybrid format offers flexibility for both site coordinators and students, and can provide more efficiency with overall AMLS course planning. Students who successfully complete both portions of this course receive 16 hours of CECBEMS credit and an AMLS card. Contact [education@naemt.org](mailto:education@naemt.org) for more information.

#### Welcome New AMLS State Coordinators

NAEMT extends a warm welcome to the following state coordinators. State Coordinators are responsible for actively promoting the education program in their state, and for providing assistance and support to course sites, coordinators and faculty. Their time and dedication to enriching EMS education is appreciated!

- Christina Oatman, New Jersey
- Eric Dievendorf, Nevada
- Travis Spier, South Dakota
- Bill Justice, Oklahoma
- Dennis Russell, Maine

If you are interested in bringing AMLS to your EMS agency, please contact NAEMT at [education@naemt.org](mailto:education@naemt.org)

#### On The International EMS Education Front

• AMLS Associate Medical Director Dr. Angus Jameson and Pennsylvania AMLS State Coordinator Brian Fullgraf helped The College of Paramedics Learning and Education launch AMLS in the United Kingdom on November 5th. The course was held at the South Western Ambulance Service in Southern England’s town of Poole, where 14 AMLS students were trained.

• In October, AMLS made its debut in Spain. AMLS Spain conducted its initial course with 22 AMLS students and the expertise of international teachers. “They all had a great

clinical and teaching experience... It can only be said that they got completely involved in the course, learned a lot, and had a motivating connection from the beginning. Seeing the depth of this course, we are confident that it will provide a new way to deal with medical emergencies.” —Javier Uriarte, AMLS Spain



### PHTLS

#### Updated Information To Continue Teaching At The Highest Level

The PHTLS Committee has completed the 8th edition of the PHTLS textbook and work is underway on the instructor materials. Mark your calendars for the 8th Edition PHTLS Update on Sunday, November 9, 2014 in Nashville, Tennessee. We hope all PHTLS instructors will join us for this exciting update on the global standard in prehospital trauma education.



*PHTLS course receives rave reviews from the western Asian Republic of Azerbaijan. The course was held last November, and was attended by physicians who fully participated in exercises and enjoyed interactive lectures.*





## EPC

### Two New Regional Coordinators Appointed

We are pleased to announce the following additions to our EPC team. Regional coordinators are responsible

for overseeing the activities of state coordinators and affiliate faculty within their respective state. Their contributions to the success of our EPC program are appreciated.

- James Gould, Region 1
- Anne Austin, Region 2

The EPC Committee recently completed adjustments to the course materials to improve the implementation of the program. Day Two of the EPC hybrid course now includes a 90-minute review of Day One’s online course content. The EPC Committee developed a PowerPoint resource, consisting of slides and a script to assist faculty in presenting this review. Also, students can now listen to the narrative of the Congenital Heart Defects portion of the lecture at their leisure. The Committee also developed a step-by-step instruction sheet for coordinating a hybrid EPC Course. Contact [education@naemt.org](mailto:education@naemt.org) for more information on bringing EPC to your EMS agency.



## TCCC & LEFR-TCC

### Interested In Becoming A TCCC Instructor?

TCCC is growing rapidly and the demand for courses is so great that

we are experiencing a shortage of TCCC instructors who have been trained in both PHTLS and TCCC.

To address this challenge, PHTLS course sites throughout the U.S. are hosting TCCC provider/instructor courses. If you are a PHTLS instructor interested in becoming a TCCC instructor, contact us at [education@naemt.org](mailto:education@naemt.org). All TCCC instructors are also eligible to teach the LEFR-TCC course, which is designed for law enforcement and first responders. Learn more at [www.naemt.org/education](http://www.naemt.org/education).



## EMS Safety

### Bring This Course To Your Agency!

Promote a culture of EMS safety and help reduce both the number and intensity of injuries incurred at your

agency. Contact [education@naemt.org](mailto:education@naemt.org) to begin the process. Also, be on the lookout in early 2015 for the 2nd edition of NAEMT’s award-winning EMS Safety course, which the EMS Safety Committee is now developing.

The following is excerpted from “Safety Course Makes Believers,” *EMS World Magazine*, November 2013.

*“I was not convinced we needed another program. We thought we had a good safety plan... Then in August, the company put them through the course. Every employee who drove, including those in its handicap transportation division, participated, as did anyone who might handle a patient.”*

*“The result exceeded all expectations. The class was so much more than our preconceived notions. Everyone thought it was great. We had five folks go on to become instructors and several who scored 100% on the test. Even our non-EMTs who work in our handicap division learned a lot. The course is designed to promote safety cultures within EMS organizations and help reduce injuries and their severity. It covers crew resource management; vehicle safety; scene operations; patient handling; safety for patients, providers and bystanders; and personal health. It is geared to develop risk assessment and decision-making skills.”*

*—Randy Bowers, CEO, Bowers Emergency Services, Easley, S.C.*

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### PEPL

#### Principles of Ethics and Personal Leadership (PEPL) for EMS and Mobile Healthcare

With its Ft. Worth, Tex., premier in November last year, the PEPL Committee is focused on preparing a national instructor corps across the country. Course sites throughout the U.S. will be hosting provider/instructor courses throughout the year. If you are interested in becoming a PEPL instructor, contact us at [education@naemt.org](mailto:education@naemt.org).

Principles of Ethics and Personal Leadership (PEPL) is a new NAEMT course for EMS practitioners. This 16-hour course provides EMS and Mobile Healthcare (MHC) practitioners at all levels with the necessary knowledge and skills to effectively interact with patients and their families,

other medical personnel, co-workers, supervisors and community residents at large.

The course covers topics and skills in the following areas:

- personal and professional core values
- ethics
- decision-making
- duty to serve
- strategies for conflict resolution
- ambassadorship for the profession, their agencies, and the community at large

Through course presentation, dialogue, and learning activities, including written and video case studies, students will explore the importance of ethics and personal leadership, identify their leadership roles in civic life as individuals, family members, professionals, and members of the community, and practice the skills important to the exercise of personal, ethical leadership.

## Congratulations To Members Advancing Careers With NAEMT Scholarships

We congratulate the following scholarship recipients and extend our best wishes for ongoing achievement and contributions to the EMS profession:



**EMT-Basic to EMT-Paramedic** (up to \$5,000) - Ramon Deering-Estrada, Soquel, California

“The idea of being able to be the lead Paramedic while on emergency calls is very appealing to me. The skill-set that I will obtain after successfully completing a Paramedic program will... fulfill both my personal and educational goals. The help that this scholarship could provide me with is immeasurable.

**EMT-Basic to EMT-Paramedic** (up to \$5,000) - George Manuel, Hilo, Hawaii

“My goal is to become a licensed Paramedic... and work as a champion educator for coworkers, professionals, college students and native Hawaiians.”



**Paramedic to Advance EMS** (up to \$2,000) - Robert Steeps, Bixby, Oklahoma

“I am currently pursuing a graduate degree from Western Carolina University. My goal is to use this degree to have a positive impact on the future of EMS education in my and in the country.



**First Responder to EMT-Basic** (up to \$500) - Victoria Furman, Federal Dam, Minnesota

“I am currently on my local volunteer fire department. [this scholarship] will help pay for my EMT classes... and pursue something that can help me advance in my career.”

The deadline for the next Degree Completion Program scholarship through The College Network is **March 15**. Learn more at [www.naemt.org/members\\_audience.aspx](http://www.naemt.org/members_audience.aspx).

## NAEMT MEMBERSHIP UPDATE

# Viva Las Vegas!

## Here's a Look Back at the 2013 NAEMT Annual Meeting

Members lit up Las Vegas in September during the NAEMT Annual Meeting. From networking with fellow professionals to top-notch preconference education programs, our members experienced the progression of our association and profession. Held in conjunction with EMS World Expo, the NAEMT Annual Meeting offered members the opportunity to learn about, and participate in, our association's most recent activities, meet association leaders to discuss issues impacting our profession, and network with professional colleagues from across the country and around the globe.

Known for its nightlife, the "city that never sleeps" also came through with non-stop programs each day. Meetings for NAEMT committees, education programs, the Affiliate Advisory Council, and the general membership were informative and productive. NAEMT President Don Lundy presented to members on the activities and successes of the association during the year, and acknowledged the corporate partners who helped us reach those successes. He also kicked off the meeting by leading the Pledge of Allegiance and performing a solo version of the National Anthem (nicely done, for those who missed it). The enjoyment of members continued with our member reception.

### EMS Awards of Excellence

The stars were in full gleam during the general membership meeting as presentations were made to the National EMS Awards of Excellence 2013 winners:

- **Daniel Manz** – prestigious Rocco V. Morando Lifetime Achievement Award, *sponsored by the National Registry of Emergency Medical Technicians (NREMT)*
- **Shawn Mease, NREMT-P** – NAEMT/Nasco Paramedic of the Year, *sponsored by Nasco*
- **Paul Schueth, Adv EMT** – NAEMT/Braun Industries EMT of the Year, *sponsored by Braun Industries*
- **Robert Ditch, EdD** – NAEMT/Jones & Bartlett Learning Educator of the Year, *sponsored by Jones & Bartlett Learning*

### Highlight Events

Highlighting the EMS World Expo events was the first Mobile Integrated Healthcare Summit, led by Matt Zavadsky, NAEMT At-Large Director. The summit brought top experts together to discuss strategies that can help agencies navigate the new environment created by the Affordable Care Act. Community Paramedicine and Mobile Integrated Healthcare are priorities of our association and open new opportunities for all of EMS. (Learn more at [www.naemt.org/about\\_ems](http://www.naemt.org/about_ems))

Back by popular demand was the second annual World Trauma Symposium, which was presented by international experts and focused on the latest global trends in prehospital trauma care. Hosted by NAEMT's PHTLS Committee and EMS World Expo, the Symposium included leading-edge presentations on translating military advances to civilian care, mass shootings response, and other hot topics in trauma care, which held audience attention.

Also, for the first time, a Special Forum on EMS in Latin America was held to learn about the needs of NAEMT's EMS students and educators, and the overall impact of the emerging EMS community in that part of the world.

### See You November 9-13 in Nashville!

Thank you to all the members who attended last year's meeting! If you haven't attended one yet, you will definitely want to attend this year! Make your plans to attend the 2014 Annual Meeting and EMS World Expo in Nashville, Tenn., November 9-13. It's an important time in EMS and you won't want to miss it. We'll look forward to seeing you!





NAEMT President Don Lundy (photo-right) proudly presents NAEMT Presidential Leadership Awards on September 9th to Ben Chlapek (left) and Dr. Paul Hinchey for their outstanding commitment and support of our association. Chlapek is credited with giving NAEMT members who serve in Armed Services a voice within our association, on Capitol Hill, and at the White House. Hinchey has molded the NAEMT Medical Director role into one of importance to the association that is heavily depended upon.



Daniel Manz (right) received the prestigious "Rocco V. Morando Lifetime Achievement Award" on September 9th from NAEMT President Don Lundy (left) and NREMT Executive Director Severo Rodriguez.



Awards were presented on September 9th to (left to right): Shawn Mease, NREMT-P; Paul Schueth, Adv EMT; and Robert Ditch, EdD.



The Member Reception provided the perfect social setting to meet friends, share stories, and make new acquaintances.





Standing out in this year's EMS "Service Award" category are two innovative and inspirational winners. These awards were presented on September 9th. (Top) Kiowa County EMS of Greensburg, Kans., received the "Volunteer EMS Service of the Year" award, sponsored by Impact Instrumentation, Inc. MedStar Mobile Healthcare of Ft. Worth, Tex., received the "Dick Ferneau Paid EMS Service of the Year" award, sponsored by Ferno.



Preconference Education Sessions were well-attended and a popular part of the Annual Meeting.

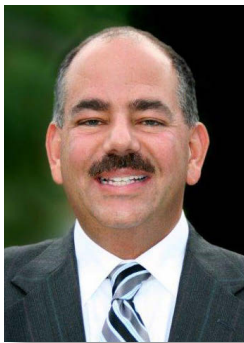


The NAEMT Exhibit Booth was a welcoming gathering spot to discuss continuing education programs, legislative priorities, and member benefits.

# Welcome the 2014 NAEMT Board of Directors!

We are pleased to welcome new and returning members to the NAEMT Board of Directors, serving in leadership positions in 2014. Our gratitude and thanks to all active members who voted in the elections for open positions last October. Your new Board officially took its position on January 1, and is committed to lead our association through the changes taking place in our nation's healthcare system – particularly those changes that will transform EMS in the days ahead.

## Congratulations to the new members of our 2014 Board of Directors:



**Scott Matin** of New Jersey is re-elected as Region I Director. He is Vice President of Clinical & Business Services at MONOC Mobile Health Services, Wall, N.J. — New Jersey's largest provider of EMS, ambulance and aeromedical services. Over the past year, Matin chaired the NAEMT Membership Committee and led the Principles

of Ethics and Personal Leadership (PEPL) Committee to develop a 16-hour CEU program for EMTs and Paramedics. He also serves on NAEMT's Community Paramedicine and Advocacy Committees, and is a liaison to the American Ambulance Association and the Association of Air Medical Services. Matin hopes to "strengthen our profession — which I have dedicated my life to — because it is among the most honorable and respectable professions a person can have."



**Cory Richter** of Florida is newly elected as Region II Director. He is a Paramedic for Indian River Fire Rescue in Florida. He also is active in NAEMT as State Advocacy Coordinator, Advanced Medical Life Support (AMLS) State Coordinator, Affiliate Faculty and Instructor, PreHospital Trauma Life Support (PHTLS) Affiliate Faculty and

Instructor, and Emergency Pediatric Care (EPC) Instructor. Richter has devoted years to state-level EMS issues, one being the creation of the Florida Drug Shortage Committee. He hopes to "continue to address the needs of EMS and push for better standards and organization at the national level, to

take EMS to the next level and beyond. EMS is at a pivotal time and we need board members with big aspirations and the tenacity to see them through," says Richter.



**Aimee Binning** of Wyoming is newly elected as Region III Director. She is a full-time practitioner for Sublette County EMS (SCEMS) in Pinedale, Wyo., where she was formerly Educational Coordinator, Secretary, Special Events Coordinator, and volunteer. Binning has served NAEMT as Region III Director, Health and

Safety Committee member, Membership Committee chair, course educator, and an NAEMT Foundation Trustee. She was also a recipient of the NAEMT Presidential Leadership Award, and has been an advocate for EMS at the federal level by participating in various meetings and collaborations with EMS related groups. Binning states, "I will represent each of you to achieve our goals and realize our full potential as the Nation's voice for EMS practitioners."



**Bruce Evans** of Colorado is re-elected as Region IV Director. He is the Deputy Chief at the Upper Pine River Fire Protection District, outside of Durango, Colo. He is a retired EMS Chief from the North Las Vegas, Nev., Fire Department, after serving 27 years in the Southern Nevada EMS system. He is an adjunct faculty member of the

National Fire Academy in the EMS, Incident Management,



and Terrorism Training programs. Bruce was also a recipient of the prestigious James O. Page EMS Achievement Award. “I have served in almost every aspect of EMS — hospital, fire, police, third-service, helicopter, and private ambulance, volunteer, and paid services — which helps bring a well-rounded perspective to NAEMT, as it strives to meet the needs of our membership,” says Evans.



**Ben Chlapek** of Missouri is re-elected as At-Large Director. He is Chair of the NAEMT Military Relations Committee. Involved in NAEMT for more than 30 years, Chlapek has served as the Missouri representative to the NAEMT Board of Governors and Deputy Chief of the Central Jackson County Fire Protection District in Blue Springs,

Mo. He also holds an A.A. in Fire Science, a B.A. degree in Chemistry, an M.P.A. degree in Public Affairs, as well as an M.S. in Homeland Security Studies. He retired as Lieutenant Colonel from the U.S. Army after 36 years of proud service. Wounded in Afghanistan, Chlapek works to help veterans. He states, “I believe that serving our profession is an honor — an opportunity to serve the people in our profession — and a duty.”

### Our appreciation to our returning Board members for their dedication to our members and the EMS profession:

- Don Lundy, President
- Chuck Kearns, President-Elect
- Jim Judge, Secretary
- Dennis Rowe, Treasurer
- Connie Meyer, Immediate Past President
- Jim Slattery, Region I Director
- Chad McIntyre, Region II Director
- Chris Cebollero, Region III Director
- Rod Barrett, Region IV Director
- Matt Zavadsky, At-Large Director
- Paul Hinchey, Medical Director

## Save These Important 2014 Dates!

### Mobile Integrated Healthcare Summit

March 25 (11:30 am - 4:30 pm), Washington, D.C.

“Mobile Integrated Healthcare Summit: Policy & Payer Update.” Learn how the Field EMS Bill (H.R. 809) can help further the CP/MIH mission. Contact [info@naemt.org](mailto:info@naemt.org) to learn more.

### EMS On The Hill Day

March 26, Washington, D.C.

(briefing on March 25 at 5:30 pm)

Never before has it been more important for all of EMS to speak up for our profession... and our patients! Visit our website for information and to register.

### World Trauma Symposium

November 10, Nashville, Tenn.

Hosted by NAEMT’s PHTLS Committee and EMS World Expo, the World Trauma Symposium presents the latest global trends in prehospital trauma care. Contact [info@naemt.org](mailto:info@naemt.org) to learn more.

### NAEMT Annual Meeting

November 9-11, Nashville, Tenn.

This annual member meeting packs education, presentations, information, association meetings and peer networking all in one fun-filled event. Held in conjunction with EMS World Expo, you won’t want to miss it. NAEMT Annual Meeting is free to all members.



National Association of Emergency Medical Technicians  
Foundation  
P.O. Box 1400  
Clinton, MS 39060-1400



## Strengthen Your Agency by Supporting Your Team!

NAEMT Agency Membership offers increased purchasing power, an attractive benefits package for employees, and resources that help advocate for EMS within your community.

**Better Team. Better Agency.**  
Learn more at [www.naemt.org](http://www.naemt.org)

**STREAMLINED & AFFORDABLE:**

## The NAEMT Instructor Course

Our online, interactive Instructor Course is now available! This course consolidates all of the NAEMT instructor courses for each of our education programs into one, affordable-yet-comprehensive course. The new NAEMT Instructor Course was developed in collaboration with our publishing partner, Jones & Bartlett Learning, and covers all of the fundamental knowledge in previous instructor courses for NAEMT's education programs, eliminating redundancy and reducing the cost of instructor training. Contact us at [education@naemt.org](mailto:education@naemt.org) to learn more.

