



<http://www.marc.org/Emergency-Services-9-1-1/MARCER>

To: Committee on Welfare
From: MARCER
RE: Opposition to HB 2240
Date: February 7, 2025

MARCER opposes the passage of HB 2240.

Mid-America Regional Council Emergency Rescue (MARCER) is the Kansas City bi-state regional EMS Council. As a subcommittee to the Mid-America Regional Council (MARC), MARCER consists of over 35 area EMS agencies and 20 hospitals that collaborate on various pre-hospital emergency medical care issues such as communications, disaster planning, hospital diversion, time critical diagnosis, group purchasing, and other policy initiatives.

The ground ambulance operations in Kansas currently receive substantial funding through the payment for services for Medicaid patients.

Variations to the Medicaid payment program for ground ambulance services typically require a State Plan Amendment (SPA). These allow KDHE and providers to respond to opportunities. HB 2240 will severely curtail many of these efforts.

Following are a couple of the opportunities that ground ambulance services are exploring.

Ground ambulance services have been in discussions with KDHE about seeking an adjustment so that the Medicaid program would reimburse ambulance services when we treat patients and leave them at home instead of transporting them to

the hospital. While there is ample data to demonstrate this will create a cost saving, we are currently awaiting action in Congress and CMS regarding the Medicare program. HB 2240 could create serious challenges for KDHE to assist with the planning and development of a Medicaid based program to complement the Medicare program, even though the data demonstrates that this program will create savings for the Medicaid program in the long term based upon fewer hospital admissions.

Kansas has a budding Community Paramedic (CP) network. There are currently 4-5 programs, with three being developed and others in the planning phase. We have been in discussions with KDHE about a payment model through the Medicaid program. There is ample data to demonstrate cost savings when established EMS resources are utilized to help keep patients in their home and manage their continuing health care needs through a CP program. While the payment model is yet to be established and several issues need to be resolved, the passage of HB 2240 will only complicate the ability to move ahead by restricting the ability of KDHE to provide the initial analysis and support to create a successful Community Paramedic network across Kansas.

If you have any questions please feel free to contact MARCER staff, Jason White, JWhite@MARC.org.