



# Ambulance Service in Rural New York State

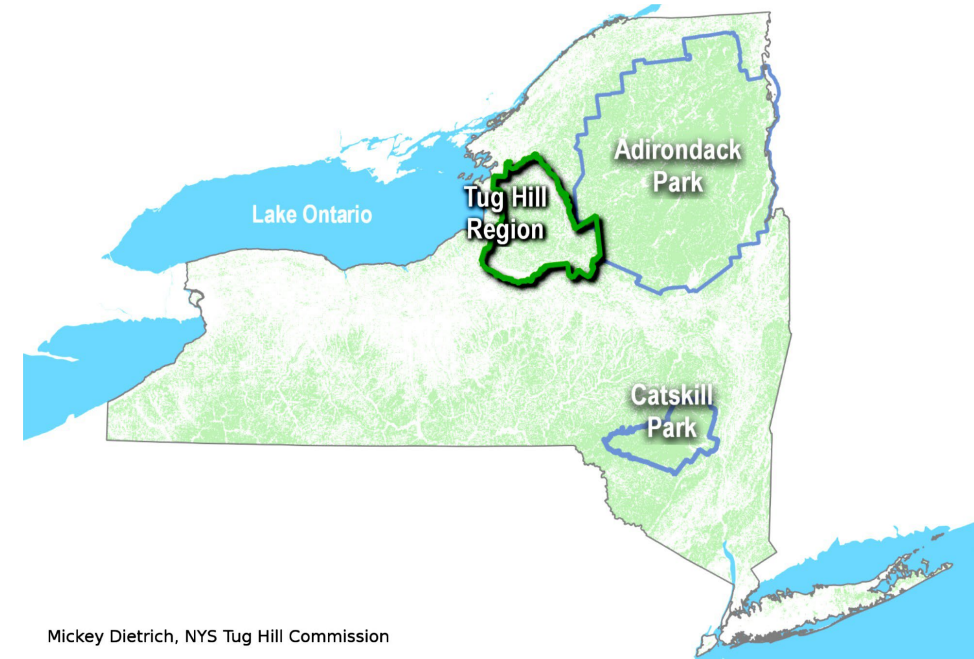
Katie Malinowski, Executive Director, NYS Tug Hill Commission  
Angie Kimball, Circuit Rider, Cooperative Tug Hill Council





# Tug Hill Commission

- A non-regulatory state agency with a mission **“to enable local governments, private organizations, and individuals to shape the future of the Tug Hill region, and to demonstrate and communicate ways that this can be done by other rural areas.”**
- In 1998, Article 37 of Executive Law reaffirmed the commission, became an executive agency, administratively tied to the NYS Department of State
- No regulatory authority; grassroots, locally driven
- Governed by a board of 9 unpaid volunteers who must be residents of the region
- Staff of 15 serving a region of 41 towns containing 18 villages, plus, with a combined population of ~100,000 people, 50 people per square mile
- Provide day-to-day assistance to local governments, and in turn leverage conservation and sustainable development that benefits the region and state



Mickey Dietrich, NYS Tug Hill Commission



Council	Communities Served
Cooperative Tug Hill Council	17 Towns 5 Villages
North Shore Council of Governments	2 Towns 2 Villages
Northern Oneida County Council of Governments	12 Towns 5 Villages
River Area Council of Governments	6 Towns 6 Villages
Salmon Rivers Council of Governments	5 Towns 2 Villages



# How is ambulance service in NYS organized?

- **NYS Department of Health  
Bureau of Emergency Medical  
Services**
  - General oversight of the emergency medical services (EMS) system statewide including financial and staff support to the State EMS Council (SEMSCO) and Regional EMS Councils (REMSCO's)
  - Approval of all Emergency Medical Technician (EMT) certification courses
  - Approval of County EMS plans
  - Among other things

 An official website of New York State. [Here's how you know](#) ▾

**Department of Health**

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**Bureau of EMS**

- [Protocols and Advisories](#)
- [EMS Forms](#)
- [Education and Certification](#)
- [Mental Health and Well Being](#)
- [Trauma Program](#)
- [Map – EMS Agency and Hospital Information by County](#)

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## Emergency Medical Technicians (EMTs) Save Lives!

**Being a part of an EMS Team provides you with**

- Sense of pride
- Opportunity to help your community
- Sense of accomplishment
- Extensive emergency response training
- Opportunity to advance in the EMS and health care profession
- An EMS family of nearly 65,000 providers in New York State

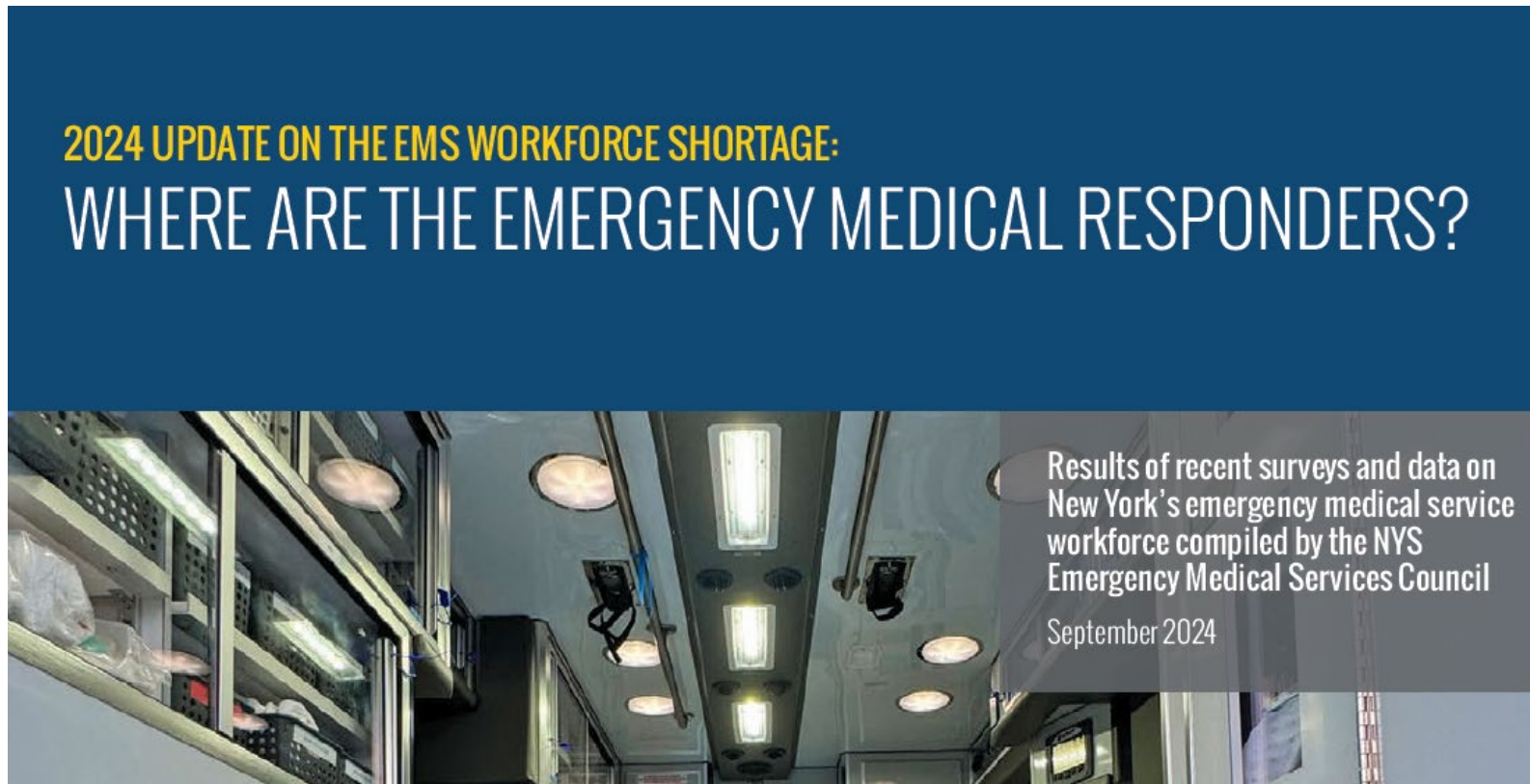




# How is ambulance service in NYS organized?

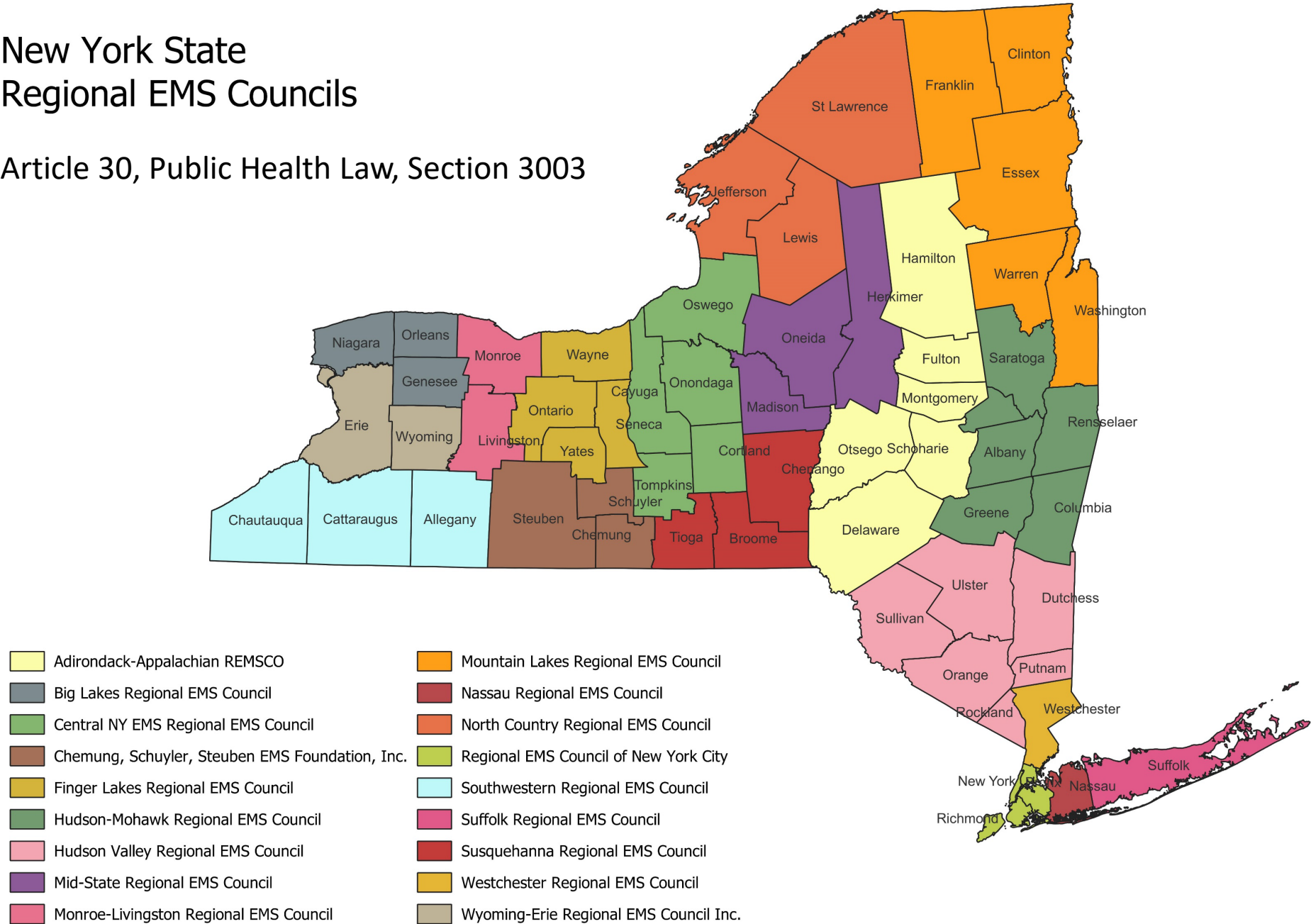
- **State EMS Council (SEMSCO)**

- Statewide coordinating body comprised of reps from the 18 REMSCOs plus 15 reps appointed by the health commissioner
- Article 30 of Public Health Law, Section 3002



# New York State Regional EMS Councils

Article 30, Public Health Law, Section 3003



# Certificates of Need (CON)

- Entities wishing to operate an ambulance service apply to the applicable REMSCO for a determination of public need for the service, prior to the NYS Bureau of EMS issuing a certificate of operating authority (PHL Article 30, Section 3005)
- **EMS CON** carried by the organization providing services, issued in four circumstances:
  1. New ambulance of advanced life support first response service operating certificate
  2. Transfer of EMS service ownership
  3. Expansion of operating territory
  4. Transition from a municipal declaration to permanent operating certificate at the end of the two-year initial operating period
- **Municipal CON (Muni-CON)** – authorized by state law in 1995/1996
  1. Municipality operates the ambulance service




## INTRODUCTION

This Policy Statement describes the application and consideration process, in accordance with Article 30 of the New York State Public Health Law (PHL), when applying for the following:

- A new ambulance or advanced life support first response service operating certificate,
- A transfer of EMS service ownership,
- An expansion of operating territory, and/or
- A transition from a municipal declaration to permanent operating certificate at the end of the two year initial operating period.


# Municipal Role in Providing EMS

- Yes, towns can play a role – but currently not required because EMS is NOT defined as an essential service
- There are some efforts underway to make EMS an essential service – stand alone bills and proposal in Governor's 2025-26 budget
- HOWEVER, towns can provide EMS, general ambulance service, or some combination in many different ways (it can get confusing!)



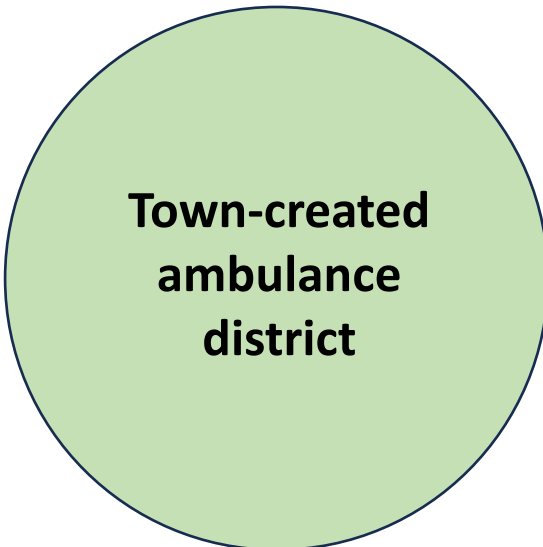
**Town-owned  
ambulance  
service**

**GML Article 6,  
Section 122b**




**Town-wide  
contract with  
individual,  
municipal  
corporation,  
association, etc.**

**GML Article 6,  
Section 122b**



**Town-created  
ambulance  
district**

**TL Articles 12 and 12-  
A, Section 198 (10-f)(a)**



**Town contract  
within any fire  
protection district  
under a fire  
protection contract**

**TL Section 184, GML  
Article 10, Section 209b**



# Municipal Role in Providing EMS, continued

- General Municipal Law (GML) Article 6, Section 122b is currently only effective until April 9, 2026 – where fire protection districts can bill
- EMS must be a town-wide charge, unless town establishes an ambulance district or provides ambulance services through a fire protection district contract
- Municipalities allowed to set a schedule of user fees to offset costs of services to taxpayers
- Collection and administration of user fees is the responsibility of the municipality; Third-party collection of fees is allowed under GML 209-b, but fees must be remitted to the municipality by the third-party
- Municipalities have the option to NOT provide any emergency or general ambulance service at all – not an essential service at this point

# How is Ambulance Service Funded?

## 1. Patient reimbursements

- ✓ Either through insurance companies, direct billing, or Medicare/Medicaid payments
- ✓ Current Medicare regulations only allow payment for emergency ground ambulance services when individuals are transported to hospitals, critical access hospitals, skilled nursing facilities, and dialysis centers (NOT primary care offices or urgent care facilities)
- ✓ Medicare and most commercial insurances reimburse ambulance service providers based on a fee schedule allowed by current regulations. There may be a shortfall between actual cost of service and amount of money recouped



# How is Ambulance Service Funded?

## 2. Contracts with local governments

- ✓ Ambulance services use income from municipal contracts to cover administrative costs or help fund capital or equipment purchases

## 3. Fundraising

- ✓ Many ambulance services are not-for-profit corporations and fundraise under GML Section 204(a), often to fill budget shortfalls for bills that are written off as uncollectable, or purchase specialized or additional equipment
- ✓ Municipally-owned ambulance services are **not** allowed to fundraise

# Ambulance Service Challenges

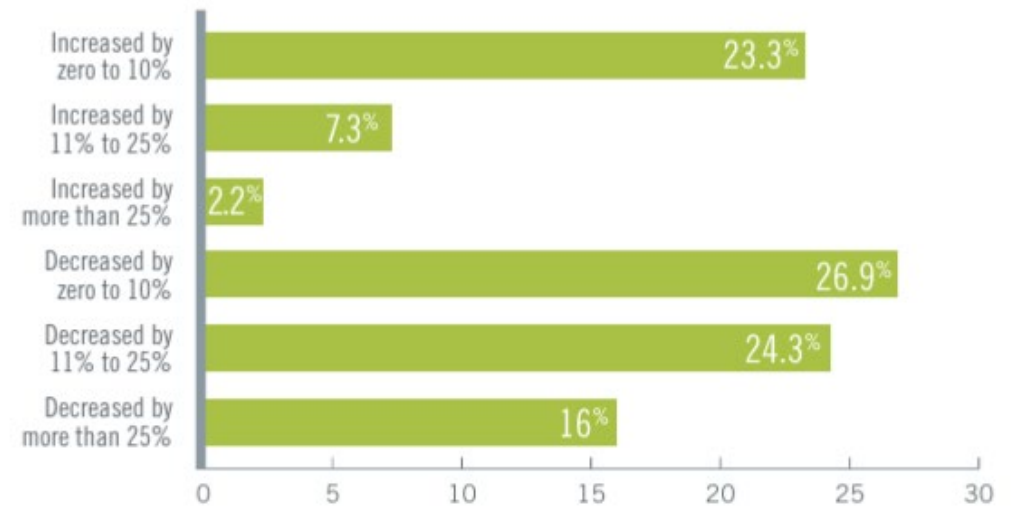
## Staffing

- DOH 2023 report: Number of certified EMS personnel statewide decreased 13% from 2019
- 37% of respondents to the 2023 SEMSCO EMS survey plan to leave the EMS field in the next 5 years

## Volunteers

- 2019 survey found 52% of agencies using volunteer responders reported responses moderately or severely impacted by staffing shortages
- 40% of agencies using volunteers saw certified volunteers decrease by 11% and 16% of agencies saw a 25% or more decrease (2019 report)

Has your number of certified volunteer responders increased or decreased in the last three years?



Two-thirds of agencies reported their number of certified volunteers decreased over the last three years; 16% saw a drop of more than 25%.

2019 report



## Paid staff

Pay rates for paid staff are significantly lower than other emergency first response professionals (fire/police)

### SALARY COMPARISON DATA — EMS/FIRE/POLICE/NURSING

2017 U.S. Bureau of Labor Statistics Data

[www.bls.gov/oes/current/oessrcma.htm](http://www.bls.gov/oes/current/oessrcma.htm)

	EMT/EMT-P	Firefighter	FF % Higher	PD Patrol Officer	PD % Higher	Registered Nurse	RN % Higher
Albany-Schenecatady-Troy	\$40,310	\$56,720	141%	\$68,110	169%	\$66,980	166%
Binghamton	\$35,230	\$65,970	187%	\$65,130	185%	\$62,320	176%
Buffalo-Niagara Falls	\$33,040	\$67,090	203%	\$66,280	201%	\$73,250	222%
Syracuse	\$34,760	\$48,860	141%	\$63,260	182%	\$64,750	186%
Rochester	\$35,180	\$68,360	194%	\$67,960	193%	\$64,280	183%
Utica-Rome	\$31,430	\$56,570	180%	\$57,580	183%	\$65,080	207%

2019 report

# Ambulance Service Challenges

## Training

- Several levels of training encompassing anywhere from 50 (for Certified First Responders) to ~2,000 (for paramedics) hours of training
- Training must be “refreshed” every four years
- Costs for tuition for the certification classes is significant – partial reimbursement from NYS is available under certain circumstances (if the student is unsuccessful in completing the course work or the state certification exam, the tuition costs are not reimbursed)
- In rural areas, travel distance from the training location can be an additional time and cost component

**New York State Department of Health  
Bureau of Emergency Medical Services  
Three Year CME Recertification Program**

**(Circle one of the following):**

**(Basic)    (AEMT)    (CC)    (Paramedic)**

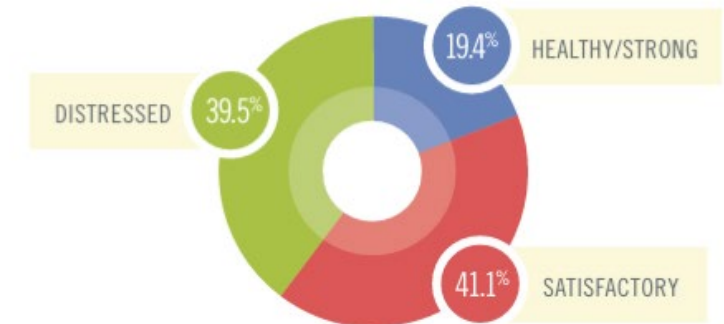
**Certification Renewal Cover Sheet**



# Ambulance Service Challenges Continued

- **Mental Strain** or “burn out” from dealing with life and death situations, traumatic events and medical emergencies is common
  - 85% of respondents have experienced burnout or compassion fatigue in their role as an EMS provider according to the 2023 SEMSCO survey
- **Physical Strain** often involving heavy lifting or other physically taxing activities in places where it is difficult or impossible to use correct body mechanics
  - Can be at risk for physical injury by patients who are combative due to drug or alcohol intoxication or experiencing head injury symptoms or mental health issues as well as bad actors
- Increasing “**off-load**” times at hospitals lengthens EMS calls and further stresses short-staffed agencies
  - In rural areas this increases the already significant time it can take to drive to the hospital and return to service – from some places in the Tug Hill region, the nearest hospital is 40+ miles away

Do you consider your EMS agencies responder workforce to be healthy/strong, satisfactory or distressed?

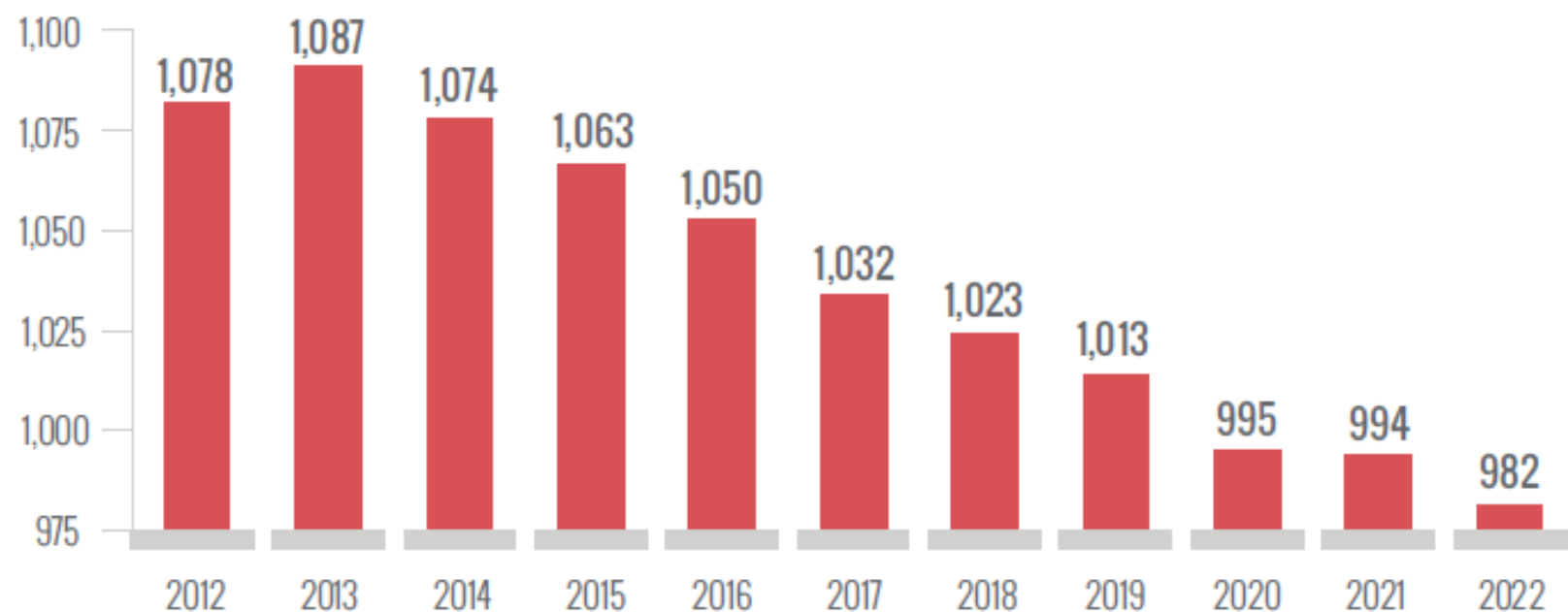


40% of respondents consider their EMS responder workforce to be “distressed.”

## EMS AGENCIES ARE CLOSING

- The total number of ambulance services in NYS has decreased by 9% over the past 10 years from 1,078 to 982 (Source: DOH 2023)
  - See endnote on page 7 for types of EMS agency ownership

Ambulance  
Services  
Per Year



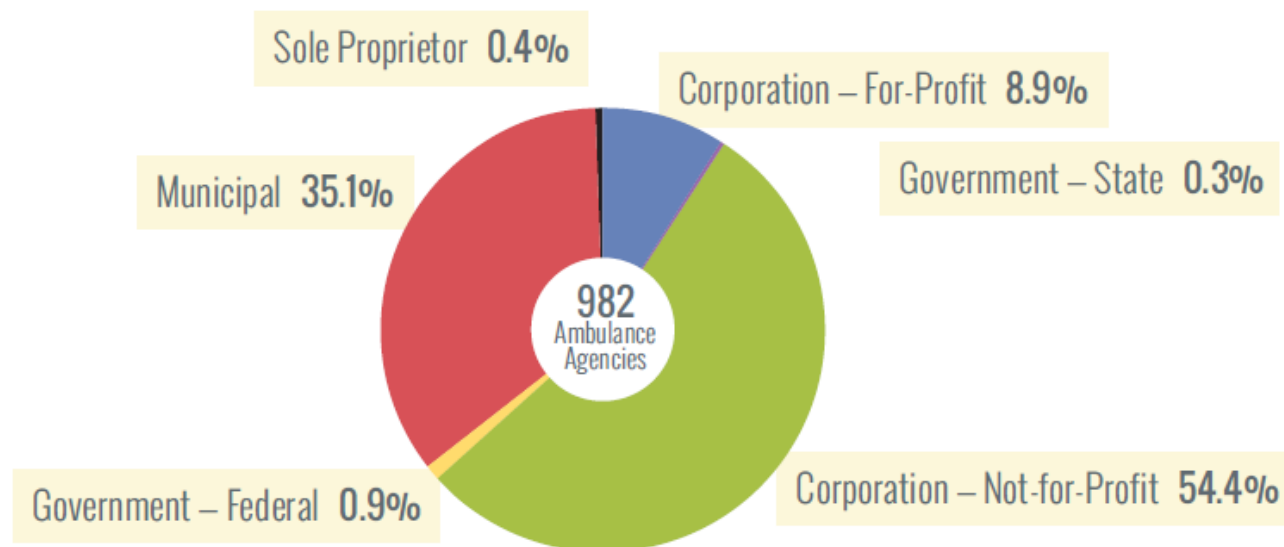
(Source: 2023 DOH PHHPC Ambulance Data Presentation)

## ENDNOTE

New York State has **982** ambulance services.

- Commercial For-Profit or Sole Proprietor (9%)
  - Commercial ambulance services answer **47%** of all emergency calls and **78%** of all non-emergency calls in NYS.  
(Source: United NY Ambulance Network testimony – NYS Joint Legislative Budget Hearing on the Executive Budget Proposal, February 8, 2022)
- Not-for-Profit (54%)
- Municipal (35%)
  - Fire District (17%)
  - County, City, Town, Village (18%)
- State and Federal Government (1%)

### Agency Breakdown

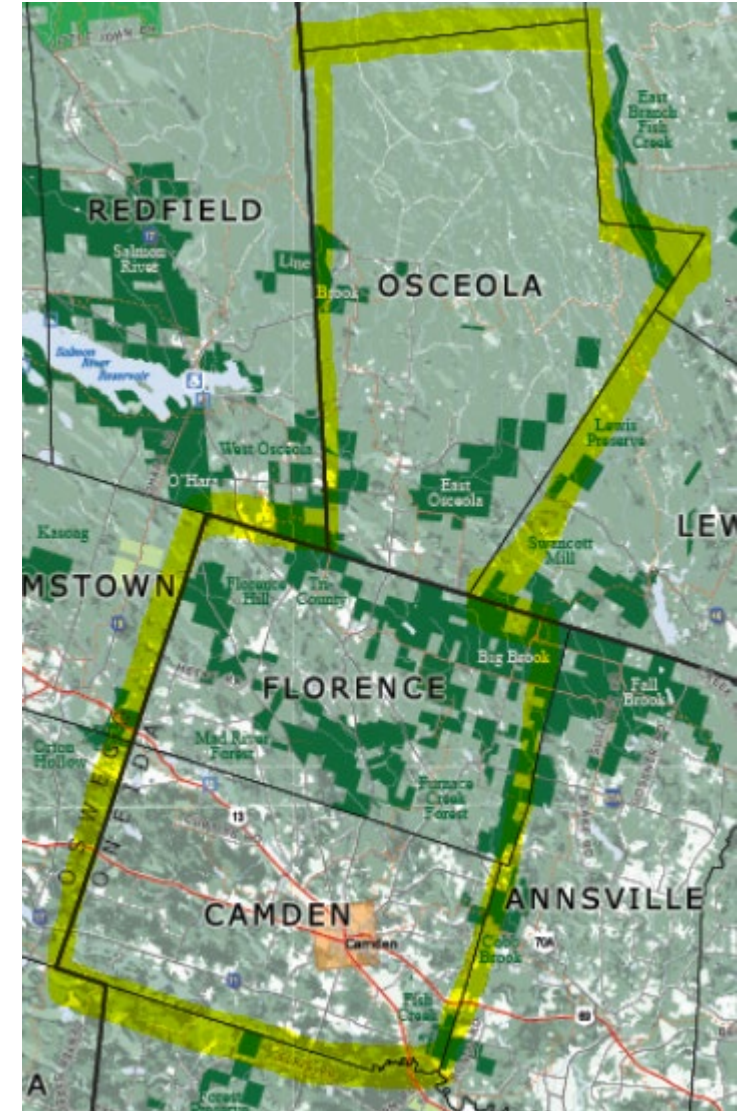


(Source: 2023 DOH PHHPC Ambulance Data Presentation)



# Camden Florence and Osceola Ambulance

- Town-owned municipal ambulance (originally just Camden)
- Were contracting with Florence and Osceola to provide services through mutual aid – there was no official jurisdiction
- In 2013, Florence and Osceola had to file a Certificate of Need (two different REMSCOs)
- Once CONs were secured, had to rebrand the ambulance as owned by all three municipalities
- Each town collects billing for calls in their town, then submit funds to ambulance
- Hybrid – both volunteer and paid staff



# Northern Oswego County Ambulance

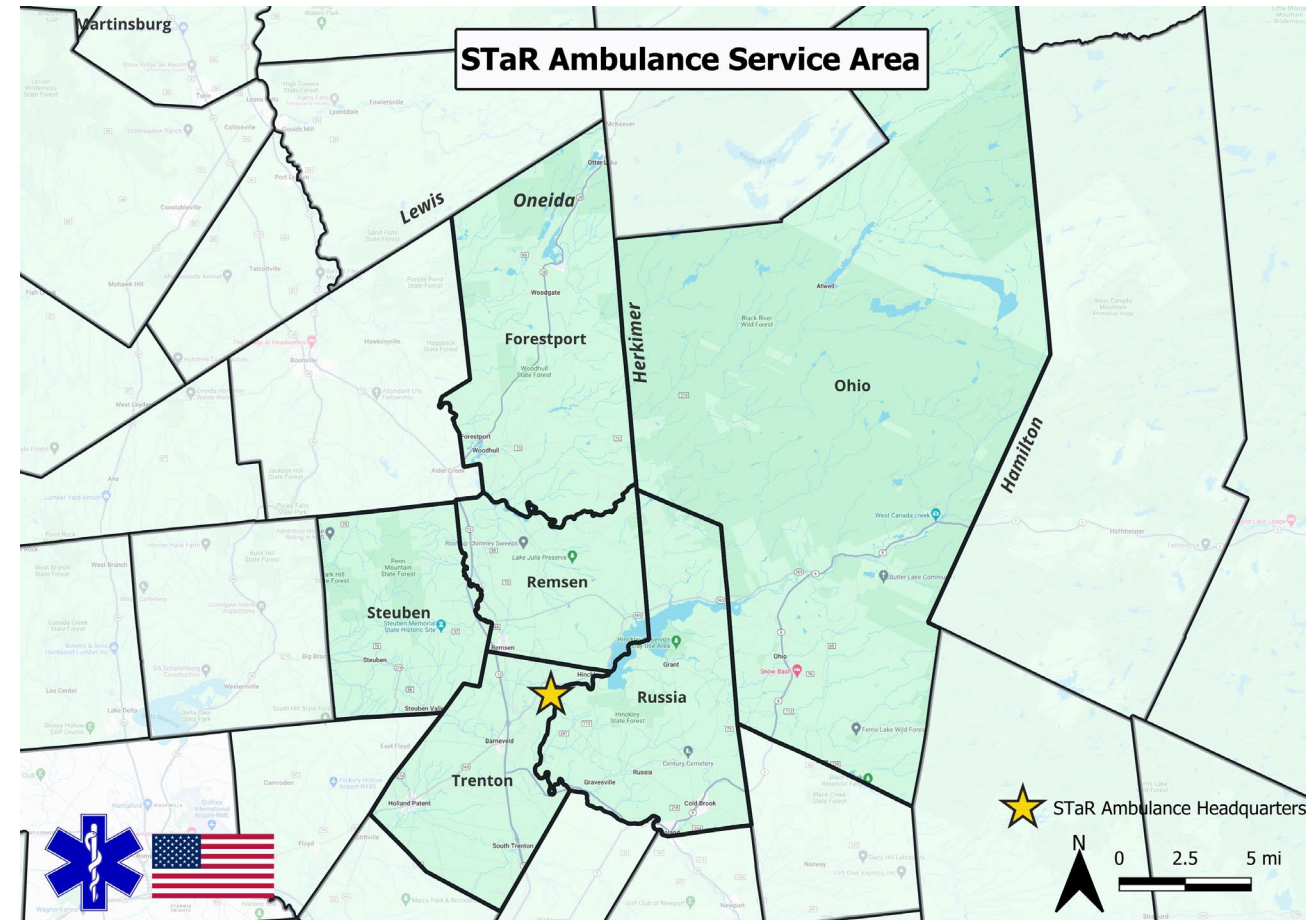
- Not-for-profit covering 7 towns by contract, 400 square miles in northern Oswego County, 30-45 minutes from nearest hospital
- 16,000 year-round residents, 12,000 seasonal
- Formed in 1974, crisis in 2009
- Board was restructured, each of the seven towns has a seat on the board, *“to improve community relations; bring financial stability to the organization; improve staffing; update medical equipment; and update the building facility”*





# STaR Ambulance

- Not-for-profit, created in 1976 as Prospect Ambulance and rebranded in 2018 after the village of Prospect dissolved
- Currently serves all or part of six towns in Oneida and Herkimer counties
- On average, insurance billings cover approximately 40% of STaR's expenditures. Contract revenue with towns, donations and grants must make up the difference. The ambulance service projects operating deficits the next two years.
- Trenton's contract trend shows big bump, then holding steady – not expected to continue
- Hybrid – volunteer and paid staff



2014	2015	2016	2017	2018
\$5,688	\$4,661	\$10,000	\$15,387	\$75,125
2019	2020	2021	2022	2023
\$75,000	\$75,000	\$75,000	\$75,000	\$75,000

## *For Years, He Has Saved Lives in Rural America. Who Will Take His Place?*

Volunteer ambulance squads are running out of volunteers.  
What happens when Bob VanCoughnett retires?

Share full article



Bob VanCoughnett in the South Jefferson Rescue Squad ambulance with a suspected stroke victim, Kevin Fuller.

# South Jefferson Rescue Squad

- Volunteer ambulance corps formed in 1969
- Fives towns, 250 square miles Adams, Ellisburg, Lorraine, Rodman and Worth
- Currently no paid EMS staff, declining volunteers
- Towns currently provide combined \$150,000 annually, rescue squad proposed forming an ambulance district to generate \$600,000 (96 cents for every \$1,000 of assessed property value)
- Not resolved





# North Shore Ambulance

- Not-for-profit on the north shore of Oneida Lake, Oswego/Oneida counties
- Had contracts to cover two towns and one village
- Closed doors in 2024 after 75 years of service
- Since closure, Menter Ambulance, a private ambulance service with a countywide CON, is responding to calls in much of the former service area, at no cost to the towns

# 2025-26 Executive Budget Proposal

- Includes HMH Part R regarding access to EMS.
- Designates EMS as an essential service, requiring towns to provide adequate EMS response capacity to meet community needs.
- Authorizes towns to establish special districts for financing and implementing EMS service expansion, with overlap prohibited to ensure equitable funding.
- Prohibits towns from dissolving existing ambulance districts except where the county explicitly assumes responsibility for EMS services in those districts.
- Creates Emergency Medical Community Assessment Program (EMCAP) to evaluate and enhance EMS throughout the state.
- Health Commissioner authorized to allocate funding to assist counties and agencies in implementing recommendations.
- Results shall be integrated in county EMS plans
- *Does not increase Medicaid reimbursements to EMS.*
- *Does not allow for ambulance protection districts.*
- *Does not talk about regional EMS plans – only state and county.*



# Incentivizing Tomorrow's Volunteers

- Income tax credit currently \$200 for volunteer firefighters and EMS personnel
- OR, if your municipality has passed a local law, a property tax credit – **one or the other**
- Pending legislation would allow volunteer firefighters and EMS personnel to claim both
- Also pending legislation to increase the income tax credit to \$500
- Offering EMT training through BOCES, qualifying to earn certification through NYS EMT exam



ISSUE PAPER SERIES

## Ambulance Service in Rural New York State

August 2024



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The Tug Hill Commission Technical and Issue Paper Series are designed to help local officials and citizens in the Tug Hill region and other rural parts of New York State. The Technical Paper Series provides guidance on procedures based on questions frequently received by the Commission. The Issue Paper Series provides background on key issues facing the region without taking advocacy positions. Other papers in each series are available from the Tug Hill Commission. Please call us or visit our website for more information.



STaR Volunteer Ambulance Facility, Prospect, NY