


Ambulance Service in Rural New York State

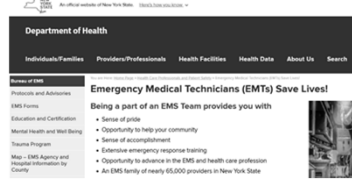
Katie Malinowski, Executive Director, NYS Tug Hill Commission
 Angie Kimball, Circuit Rider, Cooperative Tug Hill Council
 Nate Degear, EMS Coordinator, Oswego County Emergency Management Office



1

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 (REMSCOs)
 - Approval of all Emergency Medical Technician (EMT) certification courses
 - Approval of County EMS plans
 - Among other things



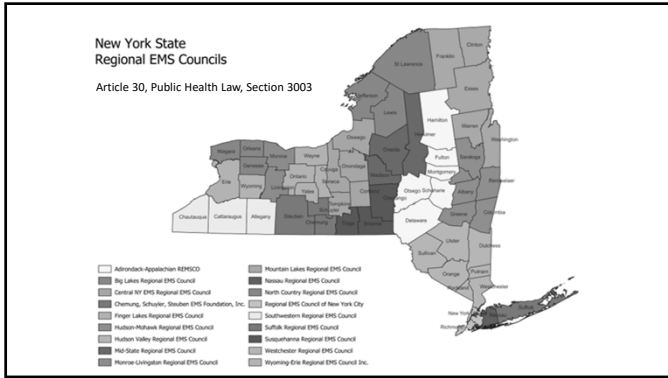
2

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



3



4

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 or 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.

5

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 proposed, language not included in final bill S7501A/A8086A approved in 2025
- **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

6

Municipal Role in Providing EMS

- Yes, villages play a role as well

 <p>Village-owned ambulance service</p> <p>GML Article 6, Section 122b</p>	 <p>Contract with individual, municipal corporation, association, etc.</p> <p>GML Article 6, Section 122b, VL Article 4, Section 4-412(9)</p>	 <p>Town-created ambulance district can extend upon consent; joint districts allowed</p> <p>TL Article 12, Section 190, GML Article 17a</p>	 <p>Village contract within any fire department or company of another entity upon consent</p> <p>GML Article 10, Section 209b</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

7

Municipal Role in Providing EMS, continued

- General Municipal Law (GML) Article 10, Section 209b(4) is currently only effective until April 9, 2031 – 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

8

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, Medicaid 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

9

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

10

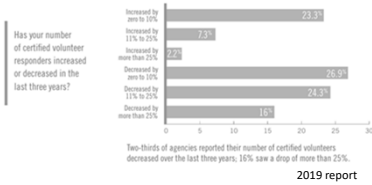
Ambulance Service Challenges

Staffing

- DOH 2024 report: Number of certified EMS personnel statewide decreased 17.5% from 2019 to 2022
- 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)



11

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/oesrscma.htm

	EMT/EMT-P	Firefighter	FF % Higher	PD Patrol Officer	PD % Higher	Registered Nurse	RN % Higher
Albany-Schenectady-Troy	\$40,310	\$56,720	141%	\$88,110	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

12

CAREER EMS WAGES

"EMTs and paramedics receive intensive training, work in high-risk and high-stress situations and have great responsibility for the well being of the people they serve. Yet, EMT wages are comparable or less than for less complex jobs, and Paramedic wages are less than other public safety and health care professions."

45% of EMTs report having an hourly base wage of \$19 or less 76% of EMTs report having an hourly base wage of \$24 or less

For reference, average wage for a convenience store shift manager in Upstate NY is \$18/hour. Average salary for a retail sales person in NYS is \$19.23

Source: 2023 SEMSCO EMS Salary Survey

13

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)

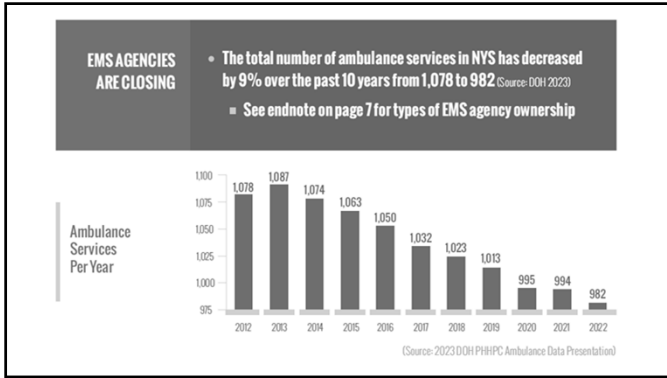
Certification Renewal Cover Sheet

14

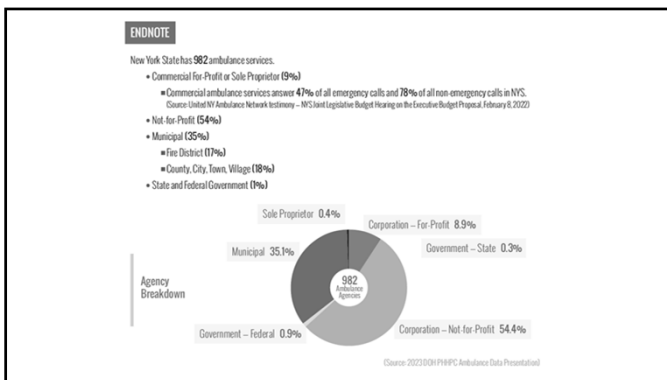
Ambulance Service Challenges Continued

- 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

15



16



17

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

18

STaR Ambulance

- Not-for-profit, created in 1976 as Prospect Ambulance, rebranded in 2018 after Prospect dissolved.
- Served all or part of six towns in Oneida and Herkimer counties. Insurance billings covered approximately 40% of STaR's expenditures, with contract revenue with towns, donations and grants must make up the difference. Despite best efforts, the ambulance service continue to run operating deficits.
- By working with the Marcellus Ambulance Volunteer Emergency Services (MAVES), STaR worked out a process, in close consultation with NYSDOH, to transfer the CDN to MAVES as of July 1, 2025. STaR is now working to dissolve their 501©3 and transfer assets to MAVES (dba NorthStar).
- MAVES' business model evolved during COVID by offering transfers of patients between hospitals, to maintain and eventually grow revenues. By moving patients between hospitals for access to needed services with higher level critical care support, MAVES was able to purchase ventilators and IV pumps for all rigs and train their employees on increasingly complicated interventions.
- STaR approached MAVES for assistance. Currently, there are three rigs in Marcellus and two rigs in Prospect during the day, with the Marcellus location going to two rigs at night.



19

For Years, He Has Saved Lives in Rural America. Who Will Take His Place?
 Volunteer ambulance squads are counting on volunteers. What happens when Bob VanCoughout retires?

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

20

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



21


ISSUE PAPER SERIES
Ambulance Service in Rural New York State
April 2026
NEW YORK STATE TUG HILL COMMISSION



www.tughill.org
katie@tughill.org
angie@tughill.org

22




Case Study:
EMS in Oswego County
Nate Degear, AEMT, Oswego County EMS Coordinator






23

Oswego County

- 951.6 Square Miles of Land area
 - 19th largest in NYS
- Total Population: 117,525 residents
- 22 Towns, 2 Cities, and 10 villages
- 9 School Districts
- 2 Colleges
- Several Large Yearly Events
 - Harbor Fest
- Critical Infrastructure:
 - Novelis Aluminum Plant
 - Nine Mile/James A. Fitzpatrick Nuclear Facility
 - I-481 and I-81
 - Dozens of other Manufacturing and Commercial Sites

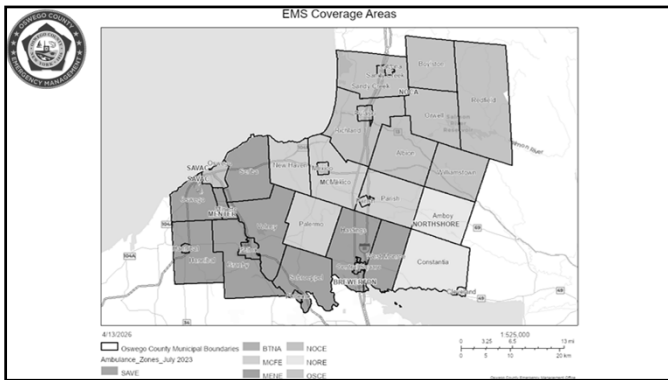
24

First Response Agencies In Oswego County

- Oswego County E911
- 8 Law Enforcement Agencies (County, City, Village and State)
- 30 Fire Departments (3 Paid & 27 Volunteer)
- 6 EMS Agencies (1 Private and 5 Public):
 - Brewerton Ambulance (Brewerton, NY)
 - McFee Ambulance (Mexico, NY)
 - Menter Ambulance (Central Square, Fulton, & Oswego, NY)
 - Northern Oswego County Ambulance (Pulaski, NY)
 - Oswego City Fire Department (Oswego, NY)
 - Student Association Volunteer Ambulance (SUNY Oswego, NY)


25



26


Brewerton Ambulance

- Located in Brewerton, NY
- Primarily an Onondaga County Agency
- Has a very small operating territory in Oswego County
- Staffs 1 to 2 Ambulances 24/7
- 2025 Call Volume: 1,010 (over 90% of which were in Onondaga County)




27

McFee Ambulance




- Located in Mexico, NY
- District Size: 148 Square Miles
- District Population: 16,148 People
- Staffs 2-3 Ambulances 24/7
- 2025 Call Volume: 2,153




28

NOCA

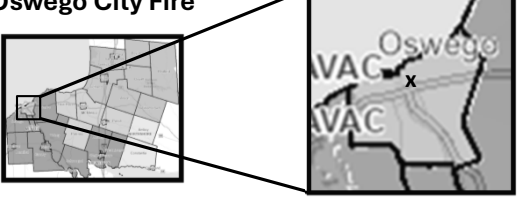


- Located in Pulaski, NY
- District Size: 319.7 Square Miles
- District Population: 15,458 People
- Staffs 2-3 Ambulances 24/7
- 2025 Call Volume: 2,733




29

Oswego City Fire

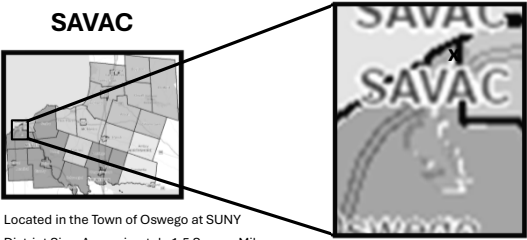


- Located in City of Oswego, NY
- District Size: 11.2 Square Miles
- District Population: 16,921 People
- Staffs 1-2 Ambulances as Needed/Requested
(Menter is the Primary EMS Service for the City of Oswego)
- 2025 EMS Call Volume: 220




30

SAVAC

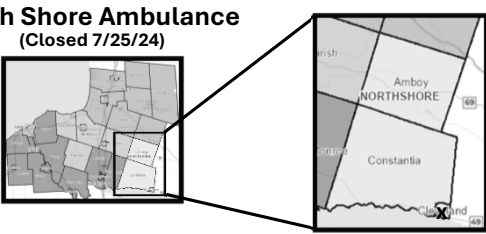


- Located in the Town of Oswego at SUNY
- District Size: Approximately 1.5 Square Miles
- District Population: Approximately 6,750 People overnight & Approximately 10,000 People during Weekdays.
- Staffs 1 BLS Ambulance during the Semester
(Menter is the Primary EMS Service for ALS or if SAVAC is Out of Service)
- 2025 Call Volume: 228




31

North Shore Ambulance
(Closed 7/25/24)

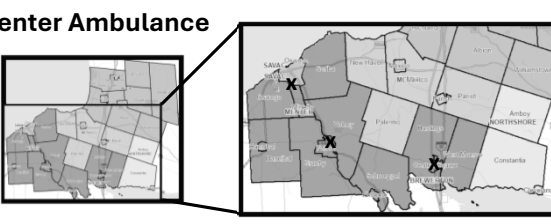


- Located in Cleveland, NY
- District Size: 95.5 Square Miles
- District Population: 6,294 People
- Staffed 1-2 Ambulances 24/7
- Call Volume 7/25/23 – 7/25/2024: 268




32

Menter Ambulance



- Located in Central Square, Fulton, and Oswego, NY
- District Size: 354.3 Square Miles
- District Population: 81,720 People
- Staffs 2-3 Ambulances in Central Square, 6-8 Ambulances in Fulton, and 2-3 Ambulances in Oswego 24/7 (10-14 total)
- 2025 Call Volume: 18,531




33

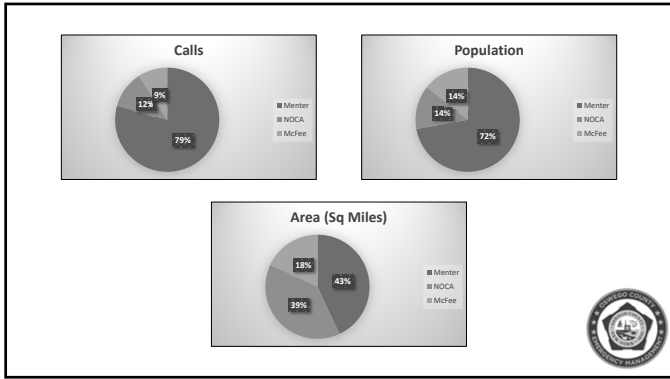
Summarized

Agency	Total Calls	Population	Area (Sq Miles)	Staffed Ambulances
Menter	18,531	81,720	354.3	10 to 14
NOCA	2,733	15,458	319.7	2 to 3
McFee	2,153	16,148	148.4	2 to 3
SAVAC	228	8,375	1.5	1
Oswego City Fire	220	16,921	11.2	1 to 2
Brewerton	100			1 to 2
TOTALS:	23,965	117,525	951.6	17 to 25

*totals might be slightly off due to some populations being counted twice, missing data, or data collected from different census polls



34




35

The North Shore Closure

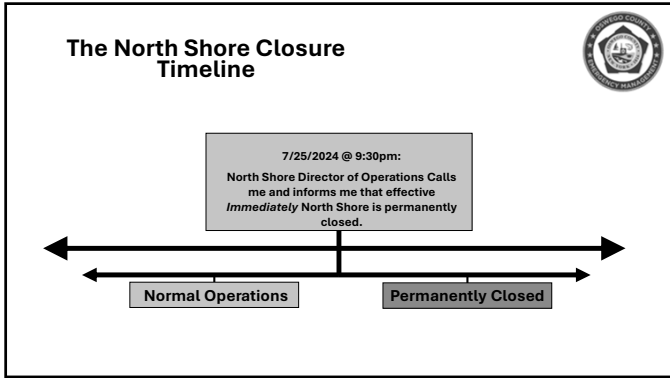
- NYS DOH BEMS Policy Statement 13-09
 - "Closure Planning for Ambulance or Advanced Life Support First Response Service Operating Certificate"

The Department of Health, Bureau of Emergency Medical Services (BEMS) recognizes that the decision by an EMS agency to close its doors is difficult and complicated. However, an EMS agency should **NOT stop responding** suddenly and without a closure plan and proper notification of the neighboring EMS agencies, the dispatch organization, the Regional EMS Council (REMSCO) and the Department of Health, Bureau of EMS. This policy is intended to provide guidance information, an outline for a written **Closure Plan** and detail the procedures an EMS agency should follow to stop providing EMS response, to surrender or transfer the EMS Operating Certificate and close the business:

The EMS agency should advise the Department and the Regional EMS Council (REMSCO) in writing, at least 90 days prior to the end of operation that the EMS agency will no longer be providing EMS response, prehospital care and transportation (if applicable).



36






37

Response Times to North Shore's District 1 Year Prior to Closure

Responses to North Shore's District 7/25/23 - 7/25/24

Agency	Constantia				Amboy			
	# of Calls	Chute Time	Response Time	Total	# of Calls	Chute Time	Response Time	Total
North Shore	328	08:29	08:18	16:47	39	11:35	21:22	32:57
Brewerton	1	07:29	12:57	20:26				
McFee	1	05:01	11:19	16:20	2	08:25	17:13	25:38
Menter	89	08:49	15:01	23:50	52	09:49	21:22	31:11
Totals:	419	08:33	09:45	18:18	93	10:32	21:16	31:48
District Totals:	512	08:55	11:51	20:46				

38

The North Shore Closure: Immediate Steps

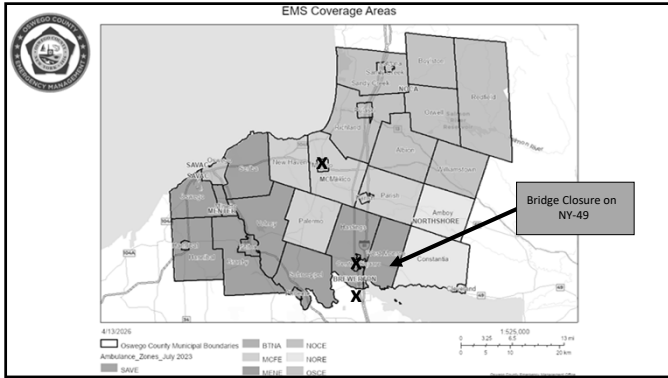
The Closure Occurred on the Opening Night of 2024 Harbor Fest

- Following Notifications Immediately Made:
 - Oswego County 911 Director
 - Oswego County Fire Coordinator
 - Oswego County Emergency Management Director
 - Mutual Aid EMS Agencies
 - Local Officials and Municipalities

The Immediate Plan:

- Dispatch the Closest Most Appropriate Mutual Aid Resource
- Dispatch Volunteer Fire Rescue to Every Call



39



40

The North Shore Closure: Long Term

- After the termination of North Shore's CON, we no longer could dispatch resources based on mutual aid.
- Menter Ambulance assumed North Shore's former operating territory as they already had those municipalities on their CON.
- Menter Ambulance remains the primary service for the towns of Amboy and Constantia, relying on mutual aid as needed





41

Response Times to North Shore's Former District 2025

Responses to North Shore's Former District 2025

Agency	Constantia				Amboy			
	# of Calls	Chute Time	Response Time	Total	# of Calls	Chute Time	Response Time	Total
Menter	737	07:56	16:22	24:18	35	08:50	22:08	30:58
District Totals:	772	07:58	16:38	24:36				



42



What Changed?

- Average response times to Amboy **decreased 50 seconds**
- Average response times to Constantia **increased 3 minutes and 50 seconds**
- Significant drop in need for mutual aid
- Significant increase in total call volume
- Municipalities no longer supplement the ambulance coverage with taxpayer dollars



43

Why We Were Lucky

- North Shore bordered Menter Ambulance
- Menter Ambulance was willing and prepared to take the territory on.
- Menter already had the towns on their CON.
- Menter Ambulance is a larger private agency, which can use urban call volume and inter-facility transports to supplement costs of operating in a rural environment.
 - Without supplemental funds from municipal sources, many small rural agencies cannot afford to stay in service on call volume alone.



44

Looking Ahead

Timely and effective EMS is not a luxury; it is an expectation.

- EMS is not considered an Essential Service in NYS.
- Insurance payouts should be adjusted to keep pace with rising operational costs.
- Municipalities may be called on to assist funding their Rural Non-For-Profit EMS Agencies if they want to maintain the availability of that resource in their community.
- Support the local Volunteer Fire Rescue Service.



45

Nate Degear, AEMT
Oswego County EMS Coordinator
Oswego County Emergency Management Office
Nathaniel.Degear@OswegoCountyNY.gov