

Minnesota Fire Association Coalition – MNFAC



Local Control of Emergency Medical Services (EMS) in Minnesota Policy Position

The current laws regulating Emergency Medical Services (EMS) in Minnesota allow ambulance providers the ability to provide EMS services in exclusive operating areas referred to as Primacy Service Areas (PSAs) – for an indefinite period of time with very little oversight or transparency. Ambulance services currently have no response time requirement from the Emergency Medical Services Regulatory Board (EMSRB) – the state’s EMS regulatory agency which oversees and issues ambulance licenses. The EMSRB also has no oversight on ambulance billing rates. Ambulance services (both public and private) have the ability to use revenue recapture to recoup unpaid bills from an individual’s state tax returns. These are only a few of the many examples of the limited oversight of ambulance services in Minnesota.

Minnesota regulations require little in the way of transparency of the ambulance industry. Ambulance services are not required to disclose the number of ambulances staffed, where the ambulance is responding from or any other important data points that would be important to ensuring a community is receiving quality ambulance services. While Minnesota’s EMS regulations are intended to create exclusive operating areas, there are numerous instances of overlapping service areas across the state with no guidance on who has the authority to determine which provider is the primary ambulance service in those overlapping service areas.

Currently no other Health Licensing Board in Minnesota grants a provider an exclusive operating area as does the EMSRB. Historically, Health Licensing Boards have played a critical role in setting professional standards and establishing credentialing processes. Other regulated industries in Minnesota such as public utilities - that have exclusive operating areas have considerably greater transparency and oversight. Public utilities exclusive operating areas are not overseen by the industry itself, nor are those exclusive operating areas guaranteed indefinitely.

MNFAC believes the local units of government (those who are closest to the service delivery) are best positioned to determine who the licensed ambulance provider is, assure transparency, and determine what level of service is needed for that community. MNFAC proposes uncoupling the professional standards overview by the EMSRB from the service area determination thus allowing the local unit of government to determine who provides service within their political boundary. This allows the professional standards to continue to be set by the EMS Regulatory Board which is made up of industry professionals and stakeholders.

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