

Mike McGrane
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Attachment 1

House Bill 561
Emergency Medical Services III Grant Fund

This legislation would expand the potential use of grant funds for emergency medical services to encompass not only the purchase of vehicles and equipment, but also to include training, licensing technology, and costs not related to the salary of personnel.

Currently EMS grants to local agencies are limited to the acquisition of vehicles and equipment. \$1.00 from drivers' license fees are dedicated to the **EMS III Fund** which generated \$1.7M in FY 2021. That amount was split \$850,000 to vehicles and \$850,000 toward equipment purchases. EMS agencies apply for grants through the Bureau of Emergency Medical Services and Preparedness.

In 2021, 25 applications were submitted for vehicles totaling \$4.3M, but only 7 grants were awarded. For equipment, there were 81 requests totaling \$1.1M, but only 63 were awarded. The grants for vehicles, mostly ambulances with an average cost of \$242,000, covered approximately 60% of the cost. The 2021 cap for ambulances was \$140,000. Alternative agency funding comes from patient revenues for those agencies that qualify to bill patients (only those who transport patients), from ambulance or fire district funds if part of a district, from 25 cents from vehicle registration fees (EMS I Fund) that are retained by the counties specifically for EMS, or from donations and local fund raising activities. Not all areas of the state are covered by an ambulance district, and many EMS agencies do not transport patients or do not have the resources to bill for services. As for the county EMS dedicated fund, some counties receive less than \$1,000 annually for EMS (Camas, Clark, Butte). Those agencies with less funding, may not even apply for the EMS grants because they cannot afford their share of the cost of needed vehicles and equipment.

This legislation simply broadens the allowable use of grant funds for needed, but less costly items, most importantly for training and licensing of current and new EMS volunteers. 65% of EMS providers in Idaho are volunteers who are dedicated to their communities and proud of their service. This legislation would provide needed support for those agencies that otherwise would not participate in the grant process. Awards preference volunteer and rural agencies. EMS III grant awards would still be limited to governmental or non-profit agencies; based on need; and must meet bureau grant criteria.