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Unity Is Strength

To: Chairwoman Senator Carolyn McGinn and members of the Senate Committee on Local Government

From: David Adams, President of the Kansas Emergency Medical Services Association

The Kansas EMS Association (KEMSA) represents over 2,300 EMS professionals and 117 EMS agencies in Kansas; we represent agencies that are volunteer, privately owned and operated, hospital based, combined Fire and EMS or municipally run departments. As such, KEMSA understands the various types of services we represent as well as the many challenges our industry faces; including reimbursement for our services as well as the staffing challenges in our great state.

Regarding Senate Bill 384, the bill, as written, will directly harm persons in every county in the great state of Kansas. The Kansas EMS Association understands and acknowledges there are struggles in the smaller counties and communities due to monetary constraints as well as the ability to recruit and retain volunteers and employees. This bill will lead to unnecessary and needless suffering and deaths of our citizens. Our opposition to this bill is based on multiple factors including and not limited to:

- The Kansas Board of EMS has adopted new variance procedures and processes to assist agencies in a proactive approach to increase staffing while adjusting for their unique challenges. This variance process has five (5) agencies enrolled and has not been given a chance to show whether it will successfully mitigate their challenges.
- 2. The bill makes no provisions for the person driving the ambulance. The operation of an ambulance under normal conditions is a dangerous endeavor and requires training and understanding of the characteristics of such a large vehicle. Driving an ambulance in an emergency utilizing lights and sirens will increase the likelihood of traffic accidents exponentially as those driving will not know how to navigate traffic and the unpredictability of others properly and safely.
- 3. The bill allows for patient care to be handled by one person at the level of Emergency Medical Technician (EMT) in unpredictable emergency situations. Calls into 911 systems often do not provide an adequate picture of the situation and we can say with certainty there will be a lack of appropriate care in many cases.
- 4. The population size of the communities included in the bill is disproportionately high when compared to the departments who are struggling with volunteer staffing. While all departments struggle with personnel from time to time, this SB 384 will allow for larger communities to reduce their capabilities which will negatively impact a larger number of

their citizens. At this time, we are unaware of staffing shortages in larger communities which would warrant this drastic change.

5. Over the past 30 years Emergency Medical Services have grown in ability and expectations. The COVID-19 pandemic showed the nation what EMS can do and our value to those we serve. No other state has such a liberal and lax policy regarding the size and scope of Senate Bill 384; thus, this is unprecedented and will set Emergency Medical Services in the state of Kansas back 30 years from which we may never recover.

Based on the factors I have presented; the Kansas EMS Association opposes Senate Bill 384 as written.

Thank you for your consideration on this most important matter.

Respectfully submitted,

David A. Adams, KEMSA President