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## **EMS is an Underutilized Workforce that Can Provide Low-Cost and High Quality Prevention and Disease Management Services in Patients' Homes**

### **The Need**

The Institute of Medicine in *"Retooling for an Aging America: Building the Health Care Workforce"* (November 2008) states:

"Meeting the demand that is expected in coming years will require expansion of the roles of many members of the health care workforce... As the roles and responsibilities of individual members of the health care workforce change, the Medicare system will need to be flexible in paying for innovative models of care and perhaps emerging types of providers that have new designations and training requirements."

Pennsylvania State Senator Lisa Baker stated at an Appropriations Committee meeting on 3-18-09 during discussions of home health care for seniors: "As we've been talking about our shift to home- and community-based care, it seems to me we have to have a lot of other systems in place to help support that," and she then asked the Department of Aging Acting Secretary John Michael Hall if there are enough qualified caregivers available "to give families the confidence their loved one can actually be cared for in their home." Hall responded: "We struggle in this state and in this country with a shortage of both nurses and direct-care workers, and it does hinder our ability to extend services and to provide the kind of confidence that our families need."

**However, there is an underutilized healthcare workforce that is present in almost every community across Pennsylvania and the United States that can help meet these needs: Emergency Medical Service (EMS) agencies and providers.**

In addition, utilizing EMS agencies and providers to deliver prevention and disease management services in the community can help to stabilize struggling EMS agencies, especially in rural areas, through increasing their revenue and providing additional education and career opportunities for EMS providers..

### **What is Emed Health?**

Emed Health is a division of the independent nonprofit Center for Emergency Medicine of Western Pennsylvania (CEM). CEM is a multi-hospital consortium dedicated to the advancement of emergency medicine through research, education, air medical transport and quality care. Emed Health utilizes specially-trained Emergency Medical System (EMS) providers, such as paramedics and EMTs, as health coaches to deliver prevention and disease management services in the home, community and worksite. Emed Health's programs are unique in three ways:

- Emed Health provides a new level of community and home-based healthcare services to enable people to better manage their own health, such as a primary fall prevention program for seniors and a "Safe Landing" program, in which a home visit is provided within 48 hours after discharge from the hospital to assist in this transition from hospital to home. EMS health coaches provide all of the patient care.
- Emed Health subcontracts with EMS agencies to provide these new healthcare services which results in diversification and increases in EMS agency revenue and creation of new career opportunities within the existing EMS system for EMS providers.

- Due to the lower costs of EMS provider wages (1/2 to 1/3 the cost of nurses) and use of existing EMS infrastructure (malpractice insurance, workman's compensation, vehicles...), all patient services are provided in a cost-effective manner to patients in their homes, workplace or communities- "bringing healthcare to the people".

Due to the fragmentation of EMS, Emed Health provides the evidence-based programs, training, data collection, data analysis, quality assurance and contract acquisition with 3<sup>rd</sup> party payers. The need for these new services is great in Pennsylvania due to an aging population with increasing health concerns, home healthcare nursing shortages, physicians with dwindling availability, and costs that are escalating.

### Current Emed Health Programs

#### 1) Prevention Programs

- **Seasonal and H1N1 vaccination** in the home, hospital units (mobile cart program) and job sites. In 2009, Pennsylvania was the first state to use EMS personnel and agencies statewide to supplement the local Departments of Health to provide H1N1 vaccines to the public due to previous work and publications about Emed Health's flu programs (Zimmerman, RK et al. *Factorial design for improving influenza vaccination among employees of a large health system. Infect Control Hosp Epidemiol.* 2009 Jul;30(7):691-7 and Mossesso, VN et al. *Influenza immunizations provided by EMS agencies: the MEDICVAX Project. Prehosp Emerg Care.* 2003 Jan-Mar;7(1):74-8.).
- **Biometric health screenings** at employer sites (point of care glucose, blood pressure, cholesterol, carbon monoxide, and body mass index testing with relevant counselling).
- **Primary fall prevention for seniors.**

#### 2) Disease Management Programs

- **Individual disease management:** One-on-one home visits that focus on empowering patients to manage their specific diseases, such as asthma, congestive heart failure, coronary artery disease, COPD and diabetes.
- **"Staying Independent" seminar:** Six chronic disease management group classes which focus on managing the psychosocial burdens of having a chronic disease.
- **"Safe Landing" transitions to home program:** Patients are seen in the hospital and enrolled in a program of one or more home visits after discharge from the hospital to ensure a smooth transition from the hospital to home and prevent readmissions. Medications, discharge instructions, caregiver support, and follow-up care, based on Dr. Eric Coleman's work, are reviewed with the patient in his/her home within 48 hours of hospital discharge by an EMS health coach.

### The Request

1. When developing regulations and laws around healthcare services, such as prevention and disease management, include EMS providers and agencies in the language as possible providers or at a minimum DO NOT exclude them.
2. Include the Office of EMS within the Department of Health, Emed Health, the Pennsylvania Ambulance Association and other EMS advocacy groups when developing solutions to healthcare challenges.
3. Consider funding demonstration projects to determine the feasibility and cost-effectiveness of such programs outside of western Pennsylvania because Emed Health has a potential model for the entire state of Pennsylvania and the country.