



Association of Towns

of the State of New York • G. Jeffrey Haber, Executive Director
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Volunteer Fire and Emergency Medical Services - Systems in Crisis: WHITE PAPER

The impetus for this study emanated from the direct concern of the Association's Executive Director, G. Jeffrey Haber. This was reinforced by statements of concern from our membership as our staff raised the issue while traveling the State on lobbying and training missions. Many town officials feel that the state of volunteer emergency services in their respective areas of the State is in crisis and that the level of protection is dropping drastically because of a shortage of volunteers in fire and ambulance. More importantly, they feel that (due to the threat to the volunteer services) a dramatic increase in real property taxes (town government's only locally-generated revenue) is looming.

Are the training requirements mandated by the State an impediment to recruitment and retention? Do the requirements reflect the levels of expertise necessary to perform many of the basic tasks associated with fire and emergency services? Are there ways to alleviate some of the time burden imposed on volunteers by State mandates? Has the threat of terrorism placed additional unreasonable demands on this locally-funded system?

The Association of Towns offers this paper as the basis for an exploration and discussion of the issues contributing to this looming crisis.

Why Is This a Town Matter?

In New York, most towns are small (85 percent of the 932 towns have populations less than 10,000 and 68 percent have less than 5,000) and are served by volunteer fire and ambulance squads. According to the National Volunteer Fire Council (NVFC), the number of volunteer firefighters in the U. S. has declined 5-10 percent since 1993 while fire department call volume has increased by 20 percent. Most of this is attributed to the sharp increase in emergency medical calls. In New York the situation is worse: according to the NYS Office of Fire Prevention and Control (OFPC), over the past 10 years the number of volunteer firefighters has decreased more than 18 percent and EMT volunteers about 28 percent! [The Fire Association of the State of New York \(FASNY\)](#) states that in the more rural counties, the EMT ranks have been depleted by as much as 50 percent!

Many town officials feel that the state of volunteer emergency services in some areas of New York State is rapidly approaching crisis proportions. In other places, the crisis may

have already arrived. If it is true that the level of protection is dropping drastically because of a shortage of volunteers in fire and ambulance, then there will be a need to have full-time, career staffing of these departments. This would be intolerably expensive and result in a dramatic increase in town government's only source of locally generated tax revenue: the real property tax.

Another significant issue is the change in service expectations and demand by citizens. As the population ages and shifts from urban to suburban to rural, it certainly will have an impact on the number of calls and type of emergency services that the town is expected to deliver. According to FASNY, about 70 - 80 percent of the EMS squads in New York State are connected with a fire department. Many squads are incorporating separately in order to position for more flexible use of volunteer and career personnel, as well as more interactive mutual aid agreements and financial options such as billing for some services. Many towns already contract their ambulance services out to commercial companies. Some contract with fire companies that employ career staff. How does this affect the cost? Who handles the billing and the paperwork? Can we expect that this trend will continue?

Ironically, this study was started in August, 2001. Soon after, the entire system of emergency response was placed in a spotlight like never before because of the terrorists strikes of September 11. Now, almost four years later, the public perception of emergency service has been changed drastically. Since homeland security and the response to terrorism have been thrown into the mix, have the expectations and demands become unrealistic?

There are many theories about the genesis of this crisis. The pursuit of answers in this vein (i.e. societal change, State and Federal mandates on coverage and training, economic pressure) is complicated and could lead to a protracted academic exercise. This is not the focus of the Association of Towns. As interesting as these subjects may be, they have already been analyzed in the excellent report: *Recruitment and Retention in the Volunteer Fire Service*, produced by the Federal Emergency Management Agency (FEMA), the National Volunteer Fire Council (NVFC) and the US Fire Administration, as well as in many other publications.

For the Association, the task at hand is to determine the potential impact of the shortage of volunteer fire and emergency service providers on town real property taxes and as a result, on the quality of life in towns. We need to estimate the cost of substituting paid coverage for fire and ambulance services for volunteers and translate it into "dollars and cents". The report: *Tax Savings and Economic Impact of Volunteer Firefighters*. (Firemen's Association of the State of New York, October, 2001) is now public and addresses the fire service aspects of the crisis in this manner. In many ways the two services are inseparable because many volunteer firefighters are EMS providers as well. In a lot of cases the volunteer fire company provides part or all of the EMS service. Sometimes this involves partnerships with private agencies or a combination of career staff with the volunteers.

Why are we concerned about this? At the outset, it is important to note the severe limitations on town real property tax revenue that already exist. In New York State, the real property tax revenue source is a "pot" of money shared across classes of government that respectively dip into it in varying degrees. While there is no Constitutional "limit" on the amount that towns are allowed to raise through the property tax, in reality it is finite. This pot of money serves many masters and recently has been eroded by increases in school, county, village and special district demands. Indeed, New York is one of only a very few states that require local government to share in the cost of Medicaid – an enormous cost that falls back on real property taxes in varying degrees from county to county. Despite recent progress in stemming the cost of Medicaid, demands on this "pot" from all levels of local government show signs of growth - continuing to limit the amount of revenue available to towns.

There is no help from the higher levels of government either. Federal revenue sharing ceased in the late 1980s and for the last 10 years, State revenue sharing has declined dramatically, first in real dollars under Governor Cuomo and since that time, because of no increase, as a percentage share of town revenue. Clearly, the crisis varies in degree and potential cost from area to area across the State. It is the result of many factors that are in the control of many different players. We need to draw together those most heavily affected to agree on a plan of action. Our hope is that by focusing attention on the cost issues, we can begin progress toward this goal.

Will the complexities of fire and EMS delivery continue to grow in the new millennium, requiring even more time from volunteers? In particular, the dependency on volunteers in towns for disaster management seems critical in that it adds to the training load (Hazmat, WMD) and the risk factors. It also may be a key to bring up in recruitment efforts, appealing to the homeland security sentiment.

According to the NYS Department of Health (DOH) Bureau of EMS, funding and requirements for EMT training have seen some changes since 1994. In that year, a dedicated training fund for local EMS was established in the DOH that pays for the delivery of approximately 2,000 courses per year around the state. In 1998, a "no-test" refresher system using continuing medical education (CME) credits became an alternative to periodic mandatory testing. Meanwhile, the time demand for initial EMT certification training has grown to almost 140 hours, not including continuing hours to maintain certification. Back in the 1970s it was about 80 hours. For firefighters, the time demand has seen some relief recently. While for about 10 years previous to 2004, the number of hours required for basic firefighting increased, the old "first responder" status has been reinstated requiring fewer hours of training.

The concept of recertification every 3 years needs to be addressed. Many feel the education of volunteers needs to be continued, but should be placed in the hands of each agency and make them responsible. The State would have to establish the criteria, while the organization would be responsible for making sure each volunteer successfully met the criteria. Practical applications may be more important than written exams and the emphasis could be placed on the practical.

The burden of paperwork (particularly the Pre-hospital Care Report [PCR]) is also onerous for volunteers. Is it all necessary? Is it all serving a purpose? Are requirements being initiated by insurance companies for their own financial reasons rather than to produce valuable information aimed at monitoring and improving service? Is there some way to "streamline" the training and paperwork and still meet the goals of the mandates in a more efficient manner; or is the volunteer system to be doomed by disincentives and lack of encouragement from the State?

Toward a Translation of the Crisis into Dollars and Cents

In New York, towns are not allowed to directly levy taxes for fire services. They have the option of creating Fire districts or using Fire Protection Districts. Fire districts have their own governing boards, tax levy and borrowing power. Fire Protection Districts are funding mechanisms for fire services in areas not included in Fire districts. These Districts provide funds to fire departments or companies that actually deliver the services. Towns levy the tax on behalf of a Fire Protection District after negotiating with the respective providers (i.e. local fire companies, fire districts, village fire companies) that service it. In both scenarios, for further financial support, virtually all volunteer companies conduct fundraising activities.

In 2002, there were 864 Fire districts and 953 Fire Protection Districts among the 932 towns. The degree to which volunteer companies deliver EMS can only be estimated, but one can assume that many deliver at least basic EMS and that a significant percentage of the membership is trained to at least the basic EMT level. Is this one half? One quarter?

According to FASNY, it is difficult to estimate the percentage of volunteer firefighters with EMS credentials. Some of those figures are captured by the Health Department but they are inconclusive in that they tell which EMS responders are connected to a fire department but they can't tell which are also serving as firefighters.

The best estimate of the penetration of EMS to fire is that approximately 80 percent of New York's 1750 fire companies have an EMS component connected to their company. There is crossover in those ranks with dual responders. There are approximately 110,000 volunteer firefighters and 40,000 EMS responders. It isn't clear how many fill dual roles but experience has shown that any of those that are trained in EMS response are probably trained beyond the basic firefighter level.

Recently, OFPC has created a Scene Support Operations course; a basic firefighter course that can be offered to an EMT and will probably create an opportunity for EMS responders to get into firefighting at a basic level. There doesn't appear to be a comparable course offered by DOH.

According to Fire in New York (1998 - OFPC), from 1997 to 1998 approximately 46 percent of all responses by fire departments were rescue or EMS calls. More recently the NVFC stated that there continues to be a sharp increase in these calls, and that they

comprise an ever-growing greater share of total calls. For the purpose of this paper we will illustrate just the EMS cost estimates.

FASNY has written extensively on the fire service costs. The FASNY report contains many facts and estimates relating to EMS. FASNY suggests that the cost to replace volunteers with career personnel statewide would exceed \$7 billion! While EMS is excluded from the replacement of service estimates FASNY did, there is still an EMS factor inherent in the calculation. This is because of the dual roles that many volunteers play as both firefighters and EMS providers. Further, it is safe to assume that EMS is more expensive than fire service, so the areas served by volunteer ambulance squads are facing even greater potential stress on their tax bases.

To put this in perspective, according to the Office of the State Comptroller, in areas served by volunteers, property taxes (all combined) for 2003 were levied at an average rate of roughly 2.25 percent of full value statewide. The total amount was about \$20 billion. If \$7 billion were added, it would result in a 35 percent property tax increase - a \$200,000 house in an "average" community would go from \$4,500 per year in property taxes to over \$6,000 per year!

Through extrapolation (continuing to exclude non-personnel costs) one can conservatively estimate that EMS volunteers (just within fire departments) save taxpayers more than \$3 billion (46 percent of \$7-plus billion) annually! This impact varies from county to county, and the FASNY report details the way it relates to real property taxes across the state. These numbers paint a very dramatic picture including all of the current system's shortcomings and redundancies as well as its strengths. There is little doubt that the system of the future will not be identical to what we have now. It will have to undergo massive changes in order to remain affordable; how such changes may affect safety is unknown.

As of January 1, 1989 towns were authorized to create Ambulance Districts to deliver EMS. This device is not widely used and currently there are 93 Ambulance Districts in only 61 of NY's 932 towns. In FY2000, according to the Office of the State Comptroller (OSC), town ambulance districts paid out \$25.5 million in expenses. Towns spent another \$12.1 million out of their general funds for ambulance expenses for a total in excess of \$36 million. Statewide, only \$3.4 million in ambulance charge revenue was received in 25 towns, leaving a net expense to towns of more than \$32 million.

While ambulance districts can charge user-fees for their services, Section 209 of the General Municipal Law forbids fire departments from doing the same for the ambulance services they provide. In towns without ambulance districts, EMT expenses are paid through contractual arrangements with fire companies, through the Fire district tax or directly out of the General Fund under "Rescue Squad" or other "Emergency Services" appropriation items. In 2000, these expenses, in towns statewide, totaled nearly half a billion dollars! This represented roughly 10 percent of total town expenses. It is widely predicted that this area of direct town expense will continue to grow at a rapid pace, producing even more pressure on the tax base.

Some of the actual total expense of the volunteer service is subsidized by fund-raising activities conducted by fire companies. How much this accounts for is unknown because these companies do not file standard reports with the OSC. Further, this funding source is facing stress since fundraising is done by the same volunteers who give their time to provide emergency services!

As one official stated: *"Relying on volunteers to raise funds, as volunteer firefighters often do, is antiquated thinking! Flipping burgers and chickens, selling raffle tickets and running bingo games, particularly in lieu of training, apparatus and equipment maintenance and other fire and EMS related tasks, is just a bad idea."*

A Suggested Plan of Action

1. Identify Questionable Mandates and Regulations

Whether volunteers can accomplish a significant pre-emption of tax increase by sheer determination is questionable. It's not unrealistic to believe that some decline in volunteerism is inevitable, the result of economic and societal change. Further, the demands for EMS are becoming greater in number and complexity, geometrically expanding the problem. These factors are not under town control and must be acknowledged and accommodated in plans for the future.

What may be controlled is the flow of training and compliance mandates from State and Federal agencies demanding increased time and money. The need for many of these mandates is questionable in the minds of some of our membership. These questionable mandates must be identified and relief from them promoted throughout the state. In some cases, where they prove to be necessary and valid, changes in the way they are structured, delivered and financed may be the only way to alleviate the stress. The advent of "distance learning", other technological advances and the building of new economies of scale may serve these changes well. Does the State solicit and act upon input from local service providers when considering requirements? Is there an effective mechanism to enable this?

Officials have commented that the requirements for maintaining an EMT certification are probably more labor and time intensive than most other vocations that are certified and/or licensed by NYS. The concept of recertification every 3 years needs to be addressed. Some feel that the education of volunteers needs to be continued but should be placed in the hands of each agency, holding each responsible. The State would have to establish the criteria and the organization would be responsible for making sure each volunteer successfully meets the criteria. The sentiment that practical applications are more important than written exams is strong among volunteers. Many feel that the emphasis should be placed on the practical.

The recent progress in reestablishing basic categories for firefighters should be

noted and paralleled for EMTs. Many feel that a minimum level of service commonly referred to as "scoop and run" should be allowed, especially for small scale service providers. These volunteers would be trained in basic first aid and transport only. The door should be open for volunteers to get involved quickly on a basic level. This will lead to the eventual advancement of many through training as time goes on.

The DOH should fully implement its "no-test" pilot program and make a real effort to evaluate its potential. The time requirements and logistics associated with the pilot should be carefully reviewed to see that they are realistic.

2. Join the Effort to Recruit and Retain Volunteers

It's not realistic for town citizen-volunteers to plow the roads, serve as animal control officers, act as policemen or regularly perform any of the many tasks required of town personnel. Therefore, these costs must be part of the real property tax-supported town budget. On the other hand, these same town citizen-volunteers may choose to serve as volunteer firefighters, rescue workers and EMS providers. By doing this, they avoid: (a) the direct personnel costs, and (b) the associated costs of "stepping up" to paid, career service such as facility and equipment improvements.

Many towns already use paid career firefighters and EMTs, often in conjunction with volunteers. The exact degree of career service in town emergency services is a hard thing to determine from empirical data. The related costs are even harder to fathom clearly. Most personnel and fiscal information is aggregated at the State or county level and therefore is non-specific. Perhaps the best way to obtain this information is through the survey process.

There are many efforts and promotional campaigns under way to bolster recruitment and retention. Incentives like health insurance, retirement plans or Length of Service Award Programs (LOSAP), tax credits and free tuition, advertising campaigns, educational programs in the schools and communities and appeals to the public's sense of duty are all part of the plan.

The State Legislature recently announced the formation of a Temporary Task Force on Volunteer Firefighter and Ambulance Recruitment and Retention within the NYS Department of State. The Association of Towns and FASNY have met with the staff that will be involved and have submitted the names of members for consideration for appointment. Both FASNY and the Association of Towns hope to participate in the ongoing efforts of this Task Force through the representation of members appointed to give local perspective. The first step will be to present this paper.

The stated goal of the Task Force is to explore recruitment and retention in the

light of the specific incentive of health insurance. We are hopeful that many of the issues included in this paper will surface in the general concerns voiced statewide and will be addressed by the Task Force under public scrutiny. In particular, the Task Force should look at incentives involving income tax deductions or credits that would help shift the burden from the local property tax to the State and Federal levels.

3. Identify More Options for Producing Revenue

Since 1999, the Association has called for the amendment of Section 209 b (4) of the General Municipal Law to permit local governments the option of establishing user fees for emergency, rescue and first aid squads of fire district fire departments and companies. Although Fire districts have their own budgets, they are still part of the town tax levy. Also, many of these departments and companies serve fire protection districts through contractual agreements paid for by town taxes.

Another area that needs exploring concerns the question of reimbursement from health insurance companies. Many of the officials interviewed in preparing this report identified billing and reimbursement as a key issue in avoiding town costs. Are local companies doing all they can to maximize this reimbursement? Are they able to bill for services or are they limited by law? Laws prohibiting billing by fire companies need to be reviewed and revised to allow (and in certain cases require) billing, particularly when there is insurance coverage in place for fire department surcharges.

In some ways, billing could pre-empt the misuse of ambulance services. One official stated that: *"Some people think we're running a "taxicab" service. These runs are killing the volunteers. If people could be billed for services they would think twice about calling for an ambulance for non-emergencies."*

Is training needed? Are State efforts needed in this area (i.e. establishment of a central billing system?)

4. Share Information on Efficiency and Creative Ideas

A system as deep and complex as our local fire and EMS system in New York almost certainly holds the potential to act more efficiently. Particularly, as the burden of service provision continues to shift from fire to EMS, it will be important to see that the resources are allocated properly and managed well. Everything from preparation to dispatch to delivery must be reviewed to make sure that the impact on local real property taxes is held in check as much as possible. Economies of scale will have to be explored perhaps challenging traditional arrangements while creating new territories and partnerships.

Columbia County has already begun the groundwork for a County EMS agency. A means of sharing information about creative solutions in a timely and thorough fashion should be established.

5. Conduct Research and Issue a Report as "Food for Thought"

It seems logical that one of the first priorities should be to design and deliver a research strategy, perhaps including a survey of the membership. In addition, a limited number of "in-depth" surveys of those directly involved in town EMS, containing a longer list of questions, could be conducted as supporting information for the work of the Association of Towns and FASNY. Recently, Rural Health Resources conducted an in-depth survey of volunteer chiefs and captains regarding EMS delivery in the Livingston/Steuben County Area. It may serve as a model for what could be conducted statewide.

Overall, fact finding is needed to address a number of questions central to the strategy of forming a coalition. Where do the issues of firefighting and EMS converge and where do they diverge? Are there separate agendas as well as the common one? Are there any conflicting issues between fire service and EMS? What are the most onerous mandates and how are they creating obstacles for recruitment and retention? Are they necessary? Is there a way to remove these obstacles?

6. Bring Together the Players

Another logical step would be a facilitated series of sessions aimed at examining the current situation and promoting good communication and teamwork. There should be an effort to aggregate the collective research and polarize objectives. The following State agencies and organizations have a role in creating or affecting policy related to the above and should be invited to participate: the Office of the State Comptroller, New York State Department of Health (DOH), Bureau of Emergency Medical Services, the New York State Department of State (DOS), Office of Fire Prevention and Control, the New York State Office of Emergency Management (SEMO), the Firemen's Association of the State of New York (FASNY), the New York State Association of Fire Chiefs (NYS AFC), the Association of Fire districts of the State of New York (AFDSNY), the New York State Volunteer Ambulance and Rescue Association (NYSVARA), the Association of Towns of the State of New York (AOTSNY), the New York Conference of Mayors (NYCOM) and the Association of Counties (NYSAC).

Most importantly, members of the New York State Senate and Assembly, particularly those who are involved with local fire or EMS services, must be brought into the discussions. These bodies, along with the Governor, hold the

power to make changes and direct resources and should be the immediate focus of our efforts.

A Final Note from Executive Director G. Jeffrey Haber

The Association of Towns is deeply concerned that the continued decline in the number of volunteers in the fire and ambulance services throughout the state can only result in disaster for the residents of New York State. If the property tax system were forced to finance paid services in what are now volunteer systems, the impact would have grave consequences to the health and economic well-being of not just the towns, but the State as a whole. Many businesses already perceive New York as having difficult economic conditions. The impact of adding three to four billion dollars to the property tax base as the result of losing our volunteers could be a true death knell to any hopes of any significant recovery to our economy.

The Association hopes that the issuance of this report will stimulate the State Government, the Legislature, the Governor, and the Agencies to take whatever measures possible to halt the continuing decline in volunteers and to acknowledge the severe consequences of going from volunteer to paid personnel.

"Service and Representation for the 932 Town Governments of New York"
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