



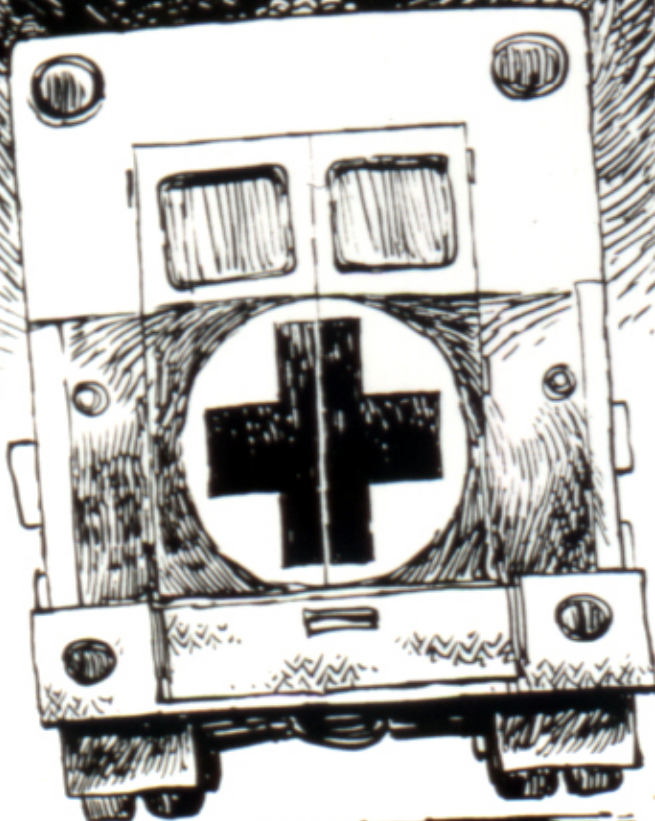
There's a Future in it: *How will EMS and Healthcare Reform Co-exist?*

Marc Eckstein, MD, MPH

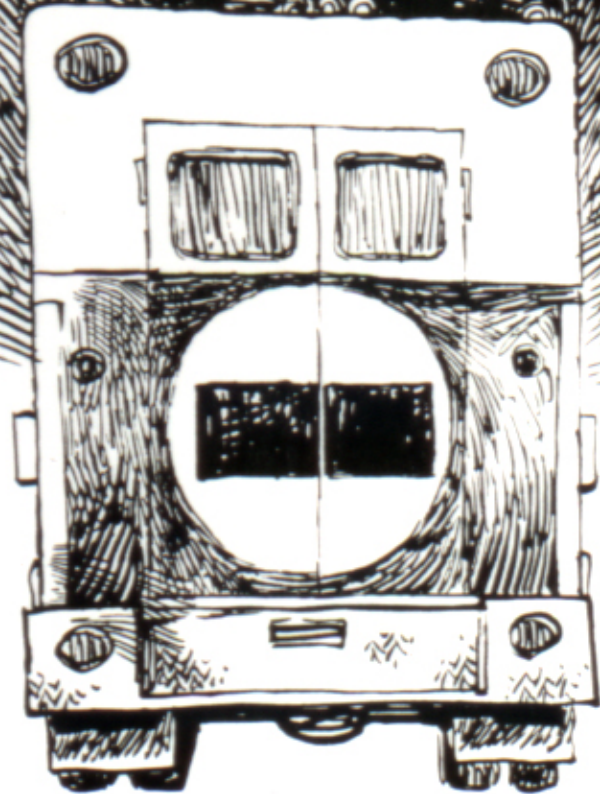
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Health Care

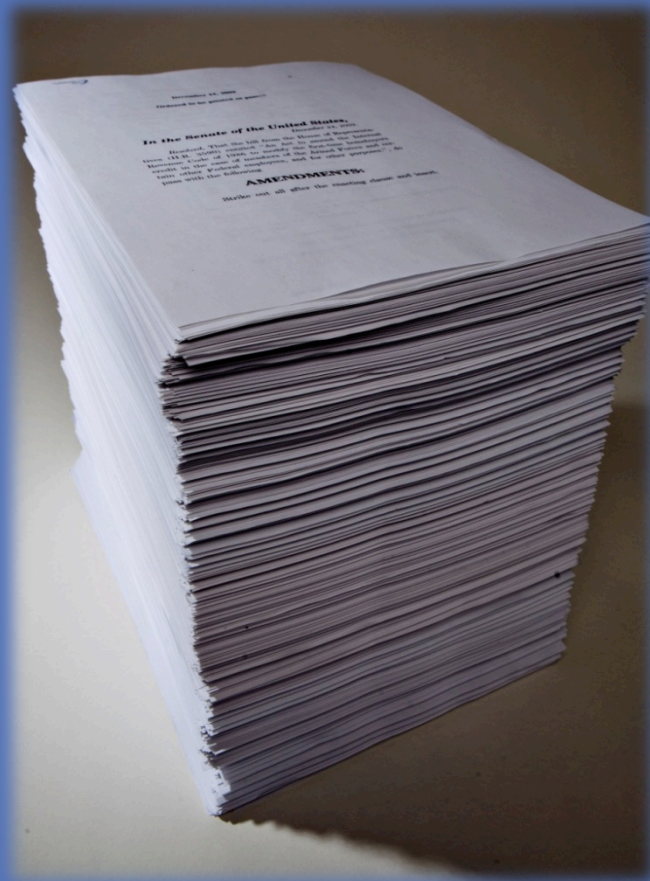


Health Care Reform



H.R. 3590

“The Patient Protection and Affordable Care Act”

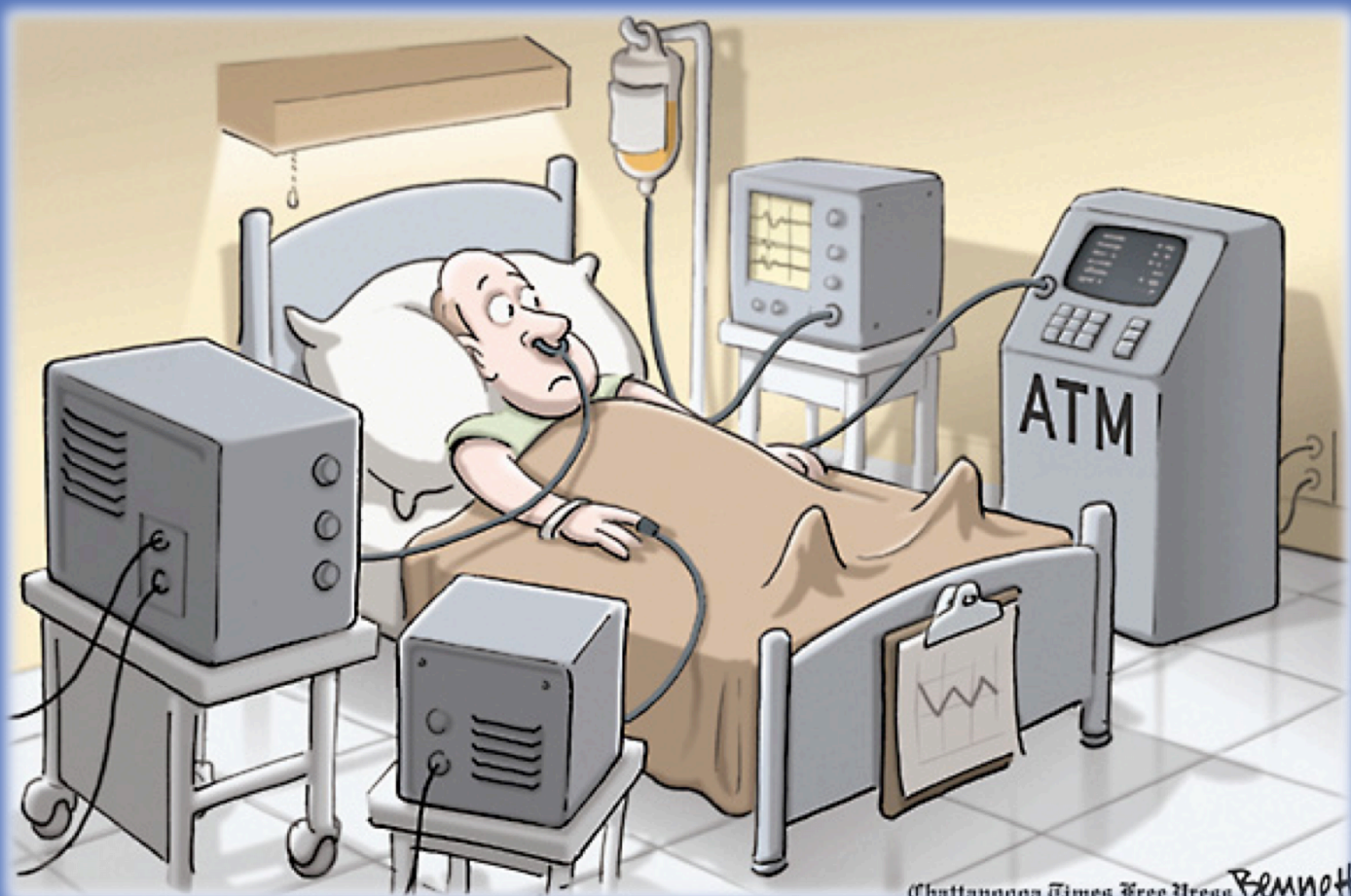


Background

- On March 23, 2010, President Obama signed into law the *Patient Protection and Affordable Care Act* (known as the **ACA**)
- The largest change to America's health care system since the creation of Medicare and Medicaid.
- The CBO estimates that the law will expand coverage to 32 million individuals at a cost of \$940 billion over 10 years.
- Supreme Court Rules ACA is constitutional by a 5-4 vote on June 28, 2012

OBAMA-CARE 
BEND OVER & COUGH

This is really “payment” reform that
has healthcare implications...



Chattanooga Times Free Press Bennett

Patient Protection & Affordable Care Act (ACA) Six Strategies:

1. Fix Medicare
2. Cover the uninsured
3. Control costs
4. Improve quality & efficiency
5. Improve insurance coverage
6. *Focus on prevention & wellness*



Accountable Care Organization (ACO)

- Reimbursement based on *quality of service*
- ACOs would make providers jointly accountable for the health of their patients, giving them strong incentives to cooperate and *save money by avoiding unnecessary tests and procedures*
- *Providers would get paid more for keeping their patients healthy and out of the hospital*

Impact on EMS

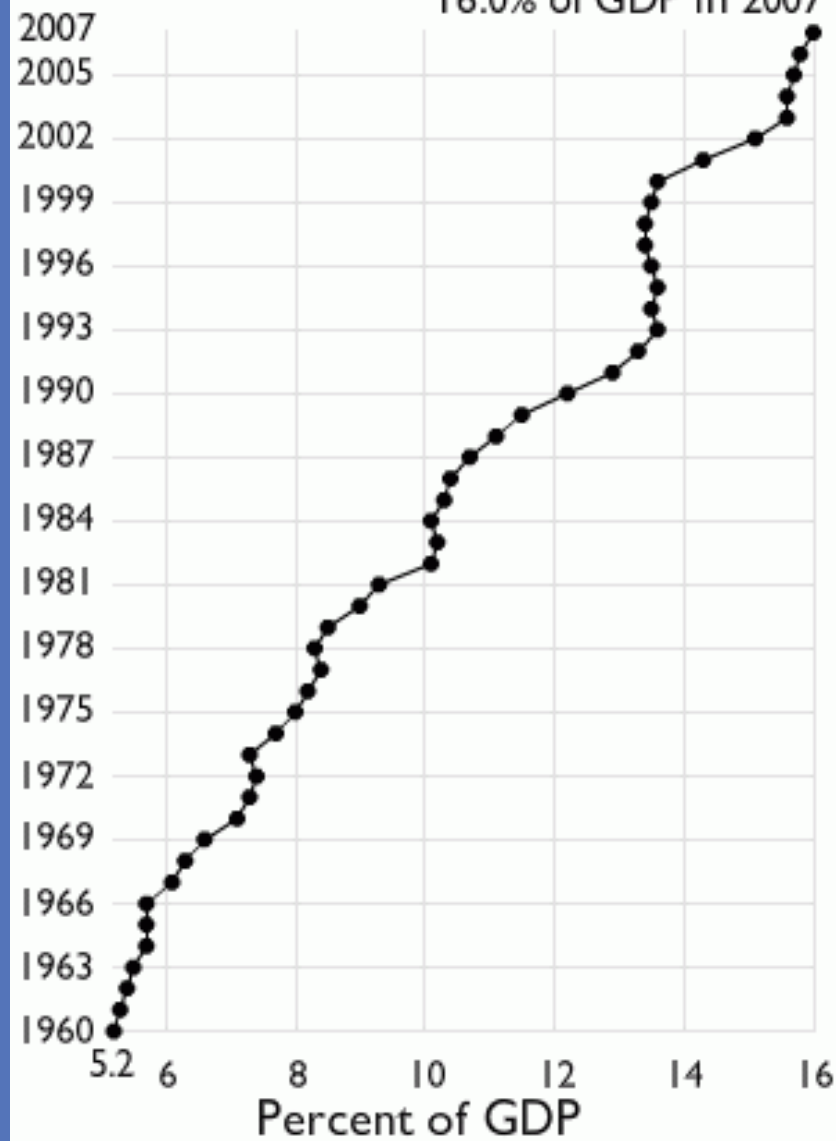
- Although EMS is only mentioned *4 times in the entire 1900 pages*, it is safe to say that we might be on the edge of a substantial change to how we operate.
- **Paying for *outcomes***, not paying a fee for service
- If you do the wrong thing, no one is going to pay you

Factors Driving Reform of Health Care System

- Largest part of personal consumption in US economy
- 25% of total federal expenditures
- 50% of federal spending by 2050 (projected)
- Employer HC costs rising at double rate of inflation
- 47 million (16 percent) of population uninsured
- *30% health costs (\$700 billion) are of little or no value*

U.S. healthcare spending

16.0% of GDP in 2007

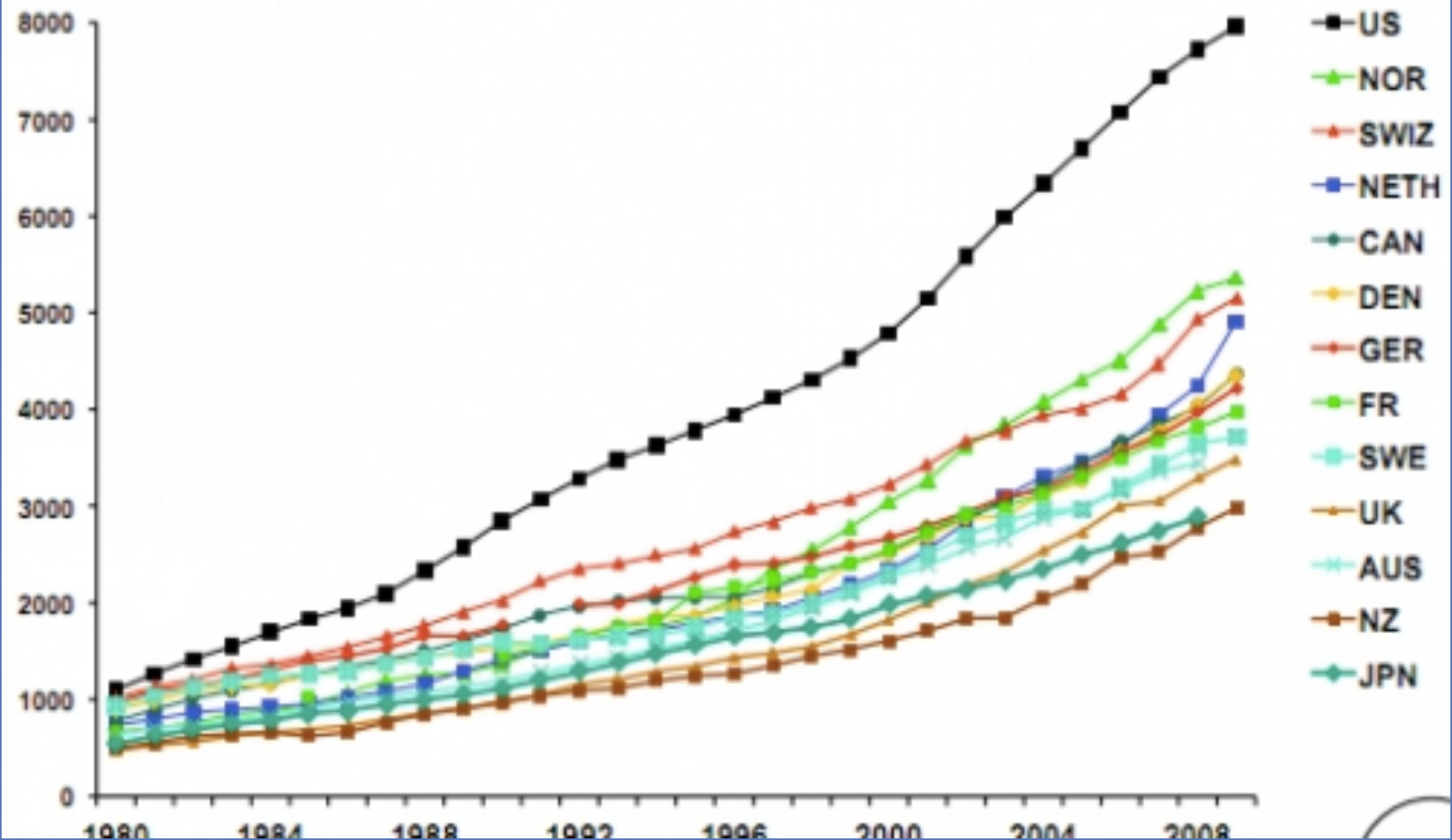


Source: OECD Health Data 2009.

Average Health Care Spending per Capita, 1980–2009

Adjusted for differences in cost of living

Dollars



Issues to Watch

- More health care decisions based upon data/research
- Expanded quality initiatives/quality measures
- Growing use of health information technology
- Emphasis on *primary care & prevention*



Future models



- Most EMS provider agencies and fire departments lack the sophistication to measure their outcomes in a way that is *verifiable* and to the level of other healthcare organizations.
- The internal controls that exist within the hospital environment to ensure quality and incentives based on performance long have been fought by fire-based EMS.



- Your department must have a ***quality management system*** in place
- Every major hospital in the U.S. is moving towards measuring every aspect of their delivery of care.
- ***Root-cause analysis*** is at the heart of this effort: they are asking why certain things are done, and why they are done in a certain manner.

Evidence based medicine and EMS

- Where is the evidence for what we do?
- Are we cost effective?





"I'm stumped.
We'll have to wait for
the autopsy."

“There is virtually NO aspect of EMS that could meet the current requirements of the FDA for approval as a safe and effective new therapy.”

Michael Callahan, MD

*“Quantifying the Sanctity Science of Prehospital Emergency Care”
Annals of Emergency Medicine 1997*

It's time for EMS to look different

- What role can EMS play in *prevention*, community-based care and *reducing hospital readmissions*?
- EMS needs to get more transparent
- Focus on resource utilization, **evidence-based solutions**
- EMS should be paid *not to transport*
- Don't be afraid to change
- Best evidence, best practice

Time for a paradigm shift

- Community practice paramedics (a step in the right direction)
- Partnerships with ACAs to provide preventive care and keep pts out of the hospital
- Can EMS providers safely treat and release on scene?
- Tort reform???

A black and white portrait of Albert Einstein, showing him from the chest up. He has his characteristic wild, white hair and a mustache. He is looking slightly to the right of the camera with a thoughtful expression. His hands are clasped together in front of him, with his fingers interlaced. The background is dark and out of focus.

Insanity:

*Doing the same thing over and over again
and expecting different results.*

Albert Einstein

tra·di·tion

/noun 1. the handing down of statements, beliefs, legends, customs, information, etc., from generation to generation, especially by word of mouth or by practice.

The Fire Service:

100 years of tradition
UNIMPEDED by progress



Seven people burst into flames — at the same time!

By KEVIN CREED / Correspondent

PARIS — Seven people at a lavish dinner party burned to death when one of them spontaneously burst into flames and the fire leapt to six others, igniting them one by one in a bizarre chain reaction!

Scientists are calling it the first case of its kind in history.

"Worldwide, there are about 20 incidents of human spontaneous combustion a year," said noted French physicist Dr. Jacques Millont.

"But there's never been a case on record before in which the phenomenon has spread from one person to another."

Dr. Millont is the world's leading expert on the uncanny episodes in which people mysteriously catch fire and burn from the inside out.

Yves Gigot, the only surviving member of the ill-fated party, witnessed the whole ghastly incident. He returned to the table after using the bathroom, just in time to see the first of the victims, Marie de Challeurs, go up in flames.

"Everyone was laughing, gathered around the table, having a wonderful time," says Gigot, 35. "There were no candles on the table, no source of heat or fire anywhere around. But when I

was halfway across the dining room I saw smoke begin to pour from Marie's ears, nose and mouth.

"Her eyes got very wide and suddenly she just sort of ex-

First case ever of a

human spontaneous combustion

CHAIN REACTION!

ploded. Fire burst out from inside her body and began to consume her.

"I saw a thin stream of fire jump over and strike Georges Casaubon. It

was as if a magnet somehow



SOLE SURVIVOR Yves Gigot watched in horror as his friends ignited one by one.

tors found only seven small piles of ashes — one on each made newspapers nationwide, including *Weekly World News*



Los Angeles Times

L.A. County's 911 system burdened by non-emergency calls

Patients who summon paramedics for rides to clinics or to refill prescriptions are taking time and resources from patients with dire needs.

Officials consider changes to make the system more adaptable.



Realigning reimbursement policy and financial incentives to support patient-centered out of hospital care.

JAMA Feb 20, 2013

- Between 7-34% of Medicare patients transported by EMS to an ER could have been transported to an alternate destination
- Medicare only allow reimbursement for transport (median \$464) and many private insurers follow Medicare guidelines
- National EMS expenditures on Medicare is \$5.2 billion annually

Status quo



- Do all EMS patients need an iv line, oxygen, and a backboard?
- Non-tiered dispatch (*really???*)
- Dispatching Code 3 to *all* calls
- All ALS systems
- 2 or more paramedics on all calls

Question the status quo

- Why do we accept certain actions as EMS dogma?
- Where is the science behind them?



The Future



- Economy is cyclical
- Fire suppression calls keep declining
- EMS calls keep rising
- Nationalized healthcare in the US
- New reimbursement models (not just for transports)
- **Healthcare reform IS COMING!**
- **EMS is NOT immune**
- *“Innovate or become extinct”*



Despite financial crises, increasing demand, a rapidly changing healthcare system, and never-ending politics, EMS really comes down to this...



- **Manage** *often*
- **Cure** *occasionally*
- **Care** *always*

Thank you

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