

Emergency Ambulance Services

Update to 2022 Evaluation Report

January 2023

Problems Identified

- **Insufficient Oversight.** The agency responsible for regulating ambulance services, the Emergency Medical Services Regulatory Board (EMSRB), has limited authority to oversee ambulance services through the licensure process outlined in state law. Ambulance services can renew their licenses or transfer them to other organizations with minimal oversight. Minnesota does not have performance standards for ambulance services.
- **Outdated Service Areas.** Ambulance services have led decisions about service area boundaries and coverage since the 1980s. EMSRB does not have authority to alter service area boundaries, even if doing so would benefit public health. Some local governments have much more local control than others based on historic precedent
- **Persistent Sustainability Challenges.** Outstate services have struggled for years to recruit and retain staff, and service directors told us that they do not have enough revenue.
- **Ineffective Board Leadership.** EMSRB was largely ineffective in its regulation and support of ambulance services. The agency failed to carry out some core functions, had outdated rules, and did not have a statewide plan to improve emergency care. The agency's board failed to provide enough oversight and had not reviewed the performance of the Executive Director in years. The board's composition creates risks for conflicts of interest.

Changes Implemented

- **Administrative Changes.** EMSRB has taken steps to implement many of our recommendations it has the authority to address. It has repealed outdated rules, increased the frequency of ambulance service inspections, established clinical performance measures to evaluate ambulance services, resumed performance reviews of the agency's Executive Director, and is reviewing its membership composition.

Actions Needed

- **Legislative Changes.** Many of our recommendations require legislative action. The Legislature should update EMSRB's statutes, require the agency to create a statewide plan, and address the agency's limited oversight authority. The Legislature should enable local governments to have input on service area boundaries and should restructure how the boundaries are created, modified, and overseen. The Legislature should experiment with pilot programs to address ambulance services' staffing and revenue challenges. The Legislature should also consider structural changes to EMSRB's board.