

117TH CONGRESS
2D SESSION

S. _____

To amend the Public Health Service Act to establish a funding program for supporting EMS organizations, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. SANDERS (for himself and Ms. SMITH) introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To amend the Public Health Service Act to establish a funding program for supporting EMS organizations, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “EMS Staffing and
5 Support Act”.

6 **SEC. 2. EMS ORGANIZATION FUNDING.**

7 Part P of title III of the Public Health Service Act
8 (42 U.S.C. 280g et seq.) is amended by adding at the end
9 the following:

1 **“SEC. 399V-7. EMS ORGANIZATION FUNDING.**

2 “(a) DEFINITIONS.—In this section:

3 “(1) INDIAN TRIBE; TRIBAL ORGANIZATION.—

4 The terms ‘Indian Tribe’ and ‘Tribal organization’
5 have the meanings given such terms in section 4 of
6 the Indian Self-Determination and Education Assist-
7 ance Act.

8 “(2) EMS ORGANIZATION.—The term ‘EMS or-
9 ganization’ means a public or private entity that
10 provides medical transport and emergency medical
11 services.

12 “(3) EMERGENCY MEDICAL SERVICES.—The
13 term ‘emergency medical services’ has the meaning
14 given such term in section 330J(e).

15 “(4) QUALIFIED APPLICANT.—The term ‘quali-
16 fied applicant’ means—

17 “(A) an EMS organization, other than an
18 EMS organization that operates for profit;

19 “(B) a State, Indian Tribe, Tribal organi-
20 zation, county, or municipality; or

21 “(C) any other nonprofit organization that
22 represents the interests of EMS organizations.

23 “(5) STATE.—The term ‘State’ means any
24 State of the United States, the District of Columbia,
25 the Commonwealth of Puerto Rico, American
26 Samoa, Guam, the United States Virgin Islands, the

1 Commonwealth of the Northern Mariana Islands,
2 and any other territory or possession of the United
3 States.

4 “(b) COMPETITIVE GRANTS.—

5 “(1) IN GENERAL.—Beginning in fiscal year
6 2023, the Secretary, acting through the Adminis-
7 trator of the Health Resources and Services Admin-
8 istration, shall award grants on a competitive basis
9 to qualified applicants to carry out activities de-
10 scribed in subsection (d) in order to support EMS
11 organizations in the United States.

12 “(2) APPLICATIONS.—

13 “(A) IN GENERAL.—A qualified applicant
14 seeking a grant under this subsection shall sub-
15 mit an application to the Secretary at such
16 time, in such manner, and containing such in-
17 formation as the Secretary may reasonably re-
18 quire, including—

19 “(i) a description of the financial need
20 of the qualified applicant (or each qualified
21 applicant in the case of a joint application
22 described in subparagraph (B)); and

23 “(ii) an analysis of the costs and ben-
24 efits, with respect to improving medical
25 transport and emergency medical services,

1 of the activities to be carried out through
2 the grant.

3 “(B) JOINT APPLICATIONS.—A qualified
4 applicant may submit a joint application with 1
5 or more other qualified applicants under this
6 subsection.

7 “(C) PEER REVIEW OF GRANT APPLICA-
8 TIONS.—

9 “(i) IN GENERAL.—The Secretary,
10 after consultation with national emergency
11 medical services organizations, shall ap-
12 point emergency medical service personnel
13 to conduct peer reviews of applications re-
14 ceived under this subsection.

15 “(ii) APPLICABILITY OF FEDERAL AD-
16 VISORY COMMITTEE ACT.—The Federal
17 Advisory Committee Act (5 U.S.C. App.)
18 shall not apply to activities carried out
19 under this subparagraph.

20 “(D) PRIORITIZATION OF GRANT
21 AWARDS.—In awarding grants under this sub-
22 section, the Secretary shall consider each of the
23 following:

1 “(i) The findings and recommenda-
2 tions of the peer reviews carried out under
3 subparagraph (C).

4 “(ii) The degree to which an award
5 will improve the coverage, response times,
6 and ability of EMS organizations to pro-
7 vide medical transport and emergency
8 medical services.

9 “(iii) The extent of the need of an ap-
10 plicant for a grant under this subsection
11 and the need to protect the United States
12 as a whole.

13 “(c) CONTRACTS OR COMPACTS WITH INDIAN
14 TRIBES AND TRIBAL ORGANIZATIONS.—

15 “(1) IN GENERAL.—Beginning in fiscal year
16 2023, the Secretary, acting through the Adminis-
17 trator of the Health Resources and Services Admin-
18 istration, shall award funding through contracts or
19 compacts pursuant to the Indian Self-Determination
20 and Education Assistance Act, distributed on a fair
21 and equitable formula as developed through con-
22 sultation with Indian Tribes and Tribal organiza-
23 tions, to Indian Tribes and Tribal organizations to
24 carry out activities described in subsection (d) in

1 order to support EMS organizations in Tribal com-
2 munities.

3 “(2) APPLICATIONS.—An Indian Tribe or Trib-
4 al organization seeking funding under this sub-
5 section shall submit an application to the Secretary
6 at such time, in such manner, and containing such
7 information as the Secretary requires through con-
8 sultation with Indian Tribes and Tribal organiza-
9 tions.

10 “(d) ACTIVITIES.—

11 “(1) IN GENERAL.—Grants or other funding
12 awarded under this section may be used to support
13 EMS organizations through any of the following:

14 “(A) Hiring EMS organization personnel.

15 “(B) Recruiting and retaining volunteer
16 EMS organization personnel.

17 “(C) Providing training or reimbursing
18 personnel for training.

19 “(D) Conducting courses and imple-
20 menting apprenticeship programs that qualify
21 graduates to serve in an EMS organization in
22 accordance with State and local requirements.

23 “(E) Purchasing necessary equipment.

24 “(F) Purchasing medicine and medical
25 supplies.

1 “(G) Purchasing EMS vehicles.

2 “(H) Wellness and fitness programs for
3 EMS organization personnel.

4 “(I) Modifying facilities.

5 “(J) Improving regional coordination
6 among EMS organizations.

7 “(K) Establishing or supporting commu-
8 nity paramedicine or mobile integrated health
9 care initiatives.

10 “(L) Any other activity the Secretary de-
11 termines appropriate.

12 “(2) LIMITATION.—No funds awarded under
13 this section may be made available to an EMS orga-
14 nization that operates for profit or to otherwise sup-
15 port efforts to establish or provide emergency med-
16 ical services, or medical transport, for profit.

17 “(e) AMOUNT.—Each grant awarded under sub-
18 section (b), or funding through a contract or compact
19 under subsection (c), shall be in an amount not to exceed
20 \$1,000,000.

21 “(f) APPROPRIATIONS.—

22 “(1) AWARDS.—

23 “(A) IN GENERAL.—There is authorized to
24 be appropriated, and there is appropriated, to
25 the Secretary to award grants, and funding

1 through contracts or compacts, under this sec-
2 tion—

3 “(i) for fiscal year 2023,
4 \$500,000,000; and

5 “(ii) for each fiscal year thereafter,
6 the amount authorized under this subpara-
7 graph for the preceding fiscal year in-
8 creased by the percentage increase in the
9 consumer price index for all urban con-
10 sumers (all items; United States city aver-
11 age) for the most recent 12-month period
12 for which applicable data is available.

13 “(B) CONTRACTS AND COMPACTS.—Of the
14 amount appropriated under subparagraph (A)
15 for each fiscal year, not less than 5 percent
16 shall be set aside to carry out subsection (c).

17 “(2) TECHNICAL ASSISTANCE.—There is au-
18 thorized to be appropriated, and there is appro-
19 priated, to the Secretary to provide technical assist-
20 ance to entities completing and submitting applica-
21 tions under this section—

22 “(A) for fiscal year 2023, \$10,000,000;
23 and

24 “(B) for each fiscal year thereafter, the
25 amount authorized under this paragraph for the

1 preceding fiscal year increased by the percent-
2 age increase in the consumer price index for all
3 urban consumers (all items; United States city
4 average) for the most recent 12-month period
5 for which applicable data is available.”.

6 **SEC. 3. REPORTS.**

7 (a) IN GENERAL.—Not later than 90 days after the
8 date of enactment of this Act, the Secretary of Health and
9 Human Services, in consultation with the Administrator
10 of the Centers for Medicare & Medicaid Services, the Ad-
11 ministrator of the Health Resources and Services Admin-
12 istration, the Assistant Secretary for Preparedness and
13 Response, and EMS stakeholders, shall submit to Con-
14 gress a report detailing the challenges, disparities, and in-
15 adequacies in providing Federal, State, and private (in-
16 cluding commercial insurers) reimbursement for medical
17 transport and emergency medical services and providing
18 recommendations for improvement with respect to pro-
19 viding such reimbursement.

20 (b) RURAL EMS ORGANIZATIONS.—Not later than 90
21 days after the date of enactment of this Act, the Secretary
22 of Health and Human Services, in consultation with the
23 Administrator of the Centers for Medicare & Medicaid
24 Services, the Administrator of the Health Resources and
25 Services Administration, the Assistant Secretary for Pre-

1 paredness and Response, and EMS stakeholders, shall
2 submit to Congress a report on the challenges specific to
3 rural EMS organizations, including with respect to Fed-
4 eral, State, and private (including private insurers) reim-
5 bursement rates and policies, and develop an action plan
6 to address those challenges through grants and other ad-
7 ministrative action.