



# One Strategy for Addressing the EMS Workforce Shortage

WRITTEN BY [AAA STAFF](#) ON APRIL 7, 2025. POSTED IN [MEMBER-ONLY](#), [WORKFORCE SHORTAGE](#).

Talk to anyone in the EMS field and they will tell you about the ongoing workforce shortage and the challenges of delivering care in our communities.

Like all complex problems, there's no simple solution. Multiple factors are driving the current shortage. And multiple efforts will be required to change course. But there are several good options, backed by data, that we know can make a difference.

Let's take a look at paramedic education, an area where there is valuable data to illuminate the opportunities.

First, the good news. We know from data collected by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions, Inc. ([CoAEMSP](#)) that more paramedics are entering the field. Between 2018 and 2022, the latest years for which [data](#) are available, CoAEMSP measured the following progress for accredited paramedic education programs nationwide:

- 9.4% increase in enrollment
- 11.2% increase in graduates
- 79% average retention rate
- 88% National Registry of Emergency Medical Technicians (NREMT) exam pass rate
- 93% positive placement
- 60,000+ new paramedics employed

It's worth noting that paramedic students must graduate from a paramedic program accredited by the Commission on Accreditation of Allied Health Education Programs ([CAAHEP](#)), or those who have attained the CoAEMSP Letter of Review (LoR), in order to be eligible to sit for the NREMT exam. CoAEMSP is the only organization recognized by CAAHEP to provide accreditation services for paramedic and, beginning in 2025, AEMT education programs.

Here's the takeaway from all these statistics: accreditation for paramedic education is delivering more and more competent paramedics ready to enter the workforce. Put another way, the workforce shortage is not influenced by accreditation.

Nevertheless, there is room for improvement. Every year, paramedic education students withdraw from their program for a variety of reasons, from academic challenges to the lack of available childcare. It is estimated that 21% of paramedic students do not complete their education. That translated to more than 3,500 potential paramedics in 2019 alone. Another 11% (or more than 1,800 students) did not have the minimal competency to pass the Registry exam.

Just think: we lost more than 5,400 *potential* paramedics in one year. Ironically, that is about the same number of paramedics that exit the profession annually. So despite the increase in enrollment, graduation and exam pass rates, as a field we are merely holding steady.

But here's the good news: we can further increase the number of paramedics entering the field.

CoAEMSP has data showing that several factors contribute to higher student attrition. Programs with open enrollment policies that do not administer a medical knowledge exam as part of the admission process have higher student attrition rates. Programs with fewer than 12 students or that take more than 12 months to complete are also more likely to have higher attrition rates. Conversely, wrap-around services (tutoring, counseling, career planning) may be critical for increasing retention of some students. But those services are not offered by all programs.

The accreditation process is designed to highlight strategies for success, to share innovations and best practices and to drive continuous quality improvement. This ultimately generates better outcomes for students.

Whether a paramedic education program is urban or rural, sponsored by a college or university, a municipality, hospital or private entity, we must commit to reducing unnecessary obstacles to student success.

At Global Medical Response, we are focused on expanding capacity through a variety of strategies, including increasing the availability of satellite education programs as well as virtual and hybrid programs to reach rural areas. We are investing in workforce partnerships and faculty development while increasing student hospital and field clinical opportunities.

Of course, innovative approaches are needed throughout the lifecycle of an EMS professional — from education through to workforce retention. As a profession, we must commit to embracing evidence-based strategies that result in more individuals entering – and staying in – the EMS field.

Because at the end of the day, innovation, employee support/engagement and continuous quality improvement are the best antidote to the workforce crisis.



*Lori Burns, MSN, RN is national vice president of Learning at Global Medical Response and the immediate past chair of the Committee on Accreditation of Educational Programs for the EMS Professions and current Commissioner of the Commission on Accreditation of Allied Health Education Programs.*



# House Reintroduces Vital Medicare Extender and EMS Workforce Bills

WRITTEN BY [TRISTAN NORTH](#) ON MARCH 19, 2025. POSTED IN [GOVERNMENT AFFAIRS](#), [LEGISLATIVE](#), [MEDICARE](#), [REIMBURSEMENT](#), [WORKFORCE SHORTAGE](#).

## Medicare Ambulance Extender Bill Introduced in House

Yesterday, March 18, Representatives Claudia Tenney (R-NY), Terry Sewell (D-AL), Cliff Bentz (R-OR), Paul Tonko (D-NY), Mike Carey (R-OH), Danny Davis (D-IL), Carol Miller (R-WV) and Marie Gluesenkamp Perez (D-WA) reintroduced the Protecting Access to Ground Ambulance Medical Services Act (H.R. 2232). This legislation would extend the temporary Medicare ambulance add-on payments at their current levels of 2% urban, 3% rural and 22.6% super rural until January 1, 2028.

The AAA and our partners at the International Association of Fire Chiefs (IAFC), International Association of Fire Fighters (IAFF), National Association of Emergency Medical Technicians (NAEMT) and National Rural Health Association (NRHA) have spearheaded efforts to extend and increase the levels of the Medicare ambulance add-on payments. We expect to see a Senate bill with the higher levels of 3.4% urban, 4.3% rural and 26.7% super rural introduced in the near future.

## EMS Workforce Shortage Bill Introduced in House

Additionally, yesterday Representatives Marie Gluesenkamp Perez (D-WA), Brad Finstad (R-MN), Randy Feenstra (R-IA), Suzanne Bonamici (D-OR), Michael Lawler (R-NY), Josh Harder (D-CA) reintroduced the Preserve Access to Rapid Ambulance Emergency Medical Treatment Act (PARA-EMT Act). H.R. 2220 would provide funding for grants to help recruit and train paramedics and EMTs, reduce barriers that prevent veteran medics transitioning to civilian paramedics and EMTs, and request the Secretary of Labor to conduct a study on the EMS workforce shortage and report their findings.

The legislation is supported by the AAA, NAEMT and NRHA. A copy of the press release on the introduction of H.R. 2220 can be found [here](#).



# AAA Submits Paramedic Expedited Visa Comments in Line with PARA-EMT Act

WRITTEN BY [TRISTAN NORTH](#) ON MAY 28, 2024. POSTED IN [LEGISLATIVE](#), [REGULATORY](#), [WORKFORCE SHORTAGE](#).

On May 13, the AAA submitted a [Comment Letter](#) to the Department of Labor (DOL) in response to their Request for Information (RFI) on modernizing the process and updating the occupations that fall under the Schedule A program. Schedule A is a program administered by DOL which allows for expedited visa processing for occupations with a predetermined workforce shortage. The AAA advocated in our letter for the DOL to add paramedics and EMTs to Schedule A which currently includes nurses, physical therapists and individuals with exceptional abilities in the sciences and arts.

The comment letter by the AAA is in line with a provision of the PARA-EMT Act (H.R. 6433) by Congresswoman Gluesenkamp Perez (D-WA) and Congressman Brad Finstad that would direct DOL to conduct a study on the EMS workforce shortage and report to Congress on consideration by the Department to add paramedics and EMTs to the list of occupations under Schedule A.



# Gluesenkamp Perez and Finstad Introduce EMS Workforce Shortage Bill

WRITTEN BY [TRISTAN NORTH](#) ON NOVEMBER 16, 2023. POSTED IN [GOVERNMENT AFFAIRS](#), [LEGISLATIVE](#), [NEWS](#), [RECRUITMENT & RETENTION](#), [WORKFORCE SHORTAGE](#).

Yesterday, November 15, Congresswoman Marie Gluesenkamp Perez (D-WA) and Congressman Brad Finstad (R-MN) introduced the [Preserve Access to Rapid Ambulance Emergency Medical Treatment \(PARA-EMT\) Act \(H.R. 6433\)](#). H.R. 6433 is the first broad, stand-alone piece of legislation specifically designed to focus solely on helping address the EMS workforce shortage.

“We greatly appreciate the leadership of Congresswoman Gluesenkamp Perez and Congressman Finstad on introducing this momentous legislation to assist with the hiring and retention of paramedics and EMTs,” stated AAA President Randy Strozyk. “We look forward to working with them on passage of the bill.”

H.R. 6433 would establish a pilot grant program under the Assistant Secretary for Preparedness and Response (ASPR) at the Department of Health and Human Services (HHS) for the recruitment and training of paramedics and EMTs. The grant program would be authorized from 2024 through 2028 with \$50 million a year in funding.

The legislation would also provide states with funding to help facilitate and expedite the transition of medics coming out of military service with the requirements of becoming a civilian paramedic or EMT. The program would be authorized from 2024 through 2028 with \$20 million a year in grant funding for states.

Lastly, H.R. 6433 would direct the Secretary of Labor to conduct a study on the EMS workforce shortage and issue a report to Congress. The report would include an analysis on potentially adding paramedics and EMTs to the list of health care occupations which benefit from an easier hiring process of professionals outside the U.S.

The American Ambulance Association, National Rural Health Association and Washington Ambulance Association have endorsed H.R. 6433. In the coming days, the AAA will be launching a Call to Action to encourage and assist our members in contacting their U.S. Representatives in support of cosponsoring H.R. 6433.

Thank you to all of the AAA members and volunteer leaders who worked tirelessly to push for the introduction of this important EMS legislation!

EMS Quick Take:  
Sign-on Bonus or Referral Bonus?

# EMS Workforce Quick Take: Sign-on and Referral Bonuses

WRITTEN BY [SAMANTHA HILKER](#) ON AUGUST 23, 2023. POSTED IN [HUMAN RESOURCES](#), [NEWS](#), [RECRUITMENT & RETENTION](#), [WORKFORCE SHORTAGE](#).

AAA Workforce Committee members Scott Moore, Esq., Moore EMS Consulting, and Adam Kuhs, Deputy Operations Director at Bell Ambulance, talk through the benefits and potential drawbacks of sign-on and referral bonuses. Which one is right for your organization?

EMS Quick Take: Sign-on Bonus or Referral Bonus?



**Binder Lift responds to emergency care provider shortage by becoming PHASE; expands resources to help providers have longer and healthier careers.**

WRITTEN BY [MEGHAN WINESETT](#) ON MAY 21, 2023. POSTED IN [NEWS](#), [WORKFORCE SHORTAGE](#).

Bigfork, Montana, May 17 – Binder Lift, a supplier of patient handling equipment and training for emergency care providers, recently became PHASE (Patient Handling and Safety Experts) in response to the ongoing workforce shortage in the emergency care industry. “Patient handling causes far more injuries to emergency care providers than any other job function,” said PHASE CEO Rick Binder. “Though we can’t help agencies find new personnel, we can help them retain employees by providing them with the equipment and training necessary to avoid injuries where they happen most.”



Recognizing a problem they could help solve, the company expanded its resources to protect emergency care providers from the most common cause of injury. It added new solutions to its product line and helped produce an accredited training program on patient handling safety that will be available without cost. “Suddenly, we weren’t only helping providers avoid lifting injuries by supplying a single product; we were helping customers safely move patients from the bathtub in the patient’s home all the way to the hospital bed,” Binder said. “Becoming PHASE was a natural progression.”

The company’s first product, Binder Lift, was born in 2012 out of a friendly argument between Binder’s mother and father. Julie Binder, an EMT-I at the time, told Dan Binder there was nothing available to help her and her partner safely lift a large patient from the floor to a standing position. Dan didn’t believe her. “After a long web search to prove her wrong, he found nothing,” Binder said. “So he got to work making his own solution.”

The result was the company’s flagship product. Since then, more than 3,000 emergency care departments have invested in the Binder Lift to keep their personnel safe when lifting patients. The device has also won multiple industry awards, including EMS Innovation of the Year.

Binder believes adding new products and resources to its offerings is the best way the company could serve the emergency care providers it works to protect. “These are remarkable people,” he said. “They work tough hours for modest pay in order to help others. They shouldn’t have to worry about being injured simply by doing their job.”

Continuing its commitment to their health and safety, PHASE is offering free product trials to first responders through its new website, [www.phaseintl.com](http://www.phaseintl.com).

The new website also includes a comprehensive resource center where users can watch instructional videos, get product information, and read case studies. The site will also feature free access to an accredited training program created in partnership with other industry stakeholders in the coming months.

“We’ve grown a lot over the last decade since first bringing the Binder Lift to market,” Binder said. “But we’re still the same family-owned and operated business that values our relationships with our customers and industry partners.”

### **About PHASE (Patient Handling and Safety Experts)**

We’re on a mission to empower emergency care providers to have longer and healthier careers by providing the equipment and training necessary to safely move patients of any size with ease. All our products and services are science-backed solutions that help

emergency care providers avoid injuries where they happen most. PHASE is a family-owned business that brings our family values to the workplace. When you do business with us, you're more than a customer. You're family. So, let's connect. We look forward to helping you. To learn more, visit [www.phaseintl.com](http://www.phaseintl.com)

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