



# ET3

## Emergency Triage, Treat and Transport Model

# Genesis of ET3

- ▶ The 2013 White Paper “Innovation Opportunities for Emergency Medical Services” outlined an EMS model of care that would allow EMS agencies to more appropriately care for their patients by adopting protocols and strategies to innovatively triage and treat patients
- ▶ The paper also noted:
  - ▶ Approximately 15% of Medicare patients transported to the ED by ambulance can be safely cared for in the community.
  - ▶ In 2009 there were 20 million ED visits (65 and older) with 38.6% arriving by ambulance and 45% of those were not admitted to the hospital
  - ▶ Those 45% that received care in the hospital setting cost Medicare 1.98 billion
  - ▶ 2013 national models indicated that Medicare would save \$560 million dollars a year if these patients were transported to a physicians office instead
  - ▶ Despite the data CMS regulations only pay EMS for transports to a hospital, critical access hospital, skilled nursing facilities and dialysis centers so that’s where the patients continue to go

# Six Years Later

- ▶ February 14, 2019-CMS announces the Emergency Triage, Treat, and Transport Model (ET3)
- ▶ A voluntary, five-year payment model that will provide greater flexibility to ambulance care teams to address emergency health care needs of Medicare beneficiaries following a 911 call
- ▶ CMS will pay participating ambulance suppliers and providers to do one of the following:
  - ▶ Transport an individual to a hospital emergency department (ED) or other destination covered under the regulations
  - ▶ Transport to an alternative destination such as a primary care doctor's office or an urgent care clinic
  - ▶ Provide treatment in place with a qualified health care practitioner on scene or connected using telehealth

# Who Can Participate

- ▶ Medicare enrolled ambulance services and hospital owned ambulance services
- ▶ Local governments, their designees or other entities that operate one or more 911 dispatch centers in areas where ambulance suppliers and providers have been selected to participate in the model will have opportunity to apply for cooperative agreement funding
- ▶ Additional payers can partner with ET3 participants to provide similar options to those patients in the same geographic area

# Funding and Timeline

- ▶ Innovation Center anticipates releasing a Request for Applications (RFA) in Summer 2019 to solicit Medicare-enrolled ambulance suppliers and providers.
- ▶ Innovation Center anticipates issuing a Notice of Funding Opportunity (NOFO) in Fall 2019 for up to 40 of two-year cooperative agreements
- ▶ The ET3 Model will have a five-year performance period
- ▶ Anticipated start date is January 2020
  - ▶ The performance period for all participants, regardless of start date, will end at the same time; thus, only applicants selected through the first RFA will participate for the full five years

# Resources

- ▶ [Innovation White Paper](#)
- ▶ Stakeholder Questions: [ET3Model@cms.hhs.gov](mailto:ET3Model@cms.hhs.gov)
- ▶ [CMS ET3 Fact Sheet](#)
- ▶ NAEMT Considerations for Implementation Webinar: [NAEMT ET3 Webinar](#)
- ▶ Journal of Emergency Medical Services: [Thinking About Applying for CMS' New ET3 Model?](#)