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*Testimony before the Senate Committee on Labor and Regulatory Reform
Senator André Jacque
February 17, 2022*

Chairman Nass and Committee Members,

Thank you for the opportunity to testify as the author in support of Senate Bill 680, PTSD coverage for emergency medical services.

I introduced this follow-up legislation to 2021 Act 29, which provides post-traumatic stress disorder coverage to first responders. This new legislation expands on the bi-partisan work done on 2021 Act 29, to include our paid emergency medical services practioners.

Senate Bill 680 is focused on providing the same coverage to paid emergency medical services practioners as we included in 2021 Act 29 for our firefighters and law enforcement officers.

There is a post-traumatic stress crisis among our first responder community that has continued to escalate. We are proud of the work we have done to open this avenue for treatment to some of our first responders, but more work needs to be done to truly address the needs of first responders in our communities.

PTSD can be treated effectively, and allow those affected to return to protecting and serving the public. It is critical that the men and women we have depended on as first responders that are affected by PTSD have access to treatment and the support they need to recover, both for their own health and those who depend on them.

We ask that you join us in supporting this legislation so that we can work together to address the needs of those who do so much to help us all.

Thank you for your consideration of Senate Bill 680.



CODY HORLACHER

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2021 Senate Bill 680

Testimony of Representative Cody Horlacher

February 17, 2022

Chairman Nass and members of the Senate Committee on Labor and Regulatory Reform, thank you for the opportunity to testify on Senate Bill 680.

This bill is follow-up legislation to 2021 Act 29, which provided post-traumatic stress disorder coverage to first responders. This new legislation expands on the bi-partisan work done on 2021 Act 29 to include our paid emergency medical services (EMS) providers. Senate Bill 680 is focused on providing the same coverage to paid emergency medical services providers as we included in 2021 Act 29 for our firefighters and law enforcement officers.

There is a post-traumatic stress crisis among our first responder community that has continued to escalate. We are proud of the work we have done to open this avenue for treatment to some of our first responders, but more work needs to be done to truly address the needs of first responders in our communities.

PTSD can be treated effectively, and allow those affected by it to return to protecting and serving the public. It is critical that the men and women we depend on as first responders who are affected by PTSD have access to treatment and the support they need to recover, both for their own health and those who depend on them.

We ask that you join us in supporting this legislation so that we can work together to address the needs of those who do so much to help us all.

Thank you for your time and consideration.

Wisconsin EMS Association
Serving Those Who Serve Others



To: Senator Stephen Nass, Chair
Members, Senate Committee on Labor & Regulatory Reform
From: Alan DeYoung, Executive Director
Date: Thursday, February 17, 2022
Re: **Support Senate Bill 680 and Senate Bill 681**

As the Executive Director and on behalf of the Wisconsin EMS Association (WEMSA) and the over 6,200 members and 330 EMS departments we serve - I am asking that the Committee please support legislation that expands to emergency medical service professionals (paramedics, advanced emergency medical technicians [AEMTs], emergency medical technicians [EMTs], and emergency medical responders [EMRs]) the current Worker's Compensation coverage policy for law enforcement officers and full-time fire fighters that are diagnosed with post-traumatic stress disorder (PTSD), similar to what was provided last year in 2021 Wisconsin Act 29.

WEMSA supports legislation that moves EMS worker's compensation PTSD coverage forward.

I want to take a moment and express our appreciation to the authors of Senate Bill 680 and 681: Senator André Jacque and Representatives Cody Horlacher and David Armstrong. And, Chairman Nass, thank you for scheduling a public hearing on this important issue.

Last year 2021 Senate Bill 11 was signed into law as Act 29, legislation that was hailed as a victory for first responders. However, those emergency first responders that are not full-time firefighters or police officers, including EMS providers not attached to a full-time fire department, were not included. Most EMS services are "stand alone," meaning they are not affiliated with a fire department.

78.6% of EMS departments rely on volunteers to serve their community. These men and women donate their time or may be paid a minimal stipend to provide the same emergency care as their EMS-firefighter affiliated contemporaries.

Please note that all volunteer services also pay for workers compensation insurance. And like our law enforcement, firefighter, and firefighter-EMS colleagues – stand-alone services experience the same work-related challenges and risks serving in their emergency first responder capacity. In fact, studies of emergency medical providers/ ambulance personnel have shown higher estimated rates of PTSD prevalence.

Simply put – it's about fairness. It's about recognizing that all EMS providers are essential first responders that face similar experiences and work-related hardships, regardless if they are associated with a municipal, private-sector based EMS service or administrated with the fire department.

Other Statistics...

- A study conducted using in-hospital and prehospital providers found that “prehospital providers were significantly more likely to screen positive for PTSD compared to the in-hospital providers (42% vs. 21%, $P < 0.001$).”¹
- From a study published in the Journal of Emergency Medical Services researchers found that first responders (EMS) in the United States were approximately 10 times more likely to have suicidal ideations and/or attempt suicide compared to the CDC national average.
- Studies show that first responders are at an increased risk of post-traumatic stress disorder and additional mental health issues including substance abuse. These studies compared police, firefighters, and first responders in each study.²
- Depression and PTSD affect an estimated 30% of our nation’s first responders – compared to 20% of the general population.³
- Approximately 3.7% of Americans have contemplated suicide, that rate jumps to 37% for fire and EMS professionals - same thing as above but different wording.⁴

Again, on behalf of the Wisconsin EMS Association membership we request that all EMS services and their EMS staff be afforded the same conditions of worker's compensation benefits for EMS who are diagnosed with PTSD. The State Legislature has already agreed to such provisions for emergency medical providers that serve on EMS services affiliated with a fire department – along with law enforcement and fire.

Thank you,

Alan DeYoung, M.S.
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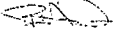
¹ Reference: [Journal of EMS: First Responders and PTSD: A Literature Review](#)

² Reference: [Journal of EMS: First Responders and PTSD: A Literature Review](#)

³ Reference: [America's first responders' struggle with PTSD and depression](#)

⁴ Reference: [America's first responders' struggle with PTSD and depression](#)

To: Senator Stephen Nass, Chair and Members of the Committee

From: Brian Donaldson, CCP, ASM, AAS 

Date: Thursday, February 17, 2022

Re: Support for Expanded Worker's Compensation to EMS Practitioners

Chair Nass and Members of the Committee,

My name is Brian Donaldson, I am a critical care paramedic, Chief of Emergency Medical Services (EMS) for Waushara County, President of the Wisconsin EMS Association, a 40-year veteran of EMS, and a resident of Wisconsin Rapids. Thank you for the opportunity to provide testimony in support of Senate Bill 680 and Senate Bill 681, bills that would expand worker's compensation coverage to emergency medical responders or emergency medical services practitioners (such as EMTs) who are diagnosed with post-traumatic stress disorder (PTSD), like that afforded to law enforcement officers and career fire fighters who are diagnosed with PTSD.

I also want to take this moment to thank the authors of these bills: Senator André Jacque and Representatives Horlacher and Armstrong. And, Chairman Nass, thank you for allowing a public hearing on these bills.

Please note, these bills are different from each other in that SB-680 only applies to paid EMS and SB-681 applies to all EMS and other professions. While I believe all EMS practitioners should be included in PTSD coverage under Worker's Compensation – I support any legislation that will expand coverage in EMS – moving my profession forward. My hope is that over time all EMS will be uniformly recognized and treated under the eyes of the Wisconsin law.

PTSD has an interesting history, mostly associated with the military. During the Civil War it was identified by physicians as "Soldier's Heart" because of the associated fast heart rate and difficulty breathing. It became known as "Shell Shock" in World War I, "Battle Fatigue" or "Combat Stress Reaction" during World War II and was later coined "Gross Stress Reaction" by the American Psychological Association in 1952. Beginning in 1980 the *Diagnostic and Statistical Manual of Mental Diseases, Third Edition (DSM-III)*, listed this syndrome as PTSD. PTSD varies from most other mental illnesses in that the causes are extrinsic rather than intrinsic.

As alluded to earlier, previous legislation has been enacted to provide worker's compensation coverage for some emergency responders within the State, but not all. It certainly excluded most of the EMS profession within the State. I have been searching for logical reasons for this exclusion, and to date, have been unable to identify any. My investigation into the prevalence of PTSD in law enforcement officers, firefighters, and EMS clinicians has left me with a myriad of data. These data lack consistency in the methods by which they were obtained and their analysis. The one suggestion that could be drawn from the aggregation of available data is that

law enforcement officers, firefighters, and EMS clinicians have an incidence of PTSD several times that of the public. It seems unclear which group should be awarded bragging rights for the highest prevalence of PTSD, and frankly, doesn't matter. All three groups are exposed to the same types of extrinsic forces; forces that cause PTSD.

As a long-time EMS clinician, I can assure you I have encountered my share of these stressors. While I am not a clinical psychologist, as I look through the diagnostic criteria set forth in DSM-5, it occurs to me that many of these criteria either could be applied to me or could have been at some point during my career. If this is true of me, could it also be true of others? I feel as though most reasonable people would agree this is likely the case.

I argue that because these PTSD causes are extrinsic, they are no different than any other occupationally acquired illness or injury that is covered under workers' compensation. I further argue the State should have no interest in limiting these benefits as the cost to provide these benefits is ultimately born solely by the employer. Finally, while it is not always possible to treat everyone equally, there should be an expectation that similar groups be treated fairly and equitably. For these reasons I again ask for your support of the inclusion of EMS practitioners in PTSD worker's compensation coverage.

Thank you.

Testimony to Senate Committee on Labor & Regulatory Reform

February 17, 2022, 10 AM

Hello Senator Steve Nass – Nice to see you again – we met at the Cambridge Fire and EMS station with Town of Oakland Chairman and Cambridge Fire & EMS Commission Chair Gene Kapsner a few years ago. You also assisted us to obtain one of the first Act 97 green lights to provide paramedic services to our community when we were staffed with paramedics. We are now licensed as a paramedic service. Thank you for your help.

Thank you, Senator Vanguard, Senator Stafsholt, Senator Wirch, and Senator Johnson. I am pleased to share my personal stories with you in order to impress upon you the need for EMTs to be covered in their organization's Workman's Compensation policy for services which they need to combat the serious effects of Post-Traumatic Stress Disorder.

I have volunteer as an EMT with Cambridge Area EMS for 30 years and then as the full time Director for 10 more years. I have experienced the most joyful successes and the most terrible tragedies you can imagine. My 40 years as an EMT has left scares and bruises that impact my daily life.

I have worked as administer of an institution for boys and girls, Executive Director of a Neighborhood Center, Rate Setter for WI DHS for institutions for boys and girls. I have been director of a therapy company providing health services. Even with this broad experience, the most frightening, traumatic, and scary events have taken place as an EMT and later as the supervisor of EMTs who experience the most horrific incidents you can envision.

Driving on I-94 in my personal vehicle and arriving first on scene of a multiple roll over car crash. I grabbed my emergency kit and ran to the vehicle where there were a man and a woman who were badly injured. The woman pointed to a small bundle about 100 feet away. I went to see and found a small child terribly bruised and not breathing and without a pulse. I worked hard with my practiced skills to provide breaths and chest compressions, but the child's skull was broken, and blood and fluid were being pushed out as I compressed that child's chest.

I have five of my own children and all I could envision was one of my babies being in that crash. This image has stayed with me for nearly 20 years and will stay with me for the rest of my life.

Several years ago, at around 4 AM in the morning the pager beckoned me from a deep sleep to a two-car head on crash on State Highway 12/18. I arrived to find two vehicles totally engulfed in flames with a driver in each vehicle. The first EMT on the scene was David (not his real name). David had just graduated from high school and earned his license as an EMT. He was headed to medical school. He identified the bodies that turned out to be two close friends and classmates of his. I trembled, knowing that this incident would forever change David's life. One of the major roles of the director is to retain and assist staff through these difficult calls. The EMTs and Fire Fighters were all invited to a debriefing. David did not show up and soon resigned from the service.

We received a call from our dispatcher that a young girl called 911 and reported that her mom was unconscious and was having a diabetic incident. We rushed to the scene and were able to help the women regain consciousness and receive hospital care. The young girl who had Down Syndrome was celebrated with an award and a party to commend her for taking action to save her mother and encourage other young persons to call for help. She was the community hero. Several years later the pager notified us of a crash on an intersection in the district. Upon arrival I observed a rolled over car with a person underneath. The Fire Department removed the car as we recognized that the girl was the hero who had saved her mom. The Dad was severely injured. We transported both and did all we could to save them. We were not successful with the girl. I still see her image lying on the cot in the ambulance. Sometimes this incident comes up in conversations with the crew – many years later.

There are many more stories of images and ghosts that haunt EMTs as well as other first responders and emergency workers.

With the passage of 680 or 681 Workman's Compensation will cover the necessary treatment and recovery for people in service to their communities.

Thank you for your attention.

Bob Salov

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