Overview of AMR/FEMA Federal National Disaster Emergency Medical Services

Following the catastrophic 2005 hurricane season, FEMA sought to implement a plan to establish a comprehensive EMS response to federally declared disasters. The government solicited proposals and on August 1, 2007, FEMA named American Medical Response (AMR) as the sole prime provider recipient of this contract, which provides a full array of ground ambulance, air ambulance and para-transit services to supplement the federal and military response to a disaster, act of terrorism or other public health emergency. This national contract is the first of its kind and as of October 1, 2009 covers the 48 contiguous United States which are divided into 4 FEMA zones.

The contracted services provided in this agreement include:

- **patient triage**
- **treatment**
- **transport**
- **hazard recognition**
- **symptom surveillance and reporting**
- **on-scene medical stand-by**
- **transport and redistribution of patients to free-up receiving hospital bed space**
- **provide immunizations**
- **staffing for shelters**
- **staffing hospital emergency departments**
- **set up mobile medical clinics**
- **medical liaison**
- **tactical management functions**
- **oversight & management of Federal EMS & para-transit resources.**

Maximum deployment for a single FEMA zone includes 300 ground ambulances, 25 air ambulances and enough para-transit vehicles to transport 3,500 people. Combined 4 zone maximum deployment includes 1,200 ground ambulances, 100 air ambulances and 14,000 para-transit seats. Simultaneous response from multiple zones for catastrophic disasters may be required under this national contract. AMR has established a robust network of subcontractors to assist in meeting these needs. Private, public, third-service and volunteer EMS agencies have joined forces with AMR to form an impressive EMS disaster response team (DRT). AMR continues to recruit agencies and individuals to be part of its national disaster response network.

AMR previous disaster experience includes:

- **Hurricane Andrew, 1992**
- **Oklahoma City Bombing, 1996**
- **Columbine High School, 1999**
- **World Trade Center Attack, Sept. 11, 2001**
- **Hurricane Charlie, 2004**
- **Hurricanes Katrina and Rita, 2005**
- **FEMA Contract, South Louisiana, 2006**
- **FEMA deployment Hurricane Dean, 2007**
- **FEMA deployment Hurricane Gustav, 2008**
- **FEMA deployment Hurricane Ike, 2008**
- **FEMA deployment 2009 Presidential Inauguration**

**Jurisdiction.** While most emergency situations are handled locally, major incidents may require assistance from other jurisdictions, including state and federal governments. The National Response Framework identifies FEMA as the federal lead during an Incident of National Significance. Emergency Support Function (ESF) #8 – Public Health and Medical Services Annex – is the mechanism for coordinated federal assistance to supplement state and local resources in response to the public health and medical care needs of potential or actual federally declared disasters and/or during a developing potential health and medical situation. The U.S. Dept. of Health and Human Services (HHS) is the
This deployment was extremely high. "Deploying roughly 600 ambulances across three Gulf States is grossly equivalent to a U.S. Army Armored Division deployed across an area more than twice the size of Iraq… It has been a pleasure working in the environment of professionalism and excellence which defines AMR.”

AMR recognizes that many EMS providers are regulated by local or state agencies and may have restrictions when it comes to responding to out-of-area disasters. The EMS needs of local communities are primary and participation in the AMR DRT is not intended to undermine those obligations. States may have Emergency Management Assistance Compact (EMAC) agreements with ambulance services; therefore, AMR will not utilize assets that are committed under EMAC.

Standards and Guidelines. The FEMA Typed Resources Definitions, Emergency Medical Services Resources, is used as a guideline for EMS responders. The applicable EMS job titles listed in FEMA’s National Emergency Responder Credentialing document are used to determine the required and recommended training and certification. Both ALS and BLS services are utilized. EMS personnel are required to maintain current credentials in their home state to practice at the required skill level. The National Incident Management System (NIMS) establishes standard incident management processes, protocols and procedures to ensure that all responders work together more effectively. NIMS works hand-in-hand with the National Response Framework (NRF). NIMS provides the template for the management of incidents, while the NRF provides the structure and mechanisms for national-level policy and incident management. For EMS deployments pursuant to the AMR/FEMA Contract, the National EMS Core Content will be used to define the domain of out-of-hospital care. The scope of practice for the AMR/FEMA Contract shall be the National EMS Scope of Practice Model.

2007 Activation. In August of 2007, catastrophic Hurricane Dean threatened to make landfall in south Texas. State officials requested Federal assistance with evacuation and the AMR/FEMA National Ambulance Contract was activated for the first time. The government asked AMR to deploy 300 ground ambulances, 25 air ambulances, and para-transit vehicles to transport 3,500 passengers. AMR coordinated the mobilization of ambulances, aircraft and para-transit vehicles from 30 states to meet this challenge. The response from AMR's disaster provider network was unprecedented. FEMA described this deployment as “the largest mobilization of EMS resources in the history of the United States”. AMR’s Hurricane Dean deployment was evaluated by FEMA and the results have been posted publicly by the National Institutes of Health. AMR attained either “outstanding” or “excellent” evaluation scores from FEMA and the U.S. Dept. of Health and Human Services in all categories. The evaluation states, “This firm acted in the most professional manner and I would easily and strongly recommend this firm to any Federal agency. The government’s overall satisfaction with this deployment was extremely high.”

2008 Activation. The 2008 hurricane season was one for the record books. On September 1, 2008, the eye of Hurricane Gustav made landfall in south Louisiana prompting the largest evacuation in that state’s history - 2 million people. The size of this storm prompted FEMA to activate the AMR national disaster contract in three (3) separate states simultaneously; Mississippi, Louisiana and Texas. This was unprecedented. While still recovering from Gustav, Hurricane Ike made landfall in Texas on September 12, 2008. At one point, the diameter of Ike’s forceful winds made it the most massive Atlantic hurricane recorded. FEMA called upon AMR once again. The government then requested the maximum EMS resources for the Atlantic and Gulf states (zones 1 and 2), be deployed for Hurricanes Gustav and Ike simultaneously. AMR and its network providers responded accordingly. AMR established forward command operations in each state (Jackson MS, Alexandria LA, San Antonio TX, Houston TX and Galveston TX). The EMS deployment to these back-to-back disasters established a new benchmark in EMS disaster response. Never before have so many ground ambulances, air ambulances, and para-transit vehicles been deployed to assist disaster victims. Ambulances responded from 35 states to Texas, Louisiana and Mississippi. Approximately 50% of the ground ambulances were supplied by AMR's subcontracted network providers. 150 different ambulance companies responded. To complicate matters, in between Gustav and Ike came Hurricane Hanna, which threatened the Atlantic Coast and made landfall on the South Carolina / North Carolina border. AMR released all deployed ambulances from states affected by Hanna so they could return home and backfilled with additional ambulances from non-vulnerable states. These contiguous disaster deployments are by far the largest mobilization of EMS disaster resources in U.S. history. USDHHS Lt. Commander Bruce Dell characterized AMR’s performance as follows: “Deploying roughly 600 ambulances across three Gulf States is grossly equivalent to a U.S. Army Armored Division deployed across an area more than twice the size of Iraq… It has been a pleasure working in the environment of professionalism and excellence which defines AMR.”
In anticipation of record crowds and increased emergency medical service activity for the 2009 Presidential Inauguration, FEMA activated its national ambulance contract with AMR. The government ordered federal aid to supplement the Washington DC response efforts. AMR was tasked with providing appropriate assistance for certain emergency protective measures that may be needed to save lives and protect public health and safety. This was designated as a National Security Special Event (NSSE) by the Department of Homeland Security.

AMR and its disaster response network subcontractors responded with 144 ambulances and 15 para-transit buses. Most of these resources were assigned to support the Washington DC Fire Department EMS system. Some assets were assigned to Maryland to provide emergency care to the large numbers of riders utilizing the public transit system out of the Capitol. In evaluating AMR’s performance of this deployment, FEMA had this to say: “We have come to rely upon AMR during national disasters and once again, they have done a great job. The AMR/FEMA contract is an all-hazards agreement and this deployment certainly demonstrates the diversity of AMR to respond to major events other than hurricanes. FEMA is proud to be represented by this group of trained EMS professionals.”

Our parent company, Emergency Medical Services Corporation (EMSC), is the leading provider of emergency medical services in the United States. EMSC operates two business segments: AMR, the nation’s leading provider of ambulance service, and EmCare, the nation’s leading provider of emergency department and facility-based physician services (400 hospitals). Together we serve 13 million patients each year. AMR currently employs more than 18,500 people serving more than 2,000 communities with a fleet of approximately 4,500 vehicles. Air Ambulance Specialists, Inc. (AASI) is a subsidiary of AMR that arranges domestic and international fixed-wing air medical transportation services.
FAST FACTS -- 2008 HURRICANE SEASON – EMS DISASTER RESPONSE
(The largest EMS disaster deployments in U.S. history....FEMA)

HURRICANE GUSTAV
- Deployed August 28 – September 12, 2008 (16 days)
- FEMA contracted EMS in three states simultaneously: MS, LA & TX
- 662 ground ambulances
- Ambulances responded from 41 states
- 27 air ambulances (fixed and rotary wing)
- 180 Para-transit vehicles (to provide 3,900 passenger seats)

HURRICANE IKE
- Deployed September 9 – October 4, 2008 (25 days)
- FEMA contracted EMS in two states simultaneously: TX and LA
- 540 ground ambulances
- Ambulances responded from 34 states
- 25 air ambulances (fixed and rotary wing)
- 163 Para-transit vehicles (to provide 3,000 passenger seats)

HURRICANES GUSTAV AND IKE COMBINED TOTALS
- Deployed August 28 – October 4, 2008 (38 total combined days, 4 overlapping days)
- FEMA contracted EMS in three states: MS, LA and TX

2007 & 2008 Hurricane Deployments

"The largest EMS disaster deployments in U.S. history"
FEMA