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2021 Assembly Bill 683 Testimony of Representative Cody Horlacher March 1, 2022

Chairman Knodl and members of the Assembly Committee on Government Accountability and Oversight, thank you for the opportunity to testify on Assembly Bill 683.

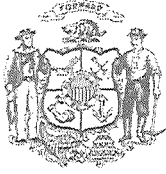
This bill is follow-up legislation to 2021 Act 29, which provided post-traumatic stress disorder coverage to first responders. This new legislation expands on the bi-partisan work done on 2021 Act 29 to include our paid emergency medical services (EMS) providers. Assembly Bill 683 is focused on providing 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.



ANDRÉ JACQUE

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*Testimony before the Assembly Committee on Government Accountability and Oversight
Senator André Jacque
March 1, 2022*

Chairman Knodl and Committee Members,

Thank you for the opportunity to testify in support of Assembly Bill 682, PTSD coverage for emergency medical services.

Rep. Horlacher and 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 practitioners.

Assembly Bill 683 is focused on providing the same coverage to paid emergency medical services practitioners 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 Assembly Bill 683.

To: Representative Daniel Knodl, Chair, and Members of the Committee

From: Brian Donaldson, CCP, ASM, AAS 

Date: Tuesday, March 01, 2022

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

Chair Knodl, Vice-Chair Brandtjen, 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 Assembly Bill 683, a bill that would expand worker's compensation coverage to emergency medical responders or emergency medical services practitioners, such as EMTs and Paramedics, who are diagnosed with post-traumatic stress disorder (PTSD). The same coverage 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 this bill: Representative Horlacher and Senator Jacque. Lastly, Chair Knodl, thank you for allowing a public hearing on this bill.

Please note, there have been multiple bills introduced this session that would afford varying degrees of coverage to 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 Assembly Committee on Government Accountability & Oversight

March 1, 2022, 10 AM

Hello Representative and Chair Knodl, Vice Chair Brandtjen and Representatives Kuglitsch, Steffen, Thiesfeldt, Krug, Emerson, Hintz, and Drake

– Nice to meet you

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 volunteered 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 Paramedic 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 crushed, 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 unrecognizably charred drivers 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 was able to identify the two 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 from on top of a body. 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 and her dad continuously asking how she was doing. 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 AB683, Workman's Compensation will cover the necessary treatment and recovery for EMTs who serve their communities.

Thank you for your attention.

Bob Salov

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Cc: Representative Barbara Dittrich – 38th Assembly District

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STATE PRESIDENT

MICHAEL WOODZICKA
STATE VICE-PRESIDENT

STEVE WILDING
STATE SEC. / TREAS.

PFFW Testimony Supporting AB-683

Assembly Government Accountability and Oversight Committee

March 1, 2022

Thank you Chairman Knodl and Committee Members for holding a hearing on this important piece of legislation.

My name is Mahlon Mitchell, I am a Lieutenant on the Madison Fire Department and am the State President of the Professional Fire Fighters of Wisconsin. We represent firefighters and EMS personnel in over 100 communities across the state.

As our name (PFFW) indicates, most of our members are career firefighters. However, most of them are also EMT's or Paramedics. That is true in cities like Madison, Milwaukee, Green Bay, Kenosha, Superior, La Crosse, and others.

Not all cities are organized that way. Some have fire department separate from their EMS departments. Cities like Sturgeon Bay, Sun Prairie, and Baraboo are examples of those "stand-alone departments". Paramedics and EMT's in those cities are also our members.

Earlier this session all of you voted for SB-11 which provided Workers Compensation for the treatment of PTSD suffered by law enforcement officers and firefighters. Thank you for that vote.

Most of my members are both fire and EMS and are now covered. However, our members who work for these "stand-alone EMS departments" are not eligible for the same Workers Compensation coverage as those that work for a department that combines both fire and EMS.

Obviously how a paramedic reacts to a terrible auto accident or gruesome fire with burn fatalities is not any different based on being a full-time fire fighter-paramedic or a stand-alone paramedic.

The bill before you, AB-683, takes care of the oversight. Therefore, the PFFW supports AB-683 and asks you to support it as well.

Fortunately, we have not seen any of our members recently diagnosed with PTSD and thus it appears none have yet received the treatment that we envision. Our goal is to get the treatment they need so they can return to work when they are well enough to do so.

Since the PTSD issue has been before the State Legislature almost this entire session, I want to thank the lead authors of both this bill as well as SB-11. They are Rep. Horlacher and Rep. Emerson and Sen Jacque. On this bill before you today I specifically want to also thank committee members Brandtjen, Drake, and Thiesfeldt for your sponsorship.

With me to testify are several of our members that work for "stand alone EMS departments". They will describe some of the trauma they and their brothers and sisters have experienced.

After they have testified, we would be glad to answer any questions you might have.

Thank you.

February 26, 2022

Re: Assembly Bill 683

To Whom It May Concern:

I have been a Wisconsin Registered EMT for 32 years and practice with both Bloomer Ambulance Service and Mayo Ambulance Service. At this time, I would like to express my support for AB 683.

I have been involved in countless serious ambulance calls over the years that have left a mark on me. Fortunately, I have been able to deal with these calls and go home to my family and live my life. But I can tell you that I know other EMS workers that have had a harder time dealing with these types of calls and have needed extra help while suffering from post-traumatic stress.

Under current law, police officers and fire fighters can get worker's compensation benefits when diagnosed with PTSD while EMS workers are not able to. It is disheartening for me to think that it has gone on this long without the law being updated to include EMS.

By passing this bill you can hopefully make a difference and allow EMS workers that suffer from PTSD to get the help that they need!

Thanks for your time and if you have any additional questions, please let me know.

Jay Young (young@bloomer.net)

702 15th Ave

Bloomer, WI 54724

Wisconsin EMS Association

Serving Those Who Serve Others



Wisconsin EMS Association

To: Representative Daniel Knodl, Chair
Members, Assembly Committee on Government Accountability & Oversight
From: Alan DeYoung, Executive Director
Date: Tuesday, March 1, 2022
Re: **Support Assembly Bill 683**

As the Executive Director and on behalf of the Wisconsin EMS Association (WEMSA) and the over 6,000 members and 360 EMS departments we serve - I am asking that the Committee please support legislation that expands to emergency medical service (EMS) providers the current Worker's Compensation coverage policy for law enforcement officers and full-time firefighters 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 Assembly Bill 683: Representative Cody Horlacher and Senator André Jacque. And, Chairman Knodl, thank you for scheduling a public hearing on this important issue. Please note the companion bill, SB-608, last week passed the Senate Committee on Labor and Regulatory Reform on a unanimous vote 5-0.

We hope when the Assembly returns – passage of this legislation will be a priority of the State Legislature.

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 workers 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 are paid a very small 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.

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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

Executive Director Wisconsin EMS Association
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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](#)