

CRAIN'S **HEALTH PULSE** NEW YORK

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NYC ambulance response times lag amid vehicle and EMT shortage



Ambulances at Elmhurst Hospital (Buck Ennis)

By
Ethan Geringer-Sameth

Ambulance response times increased more than 16% in the city's last fiscal year, amplifying a yearslong trend of flagging emergency services, according to the latest Mayor's Management Report.

Response times for life threatening emergencies jumped to 13:09 from 11:21 – more than a minute and three-quarters – the largest increase in the last four fiscal years. The increase coincided with a significant loss of ambulances on the road: Average ambulance in-service hours per day dropped to 8,109 from 8,572, a more than 400 hour decline – also the largest drop of its kind in the last four years.

The report, which covers the last six months of Mayor Eric Adams' term and the first six months of Zohran Mamdani's, offers the first partial snapshot of the new mayor's performance. It blames the fewer ambulance tours on a labor shortage at the Fire Department, an issue that has simmered for years as the city remains locked in at-times contentious contract negotiations with the emergency medical services union.

The report states EMS staffing dropped “more than usual this year” as emergency medical technicians were promoted to firefighters, which pays significantly better. Health systems have also continued to remove private ambulances from the 911 dispatch system, including 11 vehicles in fiscal year 2026, another contributor to the drop in service hours.

“We take this issue extremely seriously and will continue to take steps to improve response times and keep New Yorkers safe,” FDNY spokeswoman Amanda Farinacci said in a statement. “That includes improving coordination with hospitals, enhancing efficiency in high-volume areas, and increased operational visibility to help return units to service quickly.”

The Fire Department sees a big staffing drop every four years when it holds promotional exams, Farinacci said. That's because the city's civil service law

requires the department to hire first from the promotional exam before outside candidates, and the promotional list is almost entirely made up of EMTs and paramedics.

It is one of the primary reasons the EMS union says the system needs to be reformed. Firefighters can make up to \$109,000 a year compared to EMTs who top out around \$59,000, an imbalance that creates a one-way flow of employees, leaving the Fire Department's Emergency Medical Services chronically understaffed, said Local 2507 President Michael Greco.

"We are losing people way quicker than we can hire and train them. And that leads to citizens dying," Greco said.

The union has been without a contract since 2022 and Greco said he has seen little urgency from the Mamdani administration as attrition continues. The local, which also represents fire inspectors, began the year with 4,400 members, a headcount that had fallen to 3,900 by September despite adding hundreds of new EMTs, he said.

In July, Office of Labor Relations spokesman Kenneth Londono said negotiations were underway. "We look forward to continuing our productive discussions to reach a fair and sustainable outcome that supports these dedicated first responders while remaining fair to City taxpayers," he told *Crain's* at the time. Those negotiations are ongoing, he said on Friday.

The Fire Department has taken some steps to alleviate pressure on the fleet, Farinacci said, including by deploying units that can treat on the scene to reduce trips to the hospital. She added that traffic has been a major factor snarling response times. The agency deployed 13 so-called paramedic response units in northern Manhattan and the Bronx, which send teams to emergencies without an ambulance, allowing them to get to work on-site sooner and return to service if transport is not needed. The agency has also changed its dispatch system to improve coordination between units.

But the ambulance shortage has left units travelling longer distances to emergencies and leaving behind a backlog of 911 calls, according to Greco.

“There’s a cardiac arrest going on in Manhattan and we have no paramedics. They’re being dispatched from Brooklyn, they’re being dispatched from Queens and vice versa,” he said. “We are literally crisscrossing across the entire city all hours of the day.”

New York health officials, providers race to sort out Medicaid work rules



A gurney in a hospital hallway. (Bloomberg)

By
Amanda D'Ambrosio

New York health officials and providers are preparing to implement federal Medicaid work requirements in less than four months. But some key details

remain unclear — including which enrollees will be exempt and what role providers will play in helping people stay covered, leaders say.

The work requirements, set to take effect Jan. 1, are estimated to affect roughly 2 million of the state's 6.4 million Medicaid enrollees, according to Cadence Acquaviva, a spokesperson for the Department of Health.

State health officials have been racing to set up automatic verification systems and conduct outreach to affected Medicaid enrollees amid a tight implementation timeline and emerging federal guidance. Meanwhile, providers say they are still waiting for clarity on some basic questions to understand their administrative burden in the months to come.

“Hospitals — all providers, frankly — and the state are really starting from the same place, which is that everyone wants to ensure that New Yorkers ... don't lose the coverage they are eligible for simply because of an administrative or procedural barrier,” said Amy Nickson, senior vice president of state policy at the provider trade group Healthcare Association of New York State.

“How, at this point, things are going to roll out? I think there are still some details to be determined,” Nickson said.

The new federal work requirements were passed in 2025 as part of Republicans' budget reconciliation bill, H.R. 1. The rules require certain Medicaid enrollees between 19 and 64 years old to prove that they are working, in school, in job training or volunteering in order to maintain their health benefits. Certain groups are exempt, including children and teens, people over 65, pregnant women, people with disabilities and others.

Medicaid enrollees can meet the requirements by earning \$580 per month, completing 80 hours per month of work, school or volunteering, or some combination of income and work hours. The \$580 income threshold is based on

80 hours of work at the federal minimum wage of \$7.25. New York has a higher minimum wage — \$17 in the city, Westchester and Long Island and \$16 everywhere else in the state — than the federal minimum, so enrollees have to work fewer hours per month to fulfill the income requirement.

Dr. Debbie Salas-Lopez, executive vice president at Northwell Health's Institute for Community Health and Wellness, said that Northwell began preparing for the implementation of work requirements earlier this year, including by launching a task force to oversee implementation and communicating with the Department of Health.

But there are still a few major unknowns, she said. Firstly, it's not clear how the state will exempt Medicaid enrollees considered "medically frail" — a category that includes individuals with mental health or substance-use disorders, cancer or other chronic conditions. Those individuals must prove not only that they have a medical frailty designation, but also that that condition prevents them from being able to work.

Amir Bassiri, the state's Medicaid director, said in a presentation to members of the United Hospital Fund in June that it's estimated that roughly 30% to 40% of Medicaid enrollees will be eligible for a medical frailty exemption.

The data and reporting infrastructure between hospitals and the state also remains unknown, Salas Lopez said. That includes how hospitals will document and communicate that a patient is volunteering, for example, and can keep their insurance. "The administrative burden on this has been underestimated," Salas-Lopez said.

The state is setting up electronic verification systems that will automatically determine whether individuals are meeting the work requirements or have some sort of exemption, using data sources from federal records, other state agencies,

the Department of Health's internal systems or third-party sources, according to the Health Department.

The agency has already started notifying Medicaid enrollees that they will have to comply with work requirements next year. The Health Department has sent notices to 1.1 million households enrolled through the state's insurance marketplace, New York State of Health, said Acquaviva, the DOH spokesperson. The state plans to complete outreach to 400,000 remaining households by the end of September.

"The New York State Department of Health remains committed to helping eligible New Yorkers maintain their Medicaid coverage and mitigating the impacts of H.R. 1," Acquaviva said.

Though key questions remain, Salas-Lopez said providers are continuing to collaborate and work with state health officials as the implementation deadline nears.

"We can see this as a challenge that is insurmountable, or we can see this as an opportunity to provide care and support to our community so that they stay covered," Salas-Lopez. "This is just one more headwind that we are adjusting our sails to."