



Esteemed Council Members,

I wanted to take brief few moments of your time to discuss the current and future state of 911 Emergency Services in the City of Berlin, since we have neither been asked, what I think are important questions, nor been allowed to address the council.

Those of you who do not know me my name is William Rosenberg; I am CEO and owner of Berlin Emergency Medical Services (BEMS). I purchased BEMS in December of 2021 from Christoopher Dubey, the Dubey family had been providing emergency services to the citizens of the city since 1980. In the summer of 2021 when I came to visit the city and look at the possibility of purchasing BEMS, I was originally, given its rural location and travel from the airport turned off, but during my drive, and after meeting the staff, seeing the town, and taking in all the things Berlin has to offer fell in love with the town and it's residents, and as they say the rest is history. I am a paramedic, an accomplished Operations Executive with 20 plus years of success driving organizational growth and multi-state expansion within the healthcare field, father of four kids and four dogs, but most importantly I am an involved, engaged, and proud sole owner of BEMS with an unrelenting passion for its service to this community and beyond.

Prior to the acquisition, I meet with the city council at the time, to express my desire to work with them to upgrade the care the citizens received, through technology, staffing, training, and so much more. During that hearing I expressed my desire to be partners for the long haul, not raise rates beyond what was reasonably necessary to maintain and never leave the citizens in a lurch without the best possible care available. Their biggest fear was one seen by so many small cities; a local company gets acquired, the new owner comes in and at the next renewal double the price, cut service and quality, or worse leave town as is often the case with large multi-owner companies such as AMR. BEMS is ,not owned by private equity, we are not a large conglomerate, and although not a New Hampshire resident, I am the sole owner who cares about the patients and employees, that only answers to himself for the care and quality provided. After all, a survey completed the previous year estimated it cost the city more than triple what BEMS was charging, and they would likely get less service, especially should there be a fire and EMS emergency simultaneously.

The city council agreed we would work on a long-term agreement, unfortunately through staff turnover in the city, when it came to renewal time, despite our desire for a five-year locked in price agreement with a minimalistic 4% increase in a time when inflation was greater than 9%, we were rebuked by the Fire Chief, and a three-year agreement was struck. When I bought BEMS, my intention was to provide steady reliable, professional, high-quality EMS access for the long haul, or frankly I wouldn't have invested the money I have.

Since acquiring BEMS, we have added a second full time staffed ALS crew to the city, not on call as the agreement requires. We have added ventilators and IV pumps to the crew's assets, added power stretchers for the safety of the patients and crews, and replaced one of the aging ambulances. A second brand new ambulance is due in this summer; however, may be diverted if another agreement cannot be reached with the city. Our agreement calls for a primary ambulance no more than seven years of age,



and a second ambulance no more than ten years of age staffed within 30 minutes of a call, as noted above it is staffed 24/7 in the city going above and beyond our contractual requirements. It is important to note that our primary 911 ambulance is and always has been four-wheel drive equipped: a necessity considering the winters in Berlin.

The lack of communication and transparency regarding the cities desire to take EMS under the auspices of the Fire Department (FD), is baffling to me considering the 30+ year partnership, and collaboration between the city and BEMS. I would've welcomed the opportunity to schedule a meeting with the mayor to discuss the pros and cons of the cities desire to bring EMS under the FD. Understanding the importance of this decision and knowing the data I could provide to aid in the Council making an informed decision, I reached out the mayor to have this discussion.

It would be remise of me if I did not share several important data points with the group. The billing numbers provided to the city are inaccurate causing your revenue projections to be too high. The parent company to BEMS employes ten fulltime billers working to collect at the highest level, and at a fraction of the cost the city will have to pay an outside billing company who is never as vested as the provider. When BEMS was acquired and collections came in house, collection rose almost 17%. Additionally, the FD's capital costs, are understated if you want ambulances in service providing safe care, if you only have two and one is down for maintenance, you are at a deficit, and given their age, and mileage there will be high maintenance costs, and no you cannot simply re-chassis them both. Current wait time for re-chassis is approximately 18-24 months and one of the ambulances purchased would not be a candidate. You have been told that there is a cost to the FD and Police Department because of BEMS providing 911 services, first lets address the FD, we did not ask for them to be added to many of our calls that was done by the Fire Chief, not us, so that cost is self-inflated, as for the PD dispatching, again this was not our request; during COVID-19 we were informed of how the city would be dispatching. If you would like to just intake 911 calls and have us dispatch ourselves that is an option as well. Lastly, the ability for the city to recruit four to eight paramedics at the FD current salaries will be near impossible. We employ several recruiters and offer a higher salary and have a clear understanding of the roadblocks to staffing.

In closing, yes, we would like to renew our contract, and we would commit to a long-term contract up to ten years with a locked in price. If the FD request is not funded and you open an RFP the price will be significantly higher than now, as opposed to a simple negotiation. If we negotiate a price, it will be similar to current pricing with mild COLA increase. Yes, if we stop doing 911, it is highly unlikely we will or anyone else will serve AVH timely, meaning you may have a FD to take you to AVH, but you may also die waiting for a transfer to a tertiary care facility, because 911 and IFT MUST work in synergy for both to be viable in a community as rural as Berlin.

Most importantly thank you for your partnership, I sincerely hope you are willing to hear the rest of the story and more of the facts than you are being told, not in an aggressive campaign manner as they are being fed to you, but in a simple discussion of facts, and then you the council members get to make your decision as elected to do, but any decision with only half the facts, and none from the source of truth



(BEMS) on things like actual EMS revenue, actual costs, IFT effects, and staffing and capital challenges, in my mind is a foolish decision.

I look forward to talking to you in the future, and hope you look at all the facts and consider the experience and insight I'm willing to share before making a major decision that could negatively impact both the physical health of the citizens and the fiscal health of the city.

Yours in Service and Partnership,

William Rosenberg, M.S., NRP, CCEMT-P
President & CEO