

**To:** Members of the Senate Health and Human Services Committee

**From:** Sara Navidi | Young Invincibles

**Re: HB26-1069 Availability of Emergency Medical Services**

Thank you, Chair and members of the Committee,

My name is Sara Navidi. I am a Young Advocate at Young Invincibles, and I am here to encourage you to **pass HB26-1069**.

Like many Americans, I have faced situations where I debated whether to call an ambulance because of the potential cost. A 2024 YouGov survey found that 23% of Americans say that during a medical emergency, when they needed immediate transportation, they purposely did not call an ambulance because of the cost (1).

As a former medical assistant, I witnessed this hesitation firsthand. When patients called our clinic with alarming symptoms close to closing, physicians would sometimes recommend the emergency room or urgent care based on what the patient described over the phone. Some patients would hesitate to call an ambulance until symptoms worsen because of the cost. On other occasions, we had patients who needed to visit urgent care, but had no transportation options.

That leaves patients trapped between two bad options: avoiding an ambulance even when they believe they need one; or calling one, being transported to an ER when other options may be more appropriate, and then being left with astonishing debt.

I have experienced the second situation myself. After a severe car accident, I was transported by ambulance and later left with several thousand dollars of debt. I remember feeling regret for using an ambulance. However, because my car was not drivable, my only option was the ER with an ambulance rather than driving to urgent care. This points to a bigger issue: our current EMS system offers patients only two options at the extremes.

Under current billing structures including Colorado Medicaid, EMS reimbursement is limited for evaluation of a patient that is not then transported (2). If we change this so EMS agencies are reimbursed for stabilization without transport, telehealth evaluations, and transport to lower-cost settings, they can collaborate more effectively with patients to determine the safest and most appropriate next step.

For these reasons, I urge you to **vote yes on HB26-1069**. Thank you for your time, and I am happy to answer any questions.

Sincerely,  
Sara Navidi  
Young Invincibles | Young Advocate

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References:

1. "One-Quarter of Americans Didn't Call an Ambulance during a Medical Emergency for Fear of Costs." *YouGov*, 13 June 2024, [yougov.com/en-us/articles/49738-one-quarter-americans-didnt-call-ambulance-medical-emergency-costs-poll](https://yougov.com/en-us/articles/49738-one-quarter-americans-didnt-call-ambulance-medical-emergency-costs-poll).
2. "Emergency Medical Transportation Billing Manual." *Colorado Department of Health Care Policy & Financing*, [hcpf.colorado.gov/emt-manual](https://hcpf.colorado.gov/emt-manual). Accessed 30 Apr. 2026.