**Opinion Editorial**

**Whitney Corby’s Story**

**How did air medical impact my life? It gave me one**

On December 26, 2013, my life changed forever. While driving to the gym, my car hit a patch of black ice, sending me off the roadway and into a tree. I sustained critical, life-threatening injuries, including a traumatic brain injury.

Because I live in a rural community, the rest of my story might have been very different. There are over 85 million Americans who can only access critical care within an hour via air medical services. Because of the time it takes to reach appropriate medical care, there is an additional 22 percent risk of injury-related death in these areas.

Thankfully, my hometown of Corning, New York, is serviced by air medical transport. I was on life support while we made the 15-minute flight to the closest trauma center, Robert Packer Hospital in Sayre, Pennsylvania. Although the staff worked around the clock to save my life, my family was told to prepare for the worst. Luckily, a week later I woke up from my coma.

Once stabilized, I was transferred to a rehabilitation center where I began the long road to recovery. At 18 years old, I had to learn how to walk, talk and feed myself again.

Thanks to the first responders and medical team, I made a full recovery. I recently graduated from nursing school and am working as a neuro nurse. After the amazing care I received, I wanted to provide that same care to others experiencing neurotrauma.

As a nurse, I can tell you that having access and continuity of care is critically important. Air medical does just that. You can access specialty care more quickly, while still receiving essential care along the way. As one of my doctors said, I wouldn’t be alive today if I hadn’t been flown to appropriate care promptly. Without medical transport by air, one in four people would be unable to reach a trauma center in time for the treatment they need.

Unfortunately, there are many communities that don’t have this type of service or are losing it. Running a high-quality air medical base is expensive and many, overwhelmed by prohibitive costs, are shutting down at alarming rates. This is due to air medical providers getting reimbursed a fraction of what it costs to operate these flying ICUs.

I recently learned that seven out of 10 people transported by air ambulance have Medicaid, Medicare or no insurance at all. The median rate Medicare pays these providers only covers 59 percent of the actual cost. Medicaid almost always pays less than that. For individuals with private insurance, there is no guarantee the bill will be paid or passed along to the insured. That leaves the patient in an untenable financial position, and when bases shut down due to underpayment, future patients are robbed of the lifesaving care they need. This is, simply put, unacceptable.

However, there is one way we can preserve this crucial service. Currently, there’s a bill in Congress – S. 2121/H.R. 3378, the Ensuring Access to Air Ambulance Services Act – which would increase Medicare reimbursement rates for air medical services for the first time in two decades. It’s a good first step, and you can help. Call your Representatives in Congress and ask them to support S. 2121/ H.R. 3378.

When people ask me how having access to air medical critical care impacted my life, I tell them that it gave me one. It does the same for tens of thousands of people every year. For those families – and potentially, for your own – I hope you’ll join me in the fight to preserve this life-saving service.