

Testimony of
David D. Lowell, President
Association of Connecticut Ambulance Providers
Appropriations Committee
Thursday, March 02, 2011

Senator Harp, Representative Walker and distinguished members of the Appropriations Committee.

My name is David Lowell. I am President of the Association of Connecticut Ambulance Providers.

I am speaking on behalf of our membership in opposition of a concept that has risen today in a question posed to the commissioner of Public Health regarding the potential move of the Office of Emergency Medical Services (OEMS) to the Department of Emergency Management and Homeland Security (DEMHS).

I am here to testify that we [our association] are categorically opposed to this concept in any form.

Connecticut's EMS system exists in structure and function within the Department of Public Health. The critical functions performed by EMS providers are medical in nature and are supervised by physician medical directors through sponsor hospitals who are also overseen by DPH. The Emergency Medical Technicians and Paramedics that operate in coordinated response and delivery of medical care are licensed/certified through the department of public health. There is great continuity of care for the procedures and protocols established under this model that would risk substantial disruption if it were changed.

The Emergency Medical Services system has the integrity of high quality patient care and vehicle and equipment safety and accountability through three related and essential components of our regulations:

- Primary Service Area Assignments.
- Certificate of Need Process.
- Rate Setting and Regulations.

These essential components coupled with medical control and oversight, have served well to provide quality of medical care, licensing and regulatory controls throughout a coordinated statewide system. This system has a capacity of ambulances that has been constructed through nearly forty years of development in response to changing demands of both emergency and non emergency call volumes. This balance effectively utilizes ambulance resources and maintains the ability to expand and contract the system efficiently. The balance between emergency and non emergency ambulance transportation is vital to the overall EMS response infrastructure and moderates the reimbursement rates without a disproportionate burden on the various payers.

In conclusion, this concept was not proposed by the governor in his budget. It is our understanding that it was presented as a concept by the fire and police responders absent any dialogue with the EMS community or Department of Public Health.

The concept does not fairly represent the intricacies of the medical community and therefore does not necessarily represent the best interest of the public who rely on high quality and coordinated patient care services that effectively integrate with the emergency department, inpatient, and extended care medical facilities.

We urge you to ***oppose this concept*** as we believe it isn't broken, and that a move would significantly jeopardize the coordinated delivery of medical care and services.

Respectfully Submitted,

David D. Lowell

President