



BOROUGH OF NAUGATUCK
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HAND DELIVERED AT PUBLIC HEARING (3/15/2013)

March 15, 2013

The Honorable Terry B. Gerratana and Susan M. Johnson, Co Chairs
The Honorable Jason C. Welch and Prasad Srinivasan, Ranking Members
Public Health Committee
Connecticut General Assembly
Legislative Office Building, Room 3000
300 Capital Avenue
Hartford, CT 06106

RE: Testimony in Support of House Bill 6518
An Act Concerning Emergency Medical Services

Dear Senator Gerratana, Representative Johnson, Senator Welch, Representative
Srinivasan, and Honorable Members of the Public Health Committee:

We strongly urge your support of House Bill 6518, An Act Concerning Emergency Medical Services. The current system, which allows the state Office of Emergency Medical Services ("OEMS") to grant perpetual Primary Service Area ("PSA") designations to providers of local ambulatory care without local input, negatively effects a municipality's ability to ensure the highest level of emergency services at competitive rates.

The PSA system was created with good intentions to remove the selection of local ambulatory providers from the local political process. While we can appreciate the public benefit for such an objective, the current system no longer works. Allowing OEMS to grant an irrevocable license to a third party with no input from municipal officials is contrary to free market principles which form the basis of almost all town or special taxing district bidding procedures.

Last year Naugatuck Ambulance, Inc., the entity possessing the PSA for the Borough of Naugatuck, attempted to change the manner in which paramedic services were provided. In a system governed by market principals it is certainly the right of a private entity to determine the level of non-mandated services it will offer to a client. The client in this instance, however, is the Borough of Naugatuck. The ability of a local government to freely bid the level of ambulatory care it desires is questionable given the constraints of the current PSA system. Without changes to the existing system, the license holder of a PSA can dictate the level of non-mandated care available in a community and/or leverage ownership of the PSA to dictate compensation for delivery of the same.

In addition, under the current structure, there is no routine review of population and demand of a municipality in order to ensure the appropriate level of service to meet with the need and population of the community. The current system allows this determination and decision to be made solely by the private entity holding the PSA. Very often this decision is determined by the profit margin. While the members of the community hold the local leadership responsible for ensuring their safety, local leadership has no true input or involvement in this process without ownership of the PSA. Part of the current structure includes the creation and yearly update of an "Emergency Medical Services Plan" for the community. Once again, ownership of the PSA is held by a private entity. While community leadership may certainly create and have input in this plan, it has no leverage in guaranteeing the plan is followed by the owner of the PSA for the benefit of their community.

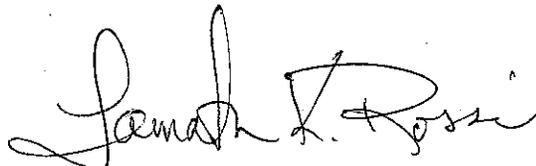
The proposed legislation will also allow the Commissioner to define a structure for changing rates associated with providing local emergency management services. This will be critical as it will grant ambulatory providers the ability to adjust rates as the Affordable Health Care Act ("AHCA") is gradually implemented. Under current regulations, many local providers of ambulatory services have little flexibility with regard to billing for services. This may lead to a further decrease in pre-hospital care, or result in increased costs to cities and towns who may wish to provide non-mandated, emergency services to its citizens.

We recognize there are complexities associated with the current PSA system, and many years of history which have led to its current structure. It is imperative, however, that local communities have the ability to ensure the highest level of emergency care at the lowest cost. Perpetuating a system that denies such local control will continue to burden Connecticut cities and towns unnecessarily. We respectfully request your support for House Bill 6518, and would be please to further discuss this important matter with Committee members upon request.

Sincerely,



Robert A. Mezzo
Mayor



Tamath K. Rossi
Deputy Mayor
Chair - Emergency Management Service
Subcommittee