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March 15, 2013

Public Health Committee
Room 3000
Legislative Office Building
Hartford, CT 06106

Re: House Bill No. 6518 (Raised) An Act Concerning Emergency Medical Services.

My name is Scott Andrews. I am the Chief and Executive Director of Seymour Ambulance Association. In representing Seymour Ambulance Association I am opposed to Raised Bill 6518 as presented.

This bill in its entirety will fragment the emergency medical services in the State of Connecticut and be a detriment to patient care. While there are places within the State that might see an improvement, the vast majority of the State will be hurt by this. I believe that proper oversight is essential to the success of any system. Removing this oversight will be detrimental to EMS in Connecticut. We have not been given proper recognition by the medical community in general. We are not just ambulance drivers as we are so often referred to. We are prehospital healthcare providers. We are a profession in our own right.

This bill as written lowers EMS as a profession within the State of Connecticut. It eliminates many of the oversight components of the EMS system that helps to validate us as professionals. I believe that the Emergency Medical Services Advisory Board serves a vital function within our State. This Board serves as a conduit and sounding board for the review and development of processes and procedures, the review of equipment and the overall evaluation of the EMS system. Without their insight and input, EMS would not be where we are today.

The Seymour Ambulance Association is dedicated to helping to improve the quality of life for the residents and guests of the Town of Seymour.

With the elimination of this Board, we will have no single voice at the State level to work toward improvement measures for EMS. This board should be charged with improving the professional guidelines by which we work through the development of standards and practices for improved patient care.

Also, the removal of the duties of the Regional Coordinators along with the general responsibilities of the Regional Councils further eliminates our voice at the local level. Our coordinators are an essential component in the communication process with the State and quite honestly, without their presence, many of us would not be provided with information at the State level or training opportunities. They have been essential at keeping their constituents informed and up-to-date with information. The regional councils have been an integral component of the EMS system for a long time and have worked hard to effect change. They work closely with the EMS chiefs and Sponsor Hospitals to establish training opportunities and to help solve problems and bring organizations closer together at the local level.

Section 6 of this bill refers to the primary service area assignments. The changes that are proposed in this section are absolutely absurd. By giving local municipalities the authority to remove a responder without proper due process essentially makes EMS a political ball to be tossed about at will. There is wording that provides for a public hearing to answer charges, however the wording is vague enough that removal of a provider can be taken without actual proof. Proper due process should include an independent hearing officer reviewing the facts and providing a determination. Once removed, the affected provider would most likely be replaced with an alternate while the provider files an appeal to the Commissioner of Public Health. There is no language that requires the Commissioner to review the appeal in any specific timeframe. Therefore, an appeal could be carried out indefinitely without a final resolution. This, in my opinion, creates an unfair practice. There are currently provisions in place that allow municipalities the right and opportunity to determine their provider through a proper process. That process is important so that local EMS providers do not become a pawn for political contest either through personality issues or the potential for deep pockets to “buy” a change in PSA assignment. It seems that the premise of this change is being offered to accommodate issues within only a very few communities. The result will be that many communities and EMS providers like Seymour Ambulance will suffer. If the intent of this change is moved forward, it

will greatly hamper a prehospital EMS service's ability to provide quality care to the community in which it serves. As a service provider, I would be leery of investing in new and updated equipment knowing that there is a possibility that my service can be replaced at the whim of a politician on an unsubstantiated allegation. The continuity of care provided to the residents of a community could suffer greatly with the potential for an on-going change in field personnel. The wording of this bill puts great political emphasis on how a provider will need to conduct business. Since local government has the ability to change every two years, essentially, the EMS provider assignment could change every two years as well.

Eliminating the Need-for-Service process really takes away a level playing field for all providers. Given the competitiveness of EMS as it stands in Connecticut, it is important to have a review process in place when companies or organizations are interested in expanding or upgrading services. Without this process, services will be allowed to arbitrarily expand EMS services with no formal review and no input from other ambulance providers that would be directly impacted by a change. The provider with the most money to invest can now begin taking over areas from smaller independent providers.

In closing, it is important to understand that not all EMS agencies are created equal. We are all tasked to provide the best care possible to our residents. If this is not happening in individual communities there are currently regulations in place to fairly affect change and municipalities should take advantage of that. Changing regulations to this extent will hurt more people than it will help. Please, do not vote in favor of these changes as they will hurt those providers that are doing good work and providing quality service. Encourage those that are having problems within their municipalities to follow the processes currently in place to effect positive change.

Eliminating these components of the EMS system will set EMS back forty years.

Thank you,



Scott Andrews
Executive Director