



## Public Health Committee

Testimony Re: HB5542

March 19, 2014

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Thank you for the opportunity to offer testimony regarding HB 5542, An Act Concerning the Recommendations of the Connecticut Emergency Medical Services Primary Services Area Task Force.

In 2011, I made the decision to improve the level of EMS service within the Town of Farmington. American Medical Response (AMR) was staffing one ambulance in my community 24 hours a day / 7 days a week and a second ambulance Monday – Friday 8 hours a day. I was interested in expanding the coverage of the second ambulance by 2 hours so that we could have two ambulances in town during both the morning and evening rush hours. AMR provided me a price of \$63,000 for what amounted to an additional 10 hours of coverage per week.

\$63,000 is a lot of money. If the Town of Farmington was going to spend this amount of money with a single vendor in a year, our Town 's purchasing policy requires putting the service out to bid. So I directed the Director of Fire & Rescue Services and Police Chief to draft a Request for Proposals. They explained to me that we couldn't go out to bid for this service because there was only one provider that was authorized by the State of Connecticut to provide ambulance service within the Town of Farmington. This sounded like a monopoly to me. So I directed them to schedule a meeting for the three of us to meet with the State Department of Public Health.

We met with DPH Branch Chief Leonard Guercia on Thursday, August 25, 2011. The following summary is an excerpt from the letter I sent to Mr. Guercia after the meeting.

"...I understand the Town of Farmington is required to allow American Medical Response to provide ambulance transport for any emergencies in the Town of Farmington that are received through 911 because AMR holds the Primary Service Area Responder Designation for Ambulance Transport in the Town of Farmington...

I further understand that, as the system exists in its present state, I am precluded from providing this service as a municipality, or from awarding the Town of Farmington's Ambulance Transport Contract to any of the other service providers within the State of Connecticut, even if they are willing to provide an improved level of service to Farmington's residents, or are willing to enter into a more economical arrangement with the Town of Farmington to deliver this service."

Mr. Guercia told me that my desire to improve the services in my community was not grounds for having my present PSA holder removed. He specifically advised me not to petition for a removal of the provider, since the current provider was meeting the minimum requirements for a responder as outlined in the State Statutes and Regulations. At his direction, I chose not to file a formal petition for removal of the PSAR with DPH. I was not allowed to do an RFP for an alternate provider and I couldn't research regionalizing with any of my neighboring communities or providing this service



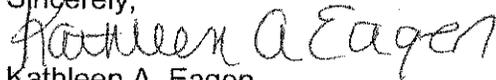
with my own personnel. When I explained that this was not good public policy, he simply replied "That is how the system works. If you don't like the system, change it."

I come to you today following the very path that your DPH has recommended that I pursue in order to be able to offer an improved level of service to my community. In 2012 and 2013, Farmington's State Representatives put forward proposed legislation to allow local municipalities the ability to enhance EMS services within their communities. Public Act 13-306, which signed into law by the Governor in July of 2013, established the Connecticut Emergency Medical Services Primary Service Area Task Force. The Town of Farmington's Director of Fire & Rescue Services, Mary-Ellen Harper, served as co-chair of this Task Force.

Director Harper worked closely with DPH to craft the final report of the EMS PSA Task Force. The report offers 5 recommendations, all of which have the formal support of DPH in the form of the final votes on each of the recommendations. Recommendation #5, the Alternative Provision of EMS Services, speaks to the very issues that brought me to DPH in 2011. While Recommendation #5 doesn't guarantee a municipality the right to make change, it does offer an avenue for us to have our concerns heard and to have a regulatory body make a ruling about what is in the best interest of our communities and the patients we serve.

The Town of Farmington has been actively working for almost 4 years to affect changes to the EMS PSA System in Connecticut. We have worked within your system to create a mechanism for a municipality to be able to make changes to the EMS provider in their community in order to provide an improved level of service. We have created a system of checks, balances, and oversight in concert with DPH. We've done everything that the state has asked us to do to be allowed to make improvements to EMS within our own community. And now, I ask that the Public Health Committee show faith in both its municipal officials and the state DPH by including the language from Recommendation #5 from the EMS PSA Task Force Final Report, the Alternative Provision of PSA Responsibilities, in HB 5542. The current PSA system is essentially a monopoly. Monopolies are not good government.

Sincerely,



Kathleen A. Eagen

Town Manager

Town of Farmington