



Association of Connecticut Ambulance Providers

Transportation Committee Testimony

Friday, February 19, 2021

Senator Cassano, Representative Lemar and other distinguished members of the Transportation Committee:

My name is Greg Allard, and I am the President of the Association of Connecticut Ambulance Providers and Vice President of American Ambulance Service, Inc. in Norwich. Thank you today for the opportunity to offer my testimony today in **strong opposition to Proposed Senate Bill No. 409, An Act Concerning the Nonemergency Transportation of Persons with Disabilities Confined to a Stretcher.**

We have testified in opposition of bills with similar title and intent before this committee for several years now. The concerns mentioned in our testimony have not changed over the years. They are related to patient safety in and around transportation and the fiscal impact on the State of Connecticut.

From a patient perspective, there is a safety concern that puts people requiring transportation by stretcher at risk of injury. People requiring stretchers should be referred to as patients and patients are transported in ambulances. They must have some sort of underlying condition, acute or chronic, that requires them to be transported on an expensive medical device and therefore should be afforded the care and attention a person with an underlying condition deserves and should receive. If an acute situation were to arise during transport the patient would be in the best place to receive immediate care, in other words they would not need to dial 911 and wait for an ambulance to arrive to begin care.

Patients do not always live in the most easily accessible locations and in many cases require additional specialized equipment to move patients. Without these specialized devices the safety of the patient again comes into question.

Another safety concern from the patient perspective also encompasses the safety of the people moving the patient. The ambulance providers move hundreds of people daily in Connecticut. We are very experienced in doing so and yet “patient movement” accounts for one of our largest Workers’ Compensation categories. The frequency



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with which these “stretcher van” transports would not be a significant number so the people doing them would not be as experienced therefore the potential for injury would be higher. This is a high risk move that would be performed with low frequency which creates a high probability for incident/injury.

We understand that in some rare cases there is the need for an ambulance transport to a personal event. American Ambulance Service, Inc., my employer, provides FREE transport experiences as part of our Sentimental Journey Program with our local Hospice Provider. We also have and will continue to provide transports to weddings, graduations, funerals or other life events. While rare, we and other Association members offer these services for such life occurrences.

There is also fiscal concern from the patient perspective. There are thousands of individuals enrolled in the Medicare Savings Program (MSP) who are considered Partial Dual Eligibles. In this case that means that the state Medicaid program will only pay for their Medicare Part B premium. Medicaid does not pay for any healthcare services including transportation for these individuals and Medicare does not pay for transports in stretcher vans. The result is that these Partial Dual Eligible seniors in the MSP program will be fully responsible for payment of transports in stretcher vans.

Adding stretcher vans to the CT Medicaid program could have a negative impact by actually increasing CT Medicaid expenditures. The only mode of non-emergency medically necessary transportation that Medicare will pay for patients is transport by ambulance. Medicare will not pay for non-emergency transport by stretcher van, wheel chair vans or similar modes. For the Full Dual Eligibles who have a medical necessity that requires transport by an ambulance, such as nursing home patients and dialysis patients, CT Medicaid incurs minimal to no cost (coinsurance or deductible). For every one of the Full Dual Eligibles that moves from an ambulance transport to transport by stretcher van, the payment moves from the Medicare ledger to the Medicaid ledger and the state Medicaid Program would bear the full cost of the transport .

It is for these reasons, the safety of the patient and the fiscal impact from the perspective of the patient and the state, that we oppose proposed Senate Bill No. 409. We would respectfully request that the committee take no further action on this bill.



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Thank you for the opportunity to provide this testimony today.

Respectfully submitted,

Gregory B. Allard
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Vice President, American Ambulance Service, Inc.