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**Testimony of Kim Aroh, President and CEO
Ambulance Service of Manchester and Aetna Ambulance Service
in opposition to
S.B. No. 409 (RAISED) AN ACT CONCERNING TRANSPORTATION ISSUES.**

Dear Representative Lemar, Senator Cassano, Representative Carney, Senator Somers and members of the Transportation Committee,

On behalf of the Ambulance Service of Manchester LLC. And Aetna Ambulance Inc., I appreciate the opportunity to offer testimony and express my sincere concerns and strong opposition to Senate Bill 409- An Act Concerning Transportation Issues which would permit stretcher vans to be used in the state.

The bill would enable temporary, or permanent livery permit holders to use stretcher vans to transport persons with disabilities or elderly persons who require "nonemergency transportation and must be transported on a stretcher but who do not require medical services during transport."

Dangerous for Patients

- Emergency medical technicians and paramedics within the state are both highly trained and regulated. Moreover, strict requirements are necessary across all regions to maintain "medical control," to practice as a provider.
- Past versions of the bill required stretcher van personnel to receive training in the lifting, moving and transport of a person on a stretcher that is equivalent to such training provided to emergency medical services personnel. It is extremely concerning that they are not required to follow any healthcare licensure for similar tasks as a licensed provider.
- This would inevitably place patients at risk in the event assistance was needed by creating a delay in the recognition of an ill or deteriorating patient, and more importantly, a barrier to receiving care. This situation occurs frequently on non-emergent transports of patients. If the personnel on the stretcher van have no medical training to handle these situations, an ambulance should be dispatched.

Lacks Appropriate Medical Oversight for Scheduling Transports

- SB409 states that "A temporary or permanent livery permit holder may use stretcher vans to transport persons with disabilities or elderly persons who require nonemergency transportation and must be transported on a stretcher but who do not require medical services during transport." The bill does not define what medical services includes and/or means, leaving it to a subjective interpretation.
- The lack of education and instruction would enable livery holders with no medical training to decide if they can safely transport a person with the incentive that they will receive private pay.

Potential Cost to the State

- Permitting use of stretcher vans in the state would likely result in a material reduction in the number of patients that qualify for Medicare coverage of non-emergency ambulance.
- The Medicare ambulance benefit is set forth in Section 1861(7) of the Social Security Act (the "Act"). The statute provides that Medicare will cover ambulance transportation provided that "... the use of other methods of transportation is contraindicated by the individual's condition, but only to the extent provided in regulations."

- The requirement that other means of transport must be contraindicated is commonly referred to as “medical necessity” for the ambulance services.
- The Centers for Medicare and Medicaid Services (CMS) has further indicated that medical necessity for the ambulance is established whenever it can be shown that the use of other means of transportation would endanger the patient’s health. This could ultimately lead to Medicaid having to pick up the costs for services currently provided by Medicare and thus the State having to spend more funds on such transportation.

Logistically Difficult to Achieve

- Wheelchair vans currently transport stable patients, capable of sitting upright; and do so at a significantly lower reimbursement rate.
- These patients require no medical oversight, and can safely be moved into and out of the wheelchair van with the assistance of a single driver.
- Stretcher van patients would be transported in either a supine (flat on their back) or semi-flowers (reclined with their feet up) position. Patients without the ability to sit upright, often require a minimum of two people to safely move them to and from their destination.

The Bill does not Regulate Rates

- Emergency Medical Services rates are regulated by the Department of Public Health. This bill makes no mention of establishing rate regulations for livery service providers.
- In Connecticut, maximum allowable EMS/ambulance rates are in place to protect consumers. Our state is one of only three in the nation with these restrictions in place.

The current system in Connecticut for transporting non-emergency patients works to ensure patient safety. Patients who are deemed medically stable to be transported by a wheelchair are done so in a safe and cost effective manner. Those that require medical supervision should remain in the care of a CT certified EMT and/or CT licensed paramedic. The introduction of another mode of transportation similar to an ambulance but with personnel that are not medically trained adds a significant amount of stress and a high level of confusion to those responsible for requesting the transport for their patients.

Thank you for taking the time to consider my reservations and please do not hesitate to contact me with any questions. I am available to meet in person to further discuss the matter if appropriate.

Sincerely,



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