



**Testimony of Hartford HealthCare**  
**Submitted to the Transportation Committee—Friday, February 19, 2021**  
**In opposition to SB 409, An Act Concerning the Nonemergency Transportation**  
**of Persons with Disabilities Confined to a Stretcher**

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

Thank you for the opportunity to express our concerns with SB 409, which would permit the use of stretcher vans in Connecticut. This bill would allow temporary or permanent livery permit holders to operate vehicles equipped with a stretcher to transport individuals who require “nonemergency transportation and must be transported by stretcher but who do not require services during transport.”

We have significant concerns with permitting persons who are not credentialed by the Dept. of Public Health to transport and care for patients who are too frail, weak, or debilitated for a wheelchair. Certified emergency medical technicians (EMTs) and licensed paramedics are trained not only to care for the sick or injured, but to use critical thinking skills with patients whose conditions can change in a moment’s notice. A patient who is too frail to be transported via a wheelchair, is likely too unstable to be cared for by anyone but an EMT or paramedic.

Here in Connecticut, hospitals coordinate transport to post-acute care settings. This is how hospitals properly manage ambulance resources and balance the various emergent and non-emergent needs of patients at any given time. It is the responsibility of the hospital, and specifically emergency department physicians, to ensure high quality medical transportation protocols. Stretcher van operators do not meet these standards.

In addition, the current bill does not address scope of practice or reimbursement rates. Currently, the Department of Public Health sets the private reimbursement rates and oversees the scope of practice of emergency medical service agencies. The federal Center for Medicare and Medicaid Services has strict guidance and reimbursement rules for ambulance and non-emergency medical transportation for government payers. In Medicaid and Medicare, patients must meet specific criteria to be considered for transportation by stretcher. This proposal could result in surprise bills for Medicaid and Medicare patients who may not realize their stretcher van trip is not covered until it is too late.

Access to high quality care should be our highest priority. The COVID pandemic has only highlighted the need for the healthcare system to be better integrated in order to provide the most appropriate level of care at the right time and in the right setting. We welcome the opportunity to discuss this matter further.

HHC is a fully integrated healthcare system serving 159 towns in Connecticut and employing over 30,000 people. The HHC hospitals are: the William W Backus Hospital in Norwich, Charlotte Hungerford Hospital In Torrington, Hartford Hospital, the Hospital of Central Connecticut in New Britain, MidState Medical Center in Meriden, Windham Hospital, and Saint Vincent’s Medical Center in Bridgeport.

Thank you for your consideration of our position. For additional information, contact Cara Passaro at [cara.passaro@hhchealth.org](mailto:cara.passaro@hhchealth.org).