



Bill Schietinger
Regional Director

Phone: 203-367-8040
Fax: 877-412-1963

TESTIMONY OF William Schietinger
BEFORE THE Transportation COMMITTEE OF THE
GENERAL ASSEMBLY
In Opposition to

**Raised Bill 409 AN ACT CONCERNING THE NONEMERGENCY TRANSPORTATION
OF PERSONS WITH DISABILITIES CONFINED TO A STRETCHER.**

February 19, 2021

Good Morning, my name is William Schietinger. I am Regional Director of American Medical Response of Connecticut and reside at 5 Foxwood Rd, Trumbull, Connecticut. I have been employed by AMR and its predecessor company, Ace Ambulance Service since 1988. I would like to thank the Transportation Committee for the opportunity to submit this testimony today in order to voice my opposition against Raised Bill No. 409, *An Act Concerning The Non-Emergency Transportation of Persons with Disabilities Confined to a Stretcher*.

The proposed use of stretcher vans for Medicaid patients is not in the best interest of patient care and is in direct conflict with the high levels of patient care currently provided by ambulance providers throughout the state of Connecticut.

Raised Bill No. 409 was presumably introduced on behalf of some livery company and it couldn't come at a worse time, when the State's managed transportation broker and its livery providers are reeling from hundreds of complaints involving inadequate service, significant delays and failure to provide basic equipment such as wheelchairs. The State's already underserved Medicaid population deserves better. Stretcher vans do not exist in the State of Connecticut. There are no ambulance providers in Connecticut that offer this mode of transportation. In fact, the state of Connecticut has passed legislation that any patient transported on a stretcher must be transported in a licensed or certified ambulance. No other types of services can provide stretcher transportation in the State of Connecticut. The law now in place was adopted to enhance patient safety, eliminate any stretcher transportation by any service that is not licensed or certified as an ambulance provider, and ensure transportation needs that are based on medical necessity rather than financial incentives which are not in the best interest of the patient's health and well-being. I am amazed to see this proposal year after year presented and dismissed due to the inherent dangers it presents. Once again it is now being proposed which results in taking steps backwards, putting patients at risk and looking to repeal a measure that was approved to protect the sanctity of patient care by transporting stretcher bound patients in an ambulance.

While stretcher van programs exist in some states, to certain degrees, it does not warrant providing lower modes of transportation services to Medicaid patients in Connecticut and undermining the fiscal structure of the EMS system in Connecticut just because some livery company sees an opportunity to increase its revenues.

Just imagine, discharging a stretcher patient in a van, with no medical equipment, no trained medical technician in the patient compartment and to my knowledge, a driver with no medical training to access or administer to the needs of the patient during transport. This mode of transportation for any patient confined to a bed, certainly subjects the patient to a high degree of risk and humiliation. Providing non-emergency medical transportation with no medical oversight or ability to intervene and administer aid is just plain dangerous! Who assumes this liability? Does the hospital discharging the patient? Does the transportation provider? I shudder to think of the consequences. Taking into consideration the cost of such transports and the fact that Medicaid already reimburses providers well below cost, the amount of financial savings will be nominal at best, but it will place the medical transportation system in jeopardy at the outset. To my knowledge none of the commercial ambulance providers have even been contacted by the State of Connecticut for any information gathering, advice or consultation regarding the use of stretcher vans or the impact of such use on the overall delivery of ambulance services in Connecticut.

The American Ambulance Association (AAA), our national trade association does not support the usage of stretcher vans stating, "Stretcher Chair Car service is not in the best interest of patients being transported as it puts patients at risk when not transported not staffed or equipped to meet their medical needs." The AAA believes that every patient who needs to be in a stretcher during transport must have a medically trained EMT to attend to his or her medical health and safety needs. It is a misguided public policy to blur the distinction between medical care provided by ambulance services and transportation for patients in non-medically equipped and staffed vehicles. Further, Medicare does not cover stretcher van transportation services as it does not have an established rate for such.

We are again not supportive of any measures that eliminate or reduce the provisions of health care services especially when they require ambulance and invalid coach transportation services. Creating new financial opportunities for certain livery companies does not justify sacrificing patient care and putting these patients at risk.

In conclusion, the EMS system in Connecticut works. The delivery of care both on an emergency basis and non-emergency basis is a result of years of planning, mutual cooperation, and commitment. The proposed radical change in the delivery of care is not in the best interest of the system as a whole; as the financial impact has not been considered and again certainly not in the best interest of patient care especially for those who currently receive Medicaid benefits.

I respectfully urge you to vote against Raised Bill 409. Thank you.