

**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Friday, March 15, 2013**

**HB 6518, An Act Concerning Emergency Medical Services**

The Connecticut Hospital Association (CHA) appreciates the opportunity to submit testimony concerning **HB 6518, An Act Concerning Emergency Medical Services**. CHA opposes the bill.

HB 6518 would implement drastic and damaging changes to our Emergency Medical Services (EMS) system without sufficient review or discussion of the impact on patients, costs, or the ability to carry out the overall mission of an EMS system.

As this Committee knows, the oversight and management of our statewide emergency response system is an enormous task that requires cooperation, input, insight, and expertise be shared among individual practitioners, ambulance companies, municipalities, regional officials, nurses, hospitals, emergency medicine physicians, paramedics, EMTs, volunteer ambulance staff, police and fire officials, and, of course, state and regional agencies. Over the past several decades, this body has made changes to the EMS structure to ensure we are doing what is best for Connecticut's patients.

However, HB 6518 would not follow in that deliberate and careful process, but would instead completely dismantle the current system of oversight. Section 11 of the bill repeals the backbone of the cooperative system – the Connecticut Emergency Medical Services Advisory Board (and its committees) – completely wiping it out through the repeal of Section 19a-178a, and instead placing all oversight and control of the EMS system in the hands of the Department of Public Health, with some powers over local ambulance assignments being reserved for municipalities. This is an exceedingly concerning proposal.

The current statutory appointees to the Connecticut Emergency Medical Services Advisory Board are determined as follows:

...the Commissioner of Public Health and the department's emergency medical services medical director, or their designees. The Governor shall appoint the following members: One person from each of the regional emergency medical services councils; one person from the Connecticut Association of Directors of Health; three persons from the Connecticut College of Emergency Physicians; one person from the Connecticut Committee on Trauma of the American College of Surgeons; one person from the Connecticut Medical Advisory Committee; one person from the Emergency Department Nurses Association; one person from the

Connecticut Association of Emergency Medical Services Instructors; one person from the Connecticut Hospital Association; two persons representing commercial ambulance providers; one person from the Connecticut Firefighters Association; one person from the Connecticut Fire Chiefs Association; one person from the Connecticut Chiefs of Police Association; one person from the Connecticut State Police; and one person from the Connecticut Commission on Fire Prevention and Control. An additional eighteen members shall be appointed as follows: Three by the president pro tempore of the Senate; three by the majority leader of the Senate; four by the minority leader of the Senate; three by the speaker of the House of Representatives; two by the majority leader of the House of Representatives and three by the minority leader of the House of Representatives. The appointees shall include a person with experience in municipal ambulance services; a person with experience in for-profit ambulance services; three persons with experience in volunteer ambulance services; a paramedic; an emergency medical technician; an advanced emergency medical technician; three consumers and four persons from state-wide organizations with interests in emergency medical services as well as any other areas of expertise that may be deemed necessary for the proper functioning of the advisory board.

The Connecticut Emergency Medical Services Advisory Board has various committees including the Connecticut Emergency Medical Services Medical Advisory Committee. The purpose of this standing committee is to “provide the commissioner, the advisory board and other ad hoc committees with advice and comment regarding the medical aspects of their projects. The standing committee may submit reports directly to the commissioner regarding medically-related concerns that have not, in the standing committee's opinion, been satisfactorily addressed by the advisory board.”

The Connecticut Emergency Medical Services Advisory Board is specifically responsive to this body as well, as set forth in Section 19a-178a(f):

The advisory board shall be provided a reasonable opportunity to review and make recommendations on all regulations, medical guidelines, and policies affecting emergency medical services before the department establishes such regulations, medical guidelines, or policies. The advisory board shall make recommendations to the Governor and to the General Assembly concerning legislation which, in the advisory board's judgment, will improve the delivery of emergency medical services.

The Department of Public Health does not have this vast background of expertise, and is unlikely to be able to afford to reproduce it with internal resources.

We cannot support any proposal that removes input from medical experts, regional stakeholders, hospitals, and ambulance providers that make up the system. These changes are not in the best interests of Connecticut's citizens. We urge you not to support HB 6518.

Thank you for consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.