



# Association of Connecticut Ambulance Providers

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Aetna Ambulance -:- Ambulance Service of Manchester -:- American Ambulance Service  
Campion Ambulance Service -:- Hunter's Ambulance Service

MORE Commission  
Mandates Committee  
February 28, 2014

Representative Sayers and distinguished members of the Committee, my name is David Lowell and I appreciate the opportunity to speak with you today.

As a legislatively appointed member of the PSAR Task Force, I appreciate the time and dedication that my colleagues put into the body of work the task force ultimately produced. Needless to say, there were many hours of constructive discussion and spirited debate.

The Association of Connecticut Ambulance Providers **supports recommendations one, two, three and four of the Emergency Medical Services Task Force report.** The legislatively appointed Primary Service Area (PSA) Task Force has made four solid recommendations for improvements in the statewide EMS system. These recommendations were consensus driven and are constructive and enhance the roles of the Department of Public Health, the municipalities, and the EMS providers.

What is entitled **"Recommendation 5"** should be excluded from any proposed legislation **pertaining to the task force.** The non-consensus item, which divided the task force, would allow municipalities to petition DPH for removal of a primary service area responder (PSAR) without cause. Enacting legislation that allows for the arbitrary removal of PSAR assignments from current providers without cause after forty years of EMS systems development would be irresponsible. And therefore the fifth recommendation is considered an issue in dispute as it could serve to be destructive to the infrastructure of the statewide EMS system as it has evolved.

Emergency medical service is the practice of medicine in the out-of-hospital environment by EMT's and Paramedics. The authority by which this delivery of medical care is provided exists with the state department of public health and is delegated through the comprehensive relationship between each PSAR, an acute care sponsor hospital and through physician oversight, medical direction and control. Further, the emergency medical services response system as it has evolved, spans across designated regions, involves regionalized mutual aid agreements and creates a statewide emergency medical system that has the capacity and ability to expand and contract as the demands within this system change.

Primary Service Area Responders are assigned the statutory responsibility to respond to 911 emergency calls for medical assistance in the communities for which they are assigned. The beneficiaries of these statutory responsibilities are the citizen who access 911. The fundamental strength of the PSAR system is the regionalized interoperability of Emergency Medical Services Providers. The need for service review, public hearing and administrative determination process has established a balance of EMS & ambulance assets across the state.

The State Legislature enacted statutes in 2000 (P.A. 00-151) that were intended to create a method by which municipalities could seek removal of a PSAR for non-performance. The statutes also established that DPH publish a local EMS plan template and assure that each community complete and maintain such a plan to be periodically reviewed by DPH.

Neither of these provisions has been properly utilized. DPH reports they have no record of any municipality using the statute as intended for removal of a PSAR. DPH also reports that they have incomplete data indicating that the tasks related to Local EMS Plans were followed through with as the statutory language provided for and does not have complete records of EMS plans for each municipality.

The four consensus recommendations aim to solve these issues and provide municipalities with a clearer understanding of how to remove a PSAR. They also empower municipalities and seek to strengthen and integrate Local EMS Plans.

The legislature should approve the four consensus recommendations and not approve or support of the fifth controversial recommendation (issue in dispute) as it could likely destabilize the EMS system, be costly to the state and politicize the system.

Respectfully Submitted,



David D. Lowell, President