Testimony of the

New York State Volunteer Ambulance and Rescue Association, Inc. (NYSVARA)

And the

United New York Ambulance Network (UNYAN)

The New York State Volunteer Ambulance and Rescue Association and the United New York Ambulance Network wish to testify before the Senate and Assembly Joint Legislative Budget Committee on Health, on the Governor’s recently released proposed changes to Article 30 of the Public Health Law as identified in the Health and Mental Hygiene Article VII (A3006/S2606) Part E. It is the position of both organizations that a review and overhaul of Article 30 is long overdue, and that some of the Governor’s proposed changes make good economic and operational sense. We also feel that some of the proposed changes may require additional information before we can clearly evaluate the efficacy of the proposed changes. We would also like to go on record as suggesting some areas of concern that may need to be addressed in order for there to be meaningful changes to the EMS healthcare delivery system that will benefit all the citizens of this state. NYSVARA and UNYAN, answer, at a minimum, over 60% of the 911 emergency medical service calls that originate in New York State each year, and as such have a deep appreciation for how the EMS system in New York State functions and how some of these proposed changes will affect the system. We are concerned that many of the EMS stakeholders involved in the state have had no input in these proposed changes to date.

We wish to comment on the following proposed changes:

1. **Consolidation of the State Emergency Medical Services Council (SEMSCO), State Emergency Medical Advisory Committee (SEMAC), the State Trauma Advisory Committee (STAC), and the Emergency Medical Services for Children Council (EMS-C), into a single State Emergency Medical Services Advisory Board (SEMSAB).** Our organizations believe that the consolidation of these agencies may make good financial sense, however we have some concerns that they will achieve the operational efficiencies sought. Our concerns are primarily in regard to the level of representation that each agency will compose on the SEMSAB, and if the needs of the EMS community will be adequately addressed to be able to meet and achieve system operational goals.

2. **The reduction of the number of Regional Emergency Medical Services Councils (REMSCOs) from the present number of eighteen (18) down to ten (10) under the proposed changes.** Our organizations agree that having eighteen (18) REMSCO may not
be the appropriate number however, lacking demographic data to support the reduction we are reluctant to offer a suggested number at this time. Our only concern is that the final number of REMSCOs adequately represents the needs of all geographic areas of the state.

3. **The removal of any of the duties and/or powers, and thus statutory authority, from the Regional Emergency Medical Services Councils (REMSCOs) and the State Emergency Medical Services Council (SEMSCO), and their designation as Advisory Boards.** We are uncertain if changing the current “Councils” to “Advisory Boards” will also remove their statutory authority. It is the opinion of our organizations that both the REMSCOs and the SEMSCO should retain the duties, powers, and the statutory authority they currently possess. The reduction in the number of REMSCOs will ultimately improve the process and efficiency of the REMSCOs. The SEMSCO will serve to ensure that any challenges to the decision of a REMSCO will have the benefit of the system of checks and balances. This democratic process would be lost if the REMSCOs and SEMSCO did not have statutory authority and all decisions were simply made by the Commissioner of Health. We think that a system that utilizes multiple bodies to provide oversight on statutory proceedings is always a good idea, similar to how the Executive branch of our Government was created. It ensures that due process is upheld.

4. **Preserve and fund EMS Education required to make sure that the EMS needs of the State will be met.** Currently, many areas of the state are underserved by trained EMS personnel, at a time when NYS is moving forward and adopting the new National EMS Educational Standard. Personnel taking an EMS certification course need to be assured that the courses will be available statewide, and that they will embrace current technology that many other allied health careers have adopted. Funding and support of the use of distance learning platforms, much like those seen in college campuses across the nation, are the future of EMS and integral to ensuring certification requirements are met into the future. We also believe that Original EMS Certifications must be validated by both a written and practical skills certification process. Recertification of these initial certifications may utilize alternative educational approaches that may not require the written and practical certification process.

5. **Preserving the use of the Certificate of Need (CON) process as the key determinant of the need for any new ambulance service.** The CON process has been used for Article 28 facilities as well as for proposed new EMS services under Article 30. The CON process was designed to evaluate the actual need for a new service or facility, and that decisions made would not negatively affect the system as a whole. That said our organizations are sympathetic to situations in which a perceived public health emergency exists. Under this circumstance, where a community is without EMS coverage through no fault of their own, an Emergency Ambulance Operating permit should be granted by the DOH, without any requirement of a formal CON process or the current two (2) year retrospective need determination as found in the current Municipal CON regulations. However, absent a public health emergency we strongly believe that all service providers, proprietary, not-for-profit
and municipal alike, should be required to undergo a mandatory CON review and approval process based on public need as currently defined.

6. **Creation and periodic review and overhaul of a Statewide EMS Mobilization plan.** Our organizations wholeheartedly endorse the formation of a workable Statewide EMS Mobilization Plan that incorporates the systematic use of all the EMS resources available throughout the State in a uniform and consistent manner.

Representatives of both NYSVARA and UNYAN are available to provide additional comment and testimony should such be required. Our organizations remain committed to ensuring that New York State has the most responsive EMS System nationwide. Thank you for your time today.

**Contact Information:**

**United New York Ambulance Network**

1450 Western Avenue

Albany, New York 12203

(518) 694-4420

Attention: James McPartion, Chairman

Email: info@unyan.net

**New York State Volunteer Ambulance and Rescue Squad**

P.O. Box 254

East Schodack, New York 12063

Attention: Michael Mastrianni, President

(845) 416-5528

Email: President@NYSVARA.org