



New York State Volunteer Ambulance and Rescue Association, Inc.

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STATEMENT OF OPPOSITION

S1315 Little

Changes Article 30 Municipal CON Process

An act to amend public health law in relation to the provision of municipal advanced life support first response service or municipal ambulance service.

Article 30 of NYS PHL defines “public need” as the demonstrated absence, reduced availability or an inadequate level of care in ambulance or emergency medical service available to a geographic area which is not readily correctable through the reallocation or improvement of existing resources. This definition has served as the basis for the approval of ambulance service certificates or CON applications. As a result, NYS has built a balanced EMS system with adequate resources capable of meeting the immediate needs of the citizens of the state.

Currently, a special provision exists within this definition allowing municipalities a fast track method for obtaining a certificate in a situation when they are left without coverage. Using this provision, the municipality must immediately meet equipment, training and staffing standards and, at the end of two years, must then prove need for the service. The intent was to provide an “emergency provision” to allow municipalities with no other option the ability to provide emergency medical service to its citizens.

The proposed legislation amends the current provision and creates an unbalanced advantage by allowing municipalities cart blanche approval of applications without any proof of need. On the other hand, both not-for-profit and proprietary ambulance services must establish need before their application can be considered. Thus the creation of two classes of ambulance certificates; the not-for-profit and proprietary ambulance certificate of **need** and the **“municipal certificate of want.”**

Due to tough economic times, municipalities have been forced to scrutinize their budgets while looking for creative avenues to increase revenue. Many cities, towns, & villages around the state have identified emergency ambulance services as a new funding source and, subsequently, have begun aggressively exploring this previously uninterested industry. This exploitation of healthcare dollars to balance general funds, lower tax rates and save public jobs also has untended consequences of collapsing our current system, increasing wait times for ambulance and producing an overall increase in the cost of providing care.

Furthermore, many of our current ambulance providers service multiple geographic areas across several municipal boundaries. Quite a few of these services rely on volume from one geographic area to support service delivery to smaller or more rural geographic areas. Should municipalities begin cherry picking high call volume areas through this new process, who will be left to service the smaller more rural areas? Will these areas be forced to establish an ambulance service when the current services can’t survive?

For these reasons we urge your opposition to S1315.

NYSVARA remains the voice of Volunteer and not-for-profit EMS in New York State.