

Testimony <u>Neither For nor Against</u> LD245: An Act to Implement the Recommendations of the Blue Ribbon Commission to Study Emergency Medical Services in the State

Senator Beebe-Center, Representative Hasenfus, members of the Committee on Criminal Justice and Public Safety, my name is Joe Kellner of Windham, and I am the chief executive officer of LifeFlight of Maine — a statewide not-for profit critical care air ambulance service. I have worked in Emergency Medical Services in Maine for over 20 years and have experience with nearly every delivery model of EMS that we have here. In addition, I spent seven years serving on the Board of Emergency Medical Services, including two years as its chair, and participated in both Blue-Ribbon Commission studies on Emergency Medical Services in Maine.

First and foremost, I sincerely appreciate the interest and the efforts of the legislature, the governor, and related stakeholders to improve EMS – there is no argument that improvement is needed. I cannot however put my full support behind this bill as currently written.

There are two components to this bill that I will speak about:

- The essentially of emergency medical services
- The proposed standing commission

Essentiality of EMS

The state, through the work of the BRC and legislature, took an incredibly important step last year in declaring EMS to be an essential service. Not only was it an important statement to make to the people of Maine, but it also validated the people who work in this profession. This was a win. Unfortunately, the essentiality has no teeth, and this proposal functionally does nothing to enhance that. Recently, there was a very public case of a terrible outcome, and one could argue that the outcome was challenged by a community not taking the proper steps to ensure that EMS was available to their residents.

I feel the legislature needs to do more to require communities ensure EMS is available, with some negative consequence should that not happen. The responsible party can of course be debated – is essentially owned by the towns and cities, the county, the state, or some other enterprise. Regardless, I am disappointed that all we seem to accomplish here is basically a strong suggestion for the existence of a plan.

Maine Emergency Medical Services Commission

I find this concept to be a good idea in the sense of what it is meant to accomplish, but I am very skeptical about the execution. Starting with the intent, at a high level, the goal was to provide more voice to EMS providers and other stakeholders, and to enhance partnership with the legislature to move initiatives forward on an ongoing basis. I hope you'll consider the following as you evaluate this:

- The size of the commission is unwieldy at 26 members. I have concerns for a quorum, and in my
 experience with boards and committees, the size of the group will inhibit progress. If this
 commission continues, the size should be cut in half.
- As an alternative, there has been a proposal by a consulting firm with deep experience in state EMS systems to spilt the Maine EMS board into two components: a licensing board and an advisory board. I feel this is the better pathway. An issue that has been brought up is the ability to report out legislation. In current state, the Department can report out legislation, but that legislation, of



course, will be in support of department priorities. Giving the advisory board specific ability to report out legislation would solve this problem.

In the summary of this bill, it discusses a law regarding authority of EMS personnel to practice in other healthcare settings, which is a complex issue, and is the complete subject of another bill that has been introduced this session. While I don't see any language on this topic in this legislation, I think that should be left out as that will simply cloud this work.

As you consider this and share our collective desire to form a better system, I hope you will consider these points. I am always happy to take questions.