



National Association of Emergency Medical Technicians
Post Office Box 1400 * Clinton, Mississippi 39060-1400
Phone: 800-34-NAEMT or 601-924-7744 * Fax: 601-924-7325
Website: www.NAEMT.org

June 28, 2018

The Honorable Robert Hertzberg
California State Senate
State Capitol Building, Room 4038
Sacramento, CA 95814

Dear Senator Hertzberg,

On behalf of the National Association of Emergency Medical Technicians (NAEMT), we are writing to express opposition to California Legislature bill, SB 944, which proposes changes to Health & Safety Code Section 1797.272 that would require local jurisdictions to have an Emergency Medical Care Committee (EMCC) as a condition of providing a community paramedic program. SB 944 would have the State dictate the composition of the EMCC membership, where under existing law the county board of supervisors establishes the composition.

Formed in 1975 and more than 65,000 members strong, NAEMT is the nation's only organization solely dedicated to representing the professional interests of all EMS practitioners, including paramedics, emergency medical technicians, first responders and other professionals working in emergency and mobile healthcare, including government service agencies, fire departments, hospital-based ambulance services, private companies, industrial and special operations, and in the military.

NAEMT is pleased that California is taking steps to make the current MIH-CP pilot programs permanent, but we are very concerned that the provisions of SB 944, as currently written, would limit innovation simply based on provider type (public or private), and add an administratively burdensome state level oversight board that seems contrary to the practice in California that gives local communities the ability to determine how best to deliver essential services to their residents.

NAEMT wholeheartedly supports the concept of MIH-CP as a patient-centered healthcare innovation that has demonstrated improved patient experiences and outcomes, and reductions in preventable healthcare expenditures. We strongly believe that local communities are best able to determine how, and by whom, healthcare is delivered, including healthcare innovations such as MIH-CP. MIH-CP innovation is recognized and supported by [several national healthcare organizations](#), including the National Association of EMS physicians and the [American Nurses Association](#).

However, limiting the ability of healthcare providers to innovate solely based on provider type (public or private), will restrict community-based innovation and will deny some communities the right to try new approaches to healthcare to better serve their residents. Moreover, additional regulatory oversight at the state level will create further impediments for local communities trying to implement healthcare innovations they feel are best for their residents. Creating a state-level oversight or approval board which is not intimately aware of the specific needs of community residents would severely restrict local community authority for community healthcare decisions.

We strongly encourage the State of California to facilitate the development and implementation of MIH-CP services by continuing to allow local communities to implement healthcare innovations utilizing authorized healthcare providers of their choosing to meet the healthcare needs of all of their residents. SB 944, in its present form, seems inconsistent with California's rich tradition of allowing local communities to determine the most appropriate EMS provider, regardless of provider type.

Thank you for your consideration and review of our concerns on SB944.

Sincerely,

A handwritten signature in blue ink that reads "Dennis W. Rowe". The signature is written in a cursive style with a large initial "D".

Dennis Rowe, EMT-P
President, NAEMT