



EMSAAC Legislative Platform 2003

Support:

- Measures that will secure sufficient and stable funding for emergency medical services including:
 - Trauma (centers, systems, physician reimbursement).
 - Emergency medical care (physician, hospital, ambulance provider reimbursement).
 - Local EMS Agencies.
- Statewide trauma system development.
- Regional approach to certain specialty services (trauma, pediatric critical care, spinal cord trauma, burns)
- Measures that will increase cardiac arrest survival (e.g., AEDs).
- Measures that will result in cellular 911 calls going to closest appropriate 911 dispatch center.
- Standardized EMS disaster planning and response capabilities.
- Improved medical/health disaster response capabilities.
- Measures that will improve data collection / analysis / sharing, provide for EMS system improvement, and promote medical research in EMS.
- Protection from discovery for EMS quality improvement processes
- Measures that will improve quality of emergency medical care.
- Measures to support the designation of EMS as an “essential public service.”

Oppose:

- Measures that will result in fragmentation of EMS systems.
- Attempts to circumvent established regulatory processes to change EMS medical standards and protocols.
- Measures that reduce LEMSA's medical control over Local EMS systems.
- Attempts to eliminate existing LEMSA funding
- Attempts to redistribute existing LEMSA funding
- Measures that increase LEMSA workload without providing adequate funding for this function