

Regulations of Connecticut State Agencies

TITLE 19a. Public Health and Well-Being

Agency

Department of Health Services

Subject

Need for Emergency Medical Services

Inclusive Sections

§§ 19a-180-1—19a-180-10

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Need for Emergency Medical Services

Sec. 19a-180-1. Definitions

(a) “Applicant” means any person that proposes to implement a new or expanded emergency medical service.

(b) “New or expanded emergency medical service” means a service which is not authorized to the applicant under the terms of a current license or certificate from the Office of Emergency Medical Services, which shall include:

(1) The operation of an emergency medical, ambulance, or invalid coach service not authorized by a current license or certificate;

(2) Any service which is not authorized currently;

(3) Principal and branch places of business for an emergency medical, ambulance, or invalid coach service which are not authorized by a current license or certificate;

(4) Emergency medical vehicles, ambulances, and invalid coaches not authorized to an emergency medical, ambulance, or invalid coach service by a current license or certificate.

(c) “Office” means the Office of Emergency Medical Services.

(d) “Person” means a natural person, partnership, corporation, association or political subdivision.

(e) “Mobile Intensive Care Service” means service above basic life support which is intensive and complex prehospital care consistent with acceptable emergency medical practices under the control of physician and hospital protocols.

(Effective December 15, 1983)

Sec. 19a-180-2. Certification and licensure

No person shall implement a new or expanded emergency medical service without a license or certificate issued in accordance with sections 19a-175 through 19a-195 inclusive of the Connecticut General Statutes and an authorization issued in accordance with these regulations from the Office. Except as noted in section 19a-180-4 of these regulations, no certificate or license shall be issued to an applicant for a new or expanded emergency medical service unless the Office has determined:

(a) That the ambulance or invalid coach will be equipped in accordance with the requirements of section 19-73w-401B4a of these regulations;

(b) That numbers and training of personnel are in accordance with the requirements of section 19-73w-401B1d of these regulations;

(c) That the applicant has paid-in working capital or binding credit agreement which equals six months operating expenses in the aggregate;

(d) That the applicant has not less than the following insurance coverage currently in effect:

(1) Automotive liability and malpractice coverage for damages by reason of personal injury to, or the death of, one person, of at least five hundred thousand dollars and for damage for each incident of at least five hundred thousand dollars; and

(2) Automotive coverage for damage to property of at least one hundred thousand dollars.

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(e) That the proposed service is necessary to satisfy the emergency medical, ambulance, or invalid coach service needs of the proposed service area, which determination shall only be made after considering:

(1) The written recommendation of the regional council within whose region the proposed service would be implemented.

(A) The Office shall consult with the appropriate regional council by sending such council a copy of a completed application and a notice of hearing. The regional council recommendation shall be received by the Office at least five working days prior to the hearing required by section 19a-180-5 of these regulations. The regional council shall simultaneously send a copy of the recommendation to the applicant. Such recommendation shall be entered into evidence at the hearing as an Office exhibit.

(B) A regional council recommendation shall either support or oppose the application for the proposed new or expanded emergency medical service. The recommendation shall contain the reasons for such support or opposition.

(C) Should the regional council not act on an application and report to the Office of Emergency Medical Services within the time limits specified, the Office shall consider the application to have been approved and supported by the council.

(2) All other evidence received at a hearing held to determine the need for the proposed service.

(Effective December 15, 1983)

Sec. 19a-180-3. Application for a license or certificate for a new or expanded emergency medical service

The applicant shall apply to the Office on forms provided by the Office. The application shall be notarized and shall include the following:

(a) The name, address and nature of the legal entity that will implement the proposed service;

(b) The name, address and telephone number of the individual responsible for making application;

(c) The trade name, department, corporation, association or partnership under which the provider is or shall do business. If the provider is a corporation, name, address and title of all officers;

(d) Name of parent and associated companies if any;

(e) Type of service requested;

(f) Locations of proposed principal place of business and/or branch places of business;

(g) Locations of health facilities and other ambulance providers within the proposed area to be served;

(h) Number and types of currently authorized vehicles;

(i) Number and types of new or expanded emergency medical services being requested;

(j) Geographic area and population to be served in implementing the proposed service;

(k) Source and volume of calls over the past 12 months for a currently licensed applicant;

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- (l) Total number of calls a currently licensed applicant refused over the past 12 months, and the circumstances for refusal;
- (m) Source and volume of calls expected over the next 12 months;
- (n) Average response times over the past 12 months for a currently licensed applicant;
- (o) Evidence of paid-in working capital or binding credit agreement which equals six months operating expenses in the aggregate;
- (p) Analysis of the improvement in cost effectiveness to the provider as a direct result of the proposed service;
- (q) Analysis of how the proposed service would integrate with the current emergency medical service system;
- (r) Proof of insurance or letter of intent for new services at levels required of by section 19a-180-2(d) of these regulations; and
- (s) Any other information as may be included by the applicant;

(Effective December 15, 1983)

Sec. 19a-180-4. Volunteer ambulance services

(a) Except as provided in subsection (b) below, any volunteer ambulance service which elects to commence a new or expanded emergency medical service but which does not intend to charge for such service shall be exempt from section 19a-180-2(e) of these regulations.

(b) If such exempt provider elects to begin charging for any new or expanded emergency service implemented on or after July 1, 1980, such provider shall apply for a determination of need as required by section 19a-180-2(e) of these regulations prior to imposing a charge for such service.

(Effective December 15, 1983)

Sec. 19a-180-5. Schedule for consideration

(a) Additional materials

(1) The Office may request the filing of additional materials which are necessary to complete the application or pertinent to the determinations to be made pursuant to section 19a-180-7 of these regulations within 30 days of receipt of the application.

(2) The applicant shall submit any requested material within 10 days of receipt of such request by the Office.

(3) Failure to submit said material within the time allowed shall be deemed withdrawal of the application without prejudice to its resubmission.

(b) Hearing notice and procedure

(1) The hearing shall be conducted by the Director of the Office of Emergency Medical Services or other presiding officer designated by such Director. Such hearing shall be conducted in accordance with Chapter 54 of the Connecticut General Statutes, and sections 19-2a-35 through 19-2a-41, inclusive, of the Regulations of Connecticut State Agencies. Two or more proceedings may be heard together by the presiding officer in his discretion.

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(2) The public hearing shall be scheduled by the Office not more than sixty (60) days after the date of filing the completed application. At least fifteen (15) days before the hearing, notice of such hearing shall be mailed to the following:

- (A) the applicant;
- (B) any regional council affected by the application; and
- (C) all emergency medical, ambulance, and invalid coach service providers operating in the region for which the new or expanded emergency medical service is requested.

(3) The Office shall grant, modify or deny any application for a new or expanded emergency medical service not more than 45 days following the adjournment of the hearing held pursuant hereto.

(Effective December 15, 1983)

Sec. 19a-180-6. Case in support

All information or materials received by the Office pursuant to sections 19a-180-3 and 19a-180-5 of these regulations shall be treated by the Office as a substantially complete case in support of the application. The burden shall be on the applicant to prove the need for the new or expanded emergency medical service.

(Effective December 15, 1983)

Sec. 19a-180-7. Factors to be considered

In determining whether a need for a new or expanded emergency medical service has been demonstrated, the Office shall consider the following factors:

- (a) The population to be served by the proposed service;
- (b) The geographic area to be served by the proposed service;
- (c) The volume of calls for the previous 12 months within such areas;
- (d) The impact of the proposed service on existing services in the area;
- (e) The potential improvement in service in the area including cost effectiveness and response times;
- (f) The location of the proposed principal and branch places of business in relation to health facilities and other providers;
- (g) The need for special services, if applicable; and
- (h) The recommendation of the any applicable regional council.

(Effective December 15, 1983)

Sec. 19a-180-8. Application limitation

If the Office determines after the hearing that no need exists for a particular new or expanded emergency medical service, no application for the same or substantially similar service from the same applicant shall be considered for a period of one year, except upon a determination of extraordinary circumstances by the Office.

(Effective December 15, 1983)

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Sec. 19a-180-9. Authorization for new or expanded emergency medical services

Any applicant who is granted authorization for a new or expanded emergency medical service shall have a maximum of six (6) months in which to acquire the necessary resources, equipment, and other material to comply with the terms of the authorizations. If the applicant fails to do so, the authorization will automatically become null and void.

(Effective December 15, 1983)

Sec. 19a-180-10. Exclusion

(a) Nothing in these regulations shall be construed to interpret the implementation of mobile intensive care service by an existing provider of ambulance service as an expansion of service. However, the provision of mobile intensive care by a person not previously providing emergency care shall be considered a new service.

(b) Any sale of an existing ambulance service business shall be exempt from the requirements for authorization for a new or expanded emergency medical services provided that: (1) the purchaser only provides services, operates vehicles or establishes branch offices which were provided, operated and established by the seller or purchaser prior to the sale; (2) the entire ambulance service business is transferred by seller to a single purchaser and said seller terminates all participation whatsoever in ambulance service business; and (3) the purchaser has satisfied all other conditions of licensure prior to operation of the purchased ambulance service. Any subsequent expansion of services provided, vehicles operated or locations established by the purchaser or seller shall be considered a “new or expanded service” as defined by section 19a-180-1(b) hereof and shall be subject to the full need for service process.

(Effective December 15, 1983)