



Date: April 3, 2023

To: The Honorable Jim Wood
Chair, Assembly Health Committee
1020 N Street, Suite 390
Sacramento, CA 95814

RE: AB 1168 (Bennett) - Emergency medical services
As Amended March 16, 2023 – OPPOSED
Set for hearing April 11, 2023 – Assembly Health Committee

Dear Assembly Member Wood,

The Emergency Medical Services Administrators Association of California (EMSAAC), representing the interests of all 34 Local EMS Agencies (LEMSAs) covering all 58 counties and the Emergency Medical Directors' Association of California (EMDAC), represents all 34 EMS Agency Medical Directors and various EMS provider medical directors are strongly opposed to AB 1168, authored by Assembly Member Bennett. LEMSAs ensure the high quality, safe, and equitable delivery of emergency medical services (EMS) care to all California's residents and visitors. This safe and equitable care is made possible by the ability of counties to organize EMS response according to local needs and provide a coordinated system prescribed by the intent and language of the EMS Act.

AB 1168 will undo decades of progress in the provision of coordinated delivery of local EMS systems and reverse over 40 years of state and local EMS system planning by abrogating holdings contrary to case law supporting 1797.201 (City of Oxnard v. Ventura (2021) 71 Cal.App.5th 1010). In short, AB 1168 allows for fragmentation of existing EMS systems which is antithetical to the legislature's intent (of the EMS act) to create a two-tiered system of EMS governance at state and county levels providing for the coordination of EMS at State and County levels.

Legislative Fix to a Local Dispute

AB 1168 seeks a legislative override to the court decision (Oxnard v. Ventura) upholding local challenges to 1797.201. This was a local dispute experienced in one county, by one fire agency. As written, this bill could be interpreted and used to break apart and effectively dismantle well established emergency ambulance response areas commonly known as Exclusive Operating Areas (EOA) across the State. Locally defined EOAs ensure EMS services are delivered in an equitable manner to all residents served in these areas. Simply put, organized EMS systems save lives, AB 1168 would allow these organized systems to be fractured.

1797.201 Authorities Already Protected

The bill's sponsor asserts AB 1168 is required to codify a city fire agency's or district's rights as outlined in 1797.201, if they entered into Joint Powers Agreement (JPA). We disagree. A number of fire agencies and districts have entered JPAs while retaining their 1797.201 authorities. 1797.201 was written to ensure a safe transition from fragmented and disorganized EMS delivery to a locally standardized and centrally coordinated EMS system.

Creates Fragmented and Disorganized EMS Systems

The sponsor/author correctly outline how the EMS Act "ensures that there is consistent coordination at a statewide level, while balancing the need to have that coordination occur at a more granular, and local level." However, by authorizing city fire agencies and districts to disrupt existing and contracted exclusive operating areas, AB 1168 will create splintered EMS systems, preventing the very coordination the author seeks to protect. Additionally, AB



1168 does not outline how pre-hospital ambulance services would continue should the city fire agency or district no longer be able to provide these services after an EOA has been dismantled.

Disenfranchises Californians

AB 1168 drives a wedge between well-resourced and historically disadvantaged communities. This measure will lead to the inequitable provision of emergency medical care for residents in California and has consequential impacts on neighboring communities. AB 1168 does not account for the economy of scale required to serve disadvantaged, rural, or lower call volume areas forcing these communities to accept the service provided by the newly separated city fire agency or district without any guarantee of contractually enforceable response or care standards.

Exclusive operating areas are designed to ensure equitable access by standardizing the level of services within these exclusive. Exclusivity creates a balanced delivery of ambulance service through this standardization. Furthermore, in counties with multiple exclusive operating areas (EOAs) any change to an EOA boundaries will require a re-balancing of the entire system and may require a county to reopen bidding on other operating areas in order to secure coverage for those impacted areas

This Issue Has Been Settled by Numerous Courts

AB1168 seeks to "abrogate any contrary holdings in City of Oxnard v. County of Ventura (2021) 71 Cal.App.5th 1010. This measure overturns a vast number of settled cases between counties, local EMS agencies, cities, fire districts, hospitals, ambulance services, and other parties creating confusion and the inability for LEMSAs to ensure equitable and universal basic emergency medical services in urban, suburban, and rural areas throughout California. AB 1168 does nothing less than repeal the EMS Act's intent of a coordinated, integrated and readily available system of prehospital emergency medical care and specialty hospital resources for everyone in California, regardless of where one lives or their socio-economic status. Today's local EMS systems provide and assure equitable access, standardized delivery of high-quality prehospital care, and the ability to ensure local coordination of EMS assets thus fulfilling the intent of the EMS Act.

For these reasons, we strongly OPPOSE AB 1168 and respectfully urge your 'NO' vote on the measure.

Should you have any additional questions please feel free to contact David Magnino at (916) 208-5985.

Respectfully,
DocuSigned by:


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Nick Clay
EMSAAC President

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Katherine Staats, MD
EMDAC President

cc: The Honorable Steve Bennett, Member, California State Assembly
Members, Assembly Health Committee
Lara Flynn, Principal Consultant, Assembly Health Committee
Gino Folchi, Consultant, Assembly Republican Caucus
Angela Pontes, Deputy Legislative Secretary, Office of Governor Newsom
Samantha Lui, Deputy Secretary, Legislative Affairs, California Health and Human Services Agency
Julie Souliere, Assistant Secretary, Office of Program and Fiscal Affairs, California Health and Human Services Department