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INDEPENDENT REGULATORY
REVIEW COMMISSION

2577

October 15, 2007

Arthur Coccodrilli, IRRC Chairman
Independent Regulatory Review Commission
333 Market Street, 14th Floor
Harrisburg, PA 17101

Dear Chairman Coccodrilli:

The Ambulance Association of Pennsylvania (AAP) has reviewed the Sexual Assault Victim Emergency Services, Final Form Regulation #10-182 (#2577) from the Department of Health and would like to offer the following comments and concerns.

The AAP feels the Department has satisfied many concerns of the emergency medical services provider community relative to transportation of sexual assault victims and specifically the five questions we raised on the proposed regulations. However, the AAP still has a few remaining questions and concerns with the Final Form Regulation, as amended.

1. Does psychological component of a victim of sexual assault constitute "essential life-saving measures" in accordance with §117.13(3) (relating to scope of services) at a facility that does not provide sexual assault emergency services?
2. §117.57(3) (relating to Religious and moral exceptions) and §117.58 (relating to Exemption for hospital providing limited services) require notification of law enforcement and ambulance and emergency medical care and transport services that a hospital has elected not to provide those services. We would suggest that a hospital should be required to notify the Regional Emergency Medical Services Council to allow them to disseminate that information to the region's medical command physicians unless the Department feels this is covered under 28 Pa. Code §117.15(b)(1) (relating to Community based plan). Our concern rests in instances where emergency medical service providers may seek the advice of medical command regarding the treatment or transportation of a victim of sexual assault the medical command physician being unaware of those hospitals that provide or do not provide sexual assault emergency services.
3. Does the right of "patient choice" to determine hospital destination outweigh compliance with these Final Form Regulations?

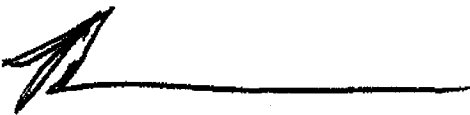
Arthur Coccodrilli, IRRC Chairman
October 15, 2007
Page 2

4. The AAP remains concerned that potential unintended consequence of this Final Form Regulation would be an increase in the number of hospitals citing exemption to provide such services either under §117.57(3) (relating to Religious and moral exceptions) or §117.58 (relating to Exemption for hospital providing limited services). Our concern stems with mainly rural providers of ambulance services in a county with limited access to an acute care facility that would have to transport a victim of sexual assault victim to a far distant hospital. This transport may remove the only available service in a specific geographic area for a lengthy amount of time essentially removing the only available emergency service provider from entire community or county.
5. The AAP would ask if the Department has considered the unknown factor of "hospital diversion" in these Final Form Regulations and what impact that would have on the emergency medical services provider community? Would hospitals that provide sexual assault victim emergency services be required to take victims of sexual assault regardless of the diversion status of the hospital?

In conclusion, we believe the Department has satisfied many concerns of the emergency medical services provider community with the changes in this Final Form Regulation. We would suggest that the Department, through the Bureau of EMS, create dialogue with the AAP, the Pennsylvania Emergency Health Services Council and the Regional Emergency Medical Services Councils to monitor the direct and indirect impact of these Final Form Regulations on the emergency medical services community.

Thank you for the opportunity to comment on these Sexual Assault Victim Emergency Services, Final Form Regulation #10-182 (#2577) from the Department of Health.

Sincerely,



Barry Albertson, Jr.
President

Cc: Sandra Knoble, Acting Director
House Health and Human Services Committee Chairs
Senate Public Health and Welfare Chairs