

# The New York City Council

# Legislation Details (With Text)

File #: Int 0398-2003 Version: \* Name: The provision of ambulance service.

Type: Introduction Status: Filed

**In control:** Committee on Fire and Criminal Justice Services

On agenda: 3/12/2003

Enactment date: Enactment #:

Title: A Local Law to amend the administrative code of the city of New York, in relation to the provision of

ambulance service.

**Sponsors:** Yvette D. Clarke, Christine C. Quinn, Leroy G. Comrie, Jr., Lewis A. Fidler, Alan J. Gerson, Robert

Jackson, Margarita Lopez, Miguel Martinez, Hiram Monserrate, Philip Reed, Kendall Stewart, Albert

Vann, David I. Weprin

Indexes:

#### Attachments:

Date	Ver.	Action By	Action	Result
3/12/2003	*	City Council	Introduced by Council	
3/12/2003	*	City Council	Referred to Comm by Council	
12/31/2003	*	City Council	Filed (End of Session)	

Int. No. 398

By Council Members Clarke, Quinn, Comrie, Fidler, Gerson, Jackson, Lopez, Martinez, Monserrate, Reed, Stewart, Vann and Weprin

A Local Law to amend the administrative code of the city of New York, in relation to the provision of ambulance service.

# Be it enacted by the Council as follows:

Section 1. Declaration of Legislative Findings and Intent. The Council enacts this legislation to maximize the efficiency of the City's Emergency Medical Service, to enhance public safety, and to promote uniformity in the treatment of all patients.

For many years, the City has supplemented its Emergency Medical Service with general ambulance service provided by or for private ("voluntary") hospitals. This practice has continued since the Emergency Medical Service has been transferred to the New York City Fire Department. When a voluntary hospital reaches an agreement with the Fire Department to provide ambulance service in the City's 911 system, it agrees

to follow the same operating rules and procedures that govern the City's Emergency Medical Service workers.

State rules require that emergency ambulances transport patients to the nearest hospital capable of caring for that patient. The reason for this rule is obvious: the sooner a patient receives medical treatment, the better. Patients, however, can request to be transported to a hospital that is not the nearest appropriate facility, provided this will not increase transportation time by more than ten minutes and provided there is no immediate threat to the patient's life.

A 2001 study by the New York City Comptroller's Office verified longstanding allegations that voluntary hospital ambulances were abusing the spirit, if not the letter, of these State rules. The study concluded that voluntary hospital ambulances that participate in the 911 system often engage in "patient steering," whereby an ambulance bypasses a closer hospital to take a patient to the specific hospital that sponsors the ambulance. In fact, the study found that when voluntary hospital ambulances pick up patients in the zip code area of a Health and Hospital Corporation ("HHC") hospital, they are less than half as likely as Fire Department ambulances to bring them to the HHC hospital. In addition, the voluntary hospital ambulances were discovered to be more than twice as likely to steer patients who are insured as patients who are not insured. Finally, steering occurs even when patients have such life-threatening conditions as a cardiac arrest and patients who should be taken to a trauma center are sometimes taken to hospitals that are not trauma centers. The Comptroller estimated that the steering of patients may have cost HHC \$86 million in Fiscal 1999 alone.

The Council finds that the transport of emergency patients to the nearest appropriate hospital is critical to public health. The Council further finds that voluntary hospital ambulances are abusing rules governing the transportation of patients to the detriment of public health and HHC. Accordingly, the Council declares that it is reasonable and necessary to penalize patient steering.

§2. Title 15 of the administrative code of the city of New York is amended by adding a new chapter 4 to read as follows:

## Chapter 4

### Ambulance Service

§15-401 Dispatch System.

§15-402 Patient Transport.

§15-403 Penalties.

§15-404 Evaluations.

§15-405 Rules.

§15-401 **Dispatch System.** (a) The department shall identify and direct, through a dispatch system, all ambulances to the nearest appropriate hospital for each emergency patient transport.

(b) Any ambulance that fails to transport an emergency patient to the hospital identified by the dispatch system shall file a report with the department explaining the reasons for such divergence.

§15-402 **Patient Transport.** (a) It shall be unlawful for any emergency medical technician to, in any manner, including by reference to reputation or quality of care, encourage a patient to request or discourage a patient from requesting transport to any hospital that is not the nearest appropriate hospital.

(b) It shall be unlawful for any company providing emergency ambulance service to encourage, induce, or require an employee to, in any manner, including by reference to reputation or quality of care, encourage a patient to request or discourage a patient from requesting transport to any hospital that is not the nearest appropriate hospital.

§15-403 **Penalties**. (a) Any person who violates subdivision a of section 15-402 of this chapter shall be subject to a civil penalty of not less than one hundred dollars and not more than two hundred dollars.

(b) Any company or hospital providing emergency ambulance service that violates subdivision b of section 15-402 of this chapter shall, for the first violation thereof, be subject to a civil penalty of not less than five hundred dollars and not more than one thousand dollars; for the second violation, which was committed within a period of twelve months of the first violation, be subject to a civil penalty of not less than one thousand dollars and not more than two thousand dollars; and for a third and subsequent violation, which was committed within a period of twelve months from the first violation, be subject to a civil penalty of not less than two thousand dollars and not more than five thousand dollars.

(c) Any company or hospital providing emergency ambulance service that fails, over a period of twelve months, to transport patients to the hospital identified by the dispatch system fifteen or greater percent of the time shall be subject to a civil penalty of not less than two hundred dollars and not more than five hundred dollars for each percent by which the company or hospital fails to

File #: Int 0398-2003, Version: \*

transport patients to the nearest appropriate hospital.

(d) Any company or hospital providing emergency ambulance service that violates subdivision b of section 15-401 of this chapter shall be subject to a civil penalty of not less than fifty dollars and not more than two hundred dollars

chapter shall be subject to a civil penalty of not less than fifty dollars and not more than two hundred dollars.

§15-404 Evaluations. The fire commissioner shall submit an annual report to the council and the mayor no later than

September 1 of each year comparing the rates at which non-department ambulances, as compared with department ambulances,

deliver patients to the nearest appropriate hospital, including a breakdown by area code and the reported reasons why ambulances did

not deliver patients to the nearest appropriate hospital.

§15-405 Rules. The department shall promulgate rules to implement the provisions of this chapter.

§3. This local law shall take effect 90 days after its enactment; except that the fire commissioner shall take all actions

necessary to implement this local law on or before the date upon which it shall take effect.

RBU LS# 2102

March 7, 2003 10:00 AM