MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND TENTH LEGISLATURE

Legislative Document

No. 1067

H. P. 900 House of Representatives, February 27, 1981 Referred to the Committee on Health and Institutional Services. Sent up for concurrence and ordered printed.

EDWIN H. PERT, Clerk

Presented by Representative Tuttle of Sanford.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-ONE

AN ACT to Relieve Emergency Ambulance Services.

Be it enacted by the People of the State of Maine, as follows:

32 MRSA § 77 is enacted to read:

- § 77. Withdrawal of nonemergency transfer service
- 1. Authorization. Upon receipt of a letter under subsection 2, a volunteer, municipal, hospital or other nonprofit ambulance service may notify the general public it serves that it will no longer provide, in a particular described area, nonemergency transfers or other transfers beyond the nearest hospital.
- 2. Statement. A licensed private ambulance transfer service intending to provide, on a 24-hour basis, service for nonemergency transfers, or other transfers beyond the nearest hospital, in a particular area shall state its intention by certified mail to any volunteer, municipal, hospital or other nonprofit ambulance service in the area described.
- 3. Notification of withdrawal. Within 30 days of receipt of the statement of intention the volunteer, municipal, hospital or other nonprofit service shall notify the general public in the area described in the statement that it will no longer provide the service described in the statement. Notification shall be made in a local newspaper of general circulation within the area described in the statement.
 - 4. Limitation. This section does not require the private ambulance transfer

service to make a transfer if a medical necessity is not evident. Emergency service personnel shall determine whether a transfer is an emergency transfer.

STATEMENT OF FACT

The purpose of this bill is to resolve emergency ambulance services from performing nonessential transfers, which create a lack of coverage for true emergency cases.