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Howard Backer, MD, MPH, FACEP Director, California Emergency Medical Services Authority 10901 Gold Center Drive, Suite 400 Rancho Cordova, CA 95670

Re: SB 944 (Hertzberg) Community Paramedicine Act of 2018 (Support If Amended)

Dear Dr. Backer:

The California Conference of Local Health Officers (CCLHO) voted at the CCLHO Board meeting on April 5, 2018 to take a Support If Amended recommendation on SB 944 (Hertzberg), a bill that would create the Community Paramedicine Act (Act) of 2018. The Act would authorize a local EMS agency to develop a community paramedicine program and provide specified community paramedic services. The Act would also require the California Emergency Medical Services Authority (Authority) to review a local EMS agency's proposed community paramedicine program and approve, approve with conditions, or deny the proposed program within 6 months after submission.

In addition, the Act would create the Community Paramedicine Oversight Committee to advise the Authority on, and approve minimum medical protocols for, community paramedicine program specialties. The Act would also require the Authority to develop, in consultation with the Community Paramedicine Oversight Committee, regulations that establish minimum standards for the development of a community paramedicine program.

CCLHO recommends a support position if the following proposed amendments are incorporated into the bill:

- Require Local Health Jurisdiction oversight when providing directly observed therapy (DOT) to persons with tuberculosis. Local health departments have developed experience and expertise with DOT and it is important that patients complete the long and complicated course of tuberculosis treatment to keep resistance down and to protect the public.
- Include Public Health expertise on the Community Paramedicine Oversight Committee membership. This amendment would help ensure one of the stated intents of the bill, which is to improve community health.
- Specify that the community paramedicine program provide patient treatment information to the patient's primary care physician as soon as feasibly possible and within current laws and regulations. Primary care physicians play a major role in the continuity and coordination of care and as such should be included in health communications to the extent possible.

Dr. Howard Backer Page 2 April 24, 2018

CCLHO further recommends that outcome data for community paramedicine programs include stratified demographic information to evaluate if the programs are equitably meeting the program needs of the whole community.

CCLHO was established in statute in 1947 to advise the California Department of Health Services (now California Department of Public Health), other departments, boards, commissions, and officials of federal, state and local agencies, the Legislature and other organizations on all matters affecting health. CCLHO membership consists of all legally appointed physician health officers in California's 61 city and county jurisdictions.

Should you have any questions, please contact me by email at <a href="mailto:ken.cutler@co.nevada.ca.us">ken.cutler@co.nevada.ca.us</a> or by phone at 530-265-7154. Thank you.

Sincerely and on behalf of the CCLHO membership,

Original signed by Dr. Ken Cutler

Ken Cutler, MD, MPH President, California Conference of Local Health Officers

Cc: Karen L. Smith, MD, MPH, Director and State Public Health Officer, California Department of Public Health