

July 6, 2023

The Honorable Susan Eggman  
Senate Health Committee, Chair  
1021 O Street, 3310  
Sacramento, CA 95814

**SUBJECT: AB 40 (Rodriguez), Oppose**

Dear Senator Eggman:

The Alliance of Catholic Health Care, which represents California's Catholic-affiliated health systems and hospitals, is writing to oppose AB 40 (Rodriguez). While we are supportive of several of the bill's provisions, we must oppose Assembly Bill (AB) 40, which would set a statewide standard for ambulance offload times and further impede the safe delivery of emergency care. Specifically, we are concerned that the bill:

- Makes hospitals alone responsible to reduce ambulance patient offload delays
- Incentivizes the misuse of the EMS system
- Does not address a significant lack of accuracy in data collection

There is no greater priority for California's Catholic hospitals than providing safe and timely care to all who come to our emergency departments (ED). This means making sure those with the greatest needs are treated first regardless of how they arrive. But there are challenges across the entire health care delivery system that often result in delays. They include:

- **Hospital workforce shortages.** California is experiencing a health care workforce crisis — *Futuro Health* conservatively estimates a shortage of 500,000 allied health employees by 2024. A UCSF study found that California had a deficit of 40,000 registered nurses in 2021.
- **Ambulance workforce shortages.** Ambulance providers across the state are experiencing the same workforce challenges, which means they are not always able to operate the required number of ambulances needed to respond to 911 calls as quickly as possible.
- **Primary care.** A lack of available primary care providers, particularly in underserved and rural communities, which results in more people turning to the ED for care.
- **Behavioral health.** A rise in the number of patients in a behavioral health crisis has led to unprecedented overall ED volumes — a 42% increase in the last seven years.
- **Homeless population.** The surge of people experiencing homelessness has increased, resulting in higher use of EDs by this population. A recent Stanford University study found that ED visits by individuals experiencing homelessness nearly doubled between 2018 and 2021.
- **Delayed discharges.** Challenges in discharging patients to lower levels of care outside of the hospital, particularly for Medi-Cal patients. This results in fewer beds that are available for new patients.



Representing California's Catholic  
Health Systems and Hospitals

Putting the responsibility on hospitals alone to reduce offload delays is an oversimplification of the problem. This is not just a hospital problem, it's not just an EMS provider problem, it's a system problem.

In order to ensure patient safety, hospitals must treat the sickest patients first, and our hospitals employ a comprehensive and clinically-driven process to evaluate, triage, and deliver appropriate care to everyone who seeks help at a hospital regardless of how they arrive at the ED. Inappropriate use of the 911 system for issues such as back pain, a sore throat, or minor cuts only creates challenges in caring for patients who truly need emergency care. AB 40 has the potential to radically shift and increase costly ambulance utilization by the public if they are aware that their care will be prioritized if they call 911. With our EDs currently experiencing unprecedented patient volume, hospitals must be able to continue to use the clinically driven triage process to treat those with the most urgent needs first, rather than being pressured to meet an offload standard.

Finally, it is premature and unrealistic to establish an offload standard when there is currently no accurate, uniform, and audited data to track the time it takes to transfer care. Currently, ambulance providers manually input data and submit it to their LEMSA, which then transmits data to EMSA. Hospitals have no formal opportunity to review, validate, or correct data prior to submission. In fact, while conducting audits, hospitals found that the offload times EMSA collects are significantly different from the transfer of care data tracked by our facilities. Although AB 40 contains a requirement for the development of an audit tool, this must be implemented prior to the passage of any legislation.

Ambulance patient offload delays are a complex, long-standing issue — exacerbated by the pandemic — resulting from challenges across the entire health care delivery system.

The Alliance of Catholic Health Care and our members are eager to be a part of the solution and we welcome continued discussions on this important issue. However, setting offload standards based on inaccurate and incomplete data while doing nothing to address the root causes of the delays is simply not a solution. Therefore, we must oppose AB 40.

Sincerely,



Lori Cappello Dangberg  
Executive Vice President