

March 9, 2009

Honorable Robert L. Sumwalt  
Member  
National Transportation Safety Board  
490 L'Enfant Plaza, SW  
Washington, DC 20594

Dear Mr. Sumwalt:

Staff and leadership at Mayo Clinic Medical Transport (MCMT) concur with the summation of the National Transportation Safety Board that the Helicopter Emergency Medical Services (HEMS) industry can and should improve its safety record, and that this type of progress is not possible through voluntary compliance alone. To that end, we support and applaud the efforts of the NTSB in publicly addressing the safety issues within the HEMS industry through the hearings held February 3-6, 2009 and the corresponding public comment period.

We appreciate the opportunity to participate in the hearings by providing testimony. Our primary value at Mayo Clinic is the needs of our patients coming first and above all we do. Our mission is to provide the best care to every patient every day through integrated clinical practice, education and research. We started an air medical services program twenty five years ago because it would allow us to bring Mayo expertise to the patient and provide the highest quality care en route to the hospital. We remain committed to providing the best, most appropriate patient care and technology—clinical and aviation—for our patients. We believe through our testimony that we demonstrated that patients can receive the highest quality medical care and that it can be conducted in a safe manner. This is why we have implemented all NTSB recommendations and FAA requirements and have also made significant safety investments that extend well beyond these recommendations.

We realize however, that a voluntary method of compliance throughout the industry will not ensure that all air medical services are acting in the best interest of patients and caregivers by creating the safest environment available. There currently is a broad spectrum of safety among air medical providers throughout the country. The greatest injustice is that patients, the general public and even those health care providers who request HEMS remain unaware of this disparity.

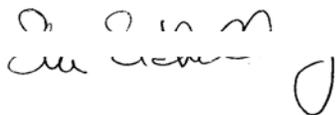
We recognize that air medical transportation has grown into a large industry over the years, doubling in the last decade. There is also limited financial incentive for many programs to comply with any voluntary safety measures. While we support free enterprise and believe that in many cases competition can offer choice and be an impetus for a better product or service, the opposite has become true for HEMS. The current system of minimum requirements, both in terms of safety and medical care, has moved incentives to favor business practice over safety and patient care. Many HEMS programs operate at minimum safety and medical care levels to optimize their margins, rather than voluntarily adopt new technology and training which can make the operating environment safer. In an industry where

reimbursement is based on distance traveled, rather than level of patient care provided or safety features employed, HEMS programs can be content with maintaining the status quo of the lowest legal safety standards.

We share the opinion of the NTSB that the HEMS industry is a unique aviation entity and therefore should be removed from the Federal Aviation Regulation (FAR) Part 135. It is prudent and practical that a new FAR be created to address the specific safety challenges involved in emergency patient transport because of the mission profile. It is important to consider that a FAR specific to HEMS should reflect the diverse missions flown and the particular safety challenges presented for each mission (day vs. night, scene vs. inter-facility, VMC vs. IIMC conditions, and other region-specific challenges). A new FAR could regulate the necessary training, procedures, processes, and technology for each unique HEMS mission type. We believe a layered approach would stimulate higher levels of safety by aligning the most appropriate level of safety with each mission type. This approach could also serve as an incentive for HEMS providers to invest in safety measures, or otherwise face the loss of transports due to limited mission capabilities.

The hospital health care environment is making strides toward better transparency and reporting of poor safety practices and patient care deficiencies. There is now more information for patients and consumers to make more informed choices. There is little evidence of this progress in the HEMS environment however. There is no public reporting of a HEMS provider's safety choices and again no financial incentive to change practice under the current reimbursement model. The result is not fully informed decision making for those who request air medical services; and worse yet an uninformed patient, family member and family of crewmembers of the risks of flying with some providers. And for those who operate air medical services as a business, rather than for patient care, the financial incentives are to offer bare minimums in order to increase margins.

At Mayo Clinic we have an ongoing commitment of protecting patients and caregivers being transported to and from scenes and hospitals in the communities we serve in Minnesota, Wisconsin and Iowa. We also feel an obligation to share our expertise with others in the air medical community and we offer to be part of a solution to making all air medical care and transport as safe, efficient and of the highest quality possible. We offer to collaborate with the NTSB, FAA and other policymakers going forward to bring about change and a return for all to why air medical care and transport was adopted—to serve the needs of patients.



Signed: \_\_\_\_\_  
E. S. Eickelberg