

House _____ Amendment NO. _____

Offered By _____

1 AMEND Senate Bill No. 194, Page 1, Section A, Line 2, by inserting immediately after all of said
2 section and line the following:

3
4 "190.103. 1. One physician with expertise in emergency medical services from each of the
5 EMS regions shall be elected by that region's EMS medical directors to serve as a regional EMS
6 medical director. The regional EMS medical directors shall constitute the state EMS medical
7 director's advisory committee and shall advise the department and their region's ambulance services
8 on matters relating to medical control and medical direction in accordance with sections 190.001 to
9 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The regional
10 EMS medical director shall serve a term of four years. The southwest, northwest, and Kansas City
11 regional EMS medical directors shall be elected to an initial two-year term. The central, east
12 central, and southeast regional EMS medical directors shall be elected to an initial four-year term.
13 All subsequent terms following the initial terms shall be four years. The state EMS medical director
14 shall be elected by the members of the regional EMS medical director's advisory committee, shall
15 serve a term of four years, and shall seek to coordinate EMS services between the EMS regions,
16 promote educational efforts for agency medical directors, represent Missouri EMS nationally in the
17 role of the state EMS medical director, and seek to incorporate the EMS system into the health care
18 system serving Missouri.

19 2. A medical director is required for all ambulance services and emergency medical
20 response agencies that provide: advanced life support services; basic life support services utilizing
21 medications or providing assistance with patients' medications; or basic life support services
22 performing invasive procedures including invasive airway procedures. The medical director shall
23 provide medical direction to these services and agencies in these instances.

24 3. The medical director, in cooperation with the ambulance service or emergency medical
25 response agency administrator, shall have the responsibility and the authority to ensure that the
26 personnel working under their supervision are able to provide care meeting established standards of
27 care with consideration for state and national standards as well as local area needs and resources.
28 The medical director, in cooperation with the ambulance service or emergency medical response
29 agency administrator, shall establish and develop triage, treatment and transport protocols, which
30 may include authorization for standing orders.

31 4. All ambulance services and emergency medical response agencies that are required to
32 have a medical director shall establish an agreement between the service or agency and their
33 medical director. The agreement will include the roles, responsibilities and authority of the medical
34 director beyond what is granted in accordance with sections 190.001 to 190.245 and rules adopted
35 by the department pursuant to sections 190.001 to 190.245. The agreement shall also include
36 grievance procedures regarding the emergency medical response agency or ambulance service,

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1 personnel and the medical director.

2 5. Regional EMS medical directors and the state EMS director elected as provided under
3 subsection 1 of this section shall be considered public officials for purposes of sovereign immunity,
4 official immunity, and the Missouri public duty doctrine defenses.

5 6. The state EMS medical director's advisory committee shall be considered a peer review
6 committee under section 537.035.

7 7. Regional EMS medical directors may act to provide online telecommunication medical
8 direction to EMT-Bs, EMT-Is, EMT-Ps, and community paramedics and provide offline medical
9 direction per standardized treatment, triage, and transport protocols when EMS personnel, including
10 EMT-Bs, EMT-Is, EMT-Ps, and community paramedics, are providing care to special needs
11 patients or at the request of a local EMS agency or medical director.

12 8. When developing treatment protocols for special needs patients, regional EMS medical
13 directors may promulgate such protocols on a regional basis across multiple political subdivisions'
14 jurisdictional boundaries, and such protocols may be used by multiple agencies including, but not
15 limited to, ambulance services, emergency response agencies, and public health departments.
16 Treatment protocols shall include steps to ensure the receiving hospital is informed of the pending
17 arrival of the special needs patient, the condition of the patient, and the treatment instituted.

18 9. Multiple EMS agencies including, but not limited to, ambulance services, emergency
19 response agencies, and public health departments shall take necessary steps to follow the regional
20 EMS protocols established as provided under subsection 8 of this section in cases of mass casualty
21 or state-declared disaster incidents.

22 10. When regional EMS medical directors develop and implement treatment protocols for
23 patients or provide online medical direction for patients, such activity shall not be construed as
24 having usurped local medical direction authority in any manner.

25 11. Notwithstanding any other provision of law, when regional EMS medical directors are
26 providing either online telecommunication medical direction to EMT-Bs, EMT-Is, EMT-Ps, and
27 community paramedics, or offline medical direction per standardized EMS treatment, triage, and
28 transport protocols for patients, those medical directions or treatment protocols may include the
29 administration of the patient's own prescription medications.

30 190.142. 1. The department shall, within a reasonable time after receipt of an application,
31 cause such investigation as it deems necessary to be made of the applicant for an emergency medical
32 technician's license. The director may authorize investigations into criminal records in other states
33 for any applicant.

34 2. The department shall issue a license to all levels of emergency medical technicians, for a
35 period of five years, if the applicant meets the requirements established pursuant to sections 190.001
36 to 190.245 and the rules adopted by the department pursuant to sections 190.001 to 190.245. The
37 department may promulgate rules relating to the requirements for an emergency medical technician
38 including but not limited to:

39 (1) Age requirements;

40 (2) Education and training requirements based on respective ~~[national curricula of the~~
41 ~~United States Department of Transportation]~~ National Emergency Medical Services Education
42 Standards and any modification to such curricula specified by the department through rules adopted
43 pursuant to sections 190.001 to 190.245;

44 (3) EMT-P programs must be accredited by the Commission on Accreditation of Allied
45 Health Education Programs (CAAHEP) or hold Committee on Accreditation of Education Programs
46 for the Emergency Medical Services Professions (CoAEMSP) letter of review;

47 (4) Initial licensure testing requirements. Initial EMT-P licensure testing shall be through
48 the national registry of EMTs or examinations developed and administered by the department of

1 health and senior services;

2 ~~[(4)]~~ (5) Continuing education and relicensure requirements; and

3 ~~[(5)]~~ (6) Ability to speak, read and write the English language.

4 3. Application for all levels of emergency medical technician license shall be made upon
5 such forms as prescribed by the department in rules adopted pursuant to sections 190.001 to
6 190.245. The application form shall contain such information as the department deems necessary to
7 make a determination as to whether the emergency medical technician meets all the requirements of
8 sections 190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 190.245.

9 4. All levels of emergency medical technicians may perform only that patient care which is:

10 (1) Consistent with the training, education and experience of the particular emergency
11 medical technician; and

12 (2) Ordered by a physician or set forth in protocols approved by the medical director.

13 5. No person shall hold themselves out as an emergency medical technician or provide the
14 services of an emergency medical technician unless such person is licensed by the department.

15 6. Any rule or portion of a rule, as that term is defined in section 536.010, that is created
16 under the authority delegated in this section shall become effective only if it complies with and is
17 subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and
18 chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to
19 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently
20 held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after
21 August 28, 2002, shall be invalid and void.

22 190.144. 1. No emergency medical technician licensed under section 190.142 or 190.143, if
23 acting in good faith and without gross negligence, shall be liable for:

24 (1) Transporting a person for whom an application for detention for evaluation and
25 treatment has been filed under section 631.115 or 632.305; [or]

26 (2) Physically or chemically restraining an at-risk behavioral health patient as that term is
27 defined under section 190.240 if such restraint is to ensure the safety of the patient or technician; or

28 (3) The administration of a patient's personal medication when deemed necessary.

29 2. Nothing in this section shall be construed as creating an exception to sovereign immunity,
30 official immunity, or the Missouri public duty doctrine defenses.

31 190.147. 1. Emergency medical technician paramedics (EMT-Ps):

32 (1) Who have completed at least forty hours of the standard crisis intervention training
33 course as endorsed and developed by the National Alliance on Mental Illness or a course of training
34 that the ground or air ambulance service's medical director has determined to be academically
35 equivalent thereto;

36 (2) Who have been authorized by their ground or air ambulance service's administration and
37 medical director under subsection 3 of section 190.103; and

38 (3) Whose ground or air ambulance service has developed and adopted standardized triage,
39 treatment, and transport protocols under subsection 3 of section 190.103, which address the
40 challenge of treating and transporting behavioral health patients who present a likelihood of serious
41 harm to themselves or others as the term "likelihood of serious harm" is defined under section
42 632.005 or who are significantly incapacitated by alcohol or drugs may make a good faith
43 determination that such patients shall be placed in a temporary hold for the sole purposes of
44 transport to the nearest appropriate facility.

45 2. EMT-Ps who have made a good faith decision for a temporary hold of a patient as
46 authorized by this section shall no longer have to rely on the common law doctrine of implied
47 consent and therefore shall not be civilly liable for a good faith determination made in accordance
48 with this section and shall not have waived any sovereign immunity defense, official immunity

1 defense, or Missouri public duty doctrine defense if employed at the time of the good faith
 2 determination by a governmental employer.

3 3. Any ground or air ambulance service that adopts the authority and protocols provided for
 4 by this section shall have a memorandum of understanding with applicable local law enforcement
 5 agencies in order to achieve a collaborative and coordinated response to patients displaying
 6 symptoms of either a likelihood of serious harm to themselves or others or significant incapacitation
 7 by alcohol or drugs, which require a crisis intervention response.

8 190.165. 1. The department may refuse to issue or deny renewal of any certificate, permit
 9 or license required pursuant to sections 190.100 to 190.245 for failure to comply with the provisions
 10 of sections 190.100 to 190.245 or any lawful regulations promulgated by the department to
 11 implement its provisions as described in subsection 2 of this section. The department shall notify
 12 the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her
 13 right to file a complaint with the administrative hearing commission as provided by chapter 621.

14 2. The department may cause a complaint to be filed with the administrative hearing
 15 commission as provided by chapter 621 against any holder of any certificate, permit or license
 16 required by sections 190.100 to 190.245 or any person who has failed to renew or has surrendered
 17 his or her certificate, permit or license for failure to comply with the provisions of sections 190.100
 18 to 190.245 or any lawful regulations promulgated by the department to implement such sections.
 19 Those regulations shall be limited to the following:

20 (1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or
 21 alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any
 22 activity licensed or regulated by sections 190.100 to 190.245;

23 (2) Being finally adjudicated and found guilty, or having entered a plea of guilty or nolo
 24 contendere, in a criminal prosecution under the laws of any state or of the United States, for any
 25 offense reasonably related to the qualifications, functions or duties of any activity licensed or
 26 regulated pursuant to sections 190.100 to 190.245, for any offense an essential element of which is
 27 fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not
 28 sentence is imposed;

29 (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate, permit
 30 or license issued pursuant to sections 190.100 to 190.245 or in obtaining permission to take any
 31 examination given or required pursuant to sections 190.100 to 190.245;

32 (4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by
 33 fraud, deception or misrepresentation;

34 (5) Incompetency, misconduct, gross negligence, fraud, misrepresentation or dishonesty in
 35 the performance of the functions or duties of any activity licensed or regulated by sections 190.100
 36 to 190.245;

37 (6) Violation of, or assisting or enabling any person to violate, any provision of sections
 38 190.100 to 190.245, or of any lawful rule or regulation adopted by the department pursuant to
 39 sections 190.100 to 190.245;

40 (7) Impersonation of any person holding a certificate, permit or license or allowing any
 41 person to use his or her certificate, permit, license or diploma from any school;

42 (8) Disciplinary action against the holder of a license or other right to practice any activity
 43 regulated by sections 190.100 to 190.245 granted by another state, territory, federal agency or
 44 country upon grounds for which revocation or suspension is authorized in this state;

45 (9) For an individual being finally adjudged insane or incompetent by a court of competent
 46 jurisdiction;

47 (10) Assisting or enabling any person to practice or offer to practice any activity licensed or
 48 regulated by sections 190.100 to 190.245 who is not licensed and currently eligible to practice

1 pursuant to sections 190.100 to 190.245;

2 (11) Issuance of a certificate, permit or license based upon a material mistake of fact;

3 (12) Violation of any professional trust, confidence, or legally protected privacy rights of a
4 patient by means of an unauthorized or unlawful disclosure;

5 (13) Use of any advertisement or solicitation which is false, misleading or deceptive to the
6 general public or persons to whom the advertisement or solicitation is primarily directed;

7 (14) Violation of the drug laws or rules and regulations of this state, any other state or the
8 federal government;

9 (15) Refusal of any applicant or licensee to respond to reasonable department of health and
10 senior services' requests for necessary information to process an application or to determine license
11 status or license eligibility;

12 (16) Any conduct or practice which is or might be harmful or dangerous to the mental or
13 physical health or safety of a patient or the public;

14 (17) Repeated acts of negligence or recklessness in the performance of the functions or
15 duties of any activity licensed or regulated by sections 190.100 to 190.245.

16 3. If the department conducts investigations, the department, prior to interviewing a licensee
17 who is the subject of the investigation, shall explain to the licensee that he or she has the right to:

18 (1) Consult legal counsel or have legal counsel present;

19 (2) Have anyone present whom he or she deems to be necessary or desirable[, except for
20 any holder of any certificate, permit, or license required by sections 190.100 to 190.245]; and

21 (3) Refuse to answer any question or refuse to provide or sign any written statement.

22 The assertion of any right listed in this subsection shall not be deemed by the department to be a
23 failure to cooperate with any department investigation.

24 4. After the filing of such complaint, the proceedings shall be conducted in accordance with
25 the provisions of chapter 621. Upon a finding by the administrative hearing commission that the
26 grounds, provided in subsection 2 of this section, for disciplinary action are met, the department
27 may, singly or in combination, censure or place the person named in the complaint on probation on
28 such terms and conditions as the department deems appropriate for a period not to exceed five years,
29 or may suspend, for a period not to exceed three years, or revoke the license, certificate or permit.
30 Notwithstanding any provision of law to the contrary, the department shall be authorized to impose
31 a suspension or revocation as a disciplinary action only if it first files the requisite complaint with
32 the administrative hearing commission. The administrative hearing commission shall hear all
33 relevant evidence on remediation activities of the licensee and shall make a recommendation to the
34 department of health and senior services as to licensure disposition based on such evidence.

35 5. An individual whose license has been revoked shall wait one year from the date of
36 revocation to apply for relicensure. Relicensure shall be at the discretion of the department after
37 compliance with all the requirements of sections 190.100 to 190.245 relative to the licensing of an
38 applicant for the first time. Any individual whose license has been revoked twice within a ten-year
39 period shall not be eligible for relicensure.

40 6. The department may notify the proper licensing authority of any other state in which the
41 person whose license was suspended or revoked was also licensed of the suspension or revocation.

42 7. Any person, organization, association or corporation who reports or provides information
43 to the department pursuant to the provisions of sections 190.100 to 190.245 and who does so in
44 good faith shall not be subject to an action for civil damages as a result thereof.

45 8. The department of health and senior services may suspend any certificate, permit or
46 license required pursuant to sections 190.100 to 190.245 simultaneously with the filing of the
47 complaint with the administrative hearing commission as set forth in subsection 2 of this section, if
48 the department finds that there is an imminent threat to the public health. The notice of suspension

1 shall include the basis of the suspension and notice of the right to appeal such suspension. The
2 licensee may appeal the decision to suspend the license, certificate or permit to the department. The
3 appeal shall be filed within ten days from the date of the filing of the complaint. A hearing shall be
4 conducted by the department within ten days from the date the appeal is filed. The suspension shall
5 continue in effect until the conclusion of the proceedings, including review thereof, unless sooner
6 withdrawn by the department, dissolved by a court of competent jurisdiction or stayed by the
7 administrative hearing commission."; and

8
9 Further amend said bill by amending the title, enacting clause, and intersectional references
10 accordingly.