

HCS SS SB 870 -- EMERGENCY MEDICAL SERVICES

SPONSOR: Hegeman

COMMITTEE ACTION: Voted "Do Pass with HCS" by the Standing Committee on Government Efficiency by a vote of 9 to 0. Voted "Do Pass" by the Standing Committee on Rules- Legislative Oversight by a vote of 11 to 0.

This bill modifies several provisions relating to emergency medical services.

EMERGENCY SERVICES DISTRICTS

Currently, the law provides that ambulance and fire protection districts are entitled to a reimbursement of between 50% and 100% of the amount of the district's tax increment deposited into the Special Allocation Fund of a tax increment financing district. This bill provides that ambulance and fire protection districts and counties operating a 911 center providing emergency or dispatch services shall annually set such reimbursement rates prior to the time the assessment is paid into the fund. If the redevelopment plan, area, or project is amended, the ambulance or fire protection district or the governing body of a county operating a 911 center providing emergency or dispatch services shall have the right to recalculate the reimbursement rate.

This bill requires plans for Chapter 100, RSMo, industrial development projects to identify ambulance and fire protection districts that are impacted by such projects, and to include an analysis of the costs and benefits of such projects to such districts.

This bill also allows ambulance and fire protection districts and counties operating a 911 center providing emergency or dispatch services to receive a reimbursement of between 50% and 100% of the amount of ad valorem property tax revenues the district or county would have received in the absence of a property tax abatement or exemption provided for under a Chapter 100 industrial development project. Ambulance and fire protection districts and the governing body of a county operating a 911 center providing emergency or dispatch services shall annually set such reimbursement rate prior to the time the assessment is determined by the county assessor. If the redevelopment plan, area, or project is amended, the ambulance or fire protection district or county shall have the right to recalculate the reimbursement rate.

This bill also modifies the Urban Redevelopment Corporations Law by allowing ambulance and fire protection districts and counties

operating a 911 center providing emergency or dispatch services to receive a reimbursement of between 50% and 100% of the amount of ad valorem property tax revenues the district or county would have received in the absence of the property tax abatement or exemption provided for under current law. Ambulance and fire protection districts and the governing body of a county operating a 911 center providing emergency or dispatch services shall annually set such reimbursement rate prior to the time the assessment is determined by the county assessor. If the redevelopment plan, area, or project is amended, the ambulance or fire protection district or the governing body of a county operating a 911 center providing emergency or dispatch services shall have the right to recalculate the reimbursement rate (Sections 99.848, 100.050, 100.059, and 335.110).

These provisions are similar to provisions in SCS SB 936 (2018).

#### CERTAIN DEFINITIONS

This bill changes the term "emergency medical technician-intermediate" to "advanced emergency medical technician".

Additionally, the term "first responder" is replaced by "emergency medical responder."

Finally, the definition of "medical control" is modified to include both online and offline medical control (Sections 135.090, 190.094, 190.100, 190.103, 190.105, 190.131, 190.196, 190.246, and 191.630).

#### EMS MEDICAL DIRECTORS

This bill requires the state EMS medical director to be elected by the members of the regional EMS medical director's advisory committee, to serve a four-year term, and to coordinate EMS services between the EMS regions, as well as to promote educational efforts for agency medical directors, represent Missouri EMS nationally, and incorporate the EMS system into Missouri's health care system (Section 190.103).

#### EMS TRAINING

This bill modifies education, training, and accreditation requirements for emergency medical technicians and paramedics. Paramedic training programs shall be accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or hold a CAAHEP letter of review (Sections 190.131 and 190.142).

#### TREATMENT PROTOCOLS

Emergency medical technicians and paramedics shall only perform medical procedures as directed by treatment protocols approved by the regional medical director or as authorized through direct communication with online medical control.

Emergency medical technician paramedics (EMT-Ps) who have completed certain training, received authorization, and whose ambulance service has adopted certain protocols may make a good faith determination that certain behavioral health patients must be placed in a temporary hold for transport to the nearest appropriate facility. Physical restraint of a patient shall be permitted only to provide for bystander, patient, or emergency personnel safety, as approved by local medical control, or in cooperation with on-scene law enforcement. All incidents involving patient restraint shall be reviewed by the ambulance service physician medical director.

This bill also specifies that the EMT-Ps who have made such determinations shall no longer rely on the common law doctrine of implied consent and are not to be held civilly liable nor be considered to have waived certain specified defenses if employed by a government employer.

Any ambulance services adopting the authority and protocols under this bill shall have a memorandum of understanding with local law enforcement agencies to achieve a collaborative and coordinated response to patients displaying a likelihood of serious harm to themselves or others or significant incapacitation by alcohol or drugs (Sections 190.103 and 190.147).

#### DISCIPLINARY INVESTIGATIONS

Currently, licensed EMS providers who are the subjects of disciplinary investigations are instructed that they are not entitled to have holders of certain certificates, permits, or licenses present at an interview. This bill removes this prohibition. Additionally, the bill provides that the Administrative Hearing Commission shall hear all relevant evidence on remediation activities of the licensee and shall make a recommendation to the Department of Health and Senior Services as to licensure disposition based on such evidence (Section 190.165).

#### EMS RECORDS

This bill provides that any information regarding the physical or mailing address, phone number, fax number, or email address of a licensed ambulance service or certified training entity shall not be considered confidential.

Nothing in this provision shall prohibit the Department of Health and Senior Services from releasing certain aggregate information in accordance with state law (Section 190.173).

#### EMS PERSONNEL LICENSURE INTERSTATE COMPACT

This bill authorizes Missouri to become a member state of the "Recognition of EMS Personnel Licensure Interstate Compact" and to adopt the provisions of authorization as specified in the bill. The purpose of the compact is to facilitate the exchange of information between member states regarding EMS personnel licensure, adverse actions, and significant investigatory information.

Applicants for initial licensure as an emergency medical technician submitted after the recognition of the compact shall submit to a background check as provided in the bill.

A home state's license authorizes an individual to practice in a remote state under the privilege to practice if the home state meets certain requirements.

If an individual's license in any home state or privilege to practice in any remote state is restricted, suspended, or revoked, the individual shall not be eligible to practice in any remote state until his or her home state license or privilege to practice is restored.

The circumstances under which an individual may practice in a remote state in the performance of emergency medical services are set forth in the bill, in conjunction with any rules created by the Interstate Commission for EMS Personnel Practice.

The Interstate Commission for EMS Personnel Practice has powers as set forth in the bill, including the collection of an annual assessment from member states. The commission shall meet at least once during each calendar year. The commission may hold closed meetings to discuss matters as specified in the bill.

The commission shall prescribe bylaws and rules to carry out the purposes and exercise the powers of the compact. The powers and duties of the commission are set forth in the bill.

Any member state may withdraw from the compact by enacting a statute repealing the same. A member state's withdrawal does not take effect until six months after enactment of the repealing statute (Sections 190.142 and 190.900 to 190.939).

#### PHYSICAL RESTRAINTS USED ON PREGNANT OR POSTPARTUM OFFENDERS

Currently, a correctional center or city or county jail in a charter county or in St. Louis is prohibited from using restraints on a pregnant offender in her third trimester during transportation, medical appointments, labor, or 48 hours post delivery, unless extraordinary circumstances exist. Extraordinary circumstances occur when the offender is a substantial flight risk or restraints must be used to ensure the safety of the offender or others. When restraints are used, they must be the least restrictive and reasonable under the circumstances. Additionally, the corrections officer, sheriff, or jailer who determined that the restraints were necessary must document the incident within 48 hours. If a health care provider requests for restraints to not be used, then the corrections officer, sheriff, or jailer must remove all restraints.

The Sentencing and Corrections Oversight Commission and the Advisory Committee shall conduct biannual reviews of every report written on incidents where restraints were used by a corrections officer.

Correctional centers and city and county jails shall ensure that employees are trained on the use of restraints for pregnant and postpartum offenders. Furthermore, the facilities must inform female offenders of procedures regarding care and custody of pregnant offenders and place such procedures in a common place (Sections 217.151 and 221.520).

PROPONENTS: Supporters say that ambulances often have to drive through multiple states. They transport patients from hospitals in one state to hospitals in another state. In areas near state lines, the closest ambulance needs to be able to respond to an emergency without worrying about in which state it occurred. This bill would ensure that first responders do not need to be licensed in every state, so long as the state they are operating in is part of this compact.

Testifying for the bill were Senator Hegeman; Metro West Fire Protection District; Greg Carrell, Assistant State Fire Marshal; Representative Sara Walsh; Missouri Catholic Conference; Campaign Life Missouri; Dymond E. Bradley, Jr (Gene), Atchison-Holt Ambulance District; Ambulance District Association of Missouri; Missouri Ambulance Association; Missouri State Council of Firefighters; Frank Foster, EMS Legal Service; Mark Alexander, Missouri Ambulance Association; and Emergency Medical Services - Cox Health.

OPPONENTS: There was no opposition voiced to the committee.