House _____ Amendment NO.____

	Offered By
1 2 3	AMEND House Committee Substitute for Senate Bill No. 1039, Page 12, Section 161.264, Line 55, by inserting after all of said section and line the following:
4	"190.053. 1. All members of the board of directors of an ambulance district first elected on
5	or after January 1, 2008, shall attend and complete an educational seminar or conference or other
6	suitable training on the role and duties of a board member of an ambulance district. The training
7	required under this section shall be offered by a statewide association organized for the benefit of
8	ambulance districts or be approved by the state advisory council on emergency medical services.
9	Such training shall include, at a minimum:
10	(1) Information relating to the roles and duties of an ambulance district director;
11	(2) A review of all state statutes and regulations relevant to ambulance districts;
12	(3) State ethics laws;
13	(4) State sunshine laws, chapter 610;
14	(5) Financial and fiduciary responsibility;
15	(6) State laws relating to the setting of tax rates; and
16	(7) State laws relating to revenue limitations.
17	2. [If any ambulance district board member fails to attend a training session within twelve
18	months after taking office, the board member shall not be compensated for attendance at meetings
19	thereafter until the board member has completed such training session. If any ambulance district
20	board member fails to attend a training session within twelve months of taking office regardless of
21	whether the board member received an attendance fee for a training session, the board member shall
22	be ineligible to run for reelection for another term of office until the board member satisfies the
23	training requirement of this section; however, this requirement shall only apply to board members
24	elected after August 28, 2022] All members of the board of directors of an ambulance district shall
25	complete three hours of continuing education for each term of office. The continuing education
26	shall be offered by a statewide association organized for the benefit of ambulance districts or be
27	approved by the state advisory council on emergency medical services.
28	3. Any ambulance district board member who fails to complete the initial training and
29	continuing education requirements on or before the anniversary date of the member's election or
30	appointment as required under this section shall immediately be disqualified from office. Upon

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1	such disqualification, the member's position shall be deemed vacant without further process or
2	declaration. The vacancy shall be filled in the manner provided for in section 190.052.
3	190.076. In addition to the annual audit required under section 190.075, each ambulance
4	district shall, at least once every three years, arrange for a certified public accountant or a firm of
5	certified public accountants to audit the records and accounts of the district. The audit shall be
6	made freely available to the public on the district's website or by other electronic means.
7	190.098. 1. As used in this section, the term "community paramedic services" means
8	services that are:
9	(1) Provided by any entity that:
10	(a) Employs licensed paramedics who are certified as community paramedics by the
11	department; and
12	(b) Has received an endorsement by the department as a community paramedic service
13	entity;
14	(2) Provided in a nonemergent setting, independent of a 911 system or emergency
15	<u>summons;</u>
16	(3) Consistent with the training and education, as well as within the scope of skill and
17	practice, of the personnel and with the supervisory standard approved by the medical director; and
18	(4) Reflected and documented in the entity's patient care plans or protocols approved by the
19	medical director in accordance with section 190.142.
20	2. In order for a person to be eligible for certification by the department as a community
21	paramedic, an individual shall:
22	(1) Be currently [certified] licensed as a paramedic;
23	(2) Successfully complete or have successfully completed a community paramedic
24	certification program from a college, university, or educational institution that has been approved by
25	the department or accredited by a national accreditation organization approved by the department;
26	and
27	(3) Complete an application form approved by the department.
28	2.A community paramedic shall practice in accordance with protocols and supervisory
29	standards established by the medical director. A community paramedic shall provide services of a
30	health care plan if the plan has been developed by the patient's physician or by an advanced practice
31	registered nurse through a collaborative practice arrangement with a physician or a physician
32	assistant through a collaborative practice arrangement with a physician and there is no duplication
33	of services to the patient from another provider.]
34	3. [Any ambulance service shall enter into a written contract to provide community
35	paramedic services in another ambulance service area, as that term is defined in section 190.100.
36	The contract that is agreed upon may be for an indefinite period of time, as long as it includes at
37	least a sixty-day cancellation notice by either ambulance service] (1) Any ambulance service that
38	seeks to provide community paramedic services outside of its ambulance service area, as described
39	in section 190.105 and administered by the department, and in the service area of another ambulance

service that currently provides community paramedic services shall be required to have a 1 2 memorandum of understanding with that ambulance service regarding the provision of such 3 community paramedic services. An ambulance service that provides community paramedic services 4 may provide community paramedic services without a memorandum of understanding in the 5 ambulance service area of an ambulance service that is not providing community paramedic 6 services, but the ambulance service providing community paramedic services shall provide 7 notification to the ambulance service with emergency service responsibilities in the service area of 8 the general community paramedic activities being performed. 9 (2) Any emergency medical response agency seeking to provide community paramedic 10 services within its designated response service area may do so if the ground ambulance service covering the area within which the emergency medical response agency is located does not provide 11 community paramedic services. If such ground ambulance service does provide community 12 13 paramedic services, the ground ambulance service may establish, at its sole discretion, a 14 memorandum of understanding with the emergency medical response agency planning to offer 15 community paramedic services in order to coordinate programs and avoid service duplication. If an emergency medical response agency is providing community paramedic services in a service area 16 17 before the ground ambulance service in that service area begins offering community paramedic 18 services, the emergency medical response agency and the ground ambulance service shall establish a 19 memorandum of understanding for the coordination of services. 20 (3) A community paramedic program shall notify the appropriate local ambulance service 21 when providing services within the service area of an ambulance service. 22 (4) The department shall establish regulations for the purpose of recognizing community 23 paramedic service entities that have met the standards necessary to provide community paramedic services, including physician medical oversight, training, patient record keeping, formal 24 relationships with primary care services where necessary, and quality improvement policies. The 25 26 department shall issue an endorsement to any community paramedic service entity that meets such standards that allows the entity to provide community paramedic services for a period of five years. 27 4. A community paramedic is subject to the provisions of sections 190.001 to 190.245 and 28 rules promulgated under sections 190.001 to 190.245. 29 30 5. No person shall hold himself or herself out as a community paramedic or provide the 31 services of a community paramedic unless such person is certified by the department. 32 6. The medical director shall approve the implementation of the community paramedic 33 program. 34 7. Any rule or portion of a rule, as that term is defined in section 536.010, that is created 35 under the authority delegated in this section shall become effective only if it complies with and is 36 subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to 37 38 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently

1	held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after
2	August 28, 2013, shall be invalid and void.
3	190.101. 1. There is hereby established a "State Advisory Council on Emergency Medical
4	Services" which shall consist of [sixteen] no fewer than thirteen members[, one of which shall be a
5	resident of a city not within a county]. The members of the council shall be appointed [by the
6	governor with the advice and consent of the senate and] as follows:
7	(1) One member with a background in mobile integrated health care and community
8	paramedicine shall be appointed by the director of the department of health and senior services from
9	the recommendations described in subdivision (4) of this subsection;
10	(2) One member shall be appointed by each regional EMS advisory committee;
11	(3) One member, who shall be a member of the time-critical diagnosis advisory committee,
12	shall be appointed by the time-critical diagnosis advisory committee; and
13	(4) All other members shall be appointed by the director of the department of health and
14	senior services from recommendations provided by:
15	(a) A statewide professional association representing ambulance service managers;
16	(b) A statewide professional association representing emergency medical technicians and
17	paramedics;
18	(c) A statewide professional association representing ambulance districts;
19	(d) A statewide professional association representing fire chiefs;
20	(e) A statewide professional association representing fire protection districts;
21	(f) A statewide professional association representing firefighters;
22	(g) A statewide professional association representing emergency nurses;
23	(h) A statewide professional association representing the air ambulance industry;
24	(i) A statewide professional association representing emergency medical services
25	physicians;
26	(j) A statewide association representing hospitals; and
27	(k) A statewide association representing pediatric emergency professionals.
28	2. The members of the council shall serve terms of four years. The [governor] council shall
29	[designate] annually elect one of [the] its members as chairperson and may elect other officers as
30	deemed necessary. The chairperson may appoint subcommittees that include noncouncil members.
31	[2.] 3. The state EMS medical directors advisory committee and the regional EMS advisory
32	committees will be recognized as subcommittees of the state advisory council on emergency
33	medical services.
34	[3.] 4. The council shall have geographical representation and representation from
35	appropriate areas of expertise in emergency medical services including volunteers, professional
36	organizations involved in emergency medical services, EMT's, paramedics, nurses, firefighters,
37	physicians, ambulance service administrators, hospital administrators and other health care
38	providers concerned with emergency medical services. [The regional EMS advisory committees

shall serve as a resource for the identification of potential members of the state advisory council on
 emergency medical services.

3 4.] <u>5.</u> The state EMS medical director, as described under section 190.103, shall serve as an
4 ex officio member of the council.

5 [5.] <u>6.</u> The members of the council and subcommittees shall serve without compensation 6 except that members of the council shall, subject to appropriations, be reimbursed for reasonable 7 travel expenses and meeting expenses related to the functions of the council.

8 [6-] 7. The purpose of the council is to make recommendations to the governor, the general 9 assembly, and the department on policies, plans, procedures and proposed regulations on how to 10 improve the statewide emergency medical services system. The council shall advise the governor, 11 the general assembly, and the department on all aspects of the emergency medical services system.

12 [7.] 8. (1) There is hereby established a standing subcommittee of the council to monitor 13 the implementation of the recognition of the EMS personnel licensure interstate compact under 14 sections 190.900 to 190.939, the interstate commission for EMS personnel practice, and the 15 involvement of the state of Missouri. The subcommittee shall meet at least biannually and receive 16 reports from the Missouri delegate to the interstate commission for EMS personnel practice. The 17 subcommittee shall consist of at least seven members appointed by the chair of the council, to 18 include at least two members as recommended by the Missouri state council of firefighters and one 19 member as recommended by the Missouri Association of Fire Chiefs. The subcommittee may 20 submit reports and recommendations to the council, the department of health and senior services, 21 the general assembly, and the governor regarding the participation of Missouri with the recognition 22 of the EMS personnel licensure interstate compact.

(2) The subcommittee shall formally request a public hearing for any rule proposed by the
interstate commission for EMS personnel practice in accordance with subsection 7 of section
190.930. The hearing request shall include the request that the hearing be presented live through the
internet. The Missouri delegate to the interstate commission for EMS personnel practice shall be
responsible for ensuring that all hearings, notices of, and related rulemaking communications as
required by the compact be communicated to the council and emergency medical services personnel
under the provisions of subsections 4, 5, 6, and 8 of section 190.930.

(3) The department of health and senior services shall not establish or increase fees for
 Missouri emergency medical services personnel licensure in accordance with this chapter for the
 purpose of creating the funds necessary for payment of an annual assessment under subdivision (3)
 of subsection 5 of section 190.924.

34 [8-] 9. The council shall consult with the time-critical diagnosis advisory committee, as
 35 described under section 190.257, regarding time-critical diagnosis.

190.109. 1. The department shall, within a reasonable time after receipt of an application,
 cause such investigation as the department deems necessary to be made of the applicant for a ground
 ambulance license.

2. Any person that owned and operated a licensed ambulance on December 31, 1997, shall receive an ambulance service license from the department, unless suspended, revoked or terminated, for that ambulance service area which was, on December 31, 1997, described and filed with the department as the primary service area for its licensed ambulances on August 28, 1998, provided that the person makes application and adheres to the rules and regulations promulgated by the department pursuant to sections 190.001 to 190.245.

7 3. The department shall issue a new ground ambulance service license to an ambulance 8 service that is not currently licensed by the department, or is currently licensed by the department 9 and is seeking to expand its ambulance service area, except as provided in subsection 4 of this 10 section, to be valid for a period of five years, unless suspended, revoked or terminated, when the director finds that the applicant meets the requirements of ambulance service licensure established 11 12 pursuant to sections 190.100 to 190.245 and the rules adopted by the department pursuant to 13 sections 190.001 to 190.245. In order to be considered for a new ambulance service license, an 14 ambulance service shall submit to the department a letter of endorsement from each ambulance 15 district or fire protection district that is authorized to provide ambulance service, or from each 16 municipality not within an ambulance district or fire protection district that is authorized to provide 17 ambulance service, in which the ambulance service proposes to operate. If an ambulance service 18 proposes to operate in unincorporated portions of a county not within an ambulance district or fire 19 protection district that is authorized to provide ambulance service, in order to be considered for a 20 new ambulance service license, the ambulance service shall submit to the department a letter of 21 endorsement from the county. Any letter of endorsement required pursuant to this section shall 22 verify that the political subdivision has conducted a public hearing regarding the endorsement and 23 that the governing body of the political subdivision has adopted a resolution approving the 24 endorsement. The letter of endorsement shall affirmatively state that the proposed ambulance 25 service:

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(1) Will provide a benefit to public health that outweighs the associated costs;

- (2) Will maintain or enhance the public's access to ambulance services;
- (3) Will maintain or improve the public health and promote the continued development ofthe regional emergency medical service system;
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(4) Has demonstrated the appropriate expertise in the operation of ambulance services; and

- (5) Has demonstrated the financial resources necessary for the operation of the proposed
 ambulance service.
- 4. A contract between a political subdivision and a licensed ambulance service for the
 provision of ambulance services for that political subdivision shall expand, without further action by
 the department, the ambulance service area of the licensed ambulance service to include the
 jurisdictional boundaries of the political subdivision. The termination of the aforementioned
 contract shall result in a reduction of the licensed ambulance service's ambulance service area by
 removing the geographic area of the political subdivision from its ambulance service area, except

1	that licensed ambulance service providers may provide ambulance services as are needed at and
2	around the state fair grounds for protection of attendees at the state fair.
3	5. The department shall renew a ground ambulance service license if the applicant meets the
4	requirements established pursuant to sections 190.001 to 190.245, and the rules adopted by the
5	department pursuant to sections 190.001 to 190.245.
6	6. The department shall promulgate rules relating to the requirements for a ground
7	ambulance service license including, but not limited to:
8	(1) Vehicle design, specification, operation and maintenance standards;
9	(2) Equipment requirements;
10	(3) Staffing requirements;
11	(4) Five-year license renewal;
12	(5) Records and forms;
13	(6) Medical control plans;
14	(7) Medical director qualifications;
15	(8) Standards for medical communications;
16	(9) Memorandums of understanding with emergency medical response agencies that provide
17	advanced life support;
18	(10) Quality improvement committees; [and]
19	(11) Response time, patient care and transportation standards;
20	(12) Participation with regional EMS advisory committees; and
21	(13) Ambulance service administrator qualifications.
22	7. Application for a ground ambulance service license shall be made upon such forms as
23	prescribed by the department in rules adopted pursuant to sections 190.001 to 190.245. The
24	application form shall contain such information as the department deems necessary to make a
25	determination as to whether the ground ambulance service meets all the requirements of sections
26	190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 190.245.
27	190.112. 1. Each ambulance service licensed under sections 190.001 to 190.245 shall
28	identify to the department an individual as the ambulance service administrator, who shall be
29	responsible for the operations and staffing of the ambulance service.
30	2. Any individual identified as the ambulance service administrator under subsection 1 of
31	this section shall be required to have achieved basic training of at least forty hours regarding the
32	operations of an ambulance service and to complete two hours of annual continuing education to
33	maintain the individual's status as the ambulance service administrator.
34	3. The training required under this section shall be offered by a statewide association
35	organized for the benefit of ambulance districts or be approved by the state advisory council on
36	emergency medical services. Such training shall include information on:
37	(1) Basic principles of accounting and economics;
38	(2) State and federal laws applicable to ambulance services;
39	(3) Regulatory requirements applicable to ambulance services;

1	(4) Human resources management and laws;
2	(5) Grant writing, contracts, and fundraising;
3	(6) The state sunshine law requirements under chapter 610 and state ethics laws; and
4	(7) Volunteer and community involvement.
5	4. Any individual serving as an ambulance service administrator as of August 28, 2024,
6	shall have until January 1, 2026, to meet the training requirements of this section.
7	190.166. 1. In addition to the grounds for disciplinary action described in section 190.165,
8	the department may refuse to issue, deny renewal of, or suspend a license required under section
9	190.109, or take other corrective actions as described in this section, based on any of the following
10	considerations:
11	(1) The license holder is determined to be financially insolvent;
12	(2) The ambulance service has inadequate personnel to operate the ambulance service to
13	provide basic emergency operations. The ambulance service shall not be deemed to have such
14	inadequate personnel as long as the ambulance service has the ability to staff a minimum of one
15	ambulance unit twenty-four hours each day, seven days each week, with at least two licensed
16	emergency medical technicians, and has a reasonable plan and schedule for the services of a second
17	ambulance unit;
18	(3) The ambulance service requires an inordinate amount of mutual aid from neighboring
19	services, such as more than ten percent of the total runs in the jurisdiction in any given month or
20	more than would be considered prudent, and thus cannot provide an appropriate level of emergency
21	response for the service area that would be considered prudent by the typical operator of emergency
22	ambulance services;
23	(4) The principal manager or a board member or executive of the ambulance service is
24	determined to be criminally liable for actions related to the license or service provided;
25	(5) The license holder or principal manager or a board member or other executive of the
26	ambulance service is determined by the Centers for Medicare and Medicaid Services to be ineligible
27	for participation in Medicare;
28	(6) The license holder or principal manager or a board member or other executive of the
29	ambulance service is determined by the MO HealthNet division to be ineligible for participation in
30	the MO HealthNet program;
31	(7) The ambulance service administrator has failed to meet the required qualifications or
32	failed to complete the training required in section 190.112; or
33	(8) If the ambulance service is an ambulance district, three or more board members have
34	failed to complete the training required in section 190.053.
35	2. If the department determines an ambulance service is financially insolvent or its
36	operations are insufficient as described in subsection 1 of this section, the department may require
37	the license holder to submit a corrective action plan within fifteen days and require implementation
38	of such corrective action plan within thirty days.

1	3. The department shall provide notice of any determination of insolvency or insufficiency
2	of operations of a license holder by the department to:
3	(1) Other license holders operating in the license holder's vicinity;
4	(2) Members of the general assembly who represent all or part of the license holder's service
5	area;
6	(3) The governing officials of any county or municipal entity in the license holder's service
7	area;
8	(4) The appropriate regional EMS advisory committee; and
9	(5) The state advisory council on emergency medical services.
10	4. Upon taking any corrective action under this section, the department shall immediately
11	engage with other license holders in the affected area to determine the extent to which ground
12	ambulance service may be provided to the affected service area during the time in which the
13	provisional or affected license holder is unable to provide adequate services, including any long-
14	term service arrangements. The holder of a provisional or suspended license may enter into an
15	agreement with other license holders to provide services to the affected area. Such agreement may
16	be in the form of an agreement to provide services, a joint powers agreement, formal consideration,
17	or payment for services rendered.
18	5. Any ambulance service operator who provides assistance in the service area of another
19	ambulance service operator whose license to operate has been suspended under this section shall
20	have the right to seek reasonable compensation from the ambulance service operator whose license
21	to operate has been suspended under this section for all calls, stand-by time, and responses to
22	medical emergencies during such time the license remains suspended. The reasonable
23	compensation shall not be limited to only those expenses incurred in actual responses, but may
24	include reasonable expenses to maintain the ambulance service including, but not limited to, the
25	daily operation costs of maintaining the service, personnel wages and benefits, equipment purchases
26	and maintenance, and other costs incurred in the operation of an ambulance service. The ambulance
27	service operator providing assistance shall be entitled to an award of costs and reasonable attorney's
28	fees in any action to enforce the provisions of this section.
29	190.174. Any person licensed under sections 190.001 to 190.245 shall be considered a
30	health care professional for purposes of section 537.035, and any quality improvement or quality
31	assurance activity required under sections 190.001 to 190.245 shall be considered an activity of a
32	peer review committee for purposes of section 537.035."; and
33 34	Further amend said bill by amending the title, enacting clause, and intersectional references
35	accordingly.