

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By

1 AMEND House Committee Substitute for House Bill No. 991, Page 1, Section A, Line 2, by  
2 inserting after all of said section and line the following:  
3

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 his or her election or  
30 appointment shall immediately be disqualified from office and his or her position shall be vacant

Action Taken \_\_\_\_\_ Date \_\_\_\_\_

without further process or declaration. The vacancy shall be filled in the manner provided for pursuant to section 190.052.

190.076. Each ambulance district shall arrange for an audit of the records and accounts of the district at least every three years by a certified public accountant or firm of certified public accountants. The audit shall be made available to the public on the district's website or otherwise freely available by other electronic means.

190.098. 1. As used in this section, the term "community paramedic services" shall mean services provided by any entity that employs licensed paramedics who are certified by the department as community paramedics for services that are:

(1) Provided in a nonemergent setting that is independent of an emergency telephone service, 911 system, or emergency summons;

(2) Consistent with the training and education requirements described in subdivision (2) of subsection 2 of this section, the scope of skill and practice for community paramedics, and the supervisory standard approved by the entity's medical director; and

(3) Reflected and documented in the entity's patient care plans or protocols approved by the medical director in accordance with the provisions of section 190.142.

2. In order for a person to be eligible for certification by the department as a community paramedic, an individual shall:

(1) Be currently ~~certified~~ licensed as a paramedic;

(2) Successfully complete or have successfully completed a community paramedic certification program from a college, university, or educational institution that has been approved by the department or accredited by a national accreditation organization approved by the department; and

(3) Complete an application form approved by the department.

~~[2-]~~ 3. A community paramedic shall practice in accordance with protocols and supervisory standards established by the medical director. A community paramedic shall provide services of a health care plan if the plan has been developed by the patient's physician or by an advanced practice registered nurse through a collaborative practice arrangement with a physician or a physician assistant through a collaborative practice arrangement with a physician and there is no duplication of services to the patient from another provider.

~~[3-]~~ 4. (1) Any ambulance service shall enter into a written contract to provide community paramedic services in another ambulance service area, as that term is defined in section 190.100. The contract that is agreed upon may be for an indefinite period of time, as long as it includes at least a sixty-day cancellation notice by either ambulance service.

(2) Any ambulance service that seeks to provide community paramedic services outside of the ambulance service's service area:

(a) Shall have a memorandum of understanding regarding the provision of such services with the ambulance service in that service area if that ambulance service is already providing community paramedic services; or

(b) Shall not be required to have a memorandum of understanding with the ambulance service in that service area if that ambulance service is not already providing community paramedic services, provided that the ambulance service seeking to provide such services shall provide notification to the other ambulance service of the community paramedic services to be provided.

(3) Any emergency medical response agency that seeks to provide community paramedic services within its designated response service area may do so if the ground ambulance service area within which the emergency medical response agency operates does not already provide such services. If the ground ambulance service does provide community paramedic services, the ground ambulance service may enter into a memorandum of understanding with the emergency medical response agency in order to coordinate programs and avoid service duplication. If the emergency medical response agency provides community paramedic services in the ground ambulance service's service area prior to the provision of such services by the ground ambulance service, the emergency medical response agency and the ground ambulance service shall enter into a memorandum of understanding for the coordination of services.

(4) Any community paramedic program shall notify the appropriate local ambulance service when providing services within the service area of an ambulance service.

(5) The department shall promulgate rules and regulations for the purpose of identifying the community paramedic services entities that have met the standards necessary to provide community paramedic services including, but not limited to, physician medical oversight, training, patient record retention, formal relationships with primary care services as needed, and quality improvement policies. Community paramedic services entities shall be certified by the department. Any such certification shall allow the entity to provide community paramedic services for a period of five years.

[4-] 5. A community paramedic is subject to the provisions of sections 190.001 to 190.245 and rules promulgated under sections 190.001 to 190.245.

[5-] 6. No person shall hold himself or herself out as a community paramedic or provide the services of a community paramedic unless such person is certified by the department.

[6-] 7. The medical director shall approve the implementation of the community paramedic program.

[7-] 8. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is 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 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be invalid and void.

190.101. 1. There is hereby established a "State Advisory Council on Emergency Medical Services" which shall consist of ~~[sixteen]~~ no more than twenty-three members, one of which shall be ~~[a resident]~~ the chief paramedic of a city not within a county. The members of the council shall be

1 appointed ~~[by the governor with the advice and consent of the senate]~~ in accordance with subsection  
 2 2 of this section and shall serve terms of four years. The ~~[governor shall designate one of the~~  
 3 ~~members as chairperson]~~ council members shall annually select a chairperson, along with other  
 4 officers as the council deems necessary. The chairperson may appoint subcommittees that include  
 5 noncouncil members.

6 2. Council members shall be appointed as follows:

7 (1) The director of the department of health and senior services shall make appointments to  
 8 the council from the recommendations provided by the following:

9 (a) The statewide professional association representing ambulance service managers;

10 (b) The statewide professional association representing emergency medical technicians and  
 11 paramedics;

12 (c) The statewide professional association representing ambulance districts;

13 (d) The statewide professional association representing fire chiefs;

14 (e) The statewide professional association representing fire protection districts;

15 (f) The statewide professional association representing firefighters;

16 (g) The statewide professional association representing emergency nurses;

17 (h) The statewide professional association representing the air ambulance industry;

18 (i) The statewide professional association representing emergency medicine physicians;

19 (j) The statewide association representing hospitals; and

20 (k) The statewide association representing pediatric emergency professionals;

21 (2) The director of health and senior services shall appoint a member to the council with a  
 22 background in mobile integrated health care-community paramedicine (MIH-CP);

23 (3) Each regional EMS advisory committee shall appoint one member; and

24 (4) The time-critical diagnosis advisory committee established under section 190.257 shall  
 25 appoint one member.

26 3. The state EMS medical directors advisory committee and the regional EMS advisory  
 27 committees will be recognized as subcommittees of the state advisory council on emergency  
 28 medical services.

29 [3.] 4. The council shall have geographical representation and representation from  
 30 appropriate areas of expertise in emergency medical services including volunteers, professional  
 31 organizations involved in emergency medical services, EMT's, paramedics, nurses, firefighters,  
 32 physicians, ambulance service administrators, hospital administrators and other health care  
 33 providers concerned with emergency medical services. [The regional EMS advisory committees  
 34 shall serve as a resource for the identification of potential members of the state advisory council on  
 35 emergency medical services.

36 4.] 5. The state EMS medical director, as described under section 190.103, shall serve as an  
 37 ex officio member of the council.

1       ~~[5-]~~ 6. The members of the council and subcommittees shall serve without compensation  
2 except that members of the council shall, subject to appropriations, be reimbursed for reasonable  
3 travel expenses and meeting expenses related to the functions of the council.

4       ~~[6-]~~ 7. The purpose of the council is to make recommendations to the governor, the general  
5 assembly, and the department on policies, plans, procedures and proposed regulations on how to  
6 improve the statewide emergency medical services system. The council shall advise the governor,  
7 the general assembly, and the department on all aspects of the emergency medical services system.

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

19       (2) The subcommittee shall formally request a public hearing for any rule proposed by the  
20 interstate commission for EMS personnel practice in accordance with subsection 7 of section  
21 190.930. The hearing request shall include the request that the hearing be presented live through the  
22 internet. The Missouri delegate to the interstate commission for EMS personnel practice shall be  
23 responsible for ensuring that all hearings, notices of, and related rulemaking communications as  
24 required by the compact be communicated to the council and emergency medical services personnel  
25 under the provisions of subsections 4, 5, 6, and 8 of section 190.930.

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

30       ~~[8-]~~ 9. The council shall consult with the time-critical diagnosis advisory committee, as  
31 described under section 190.257, regarding time-critical diagnosis.

32       190.109. 1. The department shall, within a reasonable time after receipt of an application,  
33 cause such investigation as the department deems necessary to be made of the applicant for a ground  
34 ambulance license.

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

1 department pursuant to sections 190.001 to 190.245.

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

- 21 (1) Will provide a benefit to public health that outweighs the associated costs;
- 22 (2) Will maintain or enhance the public's access to ambulance services;
- 23 (3) Will maintain or improve the public health and promote the continued development of  
24 the regional emergency medical service system;
- 25 (4) Has demonstrated the appropriate expertise in the operation of ambulance services; and
- 26 (5) Has demonstrated the financial resources necessary for the operation of the proposed  
27 ambulance service.

28 4. A contract between a political subdivision and a licensed ambulance service for the  
29 provision of ambulance services for that political subdivision shall expand, without further action by  
30 the department, the ambulance service area of the licensed ambulance service to include the  
31 jurisdictional boundaries of the political subdivision. The termination of the aforementioned  
32 contract shall result in a reduction of the licensed ambulance service's ambulance service area by  
33 removing the geographic area of the political subdivision from its ambulance service area, except  
34 that licensed ambulance service providers may provide ambulance services as are needed at and  
35 around the state fair grounds for protection of attendees at the state fair.

36 5. The department shall renew a ground ambulance service license if the applicant meets the  
37 requirements established pursuant to sections 190.001 to 190.245, and the rules adopted by the  
38 department pursuant to sections 190.001 to 190.245.

39 6. The department shall promulgate rules relating to the requirements for a ground

1 ambulance service license including, but not limited to:

- 2 (1) Vehicle design, specification, operation and maintenance standards;
- 3 (2) Equipment requirements;
- 4 (3) Staffing requirements;
- 5 (4) Five-year license renewal;
- 6 (5) Records and forms;
- 7 (6) Medical control plans;
- 8 (7) Medical director qualifications;
- 9 (8) Standards for medical communications;
- 10 (9) Memorandums of understanding with emergency medical response agencies that provide
- 11 advanced life support;
- 12 (10) Quality improvement committees; ~~and~~
- 13 (11) Response time, patient care and transportation standards;
- 14 (12) Participation with regional emergency medical services advisory committees; and
- 15 (13) Ambulance service administrator qualifications.

16 7. Application for a ground ambulance service license shall be made upon such forms as  
 17 prescribed by the department in rules adopted pursuant to sections 190.001 to 190.245. The  
 18 application form shall contain such information as the department deems necessary to make a  
 19 determination as to whether the ground ambulance service meets all the requirements of sections  
 20 190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 190.245.

21 190.112. 1. Each ambulance service licensed under this chapter shall identify to the  
 22 department the individual serving as the ambulance service administrator who is responsible for the  
 23 operations and staffing of the ambulance service. The ambulance service administrator shall be  
 24 required to have achieved basic training of at least forty hours regarding the operations of an  
 25 ambulance service and two hours of annual continuing education. The training required under this  
 26 section shall be offered by a statewide association organized for the benefit of ambulance districts or  
 27 be approved by the state advisory council on emergency medical services and shall include the  
 28 following:

- 29 (1) Basic principles of accounting and economics;
- 30 (2) State and federal laws applicable to ambulance services;
- 31 (3) Regulatory requirements applicable to ambulance services;
- 32 (4) Human resources management and laws;
- 33 (5) Grant writing, contracts, and fundraising;
- 34 (6) State sunshine laws in chapter 610, as well as applicable ethics requirements; and
- 35 (7) Volunteer and community involvement.

36 2. Ambulance service administrators serving in this capacity as of August 28, 2025, shall  
 37 have until January 1, 2026, to demonstrate compliance with the provisions of this section.

38 190.166. 1. In addition to the provisions of section 190.165, the department of health and  
 39 senior services may refuse to issue, deny renewal of, or suspend a license required pursuant to

1 section 190.109, or take other corrective actions as described in this section, based on the following  
2 considerations:

3 (1) The license holder is determined to be financially insolvent;

4 (2) The ambulance service has inadequate personnel to operate the ambulance service to  
5 provide for basic emergency operations, determined by the ability to staff a minimum of one  
6 ambulance unit twenty-four hours per day, seven days per week, with at least two licensed  
7 emergency medical technicians and a reasonable plan and schedule for the services of a second  
8 ambulance;

9 (3) The ambulance service requires an inordinate amount of mutual aid from neighboring  
10 services, such as more than ten percent of the total runs in the service area in any given month, or  
11 than would be considered prudent and thus cannot provide an appropriate level of emergency  
12 response for the service area as would be considered prudent by the typical ground ambulance  
13 services operator;

14 (4) The principal manager, board members, or other executives are determined to be  
15 criminally liable for actions related to the license or service provided;

16 (5) The license holder or principal manager, board members, or other executives are  
17 determined by the Centers for Medicare and Medicaid Services to be ineligible for participation in  
18 Medicare;

19 (6) The license holder or principal manager, board members, or other executives are  
20 determined by the MO HealthNet division to be ineligible for participation in MO HealthNet;

21 (7) The ambulance service administrator has failed to meet the required qualifications or  
22 failed to complete the training required pursuant to section 190.112; and

23 (8) Three or more board members have failed to complete required training pursuant to  
24 section 190.053 if the ambulance service is an ambulance district.

25 2. If the department makes a determination of insolvency or insufficiency of operations of a  
26 license holder under subsection 1 of this section, then the department may require the license holder  
27 to submit a corrective plan within fifteen days and require implementation of the corrective plan  
28 within thirty days.

29 3. The department shall be required to provide notice of any determination by the  
30 department of insolvency or insufficiency of operations of a license holder to other license holders  
31 operating in the license holder's vicinity, members of the general assembly who represent the license  
32 holder's service area, the governing officials of any county or municipal entity in the license holder's  
33 service area, the appropriate regional emergency medical services advisory committee, and the state  
34 advisory council on emergency medical services.

35 4. The department shall immediately engage with other license holders in the area to  
36 determine the extent to which ground ambulance service may be provided to the affected service  
37 area during the time in which the license holder is unable to provide adequate services, including  
38 any long-term service arrangements. The nature of the agreement between the license holder and  
39 other license holders providing services to the affected area may include an agreement to provide



1 services, a joint powers agreement, formal consideration, or some payment for services rendered.

2 5. Any license holder who provides assistance in the service area of another license holder  
3 whose license has been suspended under this section shall have the right to seek reasonable  
4 compensation from the license holder whose license to operate has been suspended for all calls,  
5 stand-by time, and responses to medical emergencies during such time as the license remains  
6 suspended. The reasonable compensation shall not be limited to those expenses incurred in actual  
7 responses, but may also include reasonable expenses to maintain ambulance service, including, but  
8 not limited to, the daily operation costs of maintaining the service, personnel wages and benefits,  
9 equipment purchases and maintenance, and other costs incurred in the operation of a ground  
10 ambulance service. The license holder providing assistance shall be entitled to an award of costs  
11 and reasonable attorney fees in any action to enforce the provisions of this subsection."; and  
12

13 Further amend said bill by amending the title, enacting clause, and intersectional references  
14 accordingly.