HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: CS/CS/CS/HB 805 Volunteer Ambulance Services

SPONSOR(S): Health & Human Services Committee, Local Administration & Veterans Affairs Subcommittee,

Professions & Public Health Subcommittee, Caruso and others

TIED BILLS: IDEN./SIM. BILLS: SB 1084

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Professions & Public Health Subcommittee	17 Y, 1 N, As CS	Guzzo	McElroy
Local Administration & Veterans Affairs Subcommittee	16 Y, 0 N, As CS	Renner	Miller
3) Health & Human Services Committee	16 Y, 4 N, As CS	Guzzo	Calamas

SUMMARY ANALYSIS

Prehospital life support transport services fall into two general categories – basic life support services (BLS) and advanced life support services (ALS). The Department of Health (DOH) licenses BLS service providers, ALS service providers and air ambulances. To obtain a transport vehicle permit to provide BLS or ALS services, an applicant must meet minimum standards regarding equipment, vehicles, personnel, services, and insurance established by the DOH. BLS and ALS service providers must also obtain a Certificate of Public Convenience and Necessity (COPCN) from the governing board of each county in which the provider plans to operate.

The "Florida Uniform Traffic Control Law" permits the drivers of certain authorized emergency vehicles to disregard specified traffic laws and ordinances and use emergency lights and sirens while responding to an emergency. Such vehicles include vehicles of a fire department, police department, and ambulance and emergency vehicles of municipal and county departments, public service corporations operated by private corporations, and certain state agencies. Current law does not recognize an ambulance providing volunteer ambulance services as an authorized emergency vehicle.

The bill exempts certain faith-based volunteer first responder agencies that have operated for at least 10 consecutive years from the COPCN. The bill prohibits a local government from limiting, prohibiting, or preventing a volunteer ambulance service from responding to an emergency or providing emergency medical services or transport within its jurisdiction. The bill also prohibits a local government from requiring a volunteer ambulance service to obtain a license or certificate or pay a fee to provide ambulance or air ambulance services within its jurisdiction.

The bill allows a volunteer ambulance services vehicle that qualifies as an authorized emergency vehicle to disregard specified traffic laws and ordinances and use emergency lights and sirens while responding to an emergency. The bill also allows a physician or technician of a volunteer ambulance service to disregard specified traffic laws and ordinances and use red lights in their private vehicles when responding to an emergency. The bill requires an emergency medical technician, doctor, or paramedic of a volunteer ambulance service to complete an emergency vehicle operator course before using a red light in their personal vehicle.

The bill declares that it is in the public interest to foster the development of emergency medical services that address religious sensitivities and to recognize the value of augmenting existing county and municipal emergency medical services with those provided by volunteer service organizations.

The bill has no fiscal impact on state or local government.

The bill provides an effective date of July 1, 2021.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives. STORAGE NAME: h0805e.HHS

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Emergency Medical Transport Services

Prehospital life support transport services fall into two general categories: basic life support services (BLS) and advanced life support services (ALS).

BLS services use only basic life support techniques.¹ BLS services include the assessment or treatment by a person qualified under part III of ch. 401, F.S., through the use of techniques described in the EMT-Basic National Standard Curriculum or the National Emergency Medical Services (EMS) Education Standards of the U.S. Department of Transportation.² The term includes the administration of oxygen and other techniques that have been approved and are performed under specific conditions.³ BLS services are usually performed by emergency medical technicians (EMTs).⁴

ALS services include patient assessment or treatment including the implementation of advanced medical skills such as endotracheal intubation, the administration of drugs or intravenous fluids, telemetry, cardiac monitoring, cardiac defibrillation, and other techniques described in the EMT-Paramedic National Standard Curriculum or the National EMS Education Standards.⁵ ALS services can be performed on site and are usually provided by physicians or paramedics.⁶

The Department of Health regulates BLS and ALS transport services under part III of ch. 401, F.S. To obtain a transport vehicle permit to provide BLS or ALS services, an applicant must submit an application and fees to DOH, and provide documentation that the vehicle meets the following: ⁷

- Is furnished with essential medical supplies and equipment which is in good working order;
- Meets appropriate standards for design and construction;
- Is equipped with an appropriate communication system:
- Meets appropriate safety standards;
- Meets sanitation and maintenance standards;
- Is insured for a minimum of \$100,000/\$300,000 against injuries to or the death of any person arising out of an accident; and

Applicants must also possess a certificate of public convenience and necessity (COPCN) issued by a local government.

Certificate of Public Convenience and Necessity

A COPCN is a written statement, issued by the governing board of a county, granting permission for an emergency medical service provider to provide authorized services for the benefit of the population of that county or the benefit of the population of some geographic area of that county.⁸ At the time of licensure, each provider of life support transportation services must have a COPCN from each county

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¹ Section 403.23(8), F.S.

² United States Department of Transportation, National Highway Traffic Safety Administration, *National Emergency Medical Services Education Standards*, (January 2009), *available at https://www.ems.gov/pdf/National-EMS-Education-Standards-FINAL-Jan-2009.pdf* (last visited March 11, 2021).

³ Sections 401.23(7) and (8), F.S.

⁴ Ryynanen, et. al, *Is advanced life support better than basic life support in prehospital care? A systematic review*, Scand J Trauma Resusc. Emerg. Med. 2010; 18: 62, (November 23, 2010), *available at http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3001418/* (last visited March 11, 2021).

⁵ Sections 401.23(1) and (2), F.S.

⁶ Ryynanen, et. al, supra note 18.

⁷ Section 401.26(2), F.S., and Fla. Admin. Code R. 64J-1.002 and 64J-1.003 (2019).

⁸ Rule 64J-1.001(2), F.A.C. **STORAGE NAME**: h0805e.HHS

in which the provider intends to operate. Counties are authorized, but not required, to adopt ordinances establishing standards for issuing a COPCN. 10

Emergency Vehicles

The "Florida Uniform Traffic Control Law"¹¹ provides uniform traffic laws and ordinances applicable throughout the state. The law requires providers of BLS and ALS services to document that each of its drivers has completed an emergency vehicle operator's course approved by DOH.¹² The course must include classroom and behind-the-wheel training on:¹³

- Legal aspects of authorized emergency vehicle operators;
- Selecting routes and reporting emergency operation;
- Defensive driving;
- Accident avoidance;
- Vehicle control;
- Routine vehicle safety checks;
- Braking and control braking;
- Backing up;
- Slaloming;
- Steering technique during a skid; and
- Turn-around-steering.

The law also permits the drivers of certain authorized emergency vehicles to disregard specified traffic laws and ordinances and use emergency lights and sirens while responding to an emergency.¹⁴ The authorized emergency vehicles include vehicles of a fire department, police department, and ambulance and emergency vehicles of:¹⁵

- Municipal and county departments;
- Public service corporations operated by private corporations;
- The Fish and Wildlife Conservation Commission;
- The Department of Environmental Protection:
- The Department of Health;
- The Department of Transportation; and
- The Department of Corrections.

Red or red and white lights may be shown or displayed by vehicles of the fire department and fire patrol, and by a privately owned vehicle belonging to a member of a regularly organized volunteer firefighting company or association, while on their way to the scene of a fire or other emergency in the line of duty.¹⁶

Red lights may be shown or displayed by privately owned vehicles of medical staff physicians or technicians of medical facilities licensed by the state while responding to an emergency in the line of duty, certain ambulances, and certain buses and taxicabs.¹⁷

Drivers of certain vehicles are permitted to disregard specified traffic laws and ordinances while responding to an emergency, including:¹⁸

⁹ Section 401.25(2)(d), F.S.

¹⁰ Section 401.25(6), F.S.

¹¹ See ch. 316, F.S.

¹² Section 401.281(1)(e), F.S.

¹³ Rule 64J-1.013, F.A.C.

¹⁴ Section 316.072(5), F.S.

¹⁵ Section 316.003(1), F.S.

¹⁶ Section 316.2398(1), F.S.

¹⁷ *Id.*

¹⁸ Section 316.072(5), F.S. **STORAGE NAME**: h0805e.HHS

- The driver of an authorized emergency vehicle when responding to an emergency call, when in the pursuit of an actual or suspected violator of the law, or when responding to a fire alarm, but not upon returning from a fire;
- A medical staff physician or technician of a licensed medical facility when responding to an emergency in the line of duty in his or her privately owned vehicle, using red lights;
- The driver of an authorized law enforcement vehicle, when conducting a nonemergency escort, to warn the public of an approaching motorcade.

The driver of a vehicle described above, unless otherwise directed by a police officer may: 19

- Park or stand, regardless of traffic laws and ordinances;
- Proceed past a red light or stop sign, but only after slowing down as may be necessary for safe operation:
- Exceed the maximum speed limits so long as the driver does not endanger life or property; and
- Disregard regulations governing direction or movement or turning in specified directions, as long as the driver does not endanger life or property.

Current law does not recognize an ambulance providing volunteer ambulance services as an authorized emergency vehicle.

Effect of the Bill

Emergency Medical Transport Services

The bill declares that it is in the public interest to foster the development of emergency medical services that address religious sensitivities and to recognize the value of augmenting existing county and municipal emergency medical services with those provided by volunteer service organizations.

The bill expressly authorizes faith-based volunteer first responder agencies in law, and establishes criteria for their operation.

Certificate of Public Convenience and Necessity

The bill maintains the current requirement for BLS and ALS transport providers to obtain a permit from DOH, but exempts these agencies from having to obtain a COPCN from a local government. Specifically, the bill exempts faith-based volunteer first responder agencies from the COPCN requirements if the agency:

- Has been operating in this state for at least 10 years;
- Is not a parent, subsidiary, or affiliate of, or related to any for-profit entity;
- Is a not-for-profit charitable corporation registered under ch. 617, F.S.;
- Uses only unpaid volunteers to provide services;
- Does not operate for pecuniary profit or financial gain, and does not distribute to or inure to the benefit of its directors, volunteers, members, or officers any part of its assets or income;
- Does not receive government funds; and
- Provides a management plan to DOH that includes a training program, complaint management system, accident or injury handling system, quality assurance program, and proof of adequate insurance requirements.

The bill also prohibits a county or municipal government from adopting certain ordinances on a faithbased volunteer ambulance service, if such an ambulance service:

Is a not-for-profit charitable corporation registered under ch. 617, F.S., licensed by DOH as a basic life support service or an advanced life support service;

¹⁹ *Id*.

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- Is not a parent, subsidiary or affiliate, or otherwise related to any for-profit entity;
- Uses only unpaid volunteers to provide services:
- Is not operating for pecuniary profit or financial gain; and
- Does not distribute to or inure to the benefit of its directors, volunteers, members, or officers, any part of its assets or income.

Specifically, the bill prohibits a county or municipal government from limiting, prohibiting, or preventing a volunteer ambulance service from responding to an emergency or providing emergency medical services or transport within its jurisdiction. The bill also prohibits a county or municipal government from requiring a volunteer ambulance service to obtain a license or certificate or pay a fee to provide ambulance or air ambulance services within its jurisdiction.

In the event that a county, municipal or special district operated fire rescue service and a volunteer ambulance service arrive at an emergency scene at the same time, and the patient is incapacitated and without a representative to authorize consent for medical treatment, the bill makes the locally operated fire rescue service responsible for treating and transporting the patient.

Emergency Vehicles

The bill requires an emergency medical technician, doctor, or paramedic of a volunteer ambulance service to complete a 16 hour emergency vehicle operator course before using a red light in their personal vehicle.

The bill allows a volunteer ambulance service vehicle that qualifies as an authorized emergency vehicle to disregard specified traffic laws and ordinances and use emergency lights and sirens while responding to an emergency. The bill also allows medical staff physicians or technicians of a volunteer ambulance service to disregard specified traffic laws and ordinances and use red lights in their privately owned vehicles when responding to an emergency in the line of duty.

The bill provides an effective date of July 1, 2021.

B. SECTION DIRECTORY:

- **Section 1:** Amends s. 316.003, F.S., relating to definitions.
- Section 2: Amends s. 316.072, F.S., relating to obedience to and effect of traffic laws.
- **Section 3:** Amends s. 316.2397, F.S., relating to certain lights prohibited; exceptions.
- **Section 4:** Amends s. 316.2398, F.S., relating to display or use of red or red and white warning signals; motor vehicles of volunteer firefighters or medical staff.
- **Section 5:** Amends s. 401.211, F.S., relating to legislative intent.
- **Section 6:** Amends s. 401.23, F.S., relating to definitions.
- **Section 7:** Amends s. 401.25, F.S., relating to licensure as a basic life support or an advanced life support service.
- **Section 8:** Amends s. 316.306, F.S., relating to school and work zones; prohibition on the use of a wireless communications device in a handheld manner.
- **Section 9:** Provides an effective date of July 1, 2021.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

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B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

Applicability of Municipality/County Mandates Provision:
 Not applicable. The bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

No additional rule-making authority is necessary to implement the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

The bill may present challenges for a county or municipal government (especially during a disaster or mass casualty event) because a volunteer ambulance service is not required to report to or communicate with the county or municipal government. The county or municipal government would have no ability to respond or control the scene in terms of traffic management and staging areas.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

On March 23, 2021, the Professions & Public Health Subcommittee adopted an amendment and reported the bill favorably as a committee substitute. The amendment:

- Required a volunteer ambulance service to be licensed as a basic life support service or an advanced life support service under ch. 401, F.S.
- Prohibited a volunteer ambulance service from being connected or related to any for-profit entities.
- Required volunteer ambulance services to use only unpaid volunteers.

On April 1, 2021, the Local Administration & Veterans Affairs Subcommittee adopted an amendment and reported the bill favorably as a committee substitute. The amendment specified that an emergency medical technician, doctor, or paramedic that is utilizing their personal vehicle with a red light to go to an emergency call must have completed a 16-hour emergency vehicle operator course.

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On April 19, 2021, the Health & Human Services Committee adopted an amendment and reported the bill favorably as a committee substitute. The amendment:

- Prohibited a volunteer ambulance service from being a parent, subsidiary, or affiliate of, or being related to, a for-profit entity.
- Required a faith-based, not-for-profit corporation to also be a charitable not-for-profit corporation to qualify under the bill's provisions.
- Required a volunteer ambulance service to receive no government funding to qualify for the COPCN exemption in the bill.
- Required a volunteer ambulance service to provide a management plan to DOH that includes a
 training program, complaint management system, accident or injury handling system, quality
 assurance program, and proof of adequate insurance coverage to qualify for the COPCN exemption
 in the bill.
- Makes a local government fire rescue service responsible for care and transport of an incapacitated
 patient if the service arrives at an emergency scene at the same time as a volunteer ambulance
 service and no one present can consent to treatment.

The analysis is drafted to the committee substitute as passed by the Health & Human Services Committee.

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