

SECOND REGULAR SESSION

HOUSE BILL NO. 2665

98TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE HUBRECHT.

6638H.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal section 190.103, RSMo, and to enact in lieu thereof one new section relating to regional EMS medical directors.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 190.103, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 190.103, to read as follows:

190.103. 1. One physician with expertise in emergency medical services from each of the EMS regions shall be elected by that region's EMS medical directors to serve as a regional EMS medical director. The regional EMS medical directors shall constitute the state EMS medical director's advisory committee and shall advise the department and their region's ambulance services on matters relating to medical control and medical direction in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. **The state EMS medical director shall be the chair of the state EMS medical director's advisory committee.**

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

3. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall have the responsibility and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration for state and national standards as well as local area needs

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 and resources. The medical director, in cooperation with the ambulance service or emergency
19 medical response agency administrator, shall establish and develop triage, treatment and
20 transport protocols, which may include authorization for standing orders.

21 4. All ambulance services and emergency medical response agencies that are required
22 to have a medical director shall establish an agreement between the service or agency and their
23 medical director. The agreement will include the roles, responsibilities and authority of the
24 medical director beyond what is granted in accordance with sections 190.001 to 190.245 and
25 rules adopted by the department pursuant to sections 190.001 to 190.245. The agreement shall
26 also include grievance procedures regarding the emergency medical response agency or
27 ambulance service, personnel and the medical director.

28 **5. Regional EMS medical directors elected as provided under subsection 1 of this**
29 **section shall be considered public officials for purposes of sovereign immunity, official**
30 **immunity, and the Missouri public duty doctrine defenses.**

31 6. The state EMS medical director's advisory committee shall be considered a peer
32 review committee under section 537.035 and regional EMS medical directors shall be
33 eligible to participate in the Missouri Patient Safety Organization as provided under the
34 Patient Safety and Quality Improvement Act of 2005, 42 U.S.C. section 299 et seq, as
35 amended.

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

42 8. When developing treatment protocols for special needs patients, regional EMS
43 medical directors may promulgate such protocols on a regional basis across multiple
44 political subdivisions' jurisdictional boundaries and such protocols may be used by
45 multiple agencies including, but not limited to, ambulance services, emergency response
46 agencies, and public health departments.

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

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

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

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