1	STATE OF OKLAHOMA
2	2nd Session of the 55th Legislature (2016)
3	SENATE BILL 1567 By: Standridge
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6	AS INTRODUCED
7	An Act relating to the Oklahoma Emergency Response Systems Development Act; amending 63 O.S. 2011,
8	Section 1-2503, as last amended by Section 65, Chapter 229, O.S.L. 2013 (63 O.S. Supp. 2015, Section
9	1-2503), which relates to definitions; expanding definitions to include certain personnel; providing
10	qualifications for certain personnel; amending 63 O.S. 2011, Section 1-2504, as amended by Section 2,
11	Chapter 23, O.S.L. 2013 (63 O.S. Supp. 2015, Section 1-2504), which relates to utilization of certain
12	personnel; amending 63 O.S. 2011, Section 1-2505, as amended by Section 3, Chapter 23, O.S.L. 2013 (63
13	O.S. Supp. 2015, Section 1-2505), which relates to levels of care; expanding authorized personnel to
14 15	<pre>include community paramedics; directing promulgation of rules; providing for codification; and providing an effective date.</pre>
16	an effective date.
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18	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
19	SECTION 1. AMENDATORY 63 O.S. 2011, Section 1-2503, as
20	last amended by Section 65, Chapter 229, O.S.L. 2013 (63 O.S. Supp.
21	2015, Section 1-2503), is amended to read as follows:
22	Section 1-2503. As used in the Oklahoma Emergency Response
23	Systems Development Act:
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1. "Ambulance" means any ground, air or water vehicle which is or should be approved by the Commissioner of Health, designed and equipped to transport a patient or patients and to provide appropriate on-scene and en route patient stabilization and care as required. Vehicles used as ambulances shall meet such standards as may be required by the State Board of Health for approval, and shall display evidence of such approval at all times;

- 2. "Ambulance authority" means any public trust or nonprofit corporation established by the state or any unit of local government or combination of units of government for the express purpose of providing, directly or by contract, emergency medical services in a specified area of the state;
- 3. "Ambulance patient" or "patient" means any person who is or will be transported in a reclining position to or from a health care facility in an ambulance;
- 4. "Ambulance service" means any private firm or governmental agency which is or should be licensed by the State Department of Health to provide levels of medical care, including but not limited to comprehensive integrated medical care in emergency and non-emergency settings under the supervision of a physician or advanced practice registered nurse, based on certification standards promulgated by the Board;
- 5. "Ambulance service district" means any county, group of counties or parts of counties formed together to provide, operate

and finance emergency medical services as provided by Section 9C of

Article X of the Oklahoma Constitution or Sections 1201 through 1221

of Title 19 of the Oklahoma Statutes;

6. "Board" means the State Board of Health;

- 7. "Certified emergency medical responder" means an individual certified by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Board;
- 8. "Certified emergency medical response agency" means an organization of any type certified by the Department to provide emergency medical care, but not transport. Certified emergency medical response agencies may utilize certified emergency medical responders or licensed emergency medical personnel; provided, however, that all personnel so utilized shall function under the direction of and consistent with guidelines for medical control;
- 9. "Classification" means an inclusive standardized identification of stabilizing and definitive emergency services provided by each hospital that treats emergency patients;
- 10. "CoAEMSP" means the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions;
 - 11. "Commissioner" means the State Commissioner of Health;
- 12. "Community paramedic" means a licensed paramedic who meets
 the requirements of Section 1-2505 of this title;

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12. 13. "Council" means the Trauma and Emergency Response Advisory Council created in Section 44 of this act;
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- 13. 14. "Critical care paramedic" or "CCP" means a licensed paramedic who has successfully completed critical care training and testing requirements in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Board;
 - 14. 15. "Department" means the State Department of Health;
- 15. 16. "Emergency medical services system" means a system which provides for the organization and appropriate designation of personnel, facilities and equipment for the effective and coordinated local, regional and statewide delivery of health care services primarily under emergency conditions;
- 16. 17. "Letter of review" means the official designation from CoAEMSP to a paramedic program that is in the "becoming accredited" process;
- 17. 18. "Licensed emergency medical personnel" means an emergency medical technician (EMT), an intermediate, an advanced emergency medical technician (AEMT), or a paramedic licensed by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and the rules and standards promulgated by the Board;
- 18. 19. "Licensure" means the licensing of emergency medical care providers and ambulance services pursuant to rules and

standards promulgated by the Board at one or more of the following levels:

a. Basic life support,

- b. Intermediate life support,
- c. Paramedic life support,
- d. Advanced life support,
- e. Stretcher aid van, and
- f. Specialty care, which shall be used solely for interhospital transport of patients requiring specialized en route medical monitoring and advanced life support which exceed the capabilities of the equipment and personnel provided by paramedic life support.

Requirements for each level of care shall be established by the Board. Licensure at any level of care includes a license to operate at any lower level, with the exception of licensure for specialty care; provided, however, that the highest level of care offered by an ambulance service shall be available twenty-four (24) hours each day, three hundred sixty-five (365) days per year.

Licensure shall be granted or renewed for such periods and under such terms and conditions as may be promulgated by the Board;

19. 20. "Medical control" means local, regional or statewide medical direction and quality assurance of health care delivery in an emergency medical service system. On-line medical control is the

medical direction given to licensed emergency medical personnel,
certified emergency medical responders and stretcher aid van

personnel by a physician via radio or telephone. Off-line medical
control is the establishment and monitoring of all medical
components of an emergency medical service system, which is to
include stretcher aid van service including, but not limited to,
protocols, standing orders, educational programs, and the quality

and delivery of on-line control;

20. 21. "Medical director" means a physician, fully licensed without restriction, who acts as a paid or volunteer medical advisor to a licensed ambulance service and who monitors and directs the care so provided. Such physicians shall meet such qualifications and requirements as may be promulgated by the Board;

21. 22. "Region" or "emergency medical service region" means two or more municipalities, counties, ambulance districts or other political subdivisions exercising joint control over one or more providers of emergency medical services and stretcher aid van service through common ordinances, authorities, boards or other means;

22. 23. "Regional emergency medical services system" means a network of organizations, individuals, facilities and equipment which serves a region, subject to a unified set of regional rules and standards which may exceed, but may not be in contravention of, those required by the state, which is under the medical direction of

a single regional medical director, and which participates directly in the delivery of the following services:

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- a. medical call-taking and emergency medical services dispatching, emergency and routine, including priority dispatching of first response agencies, stretcher aid van and ambulances,
- emergency medical responder services provided by
 emergency medical response agencies,
- c. ambulance services, both emergency, routine and stretcher aid van including, but not limited to, the transport of patients in accordance with transport protocols approved by the regional medical director, and
- d. directions given by physicians directly via radio or telephone, or by written protocol, to emergency medical response agencies, stretcher aid van or ambulance personnel at the scene of an emergency or while en route to a hospital;
- 23. 24. "Regional medical director" means a licensed physician, who meets or exceeds the qualifications of a medical director as defined by the Oklahoma Emergency Response Systems Development Act, chosen by an emergency medical service region to provide external medical oversight, quality control and related services to that region;

24. 25. "Registration" means the listing of an ambulance service in a registry maintained by the Department; provided, however, registration shall not be deemed to be a license;

25. 26. "Stretcher aid van" means any ground vehicle which is or should be approved by the State Commissioner of Health, which is designed and equipped to transport individuals on a stretcher or gurney type apparatus. Vehicles used as stretcher aid vans shall meet such standards as may be required by the State Board of Health for approval and shall display evidence of such approval at all times. Stretcher aid van services shall only be permitted and approved by the Commissioner in emergency medical service regions, ambulance service districts, or counties with populations in excess of 300,000 people. Notwithstanding the provisions of this paragraph, stretcher aid van transports may be made to and from any federal or state veterans facility;

26. 27. "Stretcher aid van patient" means any person who is or will be transported in a reclining position on a stretcher or gurney, who is medically stable, nonemergent and does not require any medical monitoring equipment or assistance during transport; and

27. 28. "Transport protocol" means the written instructions governing decision-making at the scene of a medical emergency by ambulance personnel regarding the selection of the hospital to which the patient shall be transported. Transport protocols shall be developed by the regional medical director for a regional emergency

medical services system or by the Department if no regional emergency medical services system has been established. Such transport protocols shall adhere to, at a minimum, the following quidelines:

- a. nonemergency, routine transport shall be to the facility of the patient's choice,
- b. urgent or emergency transport not involving lifethreatening medical illness or injury shall be to the nearest facility, or, subject to transport availability and system area coverage, to the facility of the patient's choice, and
- c. life-threatening medical illness or injury shall require transport to the nearest health care facility appropriate to the needs of the patient as established by regional or state guidelines.
- SECTION 2. AMENDATORY 63 O.S. 2011, Section 1-2504, as amended by Section 2, Chapter 23, O.S.L. 2013 (63 O.S. Supp. 2015, Section 1-2504), is amended to read as follows:

Section 1-2504. A. Any hospital or health care facility operating within the state may utilize Emergency Medical Technician, Intermediate, Advanced Emergency Medical Technician or Paramedic or Community Paramedic or Critical Care Paramedic personnel for the delivery of emergency medical patient care within the hospital or health care facility. All licensed ambulance services shall use

Emergency Medical Technician, Intermediate, Advanced Emergency

Medical Technician or Paramedic personnel for on-scene patient care

and stabilization and the delivery of prehospital and en route

emergency medical care.

- B. While participating in an Emergency Medical Technician,
 Intermediate, Advanced Emergency Medical Technician er, Community
 Paramedic or Paramedic training course approved by the Department,
 the student shall be allowed to perform in the hospital, clinic or
 prehospital setting, while under the direct supervision of a
 physician, registered nurse, or licensed emergency medical personnel
 who are licensed at a level equal to or above the level of training
 of the student, or other allied health preceptor, any of the skills
 determined to be appropriate for the training level of the student
 by the Department.
- C. A registered nurse or licensed practical nurse may be used in the back of an ambulance during an interhospital transfer to supplement the skills of licensed emergency medical personnel. A registered nurse or licensed practical nurse functioning in this fashion must be following written orders of a physician or be in direct radio or telephone contact with a physician.
- 21 SECTION 3. AMENDATORY 63 O.S. 2011, Section 1-2505, as 22 amended by Section 3, Chapter 23, O.S.L. 2013 (63 O.S. Supp. 2015, 23 Section 1-2505), is amended to read as follows:

Section 1-2505. Personnel licensed in the following levels of care may perform as designated under their classification:

- 1. "Emergency Medical Technician (EMT)" means an individual licensed by the Department of Health following completion of a standard Basic Emergency Medical Technician training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill, administered by the Department or other entity designated by the Department. The licensed Emergency Medical Technician is allowed to perform such skills as may be designated by the Department;
- 2. "Intermediate" means an individual licensed as an EMT, has completed an intermediate training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill administered by the Department or other entity designated by the Department. The Intermediate is allowed to perform such skills as may be designated by the Department;
- 3. "Advanced Emergency Medical Technician (AEMT)" means an individual licensed as an Emergency Medical Technician or

 Intermediate who has completed an AEMT training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard

licensing examination of knowledge and skills administered by the Department or other entity designated by the Department. The Advanced Emergency Medical Technician is allowed to perform such skills as may be designated by the Department; and

- 4. "Community Paramedic" means an individual who meets the provisions of paragraph 5 of this section and:
 - a. possesses two years of full-time service as a paramedic, or its part-time equivalent, and
 - b. completes a training program from an entity approved

 by the Department. Such training shall require, at a

 minimum, three hundred (300) hours of classroom and

 clinical experience provided under the supervision of

 a medical director, advanced practice registered

 nurse, physician assistant, or registered nurse; and
- 4. 5. "Paramedic", including "Community Paramedic", means an individual licensed as an EMT, Intermediate or AEMT, who has completed a standard Paramedic training program, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill administered by the Department or other entity designated by the Department. The Paramedic is allowed to perform such skills as may be designated by the Department.

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        SECTION 4. NEW LAW A new section of law to be codified
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    in the Oklahoma Statutes as Section 1-2509.1 of Title 63, unless
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    there is created a duplication in numbering, reads as follows:
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        The State Board of Health shall promulgate rules to implement
    the provisions of this act.
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        SECTION 5. This act shall become effective November 1, 2016.
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