

1 **SECURE TRANSPORT DESIGNATION AMENDMENTS**

2 2019 GENERAL SESSION

3 STATE OF UTAH

4 **Chief Sponsor: Evan J. Vickers**

5 House Sponsor: _____

7 **LONG TITLE**

8 **General Description:**

9 This bill adds a designation category for nonemergency secured behavioral health
10 transport providers and vehicles.

11 **Highlighted Provisions:**

12 This bill:

- 13 ▶ adds a designation category for nonemergency secure behavioral health transport
- 14 providers and vehicles; and
- 15 ▶ makes technical changes.

16 **Money Appropriated in this Bill:**

17 None

18 **Other Special Clauses:**

19 None

20 **Utah Code Sections Affected:**

21 AMENDS:

22 **26-8a-102**, as last amended by Laws of Utah 2017, Chapter 326

23 **26-8a-105**, as last amended by Laws of Utah 2017, Chapter 326

24 **26-8a-301**, as last amended by Laws of Utah 2017, Chapter 326

25 **26-8a-303**, as enacted by Laws of Utah 1999, Chapter 141

26 **26-8a-304**, as last amended by Laws of Utah 2013, Chapter 350

27 **26-8a-405.4**, as enacted by Laws of Utah 2010, Chapter 187



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Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-8a-102** is amended to read:

26-8a-102. Definitions.

As used in this chapter:

(1) (a) "911 ambulance or paramedic services" means:

(i) either:

(A) 911 ambulance service;

(B) 911 paramedic service; or

(C) both 911 ambulance and paramedic service; and

(ii) a response to a 911 call received by a designated dispatch center that receives 911 or E911 calls.

(b) "911 ambulance or paramedic service" does not mean a seven or ten digit telephone call received directly by an ambulance provider licensed under this chapter.

(2) "Ambulance" means a ground, air, or water vehicle that:

(a) transports patients and is used to provide emergency medical services; and

(b) is required to obtain a permit under Section [26-8a-304](#) to operate in the state.

(3) "Ambulance provider" means an emergency medical service provider that:

(a) transports and provides emergency medical care to patients; and

(b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.

(4) "Committee" means the State Emergency Medical Services Committee created by Section [26-1-7](#).

(5) "Direct medical observation" means in-person observation of a patient by a physician, registered nurse, physician's assistant, or individual licensed under Section [26-8a-302](#).

(6) "Emergency medical condition" means:

(a) a medical condition that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in:

(i) placing the individual's health in serious jeopardy;

(ii) serious impairment to bodily functions; or

- 59 (iii) serious dysfunction of any bodily organ or part; or
- 60 (b) a medical condition that in the opinion of a physician or his designee requires direct
- 61 medical observation during transport or may require the intervention of an individual licensed
- 62 under Section 26-8a-302 during transport.
- 63 (7) "Emergency medical service personnel":
- 64 (a) means an individual who provides emergency medical services to a patient and is
- 65 required to be licensed under Section 26-8a-302; and
- 66 (b) includes a paramedic, medical director of a licensed emergency medical service
- 67 provider, emergency medical service instructor, and other categories established by the
- 68 committee.
- 69 (8) "Emergency medical service providers" means:
- 70 (a) licensed ambulance providers and paramedic providers;
- 71 (b) a facility or provider that is required to be designated under [Section] Subsection
- 72 26-8a-303(1)(a); and
- 73 (c) emergency medical service personnel.
- 74 (9) "Emergency medical services" means medical services, transportation services, or
- 75 both rendered to a patient.
- 76 (10) "Emergency medical service vehicle" means a land, air, or water vehicle that is:
- 77 (a) maintained and used for the transportation of emergency medical personnel,
- 78 equipment, and supplies to the scene of a medical emergency; and
- 79 (b) required to be permitted under Section 26-8a-304.
- 80 (11) "Governing body":
- 81 (a) is as defined in Section 11-42-102; and
- 82 (b) for purposes of a "special service district" under Section 11-42-102, means a
- 83 special service district that has been delegated the authority to select a provider under this
- 84 chapter by the special service district's legislative body or administrative control board.
- 85 (12) "Interested party" means:
- 86 (a) a licensed or designated emergency medical services provider that provides
- 87 emergency medical services within or in an area that abuts an exclusive geographic service area
- 88 that is the subject of an application submitted pursuant to Part 4, Ambulance and Paramedic
- 89 Providers;

90 (b) any municipality, county, or fire district that lies within or abuts a geographic
91 service area that is the subject of an application submitted pursuant to Part 4, Ambulance and
92 Paramedic Providers; or

93 (c) the department when acting in the interest of the public.

94 (13) "Medical control" means a person who provides medical supervision to an
95 emergency medical service provider.

96 (14) "Non-911 service" means transport of a patient that is not 911 transport under
97 Subsection (1).

98 (15) "Nonemergency secured behavioral health transport" means an entity that:

99 (a) provides nonemergency secure transportation services for an individual who:

100 (i) is not required to be transported by an ambulance under Section 26-8a-305; and

101 (ii) requires behavioral health observation during transport between any of the

102 following facilities:

103 (A) a licensed acute care hospital;

104 (B) an emergency patient receiving facility; and

105 (C) a licensed mental health facility; and

106 (b) is required to be designated under Section 26-8a-303.

107 [~~15~~] (16) "Paramedic provider" means an entity that:

108 (a) employs emergency medical service personnel; and

109 (b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.

110 [~~16~~] (17) "Patient" means an individual who, as the result of illness or injury, meets
111 any of the criteria in Section 26-8a-305.

112 [~~17~~] (18) "Political subdivision" means:

113 (a) a city or town located in a county of the first or second class as defined in Section
114 17-50-501;

115 (b) a county of the first or second class;

116 (c) the following districts located in a county of the first or second class:

117 (i) a special service district created under Title 17D, Chapter 1, Special Service District
118 Act; or

119 (ii) a local district under Title 17B, Limited Purpose Local Government Entities - Local
120 Districts, for the purpose of providing fire protection, paramedic, and emergency services;

- 121 (d) areas coming together as described in Subsection 26-8a-405.2(2)(b)(ii);
- 122 (e) an interlocal entity under Title 11, Chapter 13, Interlocal Cooperation Act; or
- 123 (f) a special service district for fire protection service under Subsection 17D-1-201(9).

124 [~~18~~] (19) "Trauma" means an injury requiring immediate medical or surgical
 125 intervention.

126 [~~19~~] (20) "Trauma system" means a single, statewide system that:

127 (a) organizes and coordinates the delivery of trauma care within defined geographic
 128 areas from the time of injury through transport and rehabilitative care; and

129 (b) is inclusive of all prehospital providers, hospitals, and rehabilitative facilities in
 130 delivering care for trauma patients, regardless of severity.

131 [~~20~~] (21) "Triage" means the sorting of patients in terms of disposition, destination,
 132 or priority. For prehospital trauma victims, triage requires a determination of injury severity to
 133 assess the appropriate level of care according to established patient care protocols.

134 [~~21~~] (22) "Triage, treatment, transportation, and transfer guidelines" means written
 135 procedures that:

136 (a) direct the care of patients; and

137 (b) are adopted by the medical staff of an emergency patient receiving facility, trauma
 138 center, or an emergency medical service provider.

139 Section 2. Section 26-8a-105 is amended to read:

140 **26-8a-105. Department powers.**

141 The department shall:

142 (1) coordinate the emergency medical services within the state;

143 (2) administer this chapter and the rules established pursuant to it;

144 (3) establish a voluntary task force representing a diversity of emergency medical
 145 service providers to advise the department and the committee on rules;

146 (4) establish an emergency medical service personnel peer review board to advise the
 147 department concerning discipline of emergency medical service personnel under this chapter;
 148 and

149 (5) adopt rules in accordance with Title 63G, Chapter 3, Utah Administrative
 150 Rulemaking Act, to:

151 (a) license ambulance providers and paramedic providers;

152 (b) permit ambulances [~~and~~], emergency medical response vehicles, and nonemergency
153 secured behavioral health transport vehicles, including approving an emergency vehicle
154 operator's course in accordance with Section 26-8a-304;

155 (c) establish:

- 156 (i) the qualifications for membership of the peer review board created by this section;
- 157 (ii) a process for placing restrictions on a license while an investigation is pending;
- 158 (iii) the process for the investigation and recommendation by the peer review board;

159 and

160 (iv) the process for determining the status of a license while a peer review board
161 investigation is pending;

162 (d) establish application, submission, and procedural requirements for licenses,
163 designations, and permits; and

164 (e) establish and implement the programs, plans, and responsibilities as specified in
165 other sections of this chapter.

166 Section 3. Section 26-8a-301 is amended to read:

167 **26-8a-301. General requirement.**

168 (1) Except as provided in Section 26-8a-308 or 26-8b-201:

169 (a) an individual may not provide emergency medical services without a license issued
170 under Section 26-8a-302;

171 (b) a facility or provider may not hold itself out as a designated emergency medical
172 service provider or nonemergency secured behavioral health transport provider without a
173 designation issued under Section 26-8a-303;

174 (c) a vehicle may not operate as an ambulance [~~or~~], emergency response vehicle, or
175 nonemergency secured behavioral health transport vehicle without a permit issued under
176 Section 26-8a-304; and

177 (d) an entity may not respond as an ambulance or paramedic provider without the
178 appropriate license issued under Part 4, Ambulance and Paramedic Providers.

179 (2) Section 26-8a-502 applies to violations of this section.

180 Section 4. Section 26-8a-303 is amended to read:

181 **26-8a-303. Designation of emergency medical service providers and**
182 **nonemergency secured behavioral health transport providers.**

183 (1) To ensure quality emergency medical services, the committee shall establish
184 designation requirements for:

185 (a) emergency medical service providers in the following categories:

186 ~~(a)~~ (i) quick response provider;

187 ~~(b)~~ (ii) resource hospital for emergency medical providers;

188 ~~(c)~~ (iii) emergency medical service dispatch center;

189 ~~(d)~~ (iv) emergency patient receiving facilities; and

190 ~~(e)~~ (v) other types of emergency medical service providers as the committee

191 considers necessary[-]; and

192 (b) nonemergency secured behavioral health transport providers.

193 (2) The department shall, based on the requirements in Subsection (1), issue
194 designations to emergency medical service providers and nonemergency secured behavioral
195 health transport providers listed in Subsection (1).

196 (3) As provided in Section 26-8a-502, an entity issued a designation under Subsection
197 ~~(1)~~ (2) may only function and hold itself out in accordance with its designation.

198 Section 5. Section 26-8a-304 is amended to read:

199 **26-8a-304. Permits for emergency medical service vehicles and nonemergency**
200 **secured behavioral health transport vehicles.**

201 (1) (a) To ensure that emergency medical service vehicles and nonemergency secured
202 behavioral health transport vehicles are adequately staffed, safe, maintained, properly
203 equipped, and safely operated, the committee shall establish permit requirements at levels it
204 considers appropriate in the following categories:

205 (i) ambulance; ~~and~~

206 (ii) emergency medical response vehicle[-]; and

207 (iii) nonemergency secured behavioral health transport vehicle.

208 (b) The permit requirements under ~~[this Subsection (1)]~~ Subsections (1)(a)(i) and (ii)
209 shall include a requirement that beginning on or after January 31, 2014, every operator of an
210 ambulance or emergency medical response vehicle annually provide proof of the successful
211 completion of an emergency vehicle operator's course approved by the department for all
212 ambulances and emergency medical response vehicle operators.

213 (2) The department shall, based on the requirements established in Subsection (1),

214 issue permits to emergency medical service vehicles and nonemergency secured behavioral
215 health transport vehicles.

216 Section 6. Section **26-8a-405.4** is amended to read:

217 **26-8a-405.4. Non-911 provider -- Finding of meritorious complaint -- Request for**
218 **proposals.**

219 (1) Notwithstanding Subsection ~~26-8a-102~~(17)(18), for purposes of this section,
220 political subdivision includes:

- 221 (a) a county of any class; and
- 222 (b) a city or town located in a county of any class.

223 (2) (a) This section applies to a non-911 provider license under this chapter.

224 (b) The department shall, in accordance with Subsections (4) and (5):

- 225 (i) receive a complaint about a non-911 provider;
- 226 (ii) determine whether the complaint has merit;
- 227 (iii) issue a finding of:

- 228 (A) a meritorious complaint; or
- 229 (B) a non-meritorious complaint; and

230 (iv) forward a finding of a meritorious complaint to the governing body of the political
231 subdivision:

- 232 (A) in which the non-911 provider is licensed; or
- 233 (B) that provides the non-911 services, if different from Subsection (2)(b)(iv)(A).

234 (3) (a) A political subdivision that receives a finding of a meritorious complaint from
235 the department:

236 (i) shall take corrective action that the political subdivision determines is appropriate;
237 and

238 (ii) shall, if the political subdivision determines corrective action will not resolve the
239 complaint or is not appropriate:

240 (A) issue a request for proposal for non-911 service in the geographic service area if
241 the political subdivision will not respond to the request for proposal; or

242 (B) (I) make a finding that a request for proposal for non-911 services is appropriate
243 and the political subdivision intends to respond to a request for proposal; and

244 (II) submit the political subdivision's findings to the department with a request that the

245 department issue a request for proposal in accordance with Section 26-8a-405.5.

246 (b) (i) If Subsection (3)(a)(ii)(A) applies, the political subdivision shall issue the
247 request for proposal in accordance with Sections 26-8a-405.1 through 26-8a-405.3.

248 (ii) If Subsection (3)(a)(ii)(B) applies, the department shall issue a request for proposal
249 for non-911 services in accordance with Section 26-8a-405.5.

250 (4) The department shall make a determination under Subsection (2)(b) if:

251 (a) the department receives a written complaint from any of the following in the
252 geographic service area:

253 (i) a hospital;

254 (ii) a health care facility;

255 (iii) a political subdivision; or

256 (iv) an individual; and

257 (b) the department determines, in accordance with Subsection (2)(b), that the complaint
258 has merit.

259 (5) (a) If the department receives a complaint under Subsection (2)(b), the department
260 shall request a written response from the non-911 provider concerning the complaint.

261 (b) The department shall make a determination under Subsection (2)(b) based on:

262 (i) the written response from the non-911 provider; and

263 (ii) other information that the department may have concerning the quality of service of
264 the non-911 provider.

265 (c) (i) The department's determination under Subsection (2)(b) is not subject to an
266 adjudicative proceeding under Title 63G, Chapter 4, Administrative Procedures Act.

267 (ii) The department shall adopt administrative rules in accordance with Title 63G,
268 Chapter 3, Utah Administrative Rulemaking Act, to implement the provisions of Subsection
269 (2)(b).