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No. 100. An act relating to government operations regarding emergency medical services and public safety in response to COVID-19.

(S.182)

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 24 V.S.A. chapter 71 is amended to read:

CHAPTER 71. AMBULANCE SERVICES

Subchapter 1. Emergency Medical Services Districts

* * *

§ 2657. PURPOSES AND POWERS OF EMERGENCY MEDICAL SERVICES DISTRICTS

(a) It shall be the function of each emergency medical services district to foster and coordinate emergency medical services within the district, in the interest of affording adequate ambulance services within the district. Each emergency medical services district shall have powers which that include the power to:

* * *

(3) enter into agreements and contracts for furnishing technical, educational, and support services and credentialing related to the provision of emergency medical treatment;

* * *

(10) assist the Department of Health in a program of testing for licensure of emergency medical services personnel;

(11) assure that each affiliated agency in the district has implemented a system for the credentialing of all its licensed emergency medical personnel; and [Repealed.]

(12) develop protocols for providing appropriate response times to requests for emergency medical services.

* * *

Subchapter 2. Licensing Operation of Ambulance Service Affiliated Agencies

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§ 2682. POWERS OF STATE BOARD

(a) The State Board shall administer this subchapter and shall have power to:

* * *

- (3) Make, adopt, amend, and revise, as it deems necessary or expedient, reasonable rules in order to promote and protect the health, safety, and welfare of members of the public using, served by, or in need of emergency medical treatment. Any rule may be repealed within 90 days of the date of its adoption by a majority vote of all the district boards. Such rules may cover or relate to:
- (A) age, training, eredentialing, and physical requirements for emergency medical services personnel;

* * *

§ 2683. TERM OF LICENSE

Full licenses shall be issued on forms to be prescribed by the State Board for a period of one year three years beginning on January 1, or for the balance of any such year three-year period. Temporary, conditional, or provisional licenses may also be issued by the Board.

* * *

§ 2689. REIMBURSEMENT FOR AMBULANCE SERVICE PROVIDERS

- (a)(1) When an ambulance service provides emergency medical treatment to a person who is insured by a health insurance policy, plan, or contract that provides benefits for emergency medical treatment, the health insurer shall reimburse the ambulance service directly, subject to the terms and conditions of the health insurance policy, plan, or contract.
- (2) The Department of Financial Regulation shall enforce the provisions of this subsection.
- (b) Nothing in this section shall be construed to interfere with coordination of benefits or to require a health insurer to provide coverage for services not otherwise covered under the insured's policy, plan, or contract.
- (c) Nothing in this section shall preclude an insurer from negotiating with and subsequently entering into a contract with a nonparticipating ambulance service to establish rates of reimbursement for emergency medical treatment.

Sec. 2. DEPARTMENT OF FINANCIAL REGULATION; REPORT ON ENFORCEMENT OF HEALTH INSURER REIMBURSEMENTS TO AMBULANCE SERVICES

On or before January 15, 2021, the Department of Financial Regulation shall report to the Senate Committees on Government Operations and on Health and Welfare and the House Committees on Government Operations and on Health Care regarding its enforcement of 24 V.S.A. § 2689(a) (health insurers' direct reimbursement to ambulance services) as set forth in Sec. 1 of this act.

Sec. 3. 18 V.S.A. chapter 17 is amended to read:

CHAPTER 17. EMERGENCY MEDICAL SERVICES

§ 901. POLICY

It is the policy of the State of Vermont that all persons who suffer sudden and unexpected illness or injury should have access to the emergency medical services system in order to prevent loss of life or the aggravation of the illness or injury, and to alleviate suffering.

- (1) The system should include competent emergency medical eare treatment provided by adequately trained, licensed, eredentialed, and equipped personnel acting under appropriate medical control.
- (2) Persons involved in the delivery of emergency medical care should be encouraged to maintain and advance their levels of training and licensure, and to upgrade the quality of their vehicles and equipment.

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§ 903. AUTHORIZATION FOR PROVISION OF EMERGENCY MEDICAL SERVICES

Notwithstanding any other provision of law, including provisions of 26 V.S.A. chapter 23, persons who are licensed and credentialed to provide emergency medical care treatment pursuant to the requirements of this chapter and implementing regulations the rules adopted under it are hereby authorized to provide such care without further certification, registration, or licensing.

* * *

§ 906. EMERGENCY MEDICAL SERVICES DIVISION:

RESPONSIBILITIES

To implement the policy of section 901 of this title chapter, the Department of Health shall be responsible for:

* * *

(4) Establishing by rule minimum standards for the credentialing of emergency medical personnel by their affiliated agency, which shall be required in addition to the licensing requirements of this chapter in order for a person to practice as an emergency medical provider. Credentialing shall consist of the minimum and appropriate requirements necessary to ensure that an emergency medical provider can demonstrate the competence and minimum skills necessary to practice within his or her scope of licensure. Any rule shall balance the need for documenting competency against the burden placed on

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rural or smaller volunteer squads with little or no administrative staff.

[Repealed.]

* * *

(10) Establishing, by rule, license levels for emergency medical personnel. The Commissioner shall use the guidelines established by the National Highway Traffic Safety Administration (NHTSA) in the U.S. Department of Transportation as a standard or other comparable standards, except that a felony conviction shall not necessarily disqualify an applicant. The rules shall also provide that:

* * *

(B) An individual licensed by the Commissioner as an emergency medical technician, advanced emergency medical technician, or a paramedic, who is credentialed by an affiliated agency, shall be able to practice fully within the scope of practice for such level of licensure as defined by NHTSA's National EMS Scope of Practice Model consistent with the license level of the affiliated agency, and subject to the medical direction of the emergency medical services district medical advisor.

* * *

(E) An applicant who has served as a hospital corpsman or a medic in the U.S. Armed Forces, or who is licensed as a registered nurse or a physician assistant shall be granted a permanent waiver of the training requirements to become a licensed emergency medical technician, an advanced emergency 2020

medical technician, or a paramedic, provided the applicant passes the applicable examination approved by the Commissioner for that level of licensure and further provided that the applicant is credentialed by an affiliated agency.

(F) An applicant who is registered on the National Registry of Emergency Medical Technicians as an emergency medical technician, an advanced emergency medical technician, or a paramedic shall be granted licensure as a Vermont emergency medical technician, an advanced emergency medical technician, or a paramedic without the need for further testing, provided he or she is credentialed by an affiliated agency or is serving as a medic with the Vermont National Guard.

* * *

§ 909. EMS ADVISORY COMMITTEE

- (a) The Commissioner shall establish an advisory committee the Emergency Medical Services Advisory Committee to advise on matters relating to the delivery of emergency medical services (EMS) in Vermont.
- (b) The Emergency Medical Services Advisory Committee shall include the following members:

(e) Beginning Annually, on or before January 1, 2019, the Committee shall report annually on the emergency medical services EMS system to the House Committees on Government Operations, on Commerce and Economic

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Development, and on Human Services and to the Senate Committees on Government Operations, on Economic Development, Housing and General Affairs, and on Health and Welfare. The Committee's reports shall include information on the following:

* * *

(5) funding mechanisms and funding gaps for EMS personnel and providers across the State, including for the funding of infrastructure, equipment, and operations and costs associated with initial and continuing training, and licensure, and credentialing of personnel;

- (8) how the current system of preparing and licensing EMS personnel could be improved, including the role of Vermont Technical College's EMS program; whether the State should create an EMS academy; and how such an EMS academy should be structured; and
- (9) how EMS instructor training and licensing could be improved; and (10) the impact of the State's credentialing requirements for EMS personnel on EMS providers.
- Sec. 4. DEPARTMENT OF PUBLIC SAFETY; ELECTRICIANS' LICENSING BOARD; PLUMBERS' EXAMINING BOARD; TEMPORARY LICENSE EXTENSION AND LATE FEE WAIVER Notwithstanding the provisions of 26 V.S.A. §§ 908 (electricians) and 2195 (plumbers) regulating the renewal of licenses by the Electricians' Licensing

Board and Plumbers' Examining Board, all electrician and plumber licenses that were due to expire between March 30, 2020 and September 30, 2020 shall remain valid and be deemed to expire on September 30, 2020, and any associated late fees for renewal that would have applied during that time frame shall be waived.

- Sec. 5. COVID-19 STATE OF EMERGENCY; COUNTY RESERVE FUNDS; COUNTY SHERIFFS; FUNDING OF EMERGENCY **NEEDS**
 - (a) Funding.
- (1) To support the emergency needs of sheriffs due to the State's COVID-19 response, a county's operations reserve funds and capital reserve funds described in 24 V.S.A. § 133(e) may be allowed to be used for the emergency needs of the county sheriff subject to the approval of the assistant judges. "Emergency needs" means the needs to respond to COVID-19 and includes hiring deputies, dispatchers, and other personnel and purchasing equipment and supplies.
- (2) The funding of these emergency needs under this subsection shall be in addition to the support of the sheriff's department set forth in 24 V.S.A. § 73.
 - (b) Reimbursement.
- (1) Any sheriff who receives county reserve funds for emergency needs under subsection (a) of this section shall apply to the Federal Emergency

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Management Agency (FEMA) and any other applicable resources for COVID-19 relief known to the sheriff for any allowable reimbursement.

- (2) Within 30 days of receiving any such allowable reimbursement, the sheriff shall provide those funds to the county in order to reimburse the county for the funds allocated to the sheriff under subsection (a) of this section. A sheriff shall only be responsible for reimbursing the county an amount equal to the allowable reimbursement the sheriff received under subdivision (1) of this subsection.
- (c) Sunset. This section shall be repealed two weeks after the day the Governor terminates the state of emergency for the State of Vermont in response to COVID-19.

Sec. 6. EFFECTIVE DATE

This act shall take effect on passage.

Date Governor signed bill: May 14, 2020