

3 Senate Bill No. 539

4 SENATE BILL NO. 539 - By: MONSON of the Senate and ROAN of the
5 House.

6 An Act relating to public health and safety; amending 63
7 O.S. 2001, Sections 1-2506, 1-2509, 1-2511 and 1-2516, as
8 amended by Section 1, Chapter 85, O.S.L. 2002 (63 O.S. Supp.
9 2004, Section 1-2516), which relate to performance of
10 medical procedures, ambulance service operations, the
11 Oklahoma Emergency Medical Services Improvement Program and
12 the Oklahoma Emergency Response Systems Development Advisory
13 Council; clarifying when and how licensed and certified
14 emergency medical personnel shall act; providing for
15 response to an emergency request for care by certain ground
16 ambulance service under specified conditions; providing for
17 documentation requirements; authorizing complaint
18 investigation in specified manner; deleting provisions for
19 use of certain data set and standard in lieu of the standard
20 report; clarifying language and term of service on certain
21 council; repealing 63 O.S. 2001, Sections 1-2507, 1-2514, 1-
22 2517, 1-2518, 1-2519, 1-2520 and 1-2521, which relate to
23 Emergency Medical Technician Licensing, ambulance service
24 entities and the Supplemental Emergency Services District
25 Act; providing an effective date; and declaring an
26 emergency.

27 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

28 SECTION 1. AMENDATORY 63 O.S. 2001, Section 1-2506, is
29 amended to read as follows:

30 Section 1-2506. Licensed and certified emergency medical
31 personnel, while a duty to act is in effect, shall perform medical
32 procedures to assist patients to the best of their abilities under
33 the direction of a medical director or in accordance with written
34 protocols, which may include standing orders, authorized and

1 developed by the medical director and approved by the State
2 Department of Health when not in conflict with standards recommended
3 by the Medical Direction Subcommittee of the Oklahoma Emergency
4 Response Systems Development Advisory Council and approved by the
5 State Board of Health. Licensure, certification and authorization
6 for emergency medical personnel to perform medical procedures must
7 be consistent with provisions of this act, and rules ~~and regulations~~
8 adopted by the ~~State~~ Board. Medical control and medical directors
9 shall meet such requirements as prescribed through rules ~~and~~
10 ~~regulations~~ adopted by the ~~State~~ Board.

11 SECTION 2. AMENDATORY 63 O.S. 2001, Section 1-2509, is
12 amended to read as follows:

13 Section 1-2509. A. 1. No person, company, governmental entity
14 or trust authority may operate an ambulance service within this
15 state except as provided herein. The State Commissioner of Health,
16 the district attorney of the county wherein the ambulance service
17 operates or may be found or the Attorney General of this state shall
18 have the authority to bring an action to enjoin the operation of any
19 such ambulance service not in compliance with the provisions of this
20 act.

21 2. A ground ambulance service based outside of this state, that
22 is licensed and in good standing in its home state, may respond to
23 an emergency request for care and transportation of a patient within

1 this state provided no local licensed ambulance service is readily
2 available, and may be exempt from licensing requirements set forth
3 in rules promulgated by the State Board of Health. Such exempt
4 ambulance service may be asked to provide documentation of emergency
5 response activities performed within this state. The State
6 Department of Health shall have the authority to investigate any
7 complaint associated with such emergency response by such out-of-
8 state ambulance service in the same manner as it would those
9 services licensed by the Department.

10 B. The Commissioner shall have the authority to revoke or
11 suspend any license, to issue probationary licenses, or to levy such
12 administrative fines and penalties as may be deemed necessary, for
13 violations of the provisions of this act, subject to the provisions
14 of the ~~Oklahoma~~ Administrative Procedures Act. The powers afforded
15 the Commissioner within the general enforcement provisions of the
16 Public Health Code are additionally incorporated herein.

17 C. In addition to any other penalties, any person, company,
18 governmental entity or trust authority who violates any of the
19 provisions of this act relating to compliance with the provisions of
20 this act or of standards, specifications, procedures, and rules ~~and~~
21 ~~regulations~~ adopted by the ~~State~~ Board may be punished by the
22 assessment of a civil penalty of not more than One Hundred Dollars

1 (\$100.00) for each violation. Each day a violation continues shall
2 be considered a separate offense.

3 D. The operation or maintenance of an ambulance service in
4 violation of this act, or the rules ~~and regulations~~ promulgated by
5 the ~~State~~ Board, is declared a public nuisance inimical to the
6 public welfare. The Commissioner in the name of the people of the
7 state, through the Attorney General, or the district attorney of the
8 county in which the ambulance service is located, may, in addition
9 to other remedies herein provided, bring action for an injunction to
10 restrain such violation or to enjoin the future operation or
11 maintenance of any such ambulance service.

12 SECTION 3. AMENDATORY 63 O.S. 2001, Section 1-2511, is
13 amended to read as follows:

14 Section 1-2511. The State Commissioner of Health shall have the
15 following powers and duties with regard to an Oklahoma Emergency
16 Medical Services Improvement Program:

17 1. Administer and coordinate all federal and state programs,
18 not specifically assigned by state law to other state agencies,
19 which include provisions of the Federal Emergency Medical Services
20 Systems Act and other federal laws and programs relating to the
21 development of emergency medical services in this state. The
22 administration and coordination of federal and state laws and
23 programs relating to the development, planning, prevention,

1 improvement and management of emergency medical services, including
2 but not limited to the staffing of the Oklahoma Emergency Response
3 Systems Development Advisory Council, shall be conducted by the
4 Division of Emergency Medical Services, as prescribed by Section 1-
5 2510 of this title;

6 2. Assist private and public organizations, emergency medical
7 and health care providers, ambulance authorities, district boards
8 and other interested persons or groups in improving emergency
9 medical services at the local, municipal, district or state levels.
10 This assistance shall be through professional advice and technical
11 assistance;

12 3. Coordinate the efforts of local units of government to
13 establish service districts and set up boards of trustees or other
14 authorities to operate and finance emergency medical services in the
15 state as provided under Section 9C of Article X of the Oklahoma
16 Constitution or under Sections 1201 through 1221 of Title 19 of the
17 Oklahoma Statutes. The Commissioner shall evaluate all proposed
18 district areas and operational systems to determine the feasibility
19 of their economic and health services delivery;

20 4. Prepare, maintain and utilize a comprehensive plan and
21 program for emergency medical services development throughout the
22 state to be adopted by the State Board of Health and incorporated
23 within the State Health Plan. The plan shall establish goals,

1 objectives and standards for a statewide integrated system and a
2 timetable for accomplishing and implementing different elements of
3 the system. The plan shall also include, but not be limited to, all
4 components of an emergency medical services system; regional and
5 statewide planning; the establishment of standards and the
6 appropriate criteria for the designation of facilities; data
7 collection and quality assurance; and funding;

8 5. Maintain a comprehensive registry of all ambulance services
9 operating within the state, to be published annually. All ambulance
10 service providers shall register annually with the Commissioner on
11 forms supplied by the State Department of Health, containing such
12 requests for information as may be deemed necessary by the
13 Commissioner;

14 6. Develop a standard report form which may be used by local,
15 regional and statewide emergency medical services and emergency
16 medical services systems to facilitate the collection of data
17 related to the provision of emergency medical and trauma care. The
18 Commissioner shall also develop a standardized emergency medical
19 services data set and an electronic submission standard ~~which may,~~
20 ~~at the option of each ambulance service, be utilized in lieu of the~~
21 ~~standard report for the submission of required data.~~ Each ambulance
22 service shall submit the information required in this section
23 ~~through either the standard form or electronic data set at such~~

1 intervals as may be prescribed by rules promulgated by the State
2 Board of Health;

3 7. Evaluate and certify all emergency medical services training
4 programs and emergency medical technician training courses and
5 operational services in accordance with specifications and
6 procedures approved by the Board;

7 8. Provide an emergency medical technicians' and ambulance
8 service licensure program;

9 9. Create a standing Medical Direction Subcommittee of the
10 Advisory Council to be composed entirely of physicians who are or
11 who have been medical directors or regional medical directors.
12 Members of the Subcommittee shall be appointed by and shall serve at
13 the pleasure of the Commissioner. The Subcommittee shall advise the
14 Commissioner or the Commissioner's designee on the following:

- 15 a. the design of all medical aspects and components of
16 emergency medical services systems,
17 b. the appropriateness of all standards for medical and
18 patient care operations or services, treatment
19 procedures and protocols,
20 c. the implementation and facilitation of regional EMS
21 Systems, and
22 d. such other matters and activities as directed by the
23 Commissioner or the Commissioner's designee;

1 10. Employ and prescribe the duties of employees as may be
2 necessary to administer the provisions of the Oklahoma Emergency
3 Response Systems Development Act;

4 11. Apply for and accept public and private gifts, grants,
5 donations and other forms of financial assistance designed for the
6 support of emergency medical services;

7 12. Develop a classification system for all hospitals that
8 treat emergency patients. The classification system shall:

9 a. identify stabilizing and definitive emergency services
10 provided by each hospital,

11 b. requires each hospital to notify the regional
12 emergency medical services system control when
13 treatment services are at maximum capacity and that
14 emergency patients should be diverted to another
15 hospital; and

16 13. Develop and monitor a statewide emergency medical services
17 and trauma analysis system designed to:

18 a. identify emergency patients and severely injured
19 trauma patients treated in Oklahoma,

20 b. identify the total amount of uncompensated emergency
21 care provided each fiscal year by each hospital and
22 ambulance service in Oklahoma, and

1 c. monitor emergency patient care provided by emergency
2 medical service and hospitals.

3 SECTION 4. AMENDATORY 63 O.S. 2001, Section 1-2516, as
4 amended by Section 1, Chapter 85, O.S.L. 2002 (63 O.S. Supp. 2004,
5 Section 1-2516), is amended to read as follows:

6 Section 1-2516. A. 1. There is hereby re-created the Oklahoma
7 Emergency Response Systems Development Advisory Council until July
8 1, 2008, in accordance with the provisions of the Oklahoma Sunset
9 Law, to be composed of physicians, health service providers,
10 consumers of health care, other health care professionals, and
11 persons involved in the education and training of emergency medical
12 personnel.

13 2. The Council shall consist of nineteen (19) persons, eight of
14 whom shall be persons representing rural areas of this state and
15 counties with populations under fifty thousand (50,000). Members of
16 the Council shall be appointed as follows:

- 17 a. six members shall be appointed by the Governor,
- 18 b. five members shall be appointed by the State
19 Commissioner of Health,
- 20 c. four members shall be appointed by the Speaker of the
21 House of Representatives, and
- 22 d. four members shall be appointed by the President Pro
23 Tempore of the Senate.

1 3. Two of the appointees of each appointing authority shall
2 represent rural areas of this state and counties with populations
3 under fifty thousand (50,000). Initially, three of the appointees
4 of the Governor, two appointees of the Commissioner, and one
5 appointee each of the Speaker of the House of Representatives and
6 the President Pro Tempore of the Senate shall be appointed for terms
7 of one (1) year. The remaining appointees of the Council shall be
8 appointed for terms of two (2) years. Thereafter, all appointees
9 shall be appointed for terms of two (2) years. All appointees shall
10 be eligible for reappointment, but in no case shall any appointee
11 ~~serve~~ be appointed for more than six (6) consecutive years on the
12 Council.

13 4. The current members of the Council shall continue to serve
14 as members of the Council until a majority of the appointments are
15 made under this section and such current members shall be eligible
16 for reappointment.

17 B. Persons on the Council shall at all times serve without
18 compensation, but shall be reimbursed for their actual and necessary
19 travel expenses from funds available for the operation of the State
20 Department of Health and in accordance with the provisions of the
21 State Travel Reimbursement Act. The Council shall advise the
22 Commissioner or the Commissioner's designee on the following:

- 1 1. Training program specifications for emergency medical
2 personnel, the types of medical care procedures which may be
3 performed by emergency medical personnel, and qualifications for
4 licensure and certification of emergency medical personnel;
- 5 2. Patient care equipment for ambulances, ambulance
6 specifications, criteria and standards for the classification of
7 emergency medical services rendered by providers, including
8 communications and reporting requirements, and operational
9 procedures for providers of ambulance services;
- 10 3. Design of the statewide communications system, including
11 procedures for summoning and dispatching emergency medical service,
12 including 911;
- 13 4. Projects, programs, and legislation needed to improve
14 emergency medical services in the state; and
- 15 5. Such other matters and activities as directed by the
16 Commissioner or the Commissioner's designee.

17 SECTION 5. REPEALER 63 O.S. 2001, Sections 1-2507, 1-
18 2514, 1-2517, 1-2518, 1-2519, 1-2520 and 1-2521, are hereby
19 repealed.

20 SECTION 6. This act shall become effective July 1, 2005.

21 SECTION 7. It being immediately necessary for the preservation
22 of the public peace, health and safety, an emergency is hereby

1 declared to exist, by reason whereof this act shall take effect and
2 be in full force from and after its passage and approval.
3 COMMITTEE REPORT BY: COMMITTEE ON HEALTH & HUMAN RESOURCES, dated
4 2-24-05 - DO PASS, As Coauthored.