

1 STATE OF OKLAHOMA

2 1st Session of the 54th Legislature (2013)

3 HOUSE BILL 1083

By: Ownbey

4
5
6 AS INTRODUCED

7 An Act relating to public health and safety; amending
8 63 O.S. 2011, Sections 1-2503, 1-2504, 1-2505, 1-
9 2505.1, 1-2505.2, as amended by Section 489, Chapter
10 304, O.S.L. 2012, 1-2505.3 and 1-2511 (63 O.S. Supp.
11 2012, Section 1-2505.2), which relate to the Oklahoma
12 Emergency Response Systems Development Act; modifying
13 definitions; conforming references to certain
14 personnel; requiring certain program to include
15 certain requirement; repealing 63 O.S. 2011, Section
16 1-2508, which relates to the licensure of certain
17 individuals without examination; and providing an
18 effective date.

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

SECTION 1. AMENDATORY 63 O.S. 2011, Section 1-2503, is
amended to read as follows:

Section 1-2503. As used in the Oklahoma Emergency Response
Systems Development Act:

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

1 required. Vehicles used as ambulances shall meet such standards as
2 may be required by the State Board of Health for approval, and shall
3 display evidence of such approval at all times;

4 2. "Ambulance authority" means any public trust or nonprofit
5 corporation established by the state or any unit of local government
6 or combination of units of government for the express purpose of
7 providing, directly or by contract, emergency medical services in a
8 specified area of the state;

9 3. "Ambulance patient" or "patient" means any person who is or
10 will be transported in a reclining position to or from a health care
11 facility in an ambulance;

12 4. "Ambulance service" means any private firm or governmental
13 agency which is or should be licensed by the State Department of
14 Health to provide levels of medical care based on certification
15 standards promulgated by the Board;

16 5. "Ambulance service district" means any county, group of
17 counties or parts of counties formed together to provide, operate
18 and finance emergency medical services as provided by Section 9C of
19 Article X of the Oklahoma Constitution or Sections 1201 through 1221
20 of Title 19 of the Oklahoma Statutes;

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

22 7. "Certified emergency medical responder" means an individual
23 certified by the Department to perform emergency medical services in
24 accordance with the Oklahoma Emergency Response Systems Development

1 Act and in accordance with the rules and standards promulgated by
2 the Board;

3 8. "Certified emergency medical response agency" means an
4 organization of any type certified by the Department to provide
5 emergency medical care, but not transport. Certified emergency
6 medical response agencies may utilize certified emergency medical
7 responders of licensed emergency medical personnel provided,
8 however, that all personnel so utilized shall function under the
9 direction of and consistent with guidelines for medical control;

10 9. "Classification" means an inclusive standardized
11 identification of stabilizing and definitive emergency services
12 provided by each hospital that treats emergency patients;

13 10. "CoAEMSP" means the Committee on Accreditation of
14 Educational Programs for the Emergency Medical Services Professions;

15 ~~8.~~ 11. "Commissioner" means the State Commissioner of Health;

16 ~~9.~~ 12. "Council" means the Oklahoma Emergency Response Systems
17 Development Advisory Council;

18 13. "Critical care paramedic" or "CCP" means a licensed
19 paramedic who has successfully completed critical care training and
20 testing requirements in accordance with the Oklahoma Emergency
21 Response Systems Development Act and in accordance with the rules
22 and standards promulgated by the Board;

23 ~~10.~~ 14. "Department" means the State Department of Health;
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1 ~~11.~~ 15. "Emergency medical services system" means a system
2 which provides for the organization and appropriate designation of
3 personnel, facilities and equipment for the effective and
4 coordinated local, regional and statewide delivery of health care
5 services primarily under emergency conditions;

6 ~~12.~~ "Emergency Medical Technician/Basic, Emergency Medical
7 Technician/Intermediate, Emergency Medical Technician/Advanced
8 Cardiac, or Emergency Medical Technician/Paramedic" means an
9 individual licensed by the Department to perform emergency medical
10 services in accordance with the Oklahoma Emergency Response Systems
11 Development Act and in accordance with the rules and standards
12 promulgated by the Board;

13 ~~13.~~ "First responder" means an individual certified by the
14 Department to perform emergency medical services in accordance with
15 the Oklahoma Emergency Response Systems Development Act and in
16 accordance with the rules and standards promulgated by the Board;

17 ~~14.~~ "First response agency" means an organization of any type
18 certified by the Department to provide emergency medical care, but
19 not transport. First response agencies may utilize certified first
20 responders or licensed emergency medical technicians; provided,
21 however, that all personnel so utilized shall function under the
22 direction of and consistent with guidelines for medical control;

1 16. "Letter of review" means the official designation from
2 CoAEMSP to a paramedic program that is in the "becoming accredited"
3 process;

4 17. "Licensed emergency medical personnel" means an emergency
5 medical technician (EMT), an intermediate, an advanced emergency
6 medical technician (AEMT), or a paramedic licensed by the Department
7 to perform emergency medical services in accordance with the
8 Oklahoma Emergency Response Systems Development Act and the rules
9 and standards promulgated by the Board;

10 ~~15.~~ 18. "Licensure" means the licensing of emergency medical
11 care providers and ambulance services pursuant to rules and
12 standards promulgated by the Board at one or more of the following
13 levels:

- 14 a. Basic life support,
- 15 b. Intermediate life support,
- 16 c. Paramedic life support,
- 17 d. Advanced life support,
- 18 e. Stretcher aid van, and
- 19 ~~e.~~ ~~Specialized Mobile Intensive~~
- 20 f. Specialty Care, which shall be used solely for inter-
21 hospital transport of patients requiring specialized
22 en route medical monitoring and advanced life support
23 which exceed the capabilities of the equipment and
24 personnel provided by paramedic life support.

1 Requirements for each level of care shall be established by the
2 Board. Licensure at any level of care includes a license to operate
3 at any lower level, with the exception of licensure for ~~Specialized~~
4 ~~Mobile Intensive Care~~ speciality; provided, however, that the
5 highest level of care offered by an ambulance service shall be
6 available twenty-four (24) hours each day, three hundred sixty-five
7 (365) days per year.

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

10 ~~16.~~ 19. "Medical control" means local, regional or statewide
11 medical direction and quality assurance of health care delivery in
12 an emergency medical service system. On-line medical control is the
13 medical direction given to licensed emergency medical personnel,
14 certified emergency medical responders and stretcher aid van
15 personnel by a physician via radio or telephone. Off-line medical
16 control is the establishment and monitoring of all medical
17 components of an emergency medical service system, which is to
18 include stretcher aid van service including, but not limited to,
19 protocols, standing orders, educational programs, and the quality
20 and delivery of on-line control;

21 ~~17.~~ 20. "Medical director" means a physician, fully licensed
22 without restriction, who acts as a paid or volunteer medical advisor
23 to a licensed ambulance service and who monitors and directs the
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1 care so provided. Such physicians shall meet such qualifications
2 and requirements as may be promulgated by the Board;

3 ~~18.~~ 21. "Region" or "emergency medical service region" means
4 two or more municipalities, counties, ambulance districts or other
5 political subdivisions exercising joint control over one or more
6 providers of emergency medical services and stretcher aid van
7 service through common ordinances, authorities, boards or other
8 means;

9 ~~19.~~ 22. "Regional emergency medical services system" means a
10 network of organizations, individuals, facilities and equipment
11 which serves a region, subject to a unified set of regional rules
12 and standards which may exceed, but may not be in contravention of,
13 those required by the state, which is under the medical direction of
14 a single regional medical director, and which participates directly
15 in the delivery of the following services:

- 16 a. medical call-taking and emergency medical services
17 dispatching, emergency and routine, including priority
18 dispatching of first response agencies, stretcher aid
19 van and ambulances,
- 20 b. ~~first response~~ emergency medical responder services
21 provided by ~~first~~ emergency medical response agencies,
- 22 c. ambulance services, both emergency, routine and
23 stretcher aid van including, but not limited to, the
24 transport of patients in accordance with transport

1 protocols approved by the regional medical director,
2 and

3 d. directions given by physicians directly via radio or
4 telephone, or by written protocol, to ~~first~~ emergency
5 medical response agencies, stretcher aid van or
6 ambulance personnel at the scene of an emergency or
7 while en route to a hospital;

8 ~~20.~~ 23. "Regional medical director" means a licensed physician,
9 who meets or exceeds the qualifications of a medical director as
10 defined by the Oklahoma Emergency Response Systems Development Act,
11 chosen by an emergency medical service region to provide external
12 medical oversight, quality control and related services to that
13 region;

14 ~~21.~~ 24. "Registration" means the listing of an ambulance
15 service in a registry maintained by the Department; provided,
16 however, registration shall not be deemed to be a license;

17 ~~22.~~ 25. "Stretcher aid van" means any ground vehicle which is
18 or should be approved by the State Commissioner of Health, which is
19 designed and equipped to transport individuals on a stretcher or
20 gurney type apparatus. Vehicles used as stretcher aid vans shall
21 meet such standards as may be required by the State Board of Health
22 for approval and shall display evidence of such approval at all
23 times. Stretcher aid van services shall only be permitted and
24 approved by the Commissioner in emergency medical service regions,

1 ambulance service districts, or counties with populations in excess
2 of 300,000 people. Notwithstanding the provisions of this
3 paragraph, stretcher aid van transports may be made to and from any
4 federal or state veterans facility;

5 ~~23.~~ 26. "Stretcher aid van patient" means any person who is or
6 will be transported in a reclining position on a stretcher or
7 gurney, who is medically stable, nonemergent and does not require
8 any medical monitoring equipment or assistance during transport; and

9 ~~24.~~ 27. "Transport protocol" means the written instructions
10 governing decision-making at the scene of a medical emergency by
11 ambulance personnel regarding the selection of the hospital to which
12 the patient shall be transported. Transport protocols shall be
13 developed by the regional medical director for a regional emergency
14 medical services system or by the Department if no regional
15 emergency medical services system has been established. Such
16 transport protocols shall adhere to, at a minimum, the following
17 guidelines:

- 18 a. nonemergency, routine transport shall be to the
19 facility of the patient's choice,
- 20 b. urgent or emergency transport not involving life-
21 threatening medical illness or injury shall be to the
22 nearest facility, or, subject to transport
23 availability and system area coverage, to the facility
24 of the patient's choice, and

1 c. life-threatening medical illness or injury shall
2 require transport to the nearest health care facility
3 appropriate to the needs of the patient as established
4 by regional or state guidelines.

5 SECTION 2. AMENDATORY 63 O.S. 2011, Section 1-2504, is
6 amended to read as follows:

7 Section 1-2504. A. Any hospital or health care facility
8 operating within the state may utilize ~~EMT/Basic, EMT/Intermediate,~~
9 ~~EMT/Advanced Cardiac or EMT/Paramedic~~ Emergency Medical Technician,
10 Intermediate, Advanced Emergency Medical Technician or Paramedic or
11 Critical Care Paramedic personnel for the delivery of emergency
12 medical patient care within the hospital or health care facility.

13 All licensed ambulance services shall use ~~EMT/Basic,~~
14 ~~EMT/Intermediate, EMT/Advanced Cardiac, or EMT/Paramedic~~ Emergency
15 Medical Technician, Intermediate, Advanced Emergency Medical
16 Technician or Paramedic personnel for on-scene patient care and
17 stabilization and the delivery of prehospital and en route emergency
18 medical care.

19 B. While participating in an Emergency Medical Technician
20 ~~Basic, Intermediate,~~ Advanced Emergency Medical Technician or
21 Paramedic training course approved by the Department ~~of Health,~~ the
22 ~~EMT~~ student shall be allowed to perform in the hospital, clinic or
23 prehospital setting, while under the direct supervision of a
24 physician, registered nurse, ~~EMT~~ or licensed emergency medical

1 personnel who is licensed at a level equal to or above the level of
2 training of the student, or other allied health preceptor, any of
3 the skills determined to be appropriate for the training level of
4 the student by the Department.

5 C. A registered nurse or licensed practical nurse may be used
6 in the back of an ambulance during an interhospital transfer to
7 supplement the skills of ~~an~~ licensed emergency medical ~~technician~~
8 personnel. A registered nurse or licensed practical nurse
9 functioning in this fashion must be following written orders of a
10 physician or be in direct radio or telephone contact with a
11 physician.

12 SECTION 3. AMENDATORY 63 O.S. 2011, Section 1-2505, is
13 amended to read as follows:

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

16 1. ~~"Emergency Medical Technician/Basic" or "EMT/Basic"~~
17 Technician (EMT)" means an individual licensed by the Department of
18 Health following completion of a standard Basic Emergency Medical
19 Technician training program approved by the Department, who has met
20 such other standards of competence and character as may be required,
21 and who has passed a standard licensing examination of knowledge and
22 skill, administered by the Department or other entity designated by
23 the Department. The licensed Emergency Medical ~~Technician/Basic~~
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1 Technician is allowed to perform such skills as may be designated by
2 the Department;

3 2. ~~"Emergency Medical Technician/Intermediate" or~~
4 ~~"EMT/Intermediate"~~ Intermediate means an individual licensed as an
5 ~~EMT/Basic~~ EMT, has completed an intermediate training program
6 approved by the Department, who has met such other standards of
7 competence and character as may be required, and who has passed a
8 standard licensing examination of knowledge and skill administered
9 by the Department or other entity designated by the Department. The
10 ~~Emergency Medical Technician/Intermediate~~ Intermediate is allowed to
11 perform such skills as may be designated by the Department;

12 3. Advanced Emergency Medical Technician (AEMT)" means an
13 individual licensed as an Emergency Medical Technician or
14 Intermediate who has completed an AEMT training program approved by
15 the Department, who has met such other standards of competence and
16 character as may be required, and who has passed a standard
17 licensing examination of knowledge and skills administered by the
18 Department or other entity designated by the Department. The
19 Advanced Emergency Medical Technician is allowed to perform such
20 skills as may be designated by the Department; and

21 ~~"Emergency Medical Technician/Paramedic" or "EMT/Paramedic"~~ 4.
22 "Paramedic" means an individual licensed as an ~~EMT/Basic~~ or
23 ~~EMT/Intermediate~~ EMT, Intermediate or AMET, who has completed a
24 standard Paramedic training program, who has met such other

1 standards of competence and character as may be required, and who
2 has passed a standard licensing examination of knowledge and skill
3 administered by the Department or other entity designated by the
4 Department. The ~~Emergency Medical Technician/Paramedic~~ Paramedic is
5 allowed to perform such skills as may be designated by the
6 Department.

7 SECTION 4. AMENDATORY 63 O.S. 2011, Section 1-2505.1, is
8 amended to read as follows:

9 Section 1-2505.1 A. In the event of the death of ~~an~~ any
10 licensed emergency medical ~~technician~~ personnel or a ~~registered~~
11 certified emergency medical responder resulting from the official
12 duties of such licensed emergency medical ~~technician~~ personnel or
13 ~~registered~~ certified emergency medical responder performed while in
14 the line of duty, the State Department of Health shall pay the
15 designated beneficiary of the ~~technician or responder~~ deceased the
16 sum of Five Thousand Dollars (\$5,000.00).

17 B. If the designated beneficiary predeceases the emergency
18 medical ~~technician~~ personnel or ~~registered~~ certified emergency
19 medical responder and there is not an alternate or contingent
20 beneficiary, the death benefit shall be payable to the personal
21 representative of the decedent.

22 C. All payments made pursuant to the provisions of this section
23 shall be paid from the Emergency Medical Personnel Death Benefit
24 Revolving Fund created pursuant to Section 1-2505.2 of this title.

1 SECTION 5. AMENDATORY 63 O.S. 2011, Section 1-2505.2, as
2 amended by Section 489, Chapter 304, O.S.L. 2012 (63 O.S. Supp.
3 2012, Section 1-2505.2), is amended to read as follows:

4 Section 1-2505.2 There is hereby created in the State Treasury
5 a revolving fund for the State Department of Health to be designated
6 the "Emergency Medical Personnel Death Benefit Revolving Fund". The
7 fund shall be a continuing fund, not subject to fiscal year
8 limitations, and shall consist of all monies received by the State
9 Department of Health from the fees imposed pursuant to Section 1-
10 2505.3 of this title. All monies accruing to the credit of said
11 fund are hereby appropriated and may be budgeted and expended by the
12 State Department of Health for the purpose of making death benefit
13 payments to the named beneficiary or personal representative of a
14 deceased licensed emergency medical ~~technician~~ personnel or
15 ~~registered~~ certified emergency medical responder pursuant to Section
16 1-2505.1 of this title. Expenditures from said fund shall be made
17 upon warrants issued by the State Treasurer against claims filed as
18 prescribed by law with the Director of the Office of Management and
19 Enterprise Services for approval and payment.

20 SECTION 6. AMENDATORY 63 O.S. 2011, Section 1-2505.3, is
21 amended to read as follows:

22 Section 1-2505.3 A. In addition to any other fee that may be
23 authorized by law or pursuant to administrative rule of the State
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1 Department of Health effective July 1, 2010, there shall be imposed
2 a fee of:

3 1. Ten Dollars (\$10.00) for each original application for ~~an~~
4 ~~emergency medical technician~~ licensed emergency medical personnel;

5 2. Two Dollars and fifty cents (\$2.50) for each renewal
6 application for ~~an emergency medical technician~~ licensed emergency
7 medical personnel;

8 3. Ten Dollars (\$10.00) for each original application for a
9 ~~registered~~ certified emergency medical responder; and

10 4. Five Dollars (\$5.00) for each renewal application for a
11 ~~registered~~ certified emergency medical responder.

12 B. The fees authorized by subsection A of this section shall be
13 apportioned to the Emergency Medical Personnel Death Benefit
14 Revolving Fund created pursuant to Section 1-2505.2 of this title.

15 SECTION 7. AMENDATORY 63 O.S. 2011, Section 1-2511, is
16 amended to read as follows:

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

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

1 administration and coordination of federal and state laws and
2 programs relating to the development, planning, prevention,
3 improvement and management of emergency medical services, including
4 but not limited to the staffing of the Oklahoma Emergency Response
5 Systems Development Advisory Council, shall be conducted by the
6 Division of Emergency Medical Services, as prescribed by Section 1-
7 2510 of this title;

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

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

22 4. Prepare, maintain and utilize a comprehensive plan and
23 program for emergency medical services development throughout the
24 state to be adopted by the State Board of Health and incorporated

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

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

15 6. Develop a standard report form which may be used by local,
16 regional and statewide emergency medical services and emergency
17 medical services systems to facilitate the collection of data
18 related to the provision of emergency medical and trauma care. The
19 Commissioner shall also develop a standardized emergency medical
20 services data set and an electronic submission standard. Each
21 ambulance service shall submit the information required in this
22 section at such intervals as may be prescribed by rules promulgated
23 by the State Board of Health;

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1 7. Evaluate and certify all emergency medical services training
2 programs and emergency medical technician training courses and
3 operational services in accordance with specifications and
4 procedures approved by the Board. Nonaccredited paramedic training
5 programs shall begin their final paramedic training class by
6 December 31, 2012. Only paramedic training programs accredited or
7 receiving a Letter of Review (LOR) by CoAEMSP may enroll new
8 paramedic students after January 1, 2013;

9 8. Provide an emergency medical ~~technicians'~~ personnel and
10 ambulance service licensure program to include a requirement that
11 ambulance services licensed as specialty care ambulance providers
12 shall be used solely for interhospital transport of patients
13 requiring specialized enroute medical monitoring and advanced life
14 support which exceeds the capabilities of the equipment and
15 personnel provided by paramedic life support;

16 9. Create a standing Medical Direction Subcommittee of the
17 Advisory Council to be composed entirely of physicians who are or
18 who have been medical directors or regional medical directors.
19 Members of the Subcommittee shall be appointed by and shall serve at
20 the pleasure of the Commissioner. The Subcommittee shall advise the
21 Commissioner or the Commissioner's designee on the following:

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

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

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

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

- a. identify stabilizing and definitive emergency services provided by each hospital, and
- b. ~~requires~~ require each hospital to notify the regional emergency medical services system control when treatment services are at maximum capacity and that emergency patients should be diverted to another hospital; and

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

- 1 a. identify emergency patients and severely injured
2 trauma patients treated in Oklahoma,
3 b. identify the total amount of uncompensated emergency
4 care provided each fiscal year by each hospital and
5 ambulance service in Oklahoma, and
6 c. monitor emergency patient care provided by emergency
7 medical service and hospitals.

8 SECTION 8. REPEALER 63 O.S. 2011, Section 1-2508, is
9 hereby repealed.

10 SECTION 9. This act shall become effective November 1, 2013.

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