

1 STATE OF OKLAHOMA

2 1st Session of the 55th Legislature (2015)

3 COMMITTEE SUBSTITUTE
4 FOR
5 HOUSE BILL NO. 1036

By: Faught

6
7 COMMITTEE SUBSTITUTE

8 An Act relating to public health and safety; amending
9 63 O.S. 2011, Section 1-2503, as last amended by
10 Section 65, Chapter 229, O.S.L. 2013 (63 O.S. Supp.
11 2014, Section 1-2503), which relates to the Oklahoma
12 Emergency Response Systems Development Act; modifying
13 definitions; requiring Emergency Medical Services to
14 conduct certain reviews; requiring reviews to be
15 confidential and not be subject to certain acts;
16 amending 63 O.S. 2011, Section 1-2515, which relates
17 to the regulation and control of Ambulance Service
18 transports; updating references; providing for
19 codification; and providing an effective date.

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1 appropriate on-scene and en route patient stabilization and care as
2 required. Vehicles used as ambulances shall meet such standards as
3 may be required by the State Board of Health for approval, and shall
4 display evidence of such approval at all times;

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

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

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

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

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

23 7. "Certified emergency medical responder" means an individual
24 certified by the Department to perform emergency medical services in

1 accordance with the Oklahoma Emergency Response Systems Development
2 Act and in accordance with the rules and standards promulgated by
3 the Board;

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

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

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

16 11. "Commissioner" means the State Commissioner of Health;

17 12. "Council" means the Trauma and Emergency Response Advisory
18 Council created in Section ~~44~~ 1-103a.1 of this ~~act~~ title;

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

24 14. "Department" means the State Department of Health;

1 15. "Emergency medical services system" means a system which
2 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 16. "Letter of review" means the official designation from
7 CoAEMSP to a paramedic program that is in the "becoming accredited"
8 process;

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

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

- 18 a. Basic life support,
- 19 b. Intermediate life support,
- 20 c. Paramedic life support,
- 21 d. Advanced life support,
- 22 e. Stretcher ~~aid~~ van, and
- 23 f. Specialty care, which shall be used solely for
24 interhospital transport of patients requiring

1 specialized en route medical monitoring and advanced
2 life support which exceed the capabilities of the
3 equipment and personnel provided by paramedic life
4 support.

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

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

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

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

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

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

- 19 a. medical call-taking and emergency medical services
20 dispatching, emergency and routine, including priority
21 dispatching of first response agencies, stretcher ~~aid~~
22 van and ambulances,
23 b. emergency medical responder services provided by
24 emergency medical response agencies,

- 1 c. ambulance services, both emergency, routine and
2 stretcher ~~aid~~ van including, but not limited to, the
3 transport of patients in accordance with transport
4 protocols approved by the regional medical director,
5 and
6 d. directions given by physicians directly via radio or
7 telephone, or by written protocol, to emergency
8 medical response agencies, stretcher ~~aid~~ van or
9 ambulance personnel at the scene of an emergency or
10 while en route to a hospital;

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

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

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

1 times. Stretcher ~~aid~~ van services shall only be permitted and
2 approved by the Commissioner in emergency medical service regions,
3 ambulance service districts, or counties with populations in excess
4 of ~~300,000~~ five hundred thousand (500,000) people. Notwithstanding
5 the provisions of this paragraph, stretcher ~~aid~~ van transports may
6 be made to and from any federal or state veterans facility;

7 26. "Stretcher ~~aid~~ van patient passenger" means any person who
8 is or will be transported in a reclining position on a stretcher or
9 gurney, who is medically stable, nonemergent and does not require
10 any medical monitoring equipment or assistance during transport.
11 Passengers must be authorized as qualified to be transported by
12 stretcher van. Passengers shall be authorized through screening
13 provided by a certified medical dispatching protocol approved by the
14 Department. All patients being transported to or from any medically
15 licensed facility shall be screened before transport. Any patient
16 transported without screening shall be a violation of Board rule by
17 the transporting company and subject to administrative procedures of
18 the Department; and

19 27. "Transport protocol" means the written instructions
20 governing decision-making at the scene of a medical emergency by
21 ambulance personnel regarding the selection of the hospital to which
22 the patient shall be transported. Transport protocols shall be
23 developed by the regional medical director for a regional emergency
24 medical services system or by the Department if no regional

1 emergency medical services system has been established. Such
2 transport protocols shall adhere to, at a minimum, the following
3 guidelines:

- 4 a. nonemergency, routine transport shall be to the
5 facility of the patient's choice,
- 6 b. urgent or emergency transport not involving life-
7 threatening medical illness or injury shall be to the
8 nearest facility, or, subject to transport
9 availability and system area coverage, to the facility
10 of the patient's choice, and
- 11 c. life-threatening medical illness or injury shall
12 require transport to the nearest health care facility
13 appropriate to the needs of the patient as established
14 by regional or state guidelines.

15 SECTION 2. NEW LAW A new section of law to be codified
16 in the Oklahoma Statutes as Section 1-2504.2 of Title 63, unless
17 there is created a duplication in numbering, reads as follows:

18 A. Licensed Emergency Medical Services shall conduct Quality
19 Assurance reviews of operations and medical care provided. This
20 activity shall be in accordance with standards developed by
21 Emergency Medical Services Administration and Medical Control.

22 B. The proceedings and records of these Quality Assurance
23 reviews and continuous quality improvement activities conducted by
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1 Emergency Medical Services shall be confidential and not subject to
2 disclosure by subpoena or otherwise.

3 C. Quality Assurance and Continuous Quality Improvement
4 activity, records and proceedings of any licensed Emergency Medical
5 Service shall be confidential and not subject to the Oklahoma Open
6 Meeting Act nor the Oklahoma Open Records Act.

7 SECTION 3. AMENDATORY 63 O.S. 2011, Section 1-2515, is
8 amended to read as follows:

9 Section 1-2515. A. Notwithstanding any other provision of this
10 title, Emergency Medical Services (EMS) Regions, Ambulance Service
11 districts or municipalities are hereby authorized to regulate and
12 control, pursuant to duly enacted ordinance or regulation, Ambulance
13 Service transports originating within the jurisdiction of such EMS
14 Regions, Ambulance Service districts or municipalities.

15 B. Any ordinance or regulation adopted pursuant to subsection A
16 of this section shall meet and may exceed, but shall not be in
17 contravention of, the standards promulgated by the State Board of
18 Health for Ambulance Service transports.

19 C. 1. Any ordinance or regulation adopted by an EMS Region,
20 Ambulance Service district or a municipality may establish a sole-
21 provider system for stretcher ~~aid~~ van and/or Ambulance Service
22 transports; provided, however, any such designated or contracted
23 sole-provider which is not an EMS Region, Ambulance Service
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1 district, municipality, or other public entity shall be selected by
2 competitive bidding.

3 2. A contract entered into pursuant to such bidding shall be
4 with the lowest and best bidder and may be for an initial term of
5 such duration as deemed operationally and fiscally prudent by the
6 contracting agency. The term of such sole-provider contract shall
7 be made public at the time bids are solicited, which solicitation
8 shall be not less than sixty (60) days prior to the contract start
9 date.

10 D. Any EMS Region, Ambulance Service district or municipality
11 may establish a sole-provider system for stretcher ~~and~~ van and/or
12 Ambulance Service transports and may allow additional geographic or
13 political subdivisions to join such a system at any time. Whenever
14 such a geographic or political subdivision joins such a sole-
15 provider system, competitive bidding shall not be required and
16 provision for servicing the new jurisdiction may be accomplished by
17 amending the existing sole-provider contract. Furthermore, in the
18 event the expansion of the service area of the EMS Region, Ambulance
19 Service district or the municipality is substantial (in the sole
20 opinion of the governing body of the EMS Region, Ambulance Service
21 district or municipality), the existing sole-provider contract may
22 be extended for a period sufficient to allow reasonable opportunity
23 for recovery of capital costs of expansion, as determined by the
24 contracting agency.

1 E. The provisions of this section shall not be construed or
2 applied to limit the operation of any emergency medical service
3 district established and operating pursuant to Section 9C of Article
4 10 of the Oklahoma Constitution; provided, however, that, upon
5 invitation and approval of a majority of the voters of the district,
6 any such district is hereby authorized to join by appropriate
7 agreement any system established by an EMS Region, Ambulance Service
8 district or a municipality pursuant to the provisions of this
9 section.

10 F. The following types of patient transports shall be exempt
11 from regulation by EMS Regions, Ambulance Service districts or
12 municipalities:

13 1. Any ambulance owned or operated by, or under contract to
14 perform ambulance transport services for, the Federal or State
15 government, or any agency thereof;

16 2. Any ambulance owned and operated by a hospital and in use to
17 transport a patient of the owner-hospital, which patient has been
18 admitted to and not been discharged from the owner-hospital, to or
19 from another hospital or medical care facility at which the patient
20 receives a diagnostic or therapeutic procedure not available at the
21 owner-hospital;

22 3. Any ambulance engaged in a routine transport call to
23 transport a patient from a hospital, nursing home, or dialysis
24 center located within an EMS Region, Ambulance Service district or

1 municipality to any location outside the EMS Region, Ambulance
2 Service district or municipality;

3 4. Any ambulance engaged in the transport of a patient from a
4 location outside an EMS Region, Ambulance Service district or
5 municipality to a location inside an EMS Region, Ambulance Service
6 district or municipality; or

7 5. Any ambulance engaged in the interstate transport of a
8 patient.

9 SECTION 4. This act shall become effective November 1, 2015.

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