FIRST REGULAR SESSION SENATE COMMITTEE SUBSTITUTE FOR

SENATE BILL NO. 418

99TH GENERAL ASSEMBLY

Reported from the Committee on Professional Registration, March 9, 2017, with recommendation that the Senate Committee Substitute do pass.

1769S.02C

ADRIANE D. CROUSE, Secretary.

AN ACT

To repeal sections 190.103 and 190.165, RSMo, and to enact in lieu thereof three new sections relating to emergency medical services.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 190.103 and 190.165, RSMo, are repealed and three 2 new sections enacted in lieu thereof, to be known as sections 190.103, 190.147, 3 and 190.165, to read as follows:

190.103. 1. One physician with expertise in emergency medical services 2 from each of the EMS regions shall be elected by that region's EMS medical 3 directors to serve as a regional EMS medical director. The regional EMS medical 4 directors shall constitute the state EMS medical director's advisory committee 5and shall advise the department and their region's ambulance services on matters relating to medical control and medical direction in accordance with sections 6 7 190.001 to 190.245 and rules adopted by the department pursuant to sections 8 190.001 to 190.245. The regional EMS medical director shall serve a term of four years. The southwest, northwest, and Kansas City regional EMS medical 9 directors shall be elected to an initial two-year term. The central, east central, 10 and southeast regional EMS medical directors shall be elected to an initial 11 four-year term. All subsequent terms following the initial terms shall be four 1213 years.

A medical director is required for all ambulance services and emergency
 medical response agencies that provide: advanced life support services; basic life
 support services utilizing medications or providing assistance with patients'
 medications; or basic life support services performing invasive procedures

18 including invasive airway procedures. The medical director shall provide medical19 direction to these services and agencies in these instances.

3. The medical director, in cooperation with the ambulance service or 20emergency medical response agency administrator, shall have the responsibility 2122and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration 23for state and national standards as well as local area needs and resources. The 2425medical director, in cooperation with the ambulance service or emergency medical 26response agency administrator, shall establish and develop triage, treatment and transport protocols, which may include authorization for standing orders. 27

284. All ambulance services and emergency medical response agencies that 29are required to have a medical director shall establish an agreement between the 30 service or agency and their medical director. The agreement will include the roles, responsibilities and authority of the medical director beyond what is 3132granted in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The agreement shall also 33 34include grievance procedures regarding the emergency medical response agency or ambulance service, personnel and the medical director. 35

5. Regional EMS medical directors elected as provided under subsection 1 of this section shall be considered public officials for purposes of sovereign immunity, official immunity, and the Missouri public duty doctrine defenses.

6. The state EMS medical director's advisory committee shall be considered a peer review committee under section 537.035 and regional EMS medical directors shall be eligible to participate in the Missouri Patient Safety Organization as provided under the Patient Safety and Quality Improvement Act of 2005, 42 U.S.C. Section 299, et seq., as amended.

46 7. Regional EMS medical directors may act to provide online 47 telecommunication medical direction to EMT-Bs, EMT-Is, EMT-Ps, and 48 community paramedics and provide offline medical direction per 49 standardized treatment, triage, and transport protocols when EMS 50 personnel, including EMT-Bs, EMT-Is, or EMT-Ps community 51 paramedics, are providing care to special needs patients or at the 52 request of a local EMS agency or medical director.

53 8. When developing treatment protocols for special needs

patients, regional EMS medical directors may promulgate such protocols on a regional basis across multiple political subdivisions' jurisdictional boundaries and such protocols may be used by multiple agencies including, but not limited to, ambulance services, emergency response agencies, and public health departments.

9. Multiple EMS agencies including, but not limited to, ambulance services, emergency response agencies, and public health departments shall take necessary steps to follow the regional EMS protocols established as provided under subsection 8 of this section in cases of mass casualty or state-declared disaster incidents.

64 10. When regional EMS medical directors develop and implement 65 treatment protocols for patients or provide online medical direction for 66 such patients, such activity shall not be construed as having usurped 67 local medical direction authority in any manner.

11. Notwithstanding any other provision of law, when regional EMS medical directors are providing either online telecommunication medical direction to EMT-Bs, EMT-Is, EMT-Ps, and community paramedics, or offline medical direction per standardized EMS treatment, triage, and transport protocols for patients, those medical directions or treatment protocols may include the administration of the patient's own prescription medications.

190.147. 1. Emergency medical technician paramedics (EMT-Ps) 2 who have:

3 (1) Completed at least forty hours of the standard crisis 4 intervention training course as endorsed and developed by the National 5 Alliance on Mental Illness or a course of training that the ground or air 6 ambulance service's medical director has determined to be 7 academically equivalent thereto;

8 (2) Been authorized by their ground or air ambulance service's 9 administration and medical director under subsection 3 of section 10 190.103; and

(3) Whose ground or air ambulance service has developed and adopted standardized triage, treatment, and transport protocols under subsection 3 of section 190.103, which address the challenge of treating and transporting behavioral health patients who present a likelihood of serious harm to themselves or others as the term "likelihood of serious harm" is defined under section 632.005 or who are significantly 17 incapacitated by alcohol or drugs;

may make a good faith determination that such patients shall be placed
into a temporary hold for the sole purposes of transport to the nearest
appropriate facility.

212. EMT-Ps who have made a good faith decision for a temporary 22hold of a patient as authorized by this section shall no longer have to rely on the common law doctrine of implied consent and therefore shall 23not be civilly liable for a good faith determination made in accordance 24with this section and shall not have waived any sovereign immunity 25defense, official immunity defense, or Missouri public duty doctrine 2627defense if employed at the time of the good faith determination by a 28governmental employer.

3. Any ground or air ambulance service that adopts the authority and protocols provided for by this section shall have a memorandum of understanding with applicable local law enforcement agencies in order to achieve a collaborative and coordinated response to patients displaying symptoms of either a likelihood of serious harm to themselves or others or significant incapacitation by alcohol or drugs, which require a crisis intervention response.

190.165. 1. The department may refuse to issue or deny renewal of any certificate, permit or license required pursuant to sections 190.100 to 190.245 for failure to comply with the provisions of sections 190.100 to 190.245 or any lawful regulations promulgated by the department to implement its provisions as described in subsection 2 of this section. The department shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.

9 2. The department may cause a complaint to be filed with the 10 administrative hearing commission as provided by chapter 621 against any holder 11 of any certificate, permit or license required by sections 190.100 to 190.245 or any 12 person who has failed to renew or has surrendered his or her certificate, permit 13 or license for failure to comply with the provisions of sections 190.100 to 190.245 14 or any lawful regulations promulgated by the department to implement such 15 sections. Those regulations shall be limited to the following:

16 (1) Use or unlawful possession of any controlled substance, as defined in 17 chapter 195, or alcoholic beverage to an extent that such use impairs a person's 18 ability to perform the work of any activity licensed or regulated by sections190.100 to 190.245;

20 (2) Being finally adjudicated and found guilty, or having entered a plea 21 of guilty or nolo contendere, in a criminal prosecution under the laws of any state 22 or of the United States, for any offense reasonably related to the qualifications, 23 functions or duties of any activity licensed or regulated pursuant to sections 24 190.100 to 190.245, for any offense an essential element of which is fraud, 25 dishonesty or an act of violence, or for any offense involving moral turpitude, 26 whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any
certificate, permit or license issued pursuant to sections 190.100 to 190.245 or in
obtaining permission to take any examination given or required pursuant to
sections 190.100 to 190.245;

31 (4) Obtaining or attempting to obtain any fee, charge, tuition or other32 compensation by fraud, deception or misrepresentation;

(5) Incompetency, misconduct, gross negligence, fraud, misrepresentation
or dishonesty in the performance of the functions or duties of any activity licensed
or regulated by sections 190.100 to 190.245;

36 (6) Violation of, or assisting or enabling any person to violate, any
37 provision of sections 190.100 to 190.245, or of any lawful rule or regulation
38 adopted by the department pursuant to sections 190.100 to 190.245;

39 (7) Impersonation of any person holding a certificate, permit or license or
40 allowing any person to use his or her certificate, permit, license or diploma from
41 any school;

42 (8) Disciplinary action against the holder of a license or other right to
43 practice any activity regulated by sections 190.100 to 190.245 granted by another
44 state, territory, federal agency or country upon grounds for which revocation or
45 suspension is authorized in this state;

46 (9) For an individual being finally adjudged insane or incompetent by a47 court of competent jurisdiction;

(10) Assisting or enabling any person to practice or offer to practice any
activity licensed or regulated by sections 190.100 to 190.245 who is not licensed
and currently eligible to practice pursuant to sections 190.100 to 190.245;

51 (11) Issuance of a certificate, permit or license based upon a material 52 mistake of fact;

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(12) Violation of any professional trust, confidence, or legally protected

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54 privacy rights of a patient by means of an unauthorized or unlawful disclosure;

55 (13) Use of any advertisement or solicitation which is false, misleading or 56 deceptive to the general public or persons to whom the advertisement or 57 solicitation is primarily directed;

(14) Violation of the drug laws or rules and regulations of this state, anyother state or the federal government;

60 (15) Refusal of any applicant or licensee to respond to reasonable 61 department of health and senior services' requests for necessary information to 62 process an application or to determine license status or license eligibility;

63 (16) Any conduct or practice which is or might be harmful or dangerous64 to the mental or physical health or safety of a patient or the public;

(17) Repeated acts of negligence or recklessness in the performance of the
functions or duties of any activity licensed or regulated by sections 190.100 to
190.245.

3. If the department conducts investigations, the department, prior to
interviewing a licensee who is the subject of the investigation, shall explain to the
licensee that he or she has the right to:

71 (1) Consult legal counsel or have legal counsel present;

(2) Have anyone present whom he or she deems to be necessary or
desirable[, except for any holder of any certificate, permit, or license required by
sections 190.100 to 190.245]; and

(3) Refuse to answer any question or refuse to provide or sign any writtenstatement.

The assertion of any right listed in this subsection shall not be deemed by thedepartment to be a failure to cooperate with any department investigation.

79 4. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the 80 81 administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the department may, singly or in 82 combination, censure or place the person named in the complaint on probation on 83 such terms and conditions as the department deems appropriate for a period not 84 to exceed five years, or may suspend, for a period not to exceed three years, or 85 86 revoke the license, certificate or permit. Notwithstanding any provision of law 87 to the contrary, the department shall be authorized to impose a suspension or revocation as a disciplinary action only if it first files the requisite complaint with 88 89 the administrative hearing commission. The administrative hearing 90 commission shall hear all relevant evidence on remediation activities
91 of the licensee and shall make a recommendation to the department of
92 health and senior services as to licensure disposition based on such
93 evidence.

5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the department after compliance with all the requirements of sections 190.100 to 190.245 relative to the licensing of an applicant for the first time. Any individual whose license has been revoked twice within a ten-year period shall not be eligible for relicensure.

6. The department may notify the proper licensing authority of any other
state in which the person whose license was suspended or revoked was also
licensed of the suspension or revocation.

103 7. Any person, organization, association or corporation who reports or
104 provides information to the department pursuant to the provisions of sections
105 190.100 to 190.245 and who does so in good faith shall not be subject to an action
106 for civil damages as a result thereof.

107 8. The department of health and senior services may suspend any 108 certificate, permit or license required pursuant to sections 190.100 to 190.245 109 simultaneously with the filing of the complaint with the administrative hearing 110 commission as set forth in subsection 2 of this section, if the department finds 111 that there is an imminent threat to the public health. The notice of suspension 112shall include the basis of the suspension and notice of the right to appeal such 113suspension. The licensee may appeal the decision to suspend the license, 114 certificate or permit to the department. The appeal shall be filed within ten days 115from the date of the filing of the complaint. A hearing shall be conducted by the department within ten days from the date the appeal is filed. The suspension 116 117shall continue in effect until the conclusion of the proceedings, including review thereof, unless sooner withdrawn by the department, dissolved by a court of 118 119competent jurisdiction or stayed by the administrative hearing commission.

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