1	HOUSE OF REPRESENTATIVES - FLOOR VERSION		
2	STATE OF OKLAHOMA		
3	2nd Session of the 58th Legislature (2022)		
4	COMMITTEE SUBSTITUTE		
5	FOR ENGROSSED SENATE BILL NO. 1515 By: Weaver, Matthews, and Rogers of the Senate		
6	and		
7	Osburn of the House		
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11	COMMITTEE SUBSTITUTE		
12	An Act relating to emergency medical services;		
13	amending 63 O.S. 2021, Section 1-2503, as amended by Section 1, Chapter 93, O.S.L. 2019, which relates to		
14	definitions used in the Oklahoma Emergency Response Systems Development Act; modifying definitions;		
15	allowing certified emergency medical response agency to provide limited transport under certain		
16	conditions; modifying transport protocol; and providing an effective date.		
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19	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:		
20	SECTION 1. AMENDATORY 63 O.S. 2021, Section 1-2503, as		
21	amended by Section 1, Chapter 93, O.S.L. 2019, is amended to read as		
22	follows:		
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	Section 1-2503. As used in the Oklahoma Emergency Response		
24	Systems Development Act:		

1 1. "Ambulance" means any ground, air or water vehicle which is 2 or should be approved by the State Commissioner of Health, designed 3 and equipped to transport a patient or patients and to provide 4 appropriate on-scene and en route patient stabilization and care as 5 required. Vehicles used as ambulances shall meet such standards as 6 may be required by the Commissioner for approval, and shall display 7 evidence of such approval at all times;

8 2. "Ambulance authority" means any public trust or nonprofit 9 corporation established by the state or any unit of local government 10 or combination of units of government for the express purpose of 11 providing, directly or by contract, emergency medical services in a 12 specified area of the state;

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

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

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

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

7. "Certified emergency medical responder" means an individual
certified by the Department to perform emergency medical services in
accordance with the Oklahoma Emergency Response Systems Development
Act and in accordance with the rules and standards promulgated by
the Commissioner;

7 8. "Certified emergency medical response agency" means an organization of any type certified by the Department to provide 8 9 emergency medical care, but not transport and limited transport. A 10 certified emergency medical response agency shall only provide 11 transport upon approval by the appropriate online medical control at 12 the time of transport. Certified emergency medical response 13 agencies may utilize certified emergency medical responders or 14 licensed emergency medical personnel; provided, however, that all 15 personnel so utilized shall function under the direction of and 16 consistent with guidelines for medical control;

17 "Classification" means an inclusive standardized 9. 18 identification of stabilizing and definitive emergency services 19 provided by each hospital that treats emergency patients; 20 "COAEMSP" means the Committee on Accreditation of 10. 21 Educational Programs for the Emergency Medical Services Professions; 22 "Commissioner" means the State Commissioner of Health; 11. 23 12. "Council" means the Trauma and Emergency Response Advisory

24 Council created in Section 1-103a.1 of this title;

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

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

12 16. "Letter of review" means the official designation from 13 COAEMSP to a paramedic program that is in the "becoming accredited" 14 process;

15 17. "Licensed emergency medical personnel" means an emergency 16 medical technician (EMT), an intermediate, an advanced emergency 17 medical technician (AEMT), or a paramedic licensed by the Department 18 to perform emergency medical services in accordance with the 19 Oklahoma Emergency Response Systems Development Act and the rules 20 and standards promulgated by the Commissioner;

21 18. "Licensure" means the licensing of emergency medical care 22 providers and ambulance services pursuant to rules and standards 23 promulgated by the Commissioner at one or more of the following 24 levels:

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1	a.	Basic <u>basic</u> life support,
2	b.	Intermediate intermediate life support,
3	с.	Paramedic paramedic life support,
4	d.	Advanced advanced life support,
5	e.	Stretcher stretcher van, and
6	f.	Specialty specialty care, which shall be used solely
7		for interhospital transport of patients requiring
8		specialized en route medical monitoring and advanced
9		life support which exceed the capabilities of the
10		equipment and personnel provided by paramedic life
11		support.
12	Poquiromo	nts for each lowel of care shall be established by the

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

18 Licensure shall be granted or renewed for such periods and under 19 such terms and conditions as may be promulgated by the Commissioner;

20 19. "Medical control" means local, regional or statewide 21 medical direction and quality assurance of health care delivery in 22 an emergency medical service system. Online medical control is the 23 medical direction given to licensed emergency medical personnel, 24 certified emergency medical responders and stretcher van personnel by a physician via radio or telephone. Off-line medical control is the establishment and monitoring of all medical components of an emergency medical service system, which is to include stretcher van service including, but not limited to, protocols, standing orders, educational programs, and the quality and delivery of online control;

7 20. "Medical director" means a physician, fully licensed 8 without restriction, who acts as a paid or volunteer medical advisor 9 to a licensed ambulance service and who monitors and directs the 10 care so provided. Such physicians shall meet such qualifications 11 and requirements as may be promulgated by the Commissioner;

12 21. "Region" or "emergency medical service region" means two or 13 more municipalities, counties, ambulance districts or other 14 political subdivisions exercising joint control over one or more 15 providers of emergency medical services and stretcher van service 16 through common ordinances, authorities, boards or other means;

17 22. "Regional emergency medical services system" means a 18 network of organizations, individuals, facilities and equipment 19 which serves a region, subject to a unified set of regional rules 20 and standards which may exceed, but may not be in contravention of, 21 those required by the state, which is under the medical direction of 22 a single regional medical director, and which participates directly 23 in the delivery of the following services:

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- a. medical call-taking and emergency medical services
 dispatching, emergency and routine, including priority
 dispatching of first response agencies, stretcher van
 and ambulances,
- b. emergency medical responder services provided by
 emergency medical response agencies,
- 7 c. ambulance services, both emergency, routine and 8 stretcher van including, but not limited to, the 9 transport of patients in accordance with transport 10 protocols approved by the regional medical director, 11 and
- d. directions given by physicians directly via radio or
 telephone, or by written protocol, to emergency
 medical response agencies, stretcher van or ambulance
 personnel at the scene of an emergency or while en
 route to a hospital;

17 23. "Regional medical director" means a licensed physician, who 18 meets or exceeds the qualifications of a medical director as defined 19 by the Oklahoma Emergency Response Systems Development Act, chosen 20 by an emergency medical service region to provide external medical 21 oversight, quality control and related services to that region; 22 24. "Registration" means the listing of an ambulance service in

23 a registry maintained by the Department; provided, however,

24 registration shall not be deemed to be a license;

1 25. "Stretcher van" means any ground vehicle which is or should 2 be approved by the State Commissioner of Health, which is designed and equipped to transport individuals on a stretcher or gurney type 3 4 apparatus. Vehicles used as stretcher vans shall meet such 5 standards as may be required by the Commissioner for approval and 6 shall display evidence of licensure at all times. The Commissioner 7 shall not establish Federal Specification KKK-A-1822 ambulance 8 standards for stretcher vans; provided, a stretcher van shall meet Ambulance Manufacturers Division (AMD) Standards 004, 012 and 013, 9 10 and shall pass corresponding safety tests. Stretcher van services 11 shall only be permitted and approved by the Commissioner in 12 emergency medical service regions, ambulance service districts, or counties with populations in excess of five hundred thousand 13 14 (500,000) people. Notwithstanding the provisions of this paragraph, 15 stretcher van transports may be made to and from any federal or 16 state veterans facility. Stretcher vans may carry and provide 17 oxygen and may carry and utilize any equipment necessary for the 18 provision of oxygen;

19 26. "Stretcher van passenger" means any person who is or will 20 be transported in a reclining position on a stretcher or gurney, who 21 is medically stable, nonemergent and does not require any medical 22 monitoring equipment or assistance during transport except oxygen. 23 Passengers must be authorized as qualified to be transported by 24 stretcher van. Passengers shall be authorized through screening provided by a certified medical dispatching protocol approved by the Department. All patients being transported to or from any medically licensed facility shall be screened before transport. Any patient transported without screening shall be a violation of Commissioner rule by the transporting company and subject to administrative procedures of the Department; and

7 27. "Transport protocol" means the written instructions 8 governing decision-making at the scene of a medical emergency by 9 ambulance personnel regarding the selection of the hospital to which 10 the patient shall be transported. Transport protocols shall be 11 developed by the regional medical director for a regional emergency 12 medical services system or by the Department if no regional 13 emergency medical services system has been established. Such 14 transport protocols shall adhere to, at a minimum, the following 15 quidelines:

16 nonemergency, routine transport shall be to the a. 17 facility of the patient's choice, 18 b. urgent or emergency transport not involving life-19 threatening medical illness or injury shall be to the 20 nearest facility, or, subject to transport 21 availability and system area coverage, to the facility 22 of the patient's choice, and 23 life-threatening medical illness or injury shall с.

require transport to the nearest health care facility

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1	a	ppropriate to the needs of the patient as established	
2	b	y regional or state guidelines <u>, and</u>	
3	<u>d.</u> <u>e</u>	mergency ambulance transportation is not required	
4	<u>w</u>	hen a patient's apparent clinical condition, as	
5	<u>d</u>	efined by applicable medical treatment protocols,	
6	<u>d</u>	oes not warrant emergency ambulance transport, and	
7	<u>n</u>	ontransport of patients is authorized pursuant to	
8	<u>a</u>	pplicable medical treatment protocols established by	
9	<u>t</u>	he regional medical director.	
10	SECTION 2.	This act shall become effective November 1, 2022.	
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12	COMMITTEE REPORT BY: COMMITTEE ON PUBLIC SAFETY, dated 04/12/2022 - DO PASS, As Amended.		
13	DU TASS, AS Alle	nded.	
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