

## Part 1 General Provisions

### 26-8a-101 Title.

This chapter is known as the "Utah Emergency Medical Services System Act."

Enacted by Chapter 141, 1999 General Session

### 26-8a-102 Definitions.

As used in this chapter:

- (1)
  - (a) "911 ambulance or paramedic services" means:
    - (i) either:
      - (A) 911 ambulance service;
      - (B) 911 paramedic service; or
      - (C) both 911 ambulance and paramedic service; and
    - (ii) a response to a 911 call received by a designated dispatch center that receives 911 or E911 calls.
  - (b) "911 ambulance or paramedic service" does not mean a seven or ten digit telephone call received directly by an ambulance provider licensed under this chapter.
- (2) "Ambulance" means a ground, air, or water vehicle that:
  - (a) transports patients and is used to provide emergency medical services; and
  - (b) is required to obtain a permit under Section 26-8a-304 to operate in the state.
- (3) "Ambulance provider" means an emergency medical service provider that:
  - (a) transports and provides emergency medical care to patients; and
  - (b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.
- (4) "Committee" means the State Emergency Medical Services Committee created by Section 26-1-7.
- (5) "Direct medical observation" means in-person observation of a patient by a physician, registered nurse, physician's assistant, or individual certified under Section 26-8a-302.
- (6) "Emergency medical condition" means:
  - (a) a medical condition that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in:
    - (i) placing the individual's health in serious jeopardy;
    - (ii) serious impairment to bodily functions; or
    - (iii) serious dysfunction of any bodily organ or part; or
  - (b) a medical condition that in the opinion of a physician or his designee requires direct medical observation during transport or may require the intervention of an individual certified under Section 26-8a-302 during transport.
- (7) "Emergency medical service personnel":
  - (a) means an individual who provides emergency medical services to a patient and is required to be certified under Section 26-8a-302; and
  - (b) includes a paramedic, medical director of a licensed emergency medical service provider, emergency medical service instructor, and other categories established by the committee.
- (8) "Emergency medical service providers" means:
  - (a) licensed ambulance providers and paramedic providers;

- (b) a facility or provider that is required to be designated under Section 26-8a-303; and
  - (c) emergency medical service personnel.
- (9) "Emergency medical services" means medical services, transportation services, or both rendered to a patient.
- (10) "Emergency medical service vehicle" means a land, air, or water vehicle that is:
- (a) maintained and used for the transportation of emergency medical personnel, equipment, and supplies to the scene of a medical emergency; and
  - (b) required to be permitted under Section 26-8a-304.
- (11) "Governing body":
- (a) is as defined in Section 11-42-102; and
  - (b) for purposes of a "special service district" under Section 11-42-102, means a special service district that has been delegated the authority to select a provider under this chapter by the special service district's legislative body or administrative control board.
- (12) "Interested party" means:
- (a) a licensed or designated emergency medical services provider that provides emergency medical services within or in an area that abuts an exclusive geographic service area that is the subject of an application submitted pursuant to Part 4, Ambulance and Paramedic Providers;
  - (b) any municipality, county, or fire district that lies within or abuts a geographic service area that is the subject of an application submitted pursuant to Part 4, Ambulance and Paramedic Providers; or
  - (c) the department when acting in the interest of the public.
- (13) "Medical control" means a person who provides medical supervision to an emergency medical service provider.
- (14) "Non-911 service" means transport of a patient that is not 911 transport under Subsection (1).
- (15) "Paramedic provider" means an entity that:
- (a) employs emergency medical service personnel; and
  - (b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.
- (16) "Patient" means an individual who, as the result of illness or injury, meets any of the criteria in Section 26-8a-305.
- (17) "Political subdivision" means:
- (a) a city or town located in a county of the first or second class as defined in Section 17-50-501;
  - (b) a county of the first or second class;
  - (c) the following districts located in a county of the first or second class:
    - (i) a special service district created under Title 17D, Chapter 1, Special Service District Act; or
    - (ii) a local district under Title 17B, Limited Purpose Local Government Entities - Local Districts, for the purpose of providing fire protection, paramedic, and emergency services;
  - (d) areas coming together as described in Subsection 26-8a-405.2(2)(b)(ii);
  - (e) an interlocal entity under Title 11, Chapter 13, Interlocal Cooperation Act; or
  - (f) a special service district for fire protection service under Subsection 17D-1-201(9).
- (18) "Trauma" means an injury requiring immediate medical or surgical intervention.
- (19) "Trauma system" means a single, statewide system that:
- (a) organizes and coordinates the delivery of trauma care within defined geographic areas from the time of injury through transport and rehabilitative care; and
  - (b) is inclusive of all prehospital providers, hospitals, and rehabilitative facilities in delivering care for trauma patients, regardless of severity.

- (20) "Triage" means the sorting of patients in terms of disposition, destination, or priority. For prehospital trauma victims, triage requires a determination of injury severity to assess the appropriate level of care according to established patient care protocols.
- (21) "Triage, treatment, transportation, and transfer guidelines" means written procedures that:
  - (a) direct the care of patients; and
  - (b) are adopted by the medical staff of an emergency patient receiving facility, trauma center, or an emergency medical service provider.

Amended by Chapter 246, 2013 General Session

**26-8a-103 State Emergency Medical Services Committee -- Membership -- Expenses.**

- (1) The State Emergency Medical Services Committee created by Section 26-1-7 shall be composed of the following 16 members appointed by the governor, at least five of whom shall reside in a county of the third, fourth, fifth, or sixth class:
  - (a) five physicians licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, as follows:
    - (i) one surgeon who actively provides trauma care at a hospital;
    - (ii) one rural physician involved in emergency medical care;
    - (iii) two physicians who practice in the emergency department of a general acute hospital; and
    - (iv) one pediatrician who practices in the emergency department or critical care unit of a general acute hospital or a children's specialty hospital;
  - (b) one representative from a private ambulance provider;
  - (c) one representative from an ambulance provider that is neither privately owned nor operated by a fire department;
  - (d) two chief officers from fire agencies operated by the following classes of licensed or designated emergency medical services providers: municipality, county, and fire district, provided that no class of medical services providers may have more than one representative under this Subsection (1)(d);
  - (e) one director of a law enforcement agency that provides emergency medical services;
  - (f) one hospital administrator;
  - (g) one emergency care nurse;
  - (h) one paramedic in active field practice;
  - (i) one emergency medical technician in active field practice;
  - (j) one certified emergency medical dispatcher affiliated with an emergency medical dispatch center; and
  - (k) one consumer.
- (2)
  - (a) Except as provided in Subsection (2)(b), members shall be appointed to a four-year term beginning July 1.
  - (b) Notwithstanding Subsection (2)(a), the governor shall, at the time of appointment or reappointment, adjust the length of terms to ensure that the terms of committee members are staggered so that approximately half of the committee is appointed every two years.
  - (c) When a vacancy occurs in the membership for any reason, the replacement shall be appointed by the governor for the unexpired term.
- (3)
  - (a) Each January, the committee shall organize and select one of its members as chair and one member as vice chair. The committee may organize standing or ad hoc subcommittees, which shall operate in accordance with guidelines established by the committee.

- (b) The chair shall convene a minimum of four meetings per year. The chair may call special meetings. The chair shall call a meeting upon request of five or more members of the committee.
- (c) Nine members of the committee constitute a quorum for the transaction of business and the action of a majority of the members present is the action of the committee.
- (4) A member may not receive compensation or benefits for the member's service, but may receive per diem and travel expenses in accordance with:
  - (a) Section 63A-3-106;
  - (b) Section 63A-3-107; and
  - (c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and 63A-3-107.
- (5) Administrative services for the committee shall be provided by the department.

Amended by Chapter 51, 2011 General Session

Amended by Chapter 297, 2011 General Session

#### **26-8a-104 Committee advisory duties.**

The committee shall adopt rules, with the concurrence of the department, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:

- (1) establish certification and reciprocity requirements under Section 26-8a-302;
- (2) establish designation requirements under Section 26-8a-303;
- (3) promote the development of a statewide emergency medical services system under Section 26-8a-203;
- (4) establish insurance requirements for ambulance providers;
- (5) provide guidelines for requiring patient data under Section 26-8a-203;
- (6) establish criteria for awarding grants under Section 26-8a-207;
- (7) establish requirements for the coordination of emergency medical services and the medical supervision of emergency medical service providers under Section 26-8a-306; and
- (8) are necessary to carry out the responsibilities of the committee as specified in other sections of this chapter.

Amended by Chapter 74, 2016 General Session

#### **26-8a-105 Department powers.**

The department shall:

- (1) coordinate the emergency medical services within the state;
- (2) administer this chapter and the rules established pursuant to it;
- (3) establish a voluntary task force representing a diversity of emergency medical service providers to advise the department and the committee on rules;
- (4) establish an emergency medical service personnel peer review board to advise the department concerning discipline of emergency medical service personnel under this chapter; and
- (5) adopt rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to:
  - (a) license ambulance providers and paramedic providers;
  - (b) permit ambulances and emergency medical response vehicles, including approving an emergency vehicle operator's course in accordance with Section 26-8a-304;
  - (c) establish:
    - (i) the qualifications for membership of the peer review board created by this section;
    - (ii) a process for placing restrictions on a certification while an investigation is pending;
    - (iii) the process for the investigation and recommendation by the peer review board; and

- (iv) the process for determining the status of a license or certification while a peer review board investigation is pending;
- (d) establish application, submission, and procedural requirements for licenses, designations, certificates, and permits; and
- (e) establish and implement the programs, plans, and responsibilities as specified in other sections of this chapter.

Amended by Chapter 168, 2016 General Session

**26-8a-106 Waiver of rules.**

- (1) Upon application, the department, or the committee with the concurrence of the department, may waive the requirements of a rule the department, or the committee with the concurrence of the department, has adopted if:
  - (a) the person applying for the waiver satisfactorily demonstrates that:
    - (i) the waiver is necessary for a pilot project to be undertaken by the applicant;
    - (ii) in the particular situation, the requirement serves no beneficial public purpose; or
    - (iii) circumstances warrant that waiver of the requirement outweighs the public benefit to be gained by adherence to the rule; and
  - (b) for a waiver granted under Subsection (1)(a)(ii) or (iii):
    - (i) the committee or department extends the waiver to similarly situated persons upon application; or
    - (ii) the department, or the committee with the concurrence of the department, amends the rule to be consistent with the waiver.
- (2) A waiver of education, licensing, or certification requirements may be granted to a veteran, as defined in Section 68-3-12.5, if the veteran:
  - (a) provides to the committee or department documentation showing military education and training in the field in which certification or licensure is sought; and
  - (b) successfully passes any examination required.
- (3) No waiver may be granted under this section that is inconsistent with the provisions of this chapter.

Amended by Chapter 74, 2016 General Session