	EMERGENCY MEDICAL SERVICE SYSTEM AMENDMENTS
2	2017 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Adam Gardiner
5	Senate Sponsor: Todd Weiler
6 7	LONG TITLE
3	General Description:
)	This bill amends provisions in the Utah Emergency Medical Services System Act.
)	Highlighted Provisions:
	This bill:
2	<ul> <li>adds an exemption from the requirements to have a Department of Health</li> </ul>
	background clearance for licensure for law enforcement employees working as
	emergency medical service dispatchers that have received an approved Department
	of Public Safety background clearance; and
	<ul> <li>makes technical and conforming changes to align with the Emergency Medical</li> </ul>
,	Services Personnel Licensure Interstate Compact.
3	Money Appropriated in this Bill:
)	None
)	Other Special Clauses:
	None
2	<b>Utah Code Sections Affected:</b>
3	AMENDS:
1	26-8a-102, as last amended by Laws of Utah 2013, Chapter 246
	26-8a-103, as last amended by Laws of Utah 2011, Chapters 51 and 297
	26-8a-104, as last amended by Laws of Utah 2016, Chapter 74
,	26-8a-105, as last amended by Laws of Utah 2016, Chapter 168



28	26-8a-106, as last amended by Laws of Utah 2016, Chapter 74
29	26-8a-208, as last amended by Laws of Utah 2010, Chapter 391
30	26-8a-301, as last amended by Laws of Utah 2009, Chapter 22
31	26-8a-302, as last amended by Laws of Utah 2015, Chapter 307
32	26-8a-308, as last amended by Laws of Utah 2009, Chapter 22
33	26-8a-310, as repealed and reenacted by Laws of Utah 2015, Chapter 307
34	26-8a-408, as last amended by Laws of Utah 2015, Chapter 307
35	26-8a-409, as enacted by Laws of Utah 1999, Chapter 141
36	26-8a-501, as enacted by Laws of Utah 1999, Chapter 141
37	26-8a-502, as last amended by Laws of Utah 2009, Chapter 22
38	26-8a-503, as last amended by Laws of Utah 2015, Chapter 167
39	26-8a-506, as enacted by Laws of Utah 1999, Chapter 141
40	26-8a-601, as last amended by Laws of Utah 2009, Chapter 22
41	41-6a-523, as last amended by Laws of Utah 2012, Chapter 267
42	53-10-405, as last amended by Laws of Utah 2012, Chapter 267
43	58-1-307, as last amended by Laws of Utah 2016, Chapters 201 and 238
44	72-10-502, as last amended by Laws of Utah 2012, Chapter 267
45	76-5-102.7, as last amended by Laws of Utah 2016, Chapter 339
46	78A-6-209, as last amended by Laws of Utah 2016, Chapters 122 and 144
47	78B-8-401, as last amended by Laws of Utah 2013, Chapter 114
48 49	Be it enacted by the Legislature of the state of Utah:
50	Section 1. Section 26-8a-102 is amended to read:
51	26-8a-102. Definitions.
52	As used in this chapter:
53	(1) (a) "911 ambulance or paramedic services" means:
54	(i) either:
55	(A) 911 ambulance service;
56	(B) 911 paramedic service; or
57	(C) both 911 ambulance and paramedic service; and
58	(ii) a response to a 911 call received by a designated dispatch center that receives 911

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committee.

59	or E911 calls.
60	(b) "911 ambulance or paramedic service" does not mean a seven or ten digit telephone
61	call received directly by an ambulance provider licensed under this chapter.
62	(2) "Ambulance" means a ground, air, or water vehicle that:
63	(a) transports patients and is used to provide emergency medical services; and
64	(b) is required to obtain a permit under Section 26-8a-304 to operate in the state.
65	(3) "Ambulance provider" means an emergency medical service provider that:
66	(a) transports and provides emergency medical care to patients; and
67	(b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.
68	(4) "Committee" means the State Emergency Medical Services Committee created by
69	Section 26-1-7.
70	(5) "Direct medical observation" means in-person observation of a patient by a
71	physician, registered nurse, physician's assistant, or individual [certified] licensed under
72	Section 26-8a-302.
73	(6) "Emergency medical condition" means:
74	(a) a medical condition that manifests itself by symptoms of sufficient severity,
75	including severe pain, that a prudent layperson, who possesses an average knowledge of health
76	and medicine, could reasonably expect the absence of immediate medical attention to result in:
77	(i) placing the individual's health in serious jeopardy;
78	(ii) serious impairment to bodily functions; or
79	(iii) serious dysfunction of any bodily organ or part; or
80	(b) a medical condition that in the opinion of a physician or his designee requires direct
81	medical observation during transport or may require the intervention of an individual [certified]
82	<u>licensed</u> under Section 26-8a-302 during transport.
83	(7) "Emergency medical service personnel":
84	(a) means an individual who provides emergency medical services to a patient and is
85	required to be [certified] licensed under Section 26-8a-302; and
86	(b) includes a paramedic, medical director of a licensed emergency medical service

provider, emergency medical service instructor, and other categories established by the

(8) "Emergency medical service providers" means:

90	(a) licensed ambulance providers and paramedic providers;
91	(b) a facility or provider that is required to be designated under Section 26-8a-303; and
92	(c) emergency medical service personnel.
93	(9) "Emergency medical services" means medical services, transportation services, or
94	both rendered to a patient.
95	(10) "Emergency medical service vehicle" means a land, air, or water vehicle that is:
96	(a) maintained and used for the transportation of emergency medical personnel,
97	equipment, and supplies to the scene of a medical emergency; and
98	(b) required to be permitted under Section 26-8a-304.
99	(11) "Governing body":
100	(a) is as defined in Section 11-42-102; and
101	(b) for purposes of a "special service district" under Section 11-42-102, means a
102	special service district that has been delegated the authority to select a provider under this
103	chapter by the special service district's legislative body or administrative control board.
104	(12) "Interested party" means:
105	(a) a licensed or designated emergency medical services provider that provides
106	emergency medical services within or in an area that abuts an exclusive geographic service area
107	that is the subject of an application submitted pursuant to Part 4, Ambulance and Paramedic
108	Providers;
109	(b) any municipality, county, or fire district that lies within or abuts a geographic
110	service area that is the subject of an application submitted pursuant to Part 4, Ambulance and
111	Paramedic Providers; or
112	(c) the department when acting in the interest of the public.
113	(13) "Medical control" means a person who provides medical supervision to an
114	emergency medical service provider.
115	(14) "Non-911 service" means transport of a patient that is not 911 transport under
116	Subsection (1).
117	(15) "Paramedic provider" means an entity that:
118	(a) employs emergency medical service personnel; and
119	(b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.
120	(16) "Patient" means an individual who, as the result of illness or injury, meets any of

121	the criteria in Section 26-8a-305.
122	(17) "Political subdivision" means:
123	(a) a city or town located in a county of the first or second class as defined in Section
124	17-50-501;
125	(b) a county of the first or second class;
126	(c) the following districts located in a county of the first or second class:
127	(i) a special service district created under Title 17D, Chapter 1, Special Service District
128	Act; or
129	(ii) a local district under Title 17B, Limited Purpose Local Government Entities - Local
130	Districts, for the purpose of providing fire protection, paramedic, and emergency services;
131	(d) areas coming together as described in Subsection 26-8a-405.2(2)(b)(ii);
132	(e) an interlocal entity under Title 11, Chapter 13, Interlocal Cooperation Act; or
133	(f) a special service district for fire protection service under Subsection 17D-1-201(9).
134	(18) "Trauma" means an injury requiring immediate medical or surgical intervention.
135	(19) "Trauma system" means a single, statewide system that:
136	(a) organizes and coordinates the delivery of trauma care within defined geographic
137	areas from the time of injury through transport and rehabilitative care; and
138	(b) is inclusive of all prehospital providers, hospitals, and rehabilitative facilities in
139	delivering care for trauma patients, regardless of severity.
140	(20) "Triage" means the sorting of patients in terms of disposition, destination, or
141	priority. For prehospital trauma victims, triage requires a determination of injury severity to
142	assess the appropriate level of care according to established patient care protocols.
143	(21) "Triage, treatment, transportation, and transfer guidelines" means written
144	procedures that:
145	(a) direct the care of patients; and
146	(b) are adopted by the medical staff of an emergency patient receiving facility, trauma
147	center, or an emergency medical service provider.
148	Section 2. Section 26-8a-103 is amended to read:
149	26-8a-103. State Emergency Medical Services Committee Membership
150	Expenses.
151	(1) The State Emergency Medical Services Committee created by Section 26-1-7 shall

152	be composed of the following 16 members appointed by the governor, at least five of whom
153	shall reside in a county of the third, fourth, fifth, or sixth class:
154	(a) five physicians licensed under Title 58, Chapter 67, Utah Medical Practice Act, or
155	Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, as follows:
156	(i) one surgeon who actively provides trauma care at a hospital;
157	(ii) one rural physician involved in emergency medical care;
158	(iii) two physicians who practice in the emergency department of a general acute
159	hospital; and
160	(iv) one pediatrician who practices in the emergency department or critical care unit of
161	a general acute hospital or a children's specialty hospital;
162	(b) one representative from a private ambulance provider;
163	(c) one representative from an ambulance provider that is neither privately owned nor
164	operated by a fire department;
165	(d) two chief officers from fire agencies operated by the following classes of licensed
166	or designated emergency medical services providers: municipality, county, and fire district,
167	provided that no class of medical services providers may have more than one representative
168	under this Subsection (1)(d);
169	(e) one director of a law enforcement agency that provides emergency medical
170	services;
171	(f) one hospital administrator;
172	(g) one emergency care nurse;
173	(h) one paramedic in active field practice;
174	(i) one emergency medical technician in active field practice;
175	(j) one [certified] licensed emergency medical dispatcher affiliated with an emergency
176	medical dispatch center; and
177	(k) one consumer.
178	(2) (a) Except as provided in Subsection (2)(b), members shall be appointed to a
179	four-year term beginning July 1.
180	(b) Notwithstanding Subsection (2)(a), the governor shall, at the time of appointment
181	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.

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183	(c) When a vacancy occurs in the membership for any reason, the replacement shall be
184	appointed by the governor for the unexpired term.
185	(3) (a) Each January, the committee shall organize and select one of its members as
186	chair and one member as vice chair. The committee may organize standing or ad hoc
187	subcommittees, which shall operate in accordance with guidelines established by the
188	committee.
189	(b) The chair shall convene a minimum of four meetings per year. The chair may call
190	special meetings. The chair shall call a meeting upon request of five or more members of the
191	committee.
192	(c) Nine members of the committee constitute a quorum for the transaction of business
193	and the action of a majority of the members present is the action of the committee.
194	(4) A member may not receive compensation or benefits for the member's service, but
195	may receive per diem and travel expenses in accordance with:
196	(a) Section 63A-3-106;
197	(b) Section 63A-3-107; and
198	(c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and
199	63A-3-107.
200	(5) Administrative services for the committee shall be provided by the department.
201	Section 3. Section <b>26-8a-104</b> is amended to read:
202	26-8a-104. Committee advisory duties.
203	The committee shall adopt rules, with the concurrence of the department, in accordance
204	with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:
205	(1) establish [certification] licensure and reciprocity requirements under Section
206	26-8a-302;
207	(2) establish designation requirements under Section 26-8a-303;
208	(3) promote the development of a statewide emergency medical services system under
209	Section 26-8a-203;
210	(4) establish insurance requirements for ambulance providers;

(7) establish requirements for the coordination of emergency medical services and the

(5) provide guidelines for requiring patient data under Section 26-8a-203;

(6) establish criteria for awarding grants under Section 26-8a-207;

214	medical supervision of emergency medical service providers under Section 26-8a-306; and
215	(8) are necessary to carry out the responsibilities of the committee as specified in other
216	sections of this chapter.
217	Section 4. Section 26-8a-105 is amended to read:
218	26-8a-105. Department powers.
219	The department shall:
220	(1) coordinate the emergency medical services within the state;
221	(2) administer this chapter and the rules established pursuant to it;
222	(3) establish a voluntary task force representing a diversity of emergency medical
223	service providers to advise the department and the committee on rules;
224	(4) establish an emergency medical service personnel peer review board to advise the
225	department concerning discipline of emergency medical service personnel under this chapter;
226	and
227	(5) adopt rules in accordance with Title 63G, Chapter 3, Utah Administrative
228	Rulemaking Act, to:
229	(a) license ambulance providers and paramedic providers;
230	(b) permit ambulances and emergency medical response vehicles, including approving
231	an emergency vehicle operator's course in accordance with Section 26-8a-304;
232	(c) establish:
233	(i) the qualifications for membership of the peer review board created by this section;
234	(ii) a process for placing restrictions on a [certification] license while an investigation
235	is pending;
236	(iii) the process for the investigation and recommendation by the peer review board;
237	and
238	(iv) the process for determining the status of a license [or certification] while a peer
239	review board investigation is pending;
240	(d) establish application, submission, and procedural requirements for licenses,
241	designations, [certificates,] and permits; and
242	(e) establish and implement the programs, plans, and responsibilities as specified in
243	other sections of this chapter.
244	Section 5. Section <b>26-8a-106</b> is amended to read:

245	26-8a-106. Waiver of rules.
246	(1) Upon application, the department, or the committee with the concurrence of the
247	department, may waive the requirements of a rule the department, or the committee with the
248	concurrence of the department, has adopted if:
249	(a) the person applying for the waiver satisfactorily demonstrates that:
250	(i) the waiver is necessary for a pilot project to be undertaken by the applicant;
251	(ii) in the particular situation, the requirement serves no beneficial public purpose; or
252	(iii) circumstances warrant that waiver of the requirement outweighs the public benefit
253	to be gained by adherence to the rule; and
254	(b) for a waiver granted under Subsection (1)(a)(ii) or (iii):
255	(i) the committee or department extends the waiver to similarly situated persons upon
256	application; or
257	(ii) the department, or the committee with the concurrence of the department, amends
258	the rule to be consistent with the waiver.
259	(2) A waiver of education[, licensing, or certification] or licensing requirements may
260	be granted to a veteran, as defined in Section 68-3-12.5, if the veteran:
261	(a) provides to the committee or department documentation showing military education
262	and training in the field in which [certification or] licensure is sought; and
263	(b) successfully passes any examination required.
264	(3) No waiver may be granted under this section that is inconsistent with the provisions
265	of this chapter.
266	Section 6. Section 26-8a-208 is amended to read:
267	26-8a-208. Fees for training equipment rental, testing, and quality assurance
268	reviews.
269	(1) The department may charge fees, established pursuant to Section 26-1-6:
270	(a) for the use of department-owned training equipment;
271	(b) to administer tests and conduct quality assurance reviews; and
272	(c) to process an application for a [certificate,] designation, permit, or license.
273	(2) (a) Fees collected under Subsections (1)(a) and (b) shall be separate dedicated
274	credits.
275	(b) Fees under Subsection (1)(a) may be used to purchase training equipment

276	(c) Fees under Subsection (1)(b) may be used to administer tests and conduct quality
277	assurance reviews.
278	Section 7. Section 26-8a-301 is amended to read:
279	26-8a-301. General requirement.
280	(1) Except as provided in Section 26-8a-308 or 26-8b-201:
281	(a) an individual may not provide emergency medical services without a [certificate]
282	<u>license</u> issued under Section 26-8a-302;
283	(b) a facility or provider may not hold itself out as a designated emergency medical
284	service provider without a designation issued under Section 26-8a-303;
285	(c) a vehicle may not operate as an ambulance or emergency response vehicle without a
286	permit issued under Section 26-8a-304; and
287	(d) an entity may not respond as an ambulance or paramedic provider without the
288	appropriate license issued under Part 4, Ambulance and Paramedic Providers.
289	(2) Section 26-8a-502 applies to violations of this section.
290	Section 8. Section 26-8a-302 is amended to read:
291	26-8a-302. Licensure of emergency medical service personnel.
292	(1) To promote the availability of comprehensive emergency medical services
293	throughout the state, the committee shall establish:
294	(a) initial and ongoing [certification] licensure and training requirements for
295	emergency medical service personnel in the following categories:
296	(i) paramedic;
297	(ii) medical director;
298	(iii) emergency medical service instructor; and
299	(iv) other types of emergency medical personnel as the committee considers necessary;
300	and
301	(b) guidelines for giving credit for out-of-state training and experience.
302	(2) The department shall, based on the requirements established in Subsection (1):
303	(a) develop, conduct, and authorize training and testing for emergency medical service
304	personnel; and
305	(b) issue [certifications and certification] a license and license renewals to emergency
306	medical service personnel.

307	(3) As provided in Section 26-8a-502, an individual issued a [certification] license
308	under this section may only provide emergency medical services to the extent allowed by the
309	[certification] license.
310	(4) [An] Except as provided in Subsection 28A-3a-310(13), an individual may not be
311	issued or retain a [certification] license under this section unless the individual obtains and
312	retains background clearance under Section 26-8a-310.
313	Section 9. Section <b>26-8a-308</b> is amended to read:
314	26-8a-308. Exemptions.
315	(1) The following persons may provide emergency medical services to a patient
316	without being [certified or] licensed under this chapter:
317	(a) out-of-state emergency medical service personnel and providers in time of disaster;
318	(b) an individual who gratuitously acts as a Good Samaritan;
319	(c) a family member;
320	(d) a private business if emergency medical services are provided only to employees at
321	the place of business and during transport;
322	(e) an agency of the United States government if compliance with this chapter would
323	be inconsistent with federal law; and
324	(f) police, fire, and other public service personnel if:
325	(i) emergency medical services are rendered in the normal course of the person's duties
326	and
327	(ii) medical control, after being apprised of the circumstances, directs immediate
328	transport.
329	(2) An ambulance or emergency response vehicle may operate without a permit issued
330	under Section 26-8a-304 in time of disaster.
331	(3) Nothing in this chapter or Title 58, Occupations and Professions, may be construed
332	as requiring a license [or certificate] for an individual to administer cardiopulmonary
333	resuscitation or to use a fully automated external defibrillator under Section 26-8b-201.
334	(4) Nothing in this chapter may be construed as requiring a license, permit, or
335	designation[, or certificate] for an acute care hospital, medical clinic, physician's office, or
336	other fixed medical facility that:
337	(a) is staffed by a physician, physician's assistant, nurse practitioner, or registered

338	nurse; and
339	(b) treats an individual who has presented himself or was transported to the hospital,
340	clinic, office, or facility.
341	Section 10. Section <b>26-8a-310</b> is amended to read:
342	26-8a-310. Background clearance for emergency medical service personnel.
343	(1) The department shall determine whether to grant background clearance for an
344	individual seeking [certification] <u>licensure</u> under Section 26-8a-302 from whom it receives:
345	(a) the individual's social security number, fingerprints, and other personal
346	identification information specified by the department under Subsection (4); and
347	(b) any fees established by the department under Subsection (10).
348	(2) The department shall determine whether to deny or revoke background clearance
349	for individuals for whom it has previously granted background clearance.
350	(3) The department shall determine whether to grant, deny, or revoke background
351	clearance for an individual based on an initial and ongoing evaluation of information the
352	department obtains under Subsections (5) and (11), which, at a minimum, shall include an
353	initial criminal background check of state, regional, and national databases using the
354	individual's fingerprints.
355	(4) The department shall make rules, in accordance with Title 63G, Chapter 3, Utah
356	Administrative Rulemaking Act, that specify:
357	(a) the criteria the department will use under Subsection (3) to determine whether to
358	grant, deny, or revoke background clearance; and
359	(b) the other personal identification information an individual seeking [certification]
360	<u>licensure</u> under Section 26-8a-302 must submit under Subsection (1).
361	(5) To determine whether to grant, deny, or revoke background clearance, the
362	department may access and evaluate any of the following:
363	(a) Department of Public Safety arrest, conviction, and disposition records described in
364	Title 53, Chapter 10, Criminal Investigations and Technical Services Act, including
365	information in state, regional, and national records files;
366	(b) adjudications by a juvenile court of committing an act that if committed by an adult
367	would be a felony or misdemeanor, if:
368	(i) the applicant is under 28 years of age; or

369	(11) the applicant:
370	(A) is over 28 years of age; and
371	(B) has been convicted of, has pleaded no contest to, or is currently subject to a plea in
372	abeyance or diversion agreement for a felony or misdemeanor;
373	(c) juvenile court arrest, adjudication, and disposition records, other than those under
374	Subsection (5)(b), as allowed under Section 78A-6-209;
375	(d) child abuse or neglect findings described in Section 78A-6-323;
376	(e) the Department of Human Services' Division of Child and Family Services
377	Licensing Information System described in Section 62A-4a-1006;
378	(f) the Department of Human Services' Division of Aging and Adult Services database
379	of reports of vulnerable adult abuse, neglect, or exploitation, described in Section 62A-3-311.1;
380	(g) Division of Occupational and Professional Licensing records of licensing and
381	certification under Title 58, Occupations and Professions;
382	(h) records in other federal criminal background databases available to the state; and
383	(i) any other records of arrests, warrants for arrest, convictions, pleas in abeyance,
384	pending diversion agreements, or dispositions.
385	(6) Except for the Department of Public Safety, an agency may not charge the
386	department for information accessed under Subsection (5).
387	(7) When evaluating information under Subsection (3), the department shall classify a
388	crime committed in another state according to the closest matching crime under Utah law,
389	regardless of how the crime is classified in the state where the crime was committed.
390	(8) The department shall adopt measures to protect the security of information it
391	accesses under Subsection (5), which shall include limiting access by department employees to
392	those responsible for acquiring, evaluating, or otherwise processing the information.
393	(9) The department may disclose personal identification information it receives under
394	Subsection (1) to the Department of Human Services to verify that the subject of the
395	information is not identified as a perpetrator or offender in the information sources described in
396	Subsections (5)(d) through (f).
397	(10) The department may charge fees, in accordance with Section 63J-1-504, to pay
398	for:

(a) the cost of obtaining, storing, and evaluating information needed under Subsection

400	(3), both initially and on an ongoing basis, to determine whether to grant, deny, or revoke
401	background clearance; and
402	(b) other department costs related to granting, denying, or revoking background
403	clearance.
404	(11) The Criminal Investigations and Technical Services Division within the
405	Department of Public Safety shall:
406	(a) retain, separate from other division records, personal information under Subsection
407	(1), including any fingerprints sent to it by the Department of Health; and
408	(b) notify the Department of Health upon receiving notice that an individual for whom
409	personal information has been retained is the subject of:
410	(i) a warrant for arrest;
411	(ii) an arrest;
412	(iii) a conviction, including a plea in abeyance; or
413	(iv) a pending diversion agreement.
414	(12) The department shall use the Direct Access Clearance System database created
415	under Section 26-21-209 to manage information about the background clearance status of each
416	individual for whom the department is required to make a determination under Subsection (1).
417	(13) An employee in law enforcement who works as an emergency medical service
418	dispatcher and has received an approved Department of Public Safety background clearance is
419	exempt from the requirements to have a Department of Health background clearance for
420	<u>licensure.</u>
421	Section 11. Section 26-8a-408 is amended to read:
422	26-8a-408. Criteria for determining public convenience and necessity.
423	(1) The criteria for determining public convenience and necessity is set forth in
424	Subsections (2) through (6).
425	(2) Access to emergency medical services shall be maintained or improved. The
426	officer shall consider the impact on existing services, including the impact on response times,
427	call volumes, populations and exclusive geographic service areas served, and the ability of
428	surrounding licensed providers to service their exclusive geographic service areas. The
429	issuance or amendment of a license may not create an orphaned area.
430	(3) The quality of service in the area shall be maintained or improved. The officer

431	shan consider the:
432	(a) staffing and equipment standards of the current licensed provider and the applicant;
433	(b) training and [certification] licensure levels of the current licensed provider's staff
434	and the applicant's staff;
435	(c) continuing medical education provided by the current licensed provider and the
436	applicant;
437	(d) levels of care as defined by department rule;
438	(e) plan of medical control; and
439	(f) the negative or beneficial impact on the regional emergency medical service system
440	to provide service to the public.
441	(4) The cost to the public shall be justified. The officer shall consider:
442	(a) the financial solvency of the applicant;
443	(b) the applicant's ability to provide services within the rates established under Section
444	26-8a-403;
445	(c) the applicant's ability to comply with cost reporting requirements;
446	(d) the cost efficiency of the applicant; and
447	(e) the cost effect of the application on the public, interested parties, and the emergency
448	medical services system.
449	(5) Local desires concerning cost, quality, and access shall be considered. The officer
450	shall assess and consider:
451	(a) the existing provider's record of providing services and the applicant's record and
452	ability to provide similar or improved services;
453	(b) locally established emergency medical services goals, including those established in
454	Subsection (7);
455	(c) comment by local governments on the applicant's business and operations plans;
456	(d) comment by interested parties that are providers on the impact of the application on
457	the parties' ability to provide emergency medical services;
458	(e) comment by interested parties that are local governments on the impact of the
459	application on the citizens it represents; and
460	(f) public comment on any aspect of the application or proposed license.
461	(6) Other related criteria:

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462	(a) the officer considers necessary; or
463	(b) established by department rule.
464	(7) Local governments shall establish cost, quality, and access goals for the ground
465	ambulance and paramedic services that serve their areas.
466	(8) In a formal adjudicative proceeding, the applicant bears the burden of establishing
467	that public convenience and necessity require the approval of the application for all or part of
468	the exclusive geographic service area requested.
469	Section 12. Section 26-8a-409 is amended to read:
470	26-8a-409. Ground ambulance and paramedic licenses Hearing and presiding
471	officers.
472	(1) The department shall set [certification and] training standards for hearing officers
473	and presiding officers.
474	(2) At a minimum, a presiding officer shall:
475	(a) be familiar with the theory and application of public convenience and necessity; and
476	(b) have a working knowledge of the emergency medical service system in the state.
477	(3) In addition to the requirements in Subsection (2), a hearing officer shall also be
478	licensed to practice law in the state.
479	(4) The department shall provide training for hearing officer and presiding officer
480	candidates in the theory and application of public convenience and necessity and on the
481	emergency medical system in the state.
482	(5) The department shall maintain a roster of no less than five individuals who meet
483	the minimum qualifications for both presiding and hearing officers and the standards set by the
484	department.
485	(6) The parties may mutually select an officer from the roster if the officer is available.
486	(7) If the parties cannot agree upon an officer under Subsection (4), the department
487	shall randomly select an officer from the roster or from a smaller group of the roster agreed
488	upon by the applicant and the objecting interested parties.
489	Section 13. Section <b>26-8a-501</b> is amended to read:
490	26-8a-501. Discrimination.
491	(1) No person licensed[ <del>, certified,</del> ] or designated pursuant to this chapter may
492	discriminate in the provision of emergency medical services on the basis of race, sex, color,

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- (2) This chapter does not authorize or require medical assistance or transportation over the objection of an individual on religious grounds.
  - Section 14. Section **26-8a-502** is amended to read:

## 26-8a-502. Illegal activity.

- (1) Except as provided in Section 26-8a-308 or 26-8b-201, a person may not:
- (a) practice or engage in the practice, represent [himself to be] that the person is practicing or engaging in the practice, or attempt to practice or engage in the practice of any activity that requires a license[, certification,] or designation under this chapter unless that person [is so licensed, certified, or designated] is licensed or designated under this chapter; or
- (b) offer an emergency medical service that requires a license[, certificate,] or designation <u>under this chapter</u> unless the person is [so licensed, certified, or designated] licensed or designated under this chapter.
- (2) A person may not advertise or [hold himself out as one holding] represent that the person holds a license[, certification,] or designation required under this chapter, unless that person holds the license[, certification,] or designation under this chapter.
- (3) A person may not employ or permit any employee to perform any service for which a license [or certificate] is required by this chapter, unless the person performing the service possesses the required license [or certificate] under this chapter.
- (4) A person may not wear, display, sell, reproduce, or otherwise use any Utah Emergency Medical Services insignia without authorization from the department.
- (5) A person may not reproduce or otherwise use materials developed by the department for [certification or recertification] licensure testing or examination without authorization from the department.
- (6) A person may not willfully summon an ambulance or emergency response vehicle or report that one is needed when [such] the person knows that the ambulance or emergency response vehicle is not needed.
  - (7) A person who violates this section is subject to Section 26-23-6.
- Section 15. Section **26-8a-503** is amended to read:
- 522 **26-8a-503.** Discipline of emergency medical services personnel.
- 523 (1) The department may refuse to issue a [certificate] license or renewal, or revoke,

524	suspend, restrict, or place on probation an individual's [certificate] license if:
525	(a) the individual does not meet the qualifications for [certification] licensure under
526	Section 26-8a-302;
527	(b) the individual has engaged in conduct, as defined by committee rule, that:
528	(i) is unprofessional;
529	(ii) is adverse to the public health, safety, morals, or welfare; or
530	(iii) would adversely affect public trust in the emergency medical service system;
531	(c) the individual has violated Section 26-8a-502 or other provision of this chapter;
532	(d) a court of competent jurisdiction has determined the individual to be mentally
533	incompetent for any reason; or
534	(e) the individual is unable to provide emergency medical services with reasonable
535	skill and safety because of illness, drunkenness, use of drugs, narcotics, chemicals, or any other
536	type of material, or as a result of any other mental or physical condition, when the individual's
537	condition demonstrates a clear and unjustifiable threat or potential threat to oneself, coworkers,
538	or the public health, safety, or welfare that cannot be reasonably mitigated.
539	(2) (a) An action to revoke, suspend, restrict, or place a [certificate] license on
540	probation shall be done in:
541	(i) consultation with the peer review board created in Section 26-8a-105; and
542	(ii) accordance with Title 63G, Chapter 4, Administrative Procedures Act.
543	(b) Notwithstanding Subsection (2)(a), the department may issue a cease and desist
544	order under Section 26-8a-507 to immediately suspend an individual's [certificate] license
545	pending an administrative proceeding to be held within 30 days if there is evidence to show
546	that the individual poses a clear, immediate, and unjustifiable threat or potential threat to the
547	public health, safety, or welfare.
548	(3) An individual whose [certificate] license has been suspended, revoked, or restricted
549	may apply for reinstatement of the [certificate] license at reasonable intervals and upon
550	compliance with any conditions imposed upon the [certificate] license by statute, committee
551	rule, or the terms of the suspension, revocation, or restriction.
552	(4) In addition to taking disciplinary action under Subsection (1), the department may

Section 16. Section **26-8a-506** is amended to read:

impose sanctions in accordance with Section 26-23-6.

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555	26-8a-506. Investigations for enforcement of chapter.
556	(1) The department may, for the purpose of ascertaining compliance with the
557	provisions of this chapter, enter and inspect on a routine basis the business premises and
558	equipment of a person:
559	(a) with a [certificate,] designation, permit, or license; or
560	(b) who holds himself out to the general public as providing a service for which a
561	[certificate,] designation, permit, or license is required under Section 26-8a-301.
562	(2) Before conducting an inspection under Subsection (1), the department shall, after
563	identifying the person in charge:
564	(a) give proper identification;
565	(b) describe the nature and purpose of the inspection; and
566	(c) if necessary, explain the authority of the department to conduct the inspection.
567	(3) In conducting an inspection under Subsection (1), the department may, after
568	meeting the requirements of Subsection (2):
569	(a) inspect records, equipment, and vehicles; and
570	(b) interview personnel.
571	(4) An inspection conducted under Subsection (1) shall be during regular operational
572	hours.
573	Section 17. Section <b>26-8a-601</b> is amended to read:
574	26-8a-601. Persons and activities exempt from civil liability.
575	(1) (a) Except as provided in Subsection (1)(b), a licensed physician, physician's
576	assistant, or licensed registered nurse who, gratuitously and in good faith, gives oral or written
577	instructions to any of the following is not liable for any civil damages as a result of issuing the
578	instructions:
579	(i) an individual [certified] licensed under Section 26-8a-302;
580	(ii) a person who uses a fully automated external defibrillator, as defined in Section
581	26-8b-102; or
582	(iii) a person who administers CPR, as defined in Section 26-8b-102.
583	(b) The liability protection described in Subsection (1)(a) does not apply if the
584	instructions given were the result of gross negligence or willful misconduct.
585	(2) An individual [certified] licensed under Section 26-8a-302, during either training or

after [certification] <u>licensure</u>, a licensed physician, <u>a</u> physician's assistant, or a registered nurse who, gratuitously and in good faith, provides emergency medical instructions or renders emergency medical care authorized by this chapter is not liable for any civil damages as a result of any act or omission in providing the emergency medical instructions or medical care, unless the act or omission is the result of gross negligence or willful misconduct.

- (3) An individual [certified] licensed under Section 26-8a-302 is not subject to civil liability for failure to obtain consent in rendering emergency medical services authorized by this chapter to any individual who is unable to give his consent, regardless of the individual's age, where there is no other person present legally authorized to consent to emergency medical care, provided that the [certified] licensed individual acted in good faith.
- (4) A principal, agent, contractor, employee, or representative of an agency, organization, institution, corporation, or entity of state or local government that sponsors, authorizes, supports, finances, or supervises any functions of an individual [certified] licensed under Section 26-8a-302 is not liable for any civil damages for any act or omission in connection with such sponsorship, authorization, support, finance, or supervision of the [certified] licensed individual where the act or omission occurs in connection with the [certified] licensed individual's training or occurs outside a hospital where the life of a patient is in immediate danger, unless the act or omission is inconsistent with the training of the [certified] licensed individual, and unless the act or omission is the result of gross negligence or willful misconduct.
- (5) A physician who gratuitously and in good faith arranges for, requests, recommends, or initiates the transfer of a patient from a hospital to a critical care unit in another hospital is not liable for any civil damages as a result of such transfer where:
- (a) sound medical judgment indicates that the patient's medical condition is beyond the care capability of the transferring hospital or the medical community in which that hospital is located; and
- (b) the physician has secured an agreement from the receiving facility to accept and render necessary treatment to the patient.
- (6) A person who is a registered member of the National Ski Patrol System (NSPS) or a member of a ski patrol who has completed a course in winter emergency care offered by the NSPS combined with CPR for medical technicians offered by the American Red Cross or

617	American Heart Association, or an equivalent course of instruction, and who in good faith
618	renders emergency care in the course of ski patrol duties is not liable for civil damages as a
619	result of any act or omission in rendering the emergency care, unless the act or omission is the
620	result of gross negligence or willful misconduct.
621	(7) An emergency medical service provider who, in good faith, transports an individual
622	against his will but at the direction of a law enforcement officer pursuant to Section
623	62A-15-629 is not liable for civil damages for transporting the individual.
624	Section 18. Section 41-6a-523 is amended to read:
625	41-6a-523. Persons authorized to draw blood Immunity from liability.
626	(1) (a) Only the following, acting at the request of a peace officer, may draw blood to
627	determine its alcohol or drug content:
628	(i) a physician;
629	(ii) a registered nurse;
630	(iii) a licensed practical nurse;
631	(iv) a paramedic;
632	(v) as provided in Subsection (1)(b), emergency medical service personnel other than
633	paramedics; or
634	(vi) a person with a valid permit issued by the Department of Health under Section
635	26-1-30.
636	(b) The Department of Health may designate by rule, in accordance with Title 63G,
637	Chapter 3, Utah Administrative Rulemaking Act, which emergency medical service personnel,
638	as defined in Section 26-8a-102, are authorized to draw blood under Subsection (1)(a)(v),
639	based on [their] the type of [certification] license under Section 26-8a-302.
640	(c) Subsection (1)(a) does not apply to taking a urine, breath, or oral fluid specimen.
641	(2) The following are immune from civil or criminal liability arising from drawing a
642	blood sample from a person whom a peace officer has reason to believe is driving in violation
643	of this chapter, if the sample is drawn in accordance with standard medical practice:
644	(a) a person authorized to draw blood under Subsection (1)(a); and
645	(b) if the blood is drawn at a hospital or other medical facility, the medical facility.
646	Section 19. Section <b>53-10-405</b> is amended to read:
647	53-10-405. DNA specimen analysis Saliva sample to be obtained by agency

648	Blood sample to be drawn by professional.
649	(1) (a) A saliva sample shall be obtained by the responsible agency under Subsection
650	53-10-404(5).
651	(b) The sample shall be obtained in a professionally acceptable manner, using
652	appropriate procedures to ensure the sample is adequate for DNA analysis.
653	(2) (a) A blood sample shall be drawn in a medically acceptable manner by any of the
654	following:
655	(i) a physician;
656	(ii) a registered nurse;
657	(iii) a licensed practical nurse;
658	(iv) a paramedic;
659	(v) as provided in Subsection (2)(b), emergency medical service personnel other than
660	paramedics; or
661	(vi) a person with a valid permit issued by the Department of Health under Section
662	26-1-30.
663	(b) The Department of Health may designate by rule, in accordance with Title 63G,
664	Chapter 3, Utah Administrative Rulemaking Act, which emergency medical service personnel,
665	as defined in Section 26-8a-102, are authorized to draw blood under Subsection (2)(a)(v),
666	based on [their] the type of [certification] license under Section 26-8a-302.
667	(c) A person authorized by this section to draw a blood sample may not be held civilly
668	liable for drawing a sample in a medically acceptable manner.
669	(3) A test result or opinion based upon a test result regarding a DNA specimen may not
670	be rendered inadmissible as evidence solely because of deviations from procedures adopted by
671	the department that do not affect the reliability of the opinion or test result.
672	(4) A DNA specimen is not required to be obtained if:
673	(a) the court or the responsible agency confirms with the department that the
674	department has previously received an adequate DNA specimen obtained from the person in
675	accordance with this section; or
676	(b) the court determines that obtaining a DNA specimen would create a substantial and

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unreasonable risk to the health of the person.

Section 20. Section **58-1-307** is amended to read:

## 58-1-307. Exemptions from licensure.

- (1) Except as otherwise provided by statute or rule, the following individuals may engage in the practice of their occupation or profession, subject to the stated circumstances and limitations, without being licensed under this title:
- (a) an individual serving in the armed forces of the United States, the United States Public Health Service, the United States Department of Veterans Affairs, or other federal agencies while engaged in activities regulated under this chapter as a part of employment with that federal agency if the individual holds a valid license to practice a regulated occupation or profession issued by any other state or jurisdiction recognized by the division;
- (b) a student engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the division to the extent the activities are supervised by qualified faculty, staff, or designee and the activities are a defined part of the training program;
- (c) an individual engaged in an internship, residency, preceptorship, postceptorship, fellowship, apprenticeship, or on-the-job training program approved by the division while under the supervision of qualified individuals;
- (d) an individual residing in another state and licensed to practice a regulated occupation or profession in that state, who is called in for a consultation by an individual licensed in this state, and the services provided are limited to that consultation;
- (e) an individual who is invited by a recognized school, association, society, or other body approved by the division to conduct a lecture, clinic, or demonstration of the practice of a regulated occupation or profession if the individual does not establish a place of business or regularly engage in the practice of the regulated occupation or profession in this state;
- (f) an individual licensed under the laws of this state, other than under this title, to practice or engage in an occupation or profession, while engaged in the lawful, professional, and competent practice of that occupation or profession;
- (g) an individual licensed in a health care profession in another state who performs that profession while attending to the immediate needs of a patient for a reasonable period during which the patient is being transported from outside of this state, into this state, or through this state;
  - (h) an individual licensed in another state or country who is in this state temporarily to

attend to the needs of an athletic team or group, except that the practitioner may only attend to the needs of the athletic team or group, including all individuals who travel with the team or group in any capacity except as a spectator;

- (i) an individual licensed and in good standing in another state, who is in this state:
- (i) temporarily, under the invitation and control of a sponsoring entity;

- (ii) for a reason associated with a special purpose event, based upon needs that may exceed the ability of this state to address through its licensees, as determined by the division; and
- (iii) for a limited period of time not to exceed the duration of that event, together with any necessary preparatory and conclusionary periods; and
- (j) the spouse of an individual serving in the armed forces of the United States while the individual is stationed within this state, provided:
- (i) the spouse holds a valid license to practice a regulated occupation or profession issued by any other state or jurisdiction recognized by the division; and
  - (ii) the license is current and the spouse is in good standing in the state of licensure.
- (2) (a) A practitioner temporarily in this state who is exempted from licensure under Subsection (1) shall comply with each requirement of the licensing jurisdiction from which the practitioner derives authority to practice.
- (b) Violation of a limitation imposed by this section constitutes grounds for removal of exempt status, denial of license, or other disciplinary proceedings.
- (3) An individual who is licensed under a specific chapter of this title to practice or engage in an occupation or profession may engage in the lawful, professional, and competent practice of that occupation or profession without additional licensure under other chapters of this title, except as otherwise provided by this title.
- (4) Upon the declaration of a national, state, or local emergency, a public health emergency as defined in Section 26-23b-102, or a declaration by the president of the United States or other federal official requesting public health-related activities, the division in collaboration with the board may:
- (a) suspend the requirements for permanent or temporary licensure of individuals who are licensed in another state for the duration of the emergency while engaged in the scope of practice for which they are licensed in the other state;

the emergency or declaration; and

741	(b) modify, under the circumstances described in this Subsection (4) and Subsection
742	(5), the scope of practice restrictions under this title for individuals who are licensed under this
743	title as:
744	(i) a physician under Chapter 67, Utah Medical Practice Act, or Chapter 68, Utah
745	Osteopathic Medical Practice Act;
746	(ii) a nurse under Chapter 31b, Nurse Practice Act, or Chapter 31c, Nurse Licensure
747	Compact;
748	(iii) a certified nurse midwife under Chapter 44a, Nurse Midwife Practice Act;
749	(iv) a pharmacist, pharmacy technician, or pharmacy intern under Chapter 17b,
750	Pharmacy Practice Act;
751	(v) a respiratory therapist under Chapter 57, Respiratory Care Practices Act;
752	(vi) a dentist and dental hygienist under Chapter 69, Dentist and Dental Hygienist
753	Practice Act; and
754	(vii) a physician assistant under Chapter 70a, Physician Assistant Act;
755	(c) suspend the requirements for licensure under this title and modify the scope of
756	practice in the circumstances described in this Subsection (4) and Subsection (5) for medical
757	services personnel or paramedics required to be [certified] licensed under Section 26-8a-302;
758	(d) suspend requirements in Subsections 58-17b-620(3) through (6) which require
759	certain prescriptive procedures;
760	(e) exempt or modify the requirement for licensure of an individual who is activated as
761	a member of a medical reserve corps during a time of emergency as provided in Section
762	26A-1-126; and
763	(f) exempt or modify the requirement for licensure of an individual who is registered as
764	a volunteer health practitioner as provided in Title 26, Chapter 49, Uniform Emergency
765	Volunteer Health Practitioners Act.
766	(5) Individuals exempt under Subsection (4)(c) and individuals operating under
767	modified scope of practice provisions under Subsection (4)(b):
768	(a) are exempt from licensure or subject to modified scope of practice for the duration
769	of the emergency;
770	(b) must be engaged in the distribution of medicines or medical devices in response to

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772	(c) must be employed by or volunteering for:
773	(i) a local or state department of health; or
774	(ii) a host entity as defined in Section 26-49-102.
775	(6) In accordance with the protocols established under Subsection (8), upon the
776	declaration of a national, state, or local emergency, the Department of Health or a local health
777	department shall coordinate with public safety authorities as defined in Subsection
778	26-23b-110(1) and may:
779	(a) use a vaccine, antiviral, antibiotic, or other prescription medication that is not a
780	controlled substance to prevent or treat a disease or condition that gave rise to, or was a
781	consequence of, the emergency; or
782	(b) distribute a vaccine, antiviral, antibiotic, or other prescription medication that is not
783	a controlled substance:
784	(i) if necessary, to replenish a commercial pharmacy in the event that the commercial
785	pharmacy's normal source of the vaccine, antiviral, antibiotic, or other prescription medication
786	is exhausted; or
787	(ii) for dispensing or direct administration to treat the disease or condition that gave
788	rise to, or was a consequence of, the emergency by:
789	(A) a pharmacy;
790	(B) a prescribing practitioner;
791	(C) a licensed health care facility;
792	(D) a federally qualified community health clinic; or
793	(E) a governmental entity for use by a community more than 50 miles from a person
794	described in Subsections (6)(b)(ii)(A) through (D).
795	(7) In accordance with protocols established under Subsection (8), upon the declaration
796	of a national, state, or local emergency, the Department of Health shall coordinate the
797	distribution of medications:
798	(a) received from the strategic national stockpile to local health departments; and

63G, Chapter 3, Utah Administrative Rulemaking Act, protocols for administering, dispensing,

(b) from local health departments to emergency personnel within the local health

(8) The Department of Health shall establish by rule, made in accordance with Title

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departments' geographic region.

803	and distributing a vaccine, an antiviral, an antibiotic, or other prescription medication that is
804	not a controlled substance in the event of a declaration of a national, state, or local emergency.
805	The protocol shall establish procedures for the Department of Health or a local health
806	department to:
807	(a) coordinate the distribution of:
808	(i) a vaccine, an antiviral, an antibiotic, or other prescription medication that is not a
809	controlled substance received by the Department of Health from the strategic national stockpile
810	to local health departments; and
811	(ii) a vaccine, an antiviral, an antibiotic, or other non-controlled prescription
812	medication received by a local health department to emergency personnel within the local
813	health department's geographic region;
814	(b) authorize the dispensing, administration, or distribution of a vaccine, an antiviral,
815	an antibiotic, or other prescription medication that is not a controlled substance to the contact
816	of a patient without a patient-practitioner relationship, if the contact's condition is the same as
817	that of the physician's patient; and
818	(c) authorize the administration, distribution, or dispensing of a vaccine, an antiviral,
819	an antibiotic, or other non-controlled prescription medication to an individual who:
820	(i) is working in a triage situation;
821	(ii) is receiving preventative or medical treatment in a triage situation;
822	(iii) does not have coverage for the prescription in the individual's health insurance
823	plan;
824	(iv) is involved in the delivery of medical or other emergency services in response to
825	the declared national, state, or local emergency; or
826	(v) otherwise has a direct impact on public health.
827	(9) The Department of Health shall give notice to the division upon implementation of
828	the protocol established under Subsection (8).
829	Section 21. Section <b>72-10-502</b> is amended to read:
830	72-10-502. Implied consent to chemical tests for alcohol or drugs Number of

(1) (a) A person operating an aircraft in this state consents to a chemical test or tests of

tests -- Refusal -- Person incapable of refusal -- Results of test available -- Who may give

test -- Evidence -- Immunity from liability.

the person's breath, blood, urine, or oral fluids:

- (i) for the purpose of determining whether the person was operating or in actual physical control of an aircraft while having a blood or breath alcohol content statutorily prohibited under Section 72-10-501, or while under the influence of alcohol, any drug, or combination of alcohol and any drug under Section 72-10-501, if the test is or tests are administered at the direction of a peace officer having grounds to believe that person to have been operating or in actual physical control of an aircraft in violation of Section 72-10-501; or
- (ii) if the person operating the aircraft is involved in an accident that results in death, serious injury, or substantial aircraft damage.
- (b) (i) The peace officer determines which of the tests are administered and how many of them are administered.
- (ii) The peace officer may order any or all tests of the person's breath, blood, urine, or oral fluids.
- (iii) If an officer requests more than one test, refusal by a person to take one or more requested tests, even though the person does submit to any other requested test or tests, is a refusal under this section.
- (c) (i) A person who has been requested under this section to submit to a chemical test or tests of the person's breath, blood, urine, or oral fluids may not select the test or tests to be administered.
- (ii) The failure or inability of a peace officer to arrange for any specific chemical test is not a defense to taking a test requested by a peace officer, and it is not a defense in any criminal, civil, or administrative proceeding resulting from a person's refusal to submit to the requested test or tests.
- (2) (a) If the person has been placed under arrest and has then been requested by a peace officer to submit to any one or more of the chemical tests provided in Subsection (1) and refuses to submit to any chemical test, the person shall be warned by the peace officer requesting the test that a refusal to submit to the test is admissible in civil or criminal proceedings as provided under Subsection (8).
- (b) Following this warning, unless the person immediately requests that the chemical test offered by a peace officer be administered, a test may not be given.
  - (3) Any person who is dead, unconscious, or in any other condition rendering the

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person incapable of refusal to submit to any chemical test or tests is considered to not have withdrawn the consent provided for in Subsection (1), and the test or tests may be administered whether the person has been arrested or not.

- (4) Upon the request of the person who was tested, the results of the test or tests shall be made available to that person.
- (5) (a) Only the following, acting at the request of a peace officer, may draw blood to determine its alcohol or drug content:
  - (i) a physician;
  - (ii) a registered nurse;
- (iii) a licensed practical nurse;
- 875 (iv) a paramedic;
- 876 (v) as provided in Subsection (5)(b), emergency medical service personnel other than 877 paramedics; or
- 878 (vi) a person with a valid permit issued by the Department of Health under Section 879 26-1-30.
  - (b) The Department of Health may designate by rule, in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, which emergency medical service personnel, as defined in Section 26-8a-102, are authorized to draw blood under Subsection (5)(a)(v), based on [their] the type of [certification] license under Section 26-8a-302.
    - (c) Subsection (5)(a) does not apply to taking a urine, breath, or oral fluid specimen.
  - (d) The following are immune from civil or criminal liability arising from drawing a blood sample from a person who a peace officer has reason to believe is flying in violation of this chapter if the sample is drawn in accordance with standard medical practice:
    - (i) a person authorized to draw blood under Subsection (5)(a); and
    - (ii) if the blood is drawn at a hospital or other medical facility, the medical facility.
  - (6) (a) The person to be tested may, at the person's own expense, have a physician of the person's own choice administer a chemical test in addition to the test or tests administered at the direction of a peace officer.
  - (b) The failure or inability to obtain the additional test does not affect admissibility of the results of the test or tests taken at the direction of a peace officer, or preclude or delay the test or tests to be taken at the direction of a peace officer.

896 (c) The additional test shall be subsequent to the test or tests administered at the 897 direction of a peace officer. 898 (7) For the purpose of determining whether to submit to a chemical test or tests, the 899 person to be tested does not have the right to consult an attorney or have an attorney, physician, 900 or other person present as a condition for the taking of any test. 901 (8) If a person under arrest refuses to submit to a chemical test or tests or any 902 additional test under this section, evidence of any refusal is admissible in any civil or criminal 903 action or proceeding arising out of acts alleged to have been committed while the person was 904 operating or in actual physical control of an aircraft while under the influence of alcohol, any 905 drug, or combination of alcohol and any drug. 906 (9) The results of any test taken under this section or the refusal to be tested shall be 907 reported to the Federal Aviation Administration by the peace officer requesting the test. 908 Section 22. Section **76-5-102.7** is amended to read: 909 76-5-102.7. Assault against health care provider and emergency medical service 910 worker -- Penalty. 911 (1) A person who assaults a health care provider or emergency medical service worker 912 is guilty of a class A misdemeanor if: 913 (a) the person is not a prisoner or a person detained under Section 77-7-15; 914 (b) the person knew that the victim was a health care provider or emergency medical 915 service worker; and 916 (c) the health care provider or emergency medical service worker was performing 917 emergency or life saving duties within the scope of his or her authority at the time of the 918 assault. 919 (2) A person who violates Subsection (1) is guilty of a third degree felony if the 920 person: 921 (a) causes substantial bodily injury, as defined in Section 76-1-601; and 922 (b) acts intentionally or knowingly.

(b) "Health care provider" means the same as that term is defined in Section

(a) "Emergency medical service worker" means a person [certified] licensed under

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(3) As used in this section:

Section 26-8a-302.

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- 928 Section 23. Section **78A-6-209** is amended to read:
- **78A-6-209.** Court records -- Inspection.
- 930 (1) The court and the probation department shall keep records as required by the board 931 and the presiding judge.
  - (2) Court records shall be open to inspection by:
  - (a) the parents or guardian of a child, a minor who is at least 18 years of age, other parties in the case, the attorneys, and agencies to which custody of a minor has been transferred;
  - (b) for information relating to adult offenders alleged to have committed a sexual offense, a felony or class A misdemeanor drug offense, or an offense against the person under Title 76, Chapter 5, Offenses Against the Person, the State Board of Education for the purpose of evaluating whether an individual should be permitted to obtain or retain a license as an educator or serve as an employee or volunteer in a school, with the understanding that the State Board of Education must provide the individual with an opportunity to respond to any information gathered from its inspection of the records before it makes a decision concerning licensure or employment;
  - (c) the Criminal Investigations and Technical Services Division, established in Section 53-10-103, for the purpose of a criminal history background check for the purchase of a firearm and establishing good character for issuance of a concealed firearm permit as provided in Section 53-5-704;
  - (d) the Division of Child and Family Services for the purpose of Child Protective Services Investigations in accordance with Sections 62A-4a-403 and 62A-4a-409 and administrative hearings in accordance with Section 62A-4a-1009;
  - (e) the Office of Licensing for the purpose of conducting a background check in accordance with Section 62A-2-120;
  - (f) for information related to a juvenile offender who has committed a sexual offense, a felony, or an offense that if committed by an adult would be a misdemeanor, the Department of Health for the purpose of evaluating under the provisions of Subsection 26-39-404(3) whether a licensee should be permitted to obtain or retain a license to provide child care, with the understanding that the department must provide the individual who committed the offense with

an opportunity to respond to any information gathered from its inspection of records before it makes a decision concerning licensure;

- (g) for information related to a juvenile offender who has committed a sexual offense, a felony, or an offense that if committed by an adult would be a misdemeanor, the Department of Health to determine whether an individual meets the background screening requirements of Title 26, Chapter 21, Part 2, Clearance for Direct Patient Access, with the understanding that the department must provide the individual who committed the offense an opportunity to respond to any information gathered from its inspection of records before it makes a decision under that part; and
- (h) for information related to a juvenile offender who has committed a sexual offense, a felony, or an offense that if committed by an adult would be a misdemeanor, the Department of Health to determine whether to grant, deny, or revoke background clearance under Section 26-8a-310 for an individual who is seeking or who has obtained <u>an</u> emergency medical service personnel [certification] <u>license</u> under Section 26-8a-302, with the understanding that the department must provide the individual who committed the offense an opportunity to respond to any information gathered from the department's inspection of records before it makes a determination.
- (3) With the consent of the judge, court records may be inspected by the child, by persons having a legitimate interest in the proceedings, and by persons conducting pertinent research studies.
- (4) If a petition is filed charging a minor 14 years of age or older with an offense that would be a felony if committed by an adult, the court shall make available to any person upon request the petition, any adjudication or disposition orders, and the delinquency history summary of the minor charged unless the records are closed by the court upon findings on the record for good cause.
- (5) Probation officers' records and reports of social and clinical studies are not open to inspection, except by consent of the court, given under rules adopted by the board.
- (6) (a) Any juvenile delinquency adjudication or disposition orders and the delinquency history summary of any person charged as an adult with a felony offense shall be made available to any person upon request.
  - (b) This provision does not apply to records that have been destroyed or expunged in

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- (c) The court may charge a reasonable fee to cover the costs associated with retrieving a requested record that has been archived.
- 992 Section 24. Section **78B-8-401** is amended to read:
- 993 **78B-8-401. Definitions.**
- For purposes of this chapter:
  - (1) "Blood or contaminated body fluids" includes blood, saliva, amniotic fluid, pericardial fluid, peritoneal fluid, pleural fluid, synovial fluid, cerebrospinal fluid, semen, and vaginal secretions, and any body fluid visibly contaminated with blood.
  - (2) "Disease" means Human Immunodeficiency Virus infection, acute or chronic Hepatitis B infection, Hepatitis C infection, and any other infectious disease specifically designated by the Labor Commission in consultation with the Department of Health for the purposes of this chapter.
    - (3) "Emergency services provider" means:
  - (a) an individual [certified] licensed under Section 26-8a-302, a public safety officer, local fire department personnel, or personnel employed by the Department of Corrections or by a county jail, who provide prehospital emergency care for an emergency services provider either as an employee or as a volunteer; or
    - (b) an individual who provides for the care, control, support, or transport of a prisoner.
  - (4) "First aid volunteer" means a person who provides voluntary emergency assistance or first aid medical care to an injured person prior to the arrival of an emergency medical services provider or public safety officer.
    - (5) "Prisoner" is as defined in Section 76-5-101.
  - (6) "Public safety officer" means a peace officer as defined in Title 53, Chapter 13, Peace Officer Classifications.
    - (7) "Significant exposure" and "significantly exposed" mean:
- 1015 (a) exposure of the body of one person to the blood or body fluids of another person 1016 by:
  - (i) percutaneous injury, including a needle stick, cut with a sharp object or instrument, or a wound resulting from a human bite, scratch, or similar force; or
- (ii) contact with an open wound, mucous membrane, or nonintact skin because of a cut,

abrasion, dermatitis, or other damage; or

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(b) exposure that occurs by any other method of transmission defined by the

Department of Health as a significant exposure.

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