

Senator Curtis S. Bramble proposes the following substitute bill:

**NON-EMERGENCY PATIENT TRANSPORTATION SAFETY
AMENDMENTS**

2018 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Edward H. Redd

Senate Sponsor: Curtis S. Bramble

LONG TITLE

General Description:

This bill amends the Utah Emergency Medical Services System Act.

Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ adds to the list of individuals who must be transported by a licensed ambulance;
- ▶ allows an emergency medical services provider to decline or delay a request for

non-emergency transportation under certain circumstances that would endanger the patient or the provider; and

▶ requires a hospital to hold a bed for a patient whose transportation is delayed or declined under the provisions of this bill.

Money Appropriated in this Bill:

None

Other Special Clauses:

Ⓢ→ [None] This bill provides a special effective date. ←Ⓢ

Utah Code Sections Affected:

AMENDS:



150 (7) requires IV administration or maintenance, oxygen that is not patient-operated, or
 151 other emergency medical services during transport;

152 (8) needs to be immobilized during transport to a hospital, an emergency patient
 153 receiving facility, or mental health facility due to a mental or physical condition, unless the
 154 individual is in the custody of a peace officer and the primary purpose of the restraint is to
 155 prevent escape;

156 (9) needs to be immobilized due to a fracture, possible fracture, or other medical
 157 condition; [or]

158 (10) is subject to an interfacility transport; or

159 [(10)] (11) otherwise requires or has the potential to require a level of medical care that
 160 the committee establishes as requiring direct medical observation.

161 Section 3. Section **26-8a-602** is enacted to read:

162 **26-8a-602. Interfacility transportation of behavioral health unit and basic life**
 163 **support patients.**

164 (1) As used in this section:

165 (a) "Basic life support patient" means a patient admitted into a hospital emergency
 166 room, medical unit, or other hospital unit that:

167 (i) has stable vital signs;

168 (ii) does not have an IV in place;

169 (iii) has no advanced life support medications that will be required for monitoring or
 170 administering during transport; and

171 (iv) does not require ~~§~~ and is not anticipated to require ~~§~~ chemical or physical
 171a restraints.

172 (b) "Provider" means a ground ambulance or paramedic licensed under this chapter.

173 (2) A provider may refuse or delay a request for interfacility transportation if:

174 (a) the request is for the transportation of a basic life support patient;

175 (b) the request is made between the hours of ~~§~~ [10:00 p.m.] 12:00 a.m. ~~§~~ and 6:00
 175a a.m.; ~~§~~ [and]

175b (c) the request does not create an unreasonable burden on the originating site; ~~§~~

175c ~~§~~ (d) the patient is 18 years old or older; and ~~§~~

176 ~~§~~ [(c)] (e) ~~§~~ (i) the request is for a route that, at the time of the request, would require
 176a more than

177 ~~§~~ [30] 55 ~~§~~ miles of driving, as calculated from the patient's originating site to the patient's
 177a destination

178 site;

179 (ii) staffing levels or availability of equipment at the time of a request are below the
 180 levels established by the department under Subsection (3); or

181 (iii) there are hazardous weather conditions, as defined by the department under
 182 Subsection (3).

183 (3) The department shall make rules in accordance with Title 63G, Chapter 3, Utah
 184 Administrative Rulemaking Act, to:

185 (a) establish ~~§~~, based on the cost, quality, and access goals established under
 185a Subsection 26-8a-408(7), ~~←§~~ a level of staffing or equipment availability necessary to support the
 185b needs

186 and expectations of a political subdivision's 911 ambulance or paramedic services between the
 187 hours of ~~§~~ [10:00 p.m.] 12:00 a.m. ~~←§~~ and 6:00 a.m.; and

188 (b) define hazardous weather conditions under which the interfacility transportation of
 189 a non-emergent basic life support patient would result in substantial risk to the patient and the
 190 provider.

191 (4) (a) Notwithstanding the requirements in Subsections 26-8a-402(5)(c) and (6)(c), a
 192 provider outside of the exclusive geographic service area may respond to a request for the
 193 interfacility transportation of a basic life support patient if the provider that is licensed in the
 194 exclusive geographic service area:

195 (i) delays or declines a request under Subsection (2); and

196 (ii) requests assistance under a mutual aid agreement.

197 (b) A request under Subsection (4)(a)(ii) qualifies as a time of unusual demand under
 198 Subsection 26-8a-402(4)(a).

199 (5) If a provider refuses or delays a request under Subsection (2), the receiving health
 200 care provider shall honor an affirmative request from the originating health care provider to
 201 hold a bed for a patient whose transportation was refused or delayed from the time of the
 202 notification until the earlier of:

203 (a) a notification from the originating health care provider to the receiving health care
 204 provider that the bed is no longer needed; or

205 (b) 6:00 a.m. after the initial notification is given, plus a reasonable amount of time for
 206 transportation from the originating site to the receiving site.

207 (6) If a health care provider makes a request to hold a bed under Subsection (5), the
 208 originating health care provider shall provide regular updates to the receiving health care
 209 provider on the status of the delayed transportation.

210 (7) Nothing in this section requires a provider to:

211 (a) delay or decline transportation under Subsection (2); or

212

(b) render assistance under a mutual aid agreement under Subsection (4).

Ŝ→ Section 4. Effective date. ←Ŝ

Ŝ→ This bill takes effect on October 1, 2018. ←Ŝ