

## SB0085S01 compared with SB0085

~~deleted text~~ shows text that was in SB0085 but was deleted in SB0085S01.

Inserted text shows text that was not in SB0085 but was inserted into SB0085S01.

**DISCLAIMER:** This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Senator Evan J. Vickers proposes the following substitute bill:

### SECURE TRANSPORT DESIGNATION AMENDMENTS

2019 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Evan J. Vickers**

House Sponsor: ~~\_\_\_\_\_~~ Susan Pulsipher

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#### LONG TITLE

##### General Description:

This bill adds a designation category for nonemergency secured behavioral health transport providers and vehicles.

##### Highlighted Provisions:

This bill:

- ▶ adds a designation category for nonemergency secure behavioral health transport providers and vehicles;
- ▶ prohibits the state Medicaid program from reimbursing a nonemergency secured behavioral health transport provider; and
- ▶ makes technical changes.

##### Money Appropriated in this Bill:

None

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### Other Special Clauses:

None

### Utah Code Sections Affected:

#### AMENDS:

**26-8a-102**, as last amended by Laws of Utah 2017, Chapter 326

**26-8a-105**, as last amended by Laws of Utah 2017, Chapter 326

**26-8a-301**, as last amended by Laws of Utah 2017, Chapter 326

**26-8a-303**, as enacted by Laws of Utah 1999, Chapter 141

**26-8a-304**, as last amended by Laws of Utah 2013, Chapter 350

**26-8a-405.4**, as enacted by Laws of Utah 2010, Chapter 187

#### ENACTS:

**26-18-25, Utah Code Annotated 1953**

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*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **26-8a-102** is amended to read:

**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

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(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 licensed 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 licensed 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 licensed 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]~~ Subsection 26-8a-303(1)(a); 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,

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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) "Nonemergency secured behavioral health transport" means an entity that:

(a) provides nonemergency secure transportation services for an individual who:

(i) is not required to be transported by an ambulance under Section 26-8a-305; and

(ii) requires behavioral health observation during transport between any of the

following facilities:

(A) a licensed acute care hospital;

(B) an emergency patient receiving facility; ~~and~~

(C) a licensed mental health facility; and

(D) the office of a licensed health care provider; and

(b) is required to be designated under Section 26-8a-303.

~~(15)~~ (16) "Paramedic provider" means an entity that:

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- (a) employs emergency medical service personnel; and
- (b) is required to obtain a license under Part 4, Ambulance and Paramedic Providers.

~~[(16)]~~ (17) "Patient" means an individual who, as the result of illness or injury, meets any of the criteria in Section 26-8a-305.

~~[(17)]~~ (18) "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)]~~ (19) "Trauma" means an injury requiring immediate medical or surgical intervention.

~~[(19)]~~ (20) "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)]~~ (21) "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)]~~ (22) "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.

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Section 2. Section **26-8a-105** is amended to read:

### **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, and nonemergency secured behavioral health transport 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 license 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 while a peer review board investigation is pending;

(d) establish application, submission, and procedural requirements for licenses, designations, and permits; and

(e) establish and implement the programs, plans, and responsibilities as specified in other sections of this chapter.

Section 3. Section **26-8a-301** is amended to read:

### **26-8a-301. General requirement.**

(1) Except as provided in Section 26-8a-308 or 26-8b-201:

- (a) an individual may not provide emergency medical services without a license issued

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under Section 26-8a-302;

(b) a facility or provider may not hold itself out as a designated emergency medical service provider or nonemergency secured behavioral health transport provider without a designation issued under Section 26-8a-303;

(c) a vehicle may not operate as an ambulance [~~or~~], emergency response vehicle, or nonemergency secured behavioral health transport vehicle without a permit issued under Section 26-8a-304; and

(d) an entity may not respond as an ambulance or paramedic provider without the appropriate license issued under Part 4, Ambulance and Paramedic Providers.

(2) Section 26-8a-502 applies to violations of this section.

Section 4. Section **26-8a-303** is amended to read:

### **26-8a-303. Designation of emergency medical service providers and nonemergency secured behavioral health transport providers.**

(1) To ensure quality emergency medical services, the committee shall establish designation requirements for:

(a) emergency medical service providers in the following categories:

~~(a)~~ (i) quick response provider;

~~(b)~~ (ii) resource hospital for emergency medical providers;

~~(c)~~ (iii) emergency medical service dispatch center;

~~(d)~~ (iv) emergency patient receiving facilities; and

~~(e)~~ (v) other types of emergency medical service providers as the committee

considers necessary[?]; and

(b) nonemergency secured behavioral health transport providers.

(2) The department shall, based on the requirements in Subsection (1), issue designations to emergency medical service providers and nonemergency secured behavioral health transport providers listed in Subsection (1).

(3) As provided in Section 26-8a-502, an entity issued a designation under Subsection ~~(1)~~ (2) may only function and hold itself out in accordance with its designation.

Section 5. Section **26-8a-304** is amended to read:

### **26-8a-304. Permits for emergency medical service vehicles and nonemergency secured behavioral health transport vehicles.**

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(1) (a) To ensure that emergency medical service vehicles and nonemergency secured behavioral health transport vehicles are adequately staffed, safe, maintained, properly equipped, and safely operated, the committee shall establish permit requirements at levels it considers appropriate in the following categories:

- (i) ambulance; [~~and~~]
- (ii) emergency medical response vehicle[~~;~~]; and
- (iii) nonemergency secured behavioral health transport vehicle.

(b) The permit requirements under [~~this Subsection (1)~~] Subsections (1)(a)(i) and (ii) shall include a requirement that beginning on or after January 31, 2014, every operator of an ambulance or emergency medical response vehicle annually provide proof of the successful completion of an emergency vehicle operator's course approved by the department for all ambulances and emergency medical response vehicle operators.

(2) The department shall, based on the requirements established in Subsection (1), issue permits to emergency medical service vehicles and nonemergency secured behavioral health transport vehicles.

Section 6. Section **26-8a-405.4** is amended to read:

**26-8a-405.4. Non-911 provider -- Finding of meritorious complaint -- Request for proposals.**

(1) Notwithstanding Subsection 26-8a-102[~~(17)~~](18), for purposes of this section, political subdivision includes:

- (a) a county of any class; and
- (b) a city or town located in a county of any class.

(2) (a) This section applies to a non-911 provider license under this chapter.

(b) The department shall, in accordance with Subsections (4) and (5):

- (i) receive a complaint about a non-911 provider;
- (ii) determine whether the complaint has merit;
- (iii) issue a finding of:
  - (A) a meritorious complaint; or
  - (B) a non-meritorious complaint; and

(iv) forward a finding of a meritorious complaint to the governing body of the political subdivision:



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(A) in which the non-911 provider is licensed; or

(B) that provides the non-911 services, if different from Subsection (2)(b)(iv)(A).

(3) (a) A political subdivision that receives a finding of a meritorious complaint from the department:

(i) shall take corrective action that the political subdivision determines is appropriate;

and

(ii) shall, if the political subdivision determines corrective action will not resolve the complaint or is not appropriate:

(A) issue a request for proposal for non-911 service in the geographic service area if the political subdivision will not respond to the request for proposal; or

(B) (I) make a finding that a request for proposal for non-911 services is appropriate and the political subdivision intends to respond to a request for proposal; and

(II) submit the political subdivision's findings to the department with a request that the department issue a request for proposal in accordance with Section 26-8a-405.5.

(b) (i) If Subsection (3)(a)(ii)(A) applies, the political subdivision shall issue the request for proposal in accordance with Sections 26-8a-405.1 through 26-8a-405.3.

(ii) If Subsection (3)(a)(ii)(B) applies, the department shall issue a request for proposal for non-911 services in accordance with Section 26-8a-405.5.

(4) The department shall make a determination under Subsection (2)(b) if:

(a) the department receives a written complaint from any of the following in the geographic service area:

(i) a hospital;

(ii) a health care facility;

(iii) a political subdivision; or

(iv) an individual; and

(b) the department determines, in accordance with Subsection (2)(b), that the complaint has merit.

(5) (a) If the department receives a complaint under Subsection (2)(b), the department shall request a written response from the non-911 provider concerning the complaint.

(b) The department shall make a determination under Subsection (2)(b) based on:

(i) the written response from the non-911 provider; and

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(ii) other information that the department may have concerning the quality of service of the non-911 provider.

(c) (i) The department's determination under Subsection (2)(b) is not subject to an adjudicative proceeding under Title 63G, Chapter 4, Administrative Procedures Act.

(ii) The department shall adopt administrative rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to implement the provisions of Subsection (2)(b).

Section 7. Section 26-18-25 is enacted to read:

**26-18-25. Reimbursement for nonemergency secured behavioral health transport providers.**

The department may not reimburse a nonemergency secured behavioral health transport provider that is designated under Section 26-8a-303.