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HOUSE OF REPRESENTATIVES

EIGHTY-SIXTH
SESSION

HOUSE FILE NO. 842

February 16, 2009

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The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

March 23, 2009

Committee Recommendation and Adoption of Report:

To Pass

Read Second Time

1.1 A bill for an act
1.2 relating to health; making technical changes for emergency medical services;
1.3 amending Minnesota Statutes 2008, section 144E.101, subdivisions 6, 7.
1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2008, section 144E.101, subdivision 6, is amended to
1.6 read:

1.7 Subd. 6. **Basic life support.** (a) Except as provided in paragraphs (e) and (f), a
1.8 basic life-support ambulance shall be staffed by at least two EMTs, one of whom must
1.9 accompany the patient and provide a level of care so as to ensure that:

1.10 (1) life-threatening situations and potentially serious injuries are recognized;

1.11 (2) patients are protected from additional hazards;

1.12 (3) basic treatment to reduce the seriousness of emergency situations is administered;

1.13 and

1.14 (4) patients are transported to an appropriate medical facility for treatment.

1.15 (b) A basic life-support service shall provide basic airway management.

1.16 (c) A basic life-support service shall provide automatic defibrillation, as provided in
1.17 section 144E.103, subdivision 1, paragraph (b).

1.18 (d) A basic life-support service licensee's medical director may authorize the
1.19 ambulance service personnel to carry and to use medical antishock trousers and to perform
1.20 intravenous infusion if the ambulance service personnel have been properly trained.

1.21 (e) Upon application from an ambulance service that includes evidence
1.22 demonstrating hardship, the board may grant a variance from the staff requirements in
1.23 paragraph (a) and may authorize a basic life-support ambulance to be staffed by one EMT
1.24 and one first responder driver for all emergency ambulance calls and interfacility transfers.

The variance shall apply to basic life-support ambulances operated by the ambulance service until the ambulance service renews its license. When a variance expires, an ambulance service may apply for a new variance under this paragraph. For purposes of this paragraph, "ambulance service" means either an ambulance service whose primary service area is primarily located outside the metropolitan counties listed in section 473.121, subdivision 4, and outside the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud; or an ambulance service based in a community with a population of less than 1,000.

(f) After an initial emergency ambulance call, each subsequent emergency ambulance response, until the initial ambulance is again available, and interfacility transfers, may be staffed by one registered first responder driver and an EMT. The EMT must accompany the patient and provide the level of care required in paragraph (a). This paragraph applies only to an ambulance service whose primary service area is primarily located outside the metropolitan counties listed in section 473.121, subdivision 4, and outside the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud, or an ambulance based in a community with a population of less than 1,000 persons.

Sec. 2. Minnesota Statutes 2008, section 144E.101, subdivision 7, is amended to read:

Subd. 7. **Advanced life support.** (a) Except as provided in paragraphs (f) and (g), an advanced life-support ambulance shall be staffed by at least:

(1) one EMT and one EMT-P;

(2) one EMT and one registered nurse who is an EMT, is currently practicing nursing, and has passed a paramedic practical skills test approved by the board and administered by a training program; or

(3) one EMT and one physician assistant who is an EMT, is currently practicing as a physician assistant, and has passed a paramedic practical skills test approved by the board and administered by a training program.

(b) An advanced life-support service shall provide basic life support, as specified under subdivision 6, paragraph (a), advanced airway management, manual defibrillation, and administration of intravenous fluids and pharmaceuticals.

(c) In addition to providing advanced life support, an advanced life-support service may staff additional ambulances to provide basic life support according to subdivision 6 and section 144E.103, subdivision 1.

(d) An ambulance service providing advanced life support shall have a written agreement with its medical director to ensure medical control for patient care 24 hours a day, seven days a week. The terms of the agreement shall include a written policy

3.1 on the administration of medical control for the service. The policy shall address the
3.2 following issues:

- 3.3 (1) two-way communication for physician direction of ambulance service personnel;
- 3.4 (2) patient triage, treatment, and transport;
- 3.5 (3) use of standing orders; and
- 3.6 (4) the means by which medical control will be provided 24 hours a day.

3.7 The agreement shall be signed by the licensee's medical director and the licensee or
3.8 the licensee's designee and maintained in the files of the licensee.

3.9 (e) When an ambulance service provides advanced life support, the authority
3.10 of an EMT-P, Minnesota registered nurse-EMT, or Minnesota registered physician
3.11 assistant-EMT to determine the delivery of patient care prevails over the authority of
3.12 an EMT.

3.13 (f) Upon application from an ambulance service that includes evidence
3.14 demonstrating hardship, the board may grant a variance from the staff requirements in
3.15 paragraph (a), clause (1), and may authorize an advanced life-support ambulance to be
3.16 staffed by a first responder driver with a paramedic for all emergency calls and interfacility
3.17 transfers. The variance shall apply to advanced life-support ambulance services until
3.18 the ambulance service renews its license. When the variance expires, an ambulance
3.19 service may apply for a new variance under this paragraph. This paragraph applies
3.20 only to an ambulance service whose primary service area is primarily located outside
3.21 the metropolitan counties listed in section 473.121, subdivision 4, and outside the cities
3.22 of Duluth, Mankato, Moorhead, Rochester, and St. Cloud, or an ambulance based in a
3.23 community with a population of less than 1,000 persons.

3.24 (g) After an initial emergency ambulance call, each subsequent emergency
3.25 ambulance response, until the initial ambulance is again available, and interfacility
3.26 transfers, may be staffed by one registered first responder driver and an EMT or paramedic.
3.27 This paragraph applies only to an ambulance service whose primary service area is
3.28 primarily located outside the metropolitan counties listed in section 473.121, subdivision
3.29 4, and outside the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud, or an
3.30 ambulance based in a community with a population of less than 1,000 persons.