SENATE BILL 527

46TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2003 INTRODUCED BY

Allen V. Hurt

AN ACT

RELATING TO EMERGENCY MEDICAL SERVICES; EXPANDING THE SCOPE OF
THE EMERGENCY MEDICAL SERVICES ACT; AMENDING AND ENACTING
SECTIONS OF THE EMERGENCY MEDICAL SERVICES ACT; PROVIDING FOR A
PENALTY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. Section 24-10B-2 NMSA 1978 (being Laws 1983, Chapter 190, Section 2, as amended) is amended to read:

"24-10B-2. PURPOSE.--The purpose of the Emergency Medical Services Act is to enhance and regulate a comprehensive emergency medical services system in the state [including providing pre-hospital and interfacility care, establishing standards for and designating trauma care facilities, training and licensing of emergency medical technicians and establishing standards for medical direction and air ambulance services] as

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set forth in that act. Nothing in the Emergency Medical Services Act shall be construed to preclude a local emergency medical services system from adopting standards that are more stringent than those authorized by the Emergency Medical Services Act."

Section 2. Section 24-10B-3 NMSA 1978 (being Laws 1993, Chapter 161, Section 2) is amended to read:

"24-10B-3. DEFINITIONS.--As used in the Emergency Medical Services Act:

A. "academy" means [a separately funded] an emergency medical services training program administered through the department of emergency medicine of the university of New Mexico school of medicine;

B. "advance directive" means a written instruction, such as a living will, [or] durable power of attorney for health care or emergency medical services do not resuscitate form recognizable under state law and relating to the provision of health care when an individual is incapacitated;

[C. "advanced life support" means advanced prehospital and interfacility care and treatment, including basic
and intermediate life support, as prescribed by regulation,
which may be performed only by an individual licensed as a
paramedic by the bureau and operating under medical direction;

[D.] C. "air ambulance service" means any governmental or private service that provides air

transportation specifically designed to accommodate the medical needs of a person who is ill, injured or otherwise mentally or physically incapacitated and who requires in-flight medical supervision;

[E.] D. "approved emergency medical services training program" means an emergency medical services training program that is sponsored by a post-secondary educational institution, [is] accredited by [the joint review committee on educational programs] a national educational accrediting organization for emergency medical services or active in the accreditation process, [as verified by the chair of the joint review committee on educational programs, or] and is approved by the joint organization on education committee and participates in the joint organization on education committee;

[F. "basic life support" means pre-hospital and interfacility care and treatment, as prescribed by regulation, which can be performed by all licensed emergency medical technicians:

G.] <u>E.</u> "bureau" means the [primary care] <u>injury</u>
prevention and emergency medical services bureau of the public
health division of the department [of health];

[H. "certified emergency medical services first responder" means a person who is certified by the bureau and who functions within the emergency medical services system to provide initial emergency aid, but not basic, intermediate or . 144170.1

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F. "certified emergency medical service" means an organization that meets minimum standards to provide emergency services and is approved by the bureau, including emergency medical dispatch agencies, pre-hospital or interfacility care services and special event services organized to provide emergency medical services;

[H.] G. "critical incident stress [debriefing]

management program" means a program of preventive education and crisis intervention intended to reduce the negative effects of critical stress on emergency responders;

[J. "curricula" means programs of study, the minimum content of which has been developed by the joint organization on education, for the initial and mandatory refresher training of emergency medical technicians and certified emergency medical services first responders;

K.] H. "department" means the department of health;

I. "emergency medical dispatch" means an advanced form of dispatch communications used to improve emergency medical services response to medical and traumatic emergencies that utilizes specially trained emergency medical dispatchers, in accordance with an emergency medical dispatch priority reference system and the department-approved scopes of practice:

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[L.] <u>J.</u> "emergency medical dispatcher" means a
person who is trained and [certified] <u>licensed</u> pursuant to
Subsection F of Section 24-10B-4 NMSA 1978 to receive calls for
emergency medical assistance, provide pre-arrival medical
instructions, dispatch emergency medical assistance and
coordinate its response:

[M-] K. "emergency medical services" means the services rendered by [emergency medical technicians, certified emergency medical services first responders or emergency medical dispatchers] providers in response to an individual's need for immediate medical care to prevent loss of life or aggravation of physical or psychological illness or injury;

L. "emergency medical services first responder"

means a person who is licensed by the department and who

functions within the emergency medical services system to

provide initial emergency aid;

[N.] M "emergency medical services system" means a coordinated system of health care delivery that responds to the needs of the sick and injured and includes [community education and prevention programs, centralized access and emergency medical dispatch, trained first responders, medical-rescue services, ambulance services, hospital emergency departments and specialty care hospitals that respond to the needs of the acutely sick and injured] emergency medical services;

 $\left[\frac{\theta_{-}}{N_{-}}\right]$ "emergency medical technician" means a . 144170. 1

[health care] provider who has been licensed [to practice by the bureau] by the department to provide patient care;

- [P. "intermediate life support" means certain advanced pre-hospital and interfacility care and treatment, including basic life support, as prescribed by regulation, which may be performed only by an individual licensed by the bureau and operating under medical direction;
- Q. "joint review committee" means the joint review committee on educational programs for the emergency medical technician-paramedic, a nonprofit organization incorporated in the state of Massachusetts:
- R. "medical control" means supervision provided by or under the direction of physicians to providers by written protocol or direct communications;
- 0. "health care facility" means a hospital, clinic or other entity licensed or approved by the department;
- P. "injury prevention" means to promote and implement efforts to reduce the risk and severity of intentional and unintentional injuries;
- [S.] Q. "medical direction" means guidance or supervision provided by a physician to a provider or emergency medical services system and [which includes] that may include authority over and responsibility for emergency medical dispatch, direct patient care and transport of patients, arrangements for medical control and all other aspects of .144170.1

2	[T. "medical-rescue service" means a provider that
3	is part of the emergency medical services system, but not
4	subject to the authority of the state corporation commission
5	under the Ambulance Standards Act, and which may be dispatched
6	to the scene of an emergency to provide rescue or medical
7	care;]
8	R. "paramedic" means a provider licensed at that
9	level by the department to provide patient care;
10	[U.] <u>S.</u> "physician" means a doctor of medicine or
11	doctor of osteopathy who is licensed or otherwise authorized to
12	practice medicine or osteopathic medicine in New Mexico;
13	$\left[rac{V.}{.} \right] \ \underline{T.} "protocol" means a predetermined, written$
14	medical care plan and includes standing orders;
15	[\text{\formula}.] \text{\text{U.}} "provider" means a person [\formula r \text{entity}
16	delivering emergency medical services] who has been licensed by
17	the department to provide patient care within a designated
18	scope of practice;
19	[X.] <u>V.</u> "regional office" means [a regional] <u>an</u>
20	emergency medical services planning and development agency
21	formally recognized and supported by the bureau;
22	[\frac{\fmathfrak{Y}}{L}] \bigvert \bigvert " secretary" means the secretary of health;
23	[Z.] <u>X.</u> "special skills" means a set of procedures
24	or therapies that are beyond the [usual] scope of practice of a
25	given level of [life support] <u>licensure</u> and that have been
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patient care delivered by a provider;

approved by the medical direction committee for use by a specified provider; and

[AA.] Y. "state emergency medical services medical director" means a physician [employed] designated by the [bureau] department to provide overall medical direction to the statewide emergency medical services [program] system, whose duties include serving as a liaison to the medical community and chairing the medical direction committee."

Section 3. Section 24-10B-4 NMSA 1978 (being Laws 1983, Chapter 190, Section 4, as amended) is amended to read:

"24-10B-4. BUREAU--DUTIES.--The bureau is designated as the lead agency for the emergency medical services system, including injury prevention, and shall establish and maintain a program for regional planning and development, improvement, expansion and direction of emergency medical services throughout the state, including:

A. design, development, implementation and coordination of <u>emergency medical services</u> communications systems to join the personnel, facilities and equipment of a given region or system that will allow for medical [control of <u>pre-hospital or interfacility care</u>] <u>direction</u>;

B. provision of technical assistance to the public regulation commission for further development and implementation of standards for certification of ambulance services, vehicles and equipment;

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- C. development of requirements for the collection of data and statistics to evaluate the availability, operation and quality of providers in the state;
- D. adoption of [regulations] rules for emergency medical services medical direction [of a provider or emergency medical services system] upon the recommendation of the medical direction committee; [including:
- (1) development of model guidelines for medical direction of all components of an emergency medical services system;
- (2) a process for notifying the bureau of the withdrawal of medical control by a physician from a provider;
- (3) specific requirements for medical direction of intermediate and advanced life support personnel and basic life support personnel with special skills approval;
- E. maintenance of a list of approved emergency medical services training programs, the graduates of which shall be the only New Mexico emergency medical services students eligible to apply for emergency medical technician licensure or certified emergency medical services first responder certification;
- F.] \underline{E} . approval of continuing education programs for emergency medical services personnel;
- [G.] $\underline{F.}$ adoption of [regulations] rules pertaining . 144170.1

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to the training and [certification] licensure of emergency medical dispatchers and their instructors;

- [H.] G. adoption of [regulations] rules based upon the recommendations of [the] a trauma advisory committee, for implementation and monitoring of a statewide, comprehensive trauma care system, including:
- minimum standards for designation or retention of designation as a trauma center or a participating trauma facility;
- pre-hospital care management guidelines **(2)** for the triage and transportation of traumatized persons;
- **(3)** establishment for interfacility transfer criteria and transfer agreements;
- **(4)** standards for collection of data relating to trauma system operation, patient outcome and trauma prevention; and
 - creation of a state trauma care plan; **(5)**
- [H.] H. adoption of [regulations] rules, based upon the recommendations of the air transport advisory committee, for the certification of air ambulance services;
- [J.] I. adoption of [regulations] rules pertaining to authorization of providers to honor advance directives, such as emergency medical services do not resuscitate forms, to withhold or terminate care in certain pre-hospital or interfacility circumstances, as guided by local medical . 144170. 1

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[K. development of guidelines, with consultation from the state fire marshal, pertaining to the operation of medical-rescue services within the emergency medical services system;

L.] J. operation of a critical incident stress [debriefing] management program for emergency [responders] providers utilizing specifically trained volunteers who shall be considered public employees for the purposes of the Tort Claims Act when called upon to perform [a debriefing; and] their duties;

[M-] K. adoption of rules to establish a cardiac arrest targeted response program pursuant to the Cardiac Arrest Response Act, including registration of automated external defibrillator programs, maintenance of equipment, data collection, approval of automated external defibrillator training programs and a schedule of automated external defibrillator program registration fees;

L. adoption of rules for the administration of an emergency medical services licensure program; and

M promoting, developing, implementing,

coordinating and evaluating risk reduction and injury

prevention systems."

Section 4. Section 24-10B-5 NMSA 1978 (being Laws 1983, Chapter 190, Section 5, as amended) is amended to read:

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"24-10B-5. [PERSONNEL] LICENSURE REQUIRED--PENALTY. --

A. The department shall by [regulation] rule adopt and enforce licensure [and certification] requirements, including minimum standards for training, continuing education and disciplinary actions consistent with the Uniform Licensing Act, for all persons who provide emergency medical services within the state, irrespective of whether the services are remunerated. [Such regulation] The rules shall include authorization for the bureau to issue at least annually an updated list of skills, techniques and medications approved for use at each level of [life support. When setting requirements for licensure of persons also subject to the Ambulance Standards Act, the bureau shall consult with the state corporation commission] licensure. The secretary may waive licensure requirements as needed during a declared emergency.

B. Licensed emergency medical technicians may

function within health care facilities under their licensure

and approved New Mexico emergency medical services scope of

practice. Nothing in this subsection shall prohibit a health

care facility from assigning additional duties and

responsibilities in accordance with law. This subsection shall

not expand the New Mexico emergency medical services scope of

practice under the emergency medical technician's license.

[B-] C. In addition to the requirements specified in Subsection A of this section, the department may:

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- **(1)** prohibit the use of "emergency medical dispatcher", "emergency medical technician", "[certified] emergency medical services first responder", "paramedic" or similar terms connoting expertise in providing emergency medical services by any person not licensed or certified under the Emergency Medical Services Act;
- deny, suspend or revoke licensure [or **(2)** certification] in accordance with the provisions of the Uniform Licensing Act; and
- establish a schedule of reasonable fees for application, examination or licensure [or certification] and regular renewal thereof.
- Any person who represents himself to be an "emergency medical dispatcher", "emergency medical technicianbasic", "emergency medical technician-intermediate", "emergency medical technician-paramedic", "emergency medical services first responder" or "paramedic", or who uses similar terms connoting expertise in providing emergency medical services while not currently licensed under the Emergency Medical Services Act is guilty of a misdemeanor."

Section 5. Section 24-10B-5.1 NMSA 1978 (being Laws 1993, Chapter 161, Section 5) is amended to read:

"24-10B-5. 1. LICENSING COMMISSION ESTABLISHED. --

The secretary shall appoint an "emergency medical services licensing commission", which shall be staffed . 144170. 1

by the bureau and composed of one lay person, three emergency medical technicians, one from each level of [life support] licensure, and three physicians, at least two of whom shall have expertise in emergency medicine and who are appointed from a list proposed by the New Mexico chapter of the American college of emergency physicians.

- B. The composition of the emergency medical services licensing commission shall reflect geographic diversity and both public and private interests. The members shall serve for three-year staggered terms. The duties of and procedures for the emergency medical services licensing commission shall be delineated in [regulations] rules promulgated pursuant to Subsection A of Section 24-10B-5 NMSA 1978. Such duties include:
- (1) providing a forum for the receipt of public comment regarding emergency medical services licensing matters;
- (2) oversight of the bureau's licensure functions;
- (3) receiving complaints, directing investigations and authorizing the initiation of actions by the bureau regarding contemplated refusal to grant initial licensure and for disciplinary actions against licensees; and
- (4) the granting of waivers, for good cause shown, of [regulations] rules pertaining to licensure renewal.

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C. The emergency medical services licensing
commission may compel the production of books, records and
papers pertinent to any investigation authorized by the
Emergency Medical Services Act and may seek enforcement of any
subpoena so issued through the district court in the county in
which the custodian of the document is located in camera.

[C.] D. The emergency medical services licensing commission shall meet as needed, but not less frequently than semiannually. The emergency medical services licensing commission shall be subject to the provisions of the Per Diem and Mileage Act."

Section 6. Section 24-10B-6 NMSA 1978 (being Laws 1983, Chapter 190, Section 6, as amended) is amended to read:

"24-10B-6. TREATMENT AUTHORIZED. --

A. Notwithstanding the provisions of [Sections 61-6-1 through 61-6-31 NMSA 1978] the Medical Practice Act,

Sections 61-10-1 through 61-10-22 NMSA 1978 or the Nursing Practice Act, any person licensed [or certified] by the bureau may render emergency medical services commensurate with his level of licensure [or certification], as medically indicated.

B. Individuals licensed [or certified under Sections 61-6-1 through 61-6-31 NMSA 1978] pursuant to the provisions of the Medical Practice Act, Sections 61-10-1 through 61-10-22 NMSA 1978 or the Nursing Practice Act are not required to be licensed [or certified] under the Emergency . 144170.1

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Medical Services Act."

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Section 7. Section 24-10B-7 NMSA 1978 (being Laws 1983, Chapter 190, Section 7, as amended) is amended to read:

"24-10B-7. COMMITTEES ESTABLISHED. --

The secretary shall appoint a statewide emergency medical services advisory committee to advise the bureau in carrying out the provisions of the Emergency Medical The advisory committee shall include, at a Services Act. minimum, representatives from the state medical society, the state emergency medical technicians' association, the state firefighters' association, the New Mexico ambulance association, the state nurses' association, the association of public safety communications organization/national emergency numbers association, the lead state agency for public safety and emergency preparedness, the state emergency services council, the New Mexico health and hospital systems association, the university of New Mexico health sciences center. the state fire chiefs' association, a consumer, emergency medical service regional offices and other interested provider and consumer groups as determined by the secretary. The advisory committee shall establish appropriate subcommittees, including a trauma advisory committee and an air transport advisory committee.

The joint organization on education [in emergency medical services committee shall be composed, at a . 144170. 1

minimum, of the [directors] director and medical [directors] director of the academy and each approved emergency medical services training program or their designee, the state emergency medical services medical director, [and the bureau chief or his designee, who shall serve without vote, and three persons who instruct emergency medical technicians, one at each level of life support] the state emergency medical services director, each emergency medical services regional office training coordinator and one provider from the three highest levels of licensure, who are appointed by the secretary from a list proposed by the statewide emergency medical services advisory committee. The duties of the joint organization on education committee include:

- developing minimum curricula content for approved emergency medical services training programs;
- (2) establishing minimum standards for approved emergency medical services training programs;
- (3) reviewing and approving the applications of organizations seeking to become approved emergency medical services training programs; and
- (4) developing minimum qualifications for and maintaining a list of instructors for each of the approved emergency medical services training programs.
- C. The secretary shall appoint a medical direction committee to advise the bureau on matters relating to [medical . 144170.1

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control and medical direction. The state emergency medical services medical director shall be a member of the committee and shall act as its chairman. The medical direction committee shall include, at a minimum, a physician representative experienced in pre-hospital medical care selected from a list proposed by the New Mexico chapter of the American college of emergency physicians, a physician representative from the academy, one physician from each of the emergency medical services geographic regions [and one emergency medical technician at each level of life support], one physician with pediatric emergency medicine expertise, one physician representing emergency medical dispatchers and one provider from the three highest levels of licensure. Members shall be selected to represent both public and private interests. The duties of the medical direction committee include:

- (1) reviewing the medical appropriateness of all [regulations] rules proposed by the bureau;
- (2) reviewing and approving the applications of providers for special skills authorizations;
- (3) assisting in the development of [regulations] rules pertaining to medical direction; and
- (4) [updating] reviewing at least annually a list of skills, techniques and medications approved for use at each level of [life support] licensure that [will] shall be approved by the secretary and [that will be] issued by the

bureau.

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D. The committees created in this section [shall be are subject to the provisions of the Per Diem and Mileage Act, to the extent that funds are available for that purpose.

[E. Any decision that the bureau proposes to make contrary to the recommendation of any committee created in this section shall be communicated in writing to that committee. Upon the request of that committee, the decision shall be submitted for reconsideration to the director of the public health division of the department and subsequently to the secretary. Any decision made pursuant to a request for reconsideration shall be communicated in writing by the department to the appropriate committee.]

Section 8. Section 24-10B-9 NMSA 1978 (being Laws 1983, Chapter 190, Section 9, as amended) is amended to read:

"24-10B-9. EMERGENCY FIRST AID. -- [Nothing in the Emergency Medical Services Act shall prevent fire and rescue services, public safety organizations and other trained units or individuals from rendering emergency first aid to the public commensurate with their training. Nothing in the Emergency Medical Services Act shall be construed to supersede other statutory authority permitting the rendering of first aid at the scene of an emergency."

Section 24-10B-9.1 NMSA 1978 (being Laws 1993, Section 9. Chapter 161, Section 11) is amended to read:

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"24-10B-9. 1. EMERGENCY TRANSPORTATION. -- Any person may be transported to an appropriate health care facility by an emergency medical technician, under medical [control] direction, when the emergency medical technician makes a good faith judgment that the person is incapable of making an informed decision about his own safety or need for medical attention and is reasonably likely to suffer disability or death without the medical intervention available at such a facility." Section 24-10B-12 NMSA 1978 (being Laws 1993, Section 10.

Chapter 161, Section 7) is amended to read:

"24-10B-12. ACADEMY--DUTIES.--The academy is designated as the lead emergency medical services training agency [for provi ders]. Its duties include:

administering [all basic life support] formal emergency medical services training conducted in New Mexico, other than [classes administered] training provided by other approved emergency medical services training programs;

- furthering the knowledge [base] of emergency medical services education; [and]
- securing a physician as its medical director to advise it in medical matters and to serve as liaison to the state emergency medical services medical director and the medical community as a whole;
- D. supporting, promoting and conducting scholarly . 144170. 1

research regarding emergency medical services; and

E. reporting and publishing emergency medical services information."

Section 11. A new section of the Emergency Medical Services Act is enacted to read:

"[NEW MATERIAL] RECORDS CONFIDENTIALITY. --

A. Any files or records in the possession of the bureau, a regional office or a provider containing identifying information about individuals requesting or receiving treatment or other health services and any unsubstantiated complaints received by the bureau regarding any provider shall be confidential and not subject to public inspection.

B. Such files, records and complaints may be subject to subpoena for use in any pending cause in any administrative proceeding or in any of the courts of this state, unless otherwise provided by law."

Section 12. A new section of the Emergency Medical Services Act is enacted to read:

"[NEW MATERIAL] APPROVED TRAINING PROGRAMS.--Approved emergency medical services training programs for providers are an integral part of the emergency medical services system and the programs shall include:

A. improving and expanding emergency medical services within regions through focused emergency medical services educational activities;

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- B. furthering the knowledge base of emergency medical services education; and
- C. securing physicians as medical directors to advise approved training programs in medical matters and to serve as liaison to the state emergency medical services medical director and the medical community as a whole."

Section 13. A new section of the Emergency Medical Services Act is enacted to read:

"[NEW MATERIAL] REGIONAL OFFICES--DUTIES. --

- A. Regional offices may be established by the department to assist the bureau to provide regional planning and development, improvement, expansion and direction of emergency medical services and injury prevention in their respective geographic regions.
- B. Regional offices may provide technical support and assistance, training coordination, outreach, advocacy, prevention and public education and leadership to communities and providers in their respective geographic regions. They may also provide specific support to the bureau for functions such as licensing examination, planning, evaluation and Emergency Medical Services Fund Act administration."

Section 14. EFFECTIVE DATE. -- The effective date of the provisions of this act is July 1, 2003.