SENATE AMENDMENT NO. ____

Offer	ed by of
Amend	SCS/HCS/House Bill Nos. 302 & 228 , Page 1 , Section title , Lines 2-3 ,
2	of the title, by striking "law enforcement officers" and
3	inserting in lieu thereof the following: "emergency responders";
4	and
5	Further amend said bill and page, Section A, Line 2, by
6	inserting after all of said line the following:
7	"190.103. 1. One physician with expertise in emergency
8	medical services from each of the EMS regions shall be elected by
9	that region's EMS medical directors to serve as a regional EMS
10	medical director. The regional EMS medical directors shall
11	constitute the state EMS medical director's advisory committee
12	and shall advise the department and their region's ambulance
13	services on matters relating to medical control and medical
14	direction in accordance with sections 190.001 to 190.245 and
15	rules adopted by the department pursuant to sections 190.001 to
16	190.245. The regional EMS medical director shall serve a term of
17	four years. The southwest, northwest, and Kansas City regional
18	EMS medical directors shall be elected to an initial two-year
19	term. The central, east central, and southeast regional EMS
20	medical directors shall be elected to an initial four-year term.

All subsequent terms following the initial terms shall be four

1 years.

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- 2. A medical director is required for all ambulance services and emergency medical response agencies that provide: advanced life support services; basic life support services utilizing medications or providing assistance with patients' medications; or basic life support services performing invasive procedures including invasive airway procedures. The medical director shall provide medical direction to these services and agencies in these instances.
 - 3. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall have the responsibility and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration for state and national standards as well as local area needs and resources. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall establish and develop triage, treatment and transport protocols, which may include authorization for standing orders.
 - 4. All ambulance services and emergency medical response agencies that are required to have a medical director shall establish an agreement between the service or agency and their medical director. The agreement will include the roles, responsibilities and authority of the medical director beyond what is granted in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The agreement shall also include grievance procedures regarding the emergency medical response agency or

ambulance service, personnel and the medical director.

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- 5. Regional EMS medical directors elected as provided under subsection 1 of this section shall be considered public officials for purposes of sovereign immunity, official immunity, and the Missouri public duty doctrine defenses.
- 6. The state EMS medical director's advisory committee
 shall be considered a peer review committee under section 537.035
 and regional EMS medical directors shall be eligible to
 participate in the Missouri Patient Safety Organization as
 provided under the Patient Safety and Quality Improvement Act of
 2005, 42 U.S.C. Section 299, et seq., as amended.
- 7. Regional EMS medical directors may act to provide online telecommunication medical direction to EMT-Bs, EMT-Is, EMT-Ps, and community paramedics and provide offline medical direction per standardized treatment, triage, and transport protocols when EMS personnel, including EMT-Bs, EMT-Is, or EMT-Ps community paramedics, are providing care to special needs patients or at the request of a local EMS agency or medical director.
- 8. When developing treatment protocols for special needs patients, regional EMS medical directors may promulgate such protocols on a regional basis across multiple political subdivisions' jurisdictional boundaries and such protocols may be used by multiple agencies including, but not limited to, ambulance services, emergency response agencies, and public health departments.
- 9. Multiple EMS agencies including, but not limited to,
 ambulance services, emergency response agencies, and public
 health departments shall take necessary steps to follow the
 regional EMS protocols established as provided under subsection 8

of this section in cases of mass casualty or state-declared disaster incidents.

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- implement treatment protocols for patients or provide online medical direction for such patients, such activity shall not be construed as having usurped local medical direction authority in any manner.
- 11. Notwithstanding any other provision of law, when regional EMS medical directors are providing either online telecommunication medical direction to EMT-Bs, EMT-Is, EMT-Ps, and community paramedics, or offline medical direction per standardized EMS treatment, triage, and transport protocols for patients, those medical directions or treatment protocols may include the administration of the patient's own prescription medications.
- 190.147. 1. Emergency medical technician paramedics (EMT-Ps) who have:
 - (1) Completed at least forty hours of the standard crisis intervention training course as endorsed and developed by the National Alliance on Mental Illness or a course of training that the ground or air ambulance service's medical director has determined to be academically equivalent thereto;
 - (2) Been authorized by their ground or air ambulance service's administration and medical director under subsection 3 of section 190.103; and
 - (3) Whose ground or air ambulance service has developed and adopted standardized triage, treatment, and transport protocols under subsection 3 of section 190.103, which address the challenge of treating and transporting behavioral health patients

who present a likelihood of serious harm to themselves or others
as the term "likelihood of serious harm" is defined under section
632.005 or who are significantly incapacitated by alcohol or
drugs;

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- may make a good faith determination that such patients shall be placed into a temporary hold for the sole purposes of transport to the nearest appropriate facility.
- 2. EMT-Ps who have made a good faith decision for a temporary hold of a patient as authorized by this section shall no longer have to rely on the common law doctrine of implied consent and therefore shall not be civilly liable for a good faith determination made in accordance with this section and shall not have waived any sovereign immunity defense, official immunity defense, or Missouri public duty doctrine defense if employed at the time of the good faith determination by a governmental employer.
- 3. Any ground or air ambulance service that adopts the authority and protocols provided for by this section shall have a memorandum of understanding with applicable local law enforcement agencies in order to achieve a collaborative and coordinated response to patients displaying symptoms of either a likelihood of serious harm to themselves or others or significant incapacitation by alcohol or drugs, which require a crisis intervention response.
- 190.165. 1. The department may refuse to issue or deny renewal of any certificate, permit or license required pursuant to sections 190.100 to 190.245 for failure to comply with the provisions of sections 190.100 to 190.245 or any lawful

regulations promulgated by the department to implement its provisions as described in subsection 2 of this section. The department shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.

- 2. The department may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate, permit or license required by sections 190.100 to 190.245 or any person who has failed to renew or has surrendered his or her certificate, permit or license for failure to comply with the provisions of sections 190.100 to 190.245 or any lawful regulations promulgated by the department to implement such sections. Those regulations shall be limited to the following:
- (1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any activity licensed or regulated by sections 190.100 to 190.245;
- entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any activity licensed or regulated pursuant to sections 190.100 to 190.245, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any certificate, permit or license issued pursuant to sections 190.100 to 190.245 or in obtaining permission to take any examination given or required pursuant to sections 190.100 to 190.245;

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- (4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;
- (5) Incompetency, misconduct, gross negligence, fraud, misrepresentation or dishonesty in the performance of the functions or duties of any activity licensed or regulated by sections 190.100 to 190.245;
- (6) Violation of, or assisting or enabling any person to violate, any provision of sections 190.100 to 190.245, or of any lawful rule or regulation adopted by the department pursuant to sections 190.100 to 190.245;
- (7) Impersonation of any person holding a certificate, permit or license or allowing any person to use his or her certificate, permit, license or diploma from any school;
- (8) Disciplinary action against the holder of a license or other right to practice any activity regulated by sections 190.100 to 190.245 granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
- (9) For an individual being finally adjudged insane or incompetent by a court of competent jurisdiction;
- (10) Assisting or enabling any person to practice or offer to practice any activity licensed or regulated by sections 190.100 to 190.245 who is not licensed and currently eligible to

practice pursuant to sections 190.100 to 190.245;

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- (11) Issuance of a certificate, permit or license based upon a material mistake of fact;
- (12) Violation of any professional trust, confidence, or legally protected privacy rights of a patient by means of an unauthorized or unlawful disclosure;
- (13) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
- (14) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
- (15) Refusal of any applicant or licensee to respond to reasonable department of health and senior services' requests for necessary information to process an application or to determine license status or license eligibility;
- (16) Any conduct or practice which is or might be harmful or dangerous to the mental or physical health or safety of a patient or the public;
- (17) Repeated acts of negligence or recklessness in the performance of the functions or duties of any activity licensed or regulated by sections 190.100 to 190.245.
- 3. If the department conducts investigations, the department, prior to interviewing a licensee who is the subject of the investigation, shall explain to the licensee that he or she has the right to:
 - (1) Consult legal counsel or have legal counsel present;
- (2) Have anyone present whom he or she deems to be necessary or desirable[, except for any holder of any certificate, permit, or license required by sections 190.100 to

190.245**];** and

(3) Refuse to answer any question or refuse to provide or sign any written statement.

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The assertion of any right listed in this subsection shall not be deemed by the department to be a failure to cooperate with any department investigation.

- 4. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the department may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the department deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate or permit. Notwithstanding any provision of law to the contrary, the department shall be authorized to impose a suspension or revocation as a disciplinary action only if it first files the requisite complaint with the administrative hearing commission. The administrative hearing commission shall hear all relevant evidence on remediation activities of the licensee and shall make a recommendation to the department of health and senior services as to licensure disposition based on such evidence.
 - 5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the department after compliance with all the requirements of sections 190.100 to

190.245 relative to the licensing of an applicant for the first time. Any individual whose license has been revoked twice within a ten-year period shall not be eligible for relicensure.

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- 6. The department may notify the proper licensing authority of any other state in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.
- 7. Any person, organization, association or corporation who reports or provides information to the department pursuant to the provisions of sections 190.100 to 190.245 and who does so in good faith shall not be subject to an action for civil damages as a result thereof.
- The department of health and senior services may suspend any certificate, permit or license required pursuant to sections 190.100 to 190.245 simultaneously with the filing of the complaint with the administrative hearing commission as set forth in subsection 2 of this section, if the department finds that there is an imminent threat to the public health. The notice of suspension shall include the basis of the suspension and notice of the right to appeal such suspension. The licensee may appeal the decision to suspend the license, certificate or permit to the department. The appeal shall be filed within ten days from the date of the filing of the complaint. A hearing shall be conducted by the department within ten days from the date the appeal is filed. The suspension shall continue in effect until the conclusion of the proceedings, including review thereof, unless sooner withdrawn by the department, dissolved by a court of competent jurisdiction or stayed by the administrative hearing commission."; and

Further amend the title and enacting clause accordingly.