SECOND REGULAR SESSION

[PERFECTED]

SENATE SUBSTITUTE FOR

SENATE BILL NO. 870

99TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR HEGEMAN.

Offered March 14, 2018.

Senate Substitute adopted, March 14, 2018.

Taken up for Perfection March 14, 2018. Bill declared Perfected and Ordered Printed, as amended.

5721S.04P

ADRIANE D. CROUSE, Secretary.

AN ACT

To repeal sections 99.848, 100.050, 100.059, 135.090, 190.094, 190.100, 190.103, 190.105, 190.131, 190.142, 190.143, 190.165, 190.173, 190.196, 190.246, 191.630, and 353.110, RSMo, and to enact in lieu thereof thirty-four new sections relating to emergency medical services, with existing penalty provisions.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 99.848, 100.050, 100.059, 135.090, 190.094, 190.100,

- 2 190.103, 190.105, 190.131, 190.142, 190.143, 190.165, 190.173, 190.196, 190.246,
- 3 191.630, and 353.110, RSMo, are repealed and thirty-four new sections enacted
- 4 in lieu thereof, to be known as sections 99.848, 100.050, 100.059, 135.090,
- 5 190.094, 190.100, 190.103, 190.105, 190.131, 190.142, 190.143, 190.147, 190.165,
- 6 190.173, 190.196, 190.246, 190.900, 190.903, 190.906, 190.909, 190.912, 190.915,
- 7 190.918, 190.921, 190.924, 190.927, 190.930, 190.933, 190.936, 190.939, 191.630,
- 8 217.151, 221.520, and 353.110, to read as follows:

99.848. 1. Notwithstanding subsection 1 of section [99.847] 99.845, any

- 2 district or county imposing a property tax for the purposes of providing
- 3 emergency services pursuant to chapter 190 or 321 shall be entitled to
- 4 reimbursement from the special allocation fund in the amount of at least fifty
- 5 percent [nor] but not more than one hundred percent of the district's tax
- 6 increment. This section shall not apply to tax increment financing projects or
- 7 districts approved prior to August 28, 2004.

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

8 2. Beginning August 28, 2018, an ambulance district board operating under chapter 190, a fire protection district board operating 9 under chapter 321, or the governing body of a county operating a 911 center providing emergency or dispatch services under chapter 190 or 11 12 chapter 321 shall annually set the reimbursement rate under subsection 1 of this section prior to the time the assessment is paid into the special 13 allocation fund. If the redevelopment plan, area, or project is amended 14 by ordinance or by other means after August 28, 2018, the ambulance 15 16 or fire protection district board or the governing body of a county operating a 911 center providing emergency or dispatch services under 17 chapter 190 or chapter 321 shall have the right to recalculate the 19 reimbursement rate under this section.

100.050. 1. Any municipality proposing to carry out a project for 2 industrial development shall first, by majority vote of the governing body of the 3 municipality, approve the plan for the project. The plan shall include the 4 following information pertaining to the proposed project:

(1) A description of the project;

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- 6 (2) An estimate of the cost of the project;
 - (3) A statement of the source of funds to be expended for the project;
- 8 (4) A statement of the terms upon which the facilities to be provided by 9 the project are to be leased or otherwise disposed of by the municipality; and
- 10 (5) Such other information necessary to meet the requirements of sections 11 100.010 to 100.200.
- 2. If the plan for the project is approved after August 28, 2003, and the project plan involves issuance of revenue bonds or involves conveyance of a fee interest in property to a municipality, the project plan shall additionally include the following information:
- 16 (1) A statement identifying each school district, community college 17 district, ambulance district board operating under chapter 190, fire 18 protection district board operating under chapter 321, county, or city 19 affected by such project except property assessed by the state tax commission 20 pursuant to chapters 151 and 153;
- 21 (2) The most recent equalized assessed valuation of the real property and 22 personal property included in the project, and an estimate as to the equalized 23 assessed valuation of real property and personal property included in the project 24 after development;

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25 (3) An analysis of the costs and benefits of the project on each school district, community college district, ambulance district board operating under chapter 190, fire protection district board operating under chapter 321, county, or city; and

- 29 (4) Identification of any payments in lieu of taxes expected to be made by 30 any lessee of the project, and the disposition of any such payments by the 31 municipality.
- 32 3. If the plan for the project is approved after August 28, 2003, any payments in lieu of taxes expected to be made by any lessee of the project shall 33 be applied in accordance with this section. The lessee may reimburse the 34 municipality for its actual costs of issuing the bonds and administering the plan. 35 36 All amounts paid in excess of such actual costs shall, immediately upon receipt 37 thereof, be disbursed by the municipality's treasurer or other financial officer to each school district, community college district, ambulance district board 38 39 operating under chapter 190, fire protection district board operating under chapter 321, county, or city in proportion to the current ad valorem tax 40 41 levy of each school district, community college district, ambulance district board operating under chapter 190, fire protection district board 42 operating under chapter 321, county, or city; however, in any county of the 43 first classification with more than ninety-three thousand eight hundred but fewer 44 than ninety-three thousand nine hundred inhabitants, or any county of the first 45 classification with more than one hundred thirty-five thousand four hundred but 46 47 fewer than one hundred thirty-five thousand five hundred inhabitants, if the plan for the project is approved after May 15, 2005, such amounts shall be disbursed 48 by the municipality's treasurer or other financial officer to each affected taxing 49 50 entity in proportion to the current ad valorem tax levy of each affected taxing 51 entity.
 - 4. Notwithstanding the provisions of subsection 3 of this section to the contrary, beginning August 28, 2018, any district or county imposing a property tax for the purposes of providing emergency services under chapter 190 or 321 to the project area shall be entitled to be reimbursed in an amount that is at least fifty percent but not more than one hundred percent of the amount of ad valorem property tax revenues that such district or county would have received in the absence of a tax abatement or exemption provided to property included in the project. An ambulance district board operating under chapter

190, a fire protection district board operating under chapter 321, or the 62 governing body of a county operating a 911 center providing emergency 63 or dispatch services under chapter 190 or chapter 321 shall annually set the reimbursement rate provided in this subsection prior to the time the assessment is determined by the assessor of the county in which the 65 project is located, or, if not located within a county, then the assessor 66 of such city. If the plan is amended by ordinance or by any other 67 means after August 28, 2018, the ambulance or fire protection district 68 69 or the governing body of a county operating a 911 center providing emergency or dispatch services under chapter 190 or chapter 321 shall 70 71 have the right to recalculate the reimbursement rate pursuant to this 72 subsection.

100.059. 1. The governing body of any municipality proposing a project for industrial development which involves issuance of revenue bonds or involves conveyance of a fee interest in property to a municipality shall, not less than twenty days before approving the plan for a project as required by section 100.050, provide notice of the proposed project to the county in which the municipality is located and any school district that is a school district, community college district, ambulance district board operating under chapter 190, fire protection district board operating under chapter 321, county, or city; however, in any county of the first classification with more than ninety-three thousand eight hundred but fewer than ninety-three thousand nine hundred 10 11 inhabitants, or any county of the first classification with more than one hundred thirty-five thousand four hundred but fewer than one hundred thirty-five thousand five hundred inhabitants, if the plan for the project is approved after 13 May 15, 2005, such notice shall be provided to all affected taxing entities in the 14 county. Such notice shall include the information required in section 100.050, 15 16 shall state the date on which the governing body of the municipality will first 17consider approval of the plan, and shall invite such school districts, community college districts, ambulance district board operating under chapter 190, 18 19 fire protection district board operating under chapter 321, counties, or 20 cities to submit comments to the governing body and the comments shall be fairly 21 and duly considered.

2. Notwithstanding any other provisions of this section to the contrary, for purposes of determining the limitation on indebtedness of local government pursuant to Section 26(b), Article VI, Constitution of Missouri, the current

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equalized assessed value of the property in an area selected for redevelopment attributable to the increase above the total initial equalized assessed valuation shall be included in the value of taxable tangible property as shown on the last completed assessment for state or county purposes.

- 3. The county assessor shall include the current assessed value of all property within the school district, community college district, **ambulance** district board operating under chapter 190, fire protection district board operating under chapter 321, county, or city in the aggregate valuation of assessed property entered upon the assessor's book and verified pursuant to section 137.245, and such value shall be utilized for the purpose of the debt limitation on local government pursuant to Section 26(b), Article VI, Constitution of Missouri.
- 4. This section is applicable only if the plan for the project is approved after August 28, 2003.

135.090. 1. As used in this section, the following terms mean:

- 2 (1) "Homestead", the dwelling in Missouri owned by the surviving spouse 3 and not exceeding five acres of land surrounding it as is reasonably necessary for 4 use of the dwelling as a home. As used in this section, "homestead" shall not 5 include any dwelling which is occupied by more than two families;
- 6 (2) "Public safety officer", any firefighter, police officer, capitol police
 7 officer, parole officer, probation officer, correctional employee, water patrol officer,
 8 park ranger, conservation officer, commercial motor **vehicle** enforcement officer,
 9 emergency medical technician, **emergency medical responder**, **as defined in**10 **section 190.100**, first responder, or highway patrolman employed by the state
 11 of Missouri or a political subdivision thereof who is killed in the line of duty,
 12 unless the death was the result of the officer's own misconduct or abuse of alcohol
 13 or drugs;
- 14 (3) "Surviving spouse", a spouse, who has not remarried, of a public safety 15 officer.
- 2. For all tax years beginning on or after January 1, 2008, a surviving spouse shall be allowed a credit against the tax otherwise due under chapter 143, excluding withholding tax imposed by sections 143.191 to 143.265, in an amount equal to the total amount of the property taxes on the surviving spouse's homestead paid during the tax year for which the credit is claimed. A surviving spouse may claim the credit authorized under this section for each tax year beginning the year of death of the public safety officer spouse until the tax year

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in which the surviving spouse remarries. No credit shall be allowed for the tax year in which the surviving spouse remarries. If the amount allowable as a credit exceeds the income tax reduced by other credits, then the excess shall be considered an overpayment of the income tax.

- 3. The department of revenue shall promulgate rules to implement the provisions of this section.
- 4. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2007, shall be invalid and void.
 - 5. Pursuant to section 23.253 of the Missouri sunset act:
- 38 (1) The program authorized under this section shall expire on December 39 31, 2019, unless reauthorized by the general assembly; and
- 40 (2) This section shall terminate on September first of the calendar year 41 immediately following the calendar year in which the program authorized under 42 this section is sunset; and
- (3) The provisions of this subsection shall not be construed to limit or in any way impair the department's ability to redeem tax credits authorized on or before the date the program authorized under this section expires or a taxpayer's ability to redeem such tax credits.
- 190.094. 1. Any ambulance licensed in this state, when used as an ambulance and staffed with volunteer staff, shall be staffed with a minimum of one emergency medical technician and one other crew member who may be a licensed emergency medical technician, registered nurse, physician, or someone who has a [first] emergency medical responder certification.
- 6 2. When transporting a patient, at least one licensed emergency medical technician, registered nurse, or physician shall be in attendance with the patient 8 in the patient compartment at all times.
- 9 3. For purposes of this section, "volunteer" shall mean an individual who 10 performs hours of service without promise, expectation or receipt of compensation 11 for services rendered. Compensation such as a nominal stipend per call to 12 compensate for fuel, uniforms, and training shall not nullify the volunteer status.

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190.100. As used in sections 190.001 to 190.245, the following words and terms mean:

- (1) "Advanced emergency medical technician" or "AEMT", a person who has successfully completed a course of instruction in certain aspects of advanced life support care as prescribed by the department and is licensed by the department in accordance with sections 190.001 to 190.245 and rules and regulations adopted by the department pursuant to sections 190.001 to 190.245;
- (2) "Advanced life support (ALS)", an advanced level of care as provided 9 to the adult and pediatric patient such as defined by national curricula, and any 10 modifications to that curricula specified in rules adopted by the department 12 pursuant to sections 190.001 to 190.245;
- 13 [(2)] (3) "Ambulance", any privately or publicly owned vehicle or craft 14 that is specially designed, constructed or modified, staffed or equipped for, and is intended or used, maintained or operated for the transportation of persons who 15 are sick, injured, wounded or otherwise incapacitated or helpless, or who require 16 the presence of medical equipment being used on such individuals, but the term 17 does not include any motor vehicle specially designed, constructed or converted 18 for the regular transportation of persons who are disabled, handicapped, normally 19 using a wheelchair, or otherwise not acutely ill, or emergency vehicles used 20 21within airports;
 - [(3)] (4) "Ambulance service", a person or entity that provides emergency or nonemergency ambulance transportation and services, or both, in compliance with sections 190.001 to 190.245, and the rules promulgated by the department pursuant to sections 190.001 to 190.245;
- 26 [(4)] (5) "Ambulance service area", a specific geographic area in which 27 an ambulance service has been authorized to operate;
- 28 [(5)] (6) "Basic life support (BLS)", a basic level of care, as provided to the adult and pediatric patient as defined by national curricula, and any 29 30 modifications to that curricula specified in rules adopted by the department pursuant to sections 190.001 to 190.245; 31
- 32 [(6)] (7) "Council", the state advisory council on emergency medical 33 services;
- 34 [(7)] (8) "Department", the department of health and senior services, state of Missouri; 35
- 36 [(8)] (9) "Director", the director of the department of health and senior

- 37 services or the director's duly authorized representative;
- [(9)] (10) "Dispatch agency", any person or organization that receives requests for emergency medical services from the public, by telephone or other means, and is responsible for dispatching emergency medical services;
- [(10)] (11) "Emergency", the sudden and, at the time, unexpected onset of a health condition that manifests itself by symptoms of sufficient severity that would lead a prudent layperson, possessing an average knowledge of health and medicine, to believe that the absence of immediate medical care could result in:
- 45 (a) Placing the person's health, or with respect to a pregnant woman, the 46 health of the woman or her unborn child, in significant jeopardy;
 - (b) Serious impairment to a bodily function;
 - (c) Serious dysfunction of any bodily organ or part;
- 49 (d) Inadequately controlled pain;

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- [(11)] (12) "Emergency medical dispatcher", a person who receives emergency calls from the public and has successfully completed an emergency medical dispatcher course, meeting or exceeding the national curriculum of the United States Department of Transportation and any modifications to such curricula specified by the department through rules adopted pursuant to sections 190.001 to 190.245;
 - (13) "Emergency medical responder", a person who has successfully completed an emergency first response course meeting or exceeding the national curriculum of the U.S. Department of Transportation and any modifications to such curricula specified by the department through rules adopted under sections 190.001 to 190.245 and who provides emergency medical care through employment by or in association with an emergency medical response agency;
 - [(12)] (14) "Emergency medical response agency", any person that regularly provides a level of care that includes first response, basic life support or advanced life support, exclusive of patient transportation;
 - [(13)] (15) "Emergency medical services for children (EMS-C) system", the arrangement of personnel, facilities and equipment for effective and coordinated delivery of pediatric emergency medical services required in prevention and management of incidents which occur as a result of a medical emergency or of an injury event, natural disaster or similar situation;
- 71 [(14)] (16) "Emergency medical services (EMS) system", the arrangement 72 of personnel, facilities and equipment for the effective and coordinated delivery

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of emergency medical services required in prevention and management of incidents occurring as a result of an illness, injury, natural disaster or similar 75 situation;

- 76 [(15)] (17) "Emergency medical technician", a person licensed in emergency medical care in accordance with standards prescribed by sections 77 190.001 to 190.245, and by rules adopted by the department pursuant to sections 78 79 190.001 to 190.245;
- 80 [(16)] (18) "Emergency medical technician-basic" or "EMT-B", a person 81 who has successfully completed a course of instruction in basic life support as 82 prescribed by the department and is licensed by the department in accordance 83 with standards prescribed by sections 190,001 to 190,245 and rules adopted by 84 the department pursuant to sections 190.001 to 190.245;
 - [(17)] (19) "Emergency medical technician-community paramedic", "community paramedic", or "EMT-CP", a person who is certified as an emergency medical technician-paramedic and is certified by the department in accordance with standards prescribed in section 190.098;
 - [(18) "Emergency medical technician-intermediate" or "EMT-I", a person who has successfully completed a course of instruction in certain aspects of advanced life support care as prescribed by the department and is licensed by the department in accordance with sections 190.001 to 190.245 and rules and regulations adopted by the department pursuant to sections 190.001 to 190.245;
 - [(19)] (20) "Emergency medical technician-paramedic" or "EMT-P", a person who has successfully completed a course of instruction in advanced life support care as prescribed by the department and is licensed by the department in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245;
 - [(20)] (21) "Emergency services", health care items and services furnished or required to screen and stabilize an emergency which may include, but shall not be limited to, health care services that are provided in a licensed hospital's emergency facility by an appropriate provider or by an ambulance service or emergency medical response agency;
- [(21) "First responder", a person who has successfully completed an emergency first response course meeting or exceeding the national curriculum of 106 the United States Department of Transportation and any modifications to such curricula specified by the department through rules adopted pursuant to sections 108 190.001 to 190.245 and who provides emergency medical care through

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109 employment by or in association with an emergency medical response agency;

- (22) "Health care facility", a hospital, nursing home, physician's office or 110 other fixed location at which medical and health care services are performed; 111
- 112 (23) "Hospital", an establishment as defined in the hospital licensing law,
- 113 subsection 2 of section 197.020, or a hospital operated by the state;
- 114 (24) "Medical control", supervision provided by or under the direction of 115 physicians [to providers by written or verbal communications], or their designated registered nurse, including both online medical control, 116 instructions by radio, telephone, or other means of direct 117 communications, and offline medical control through supervision by 118 treatment protocols, case review, training, and standing orders for 119 120 treatment;
- 121 (25) "Medical direction", medical guidance and supervision provided by a 122 physician to an emergency services provider or emergency medical services 123 system;
- 124 (26) "Medical director", a physician licensed pursuant to chapter 334 125 designated by the ambulance service or emergency medical response agency and 126 who meets criteria specified by the department by rules pursuant to sections 127 190.001 to 190.245;
- 128 (27) "Memorandum of understanding", an agreement between an 129 emergency medical response agency or dispatch agency and an ambulance service 130 or services within whose territory the agency operates, in order to coordinate 131 emergency medical services;
- (28) "Patient", an individual who is sick, injured, wounded, diseased, or 133 otherwise incapacitated or helpless, or dead, excluding deceased individuals being transported from or between private or public institutions, homes or cemeteries, and individuals declared dead prior to the time an ambulance is called for assistance;
- 137 (29) "Person", as used in these definitions and elsewhere in sections 138 190.001 to 190.245, any individual, firm, partnership, copartnership, joint 139 venture, association, cooperative organization, corporation, municipal or private, and whether organized for profit or not, state, county, political subdivision, state 140 141 department, commission, board, bureau or fraternal organization, estate, public trust, business or common law trust, receiver, assignee for the benefit of creditors, 142143 trustee or trustee in bankruptcy, or any other service user or provider;
- 144 (30) "Physician", a person licensed as a physician pursuant to chapter 334;

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145 (31) "Political subdivision", any municipality, city, county, city not within 146 a county, ambulance district or fire protection district located in this state which 147 provides or has authority to provide ambulance service;

- 148 (32) "Professional organization", any organized group or association with 149 an ongoing interest regarding emergency medical services. Such groups and 150 associations could include those representing volunteers, labor, management, firefighters, EMT-B's, nurses, EMT-P's, physicians, communications specialists 151 152 and instructors. Organizations could also represent the interests of ground 153 ambulance services, air ambulance services, fire service organizations, law enforcement, hospitals, trauma centers, communication centers, pediatric 154 155 services, labor unions and poison control services;
- 156 (33) "Proof of financial responsibility", proof of ability to respond to 157 damages for liability, on account of accidents occurring subsequent to the effective date of such proof, arising out of the ownership, maintenance or use of a motor 158 159 vehicle in the financial amount set in rules promulgated by the department, but in no event less than the statutory minimum required for motor vehicles. Proof 160 161 of financial responsibility shall be used as proof of self-insurance;
- 162 (34) "Protocol", a predetermined, written medical care guideline, which 163 may include standing orders;
 - (35) "Regional EMS advisory committee", a committee formed within an emergency medical services (EMS) region to advise ambulance services, the state advisory council on EMS and the department;
- (36) "Specialty care transportation", the transportation of a patient 168 requiring the services of an emergency medical technician-paramedic who has received additional training beyond the training prescribed by the department. Specialty care transportation services shall be defined in writing in the appropriate local protocols for ground and air ambulance services and 172 approved by the local physician medical director. The protocols shall be maintained by the local ambulance service and shall define the additional training required of the emergency medical technician-paramedic;
 - (37) "Stabilize", with respect to an emergency, the provision of such medical treatment as may be necessary to attempt to assure within reasonable medical probability that no material deterioration of an individual's medical condition is likely to result from or occur during ambulance transportation unless the likely benefits of such transportation outweigh the risks;
 - (38) "State advisory council on emergency medical services", a committee

- 181 formed to advise the department on policy affecting emergency medical service
- 182 throughout the state;
- 183 (39) "State EMS medical directors advisory committee", a subcommittee
- 184 of the state advisory council on emergency medical services formed to advise the
- 185 state advisory council on emergency medical services and the department on
- 186 medical issues;
- 187 (40) "STEMI" or "ST-elevation myocardial infarction", a type of heart
- 188 attack in which impaired blood flow to the patient's heart muscle is evidenced by
- 189 ST-segment elevation in electrocardiogram analysis, and as further defined in
- 190 rules promulgated by the department under sections 190.001 to 190.250;
- 191 (41) "STEMI care", includes education and prevention, emergency
- 192 transport, triage, and acute care and rehabilitative services for STEMI that
- 193 requires immediate medical or surgical intervention or treatment;
- 194 (42) "STEMI center", a hospital that is currently designated as such by
- 195 the department to care for patients with ST-segment elevation myocardial
- 196 infarctions:
- 197 (43) "Stroke", a condition of impaired blood flow to a patient's brain as
- 198 defined by the department;
- 199 (44) "Stroke care", includes emergency transport, triage, and acute
- 200 intervention and other acute care services for stroke that potentially require
- 201 immediate medical or surgical intervention or treatment, and may include
- 202 education, primary prevention, acute intervention, acute and subacute
- 203 management, prevention of complications, secondary stroke prevention, and
- 204 rehabilitative services;
- 205 (45) "Stroke center", a hospital that is currently designated as such by the
- 206 department;
- 207 (46) "Trauma", an injury to human tissues and organs resulting from the
- 208 transfer of energy from the environment;
- 209 (47) "Trauma care" includes injury prevention, triage, acute care and
- 210 rehabilitative services for major single system or multisystem injuries that
- 211 potentially require immediate medical or surgical intervention or treatment;
- 212 (48) "Trauma center", a hospital that is currently designated as such by
- 213 the department.
 - 190.103. 1. One physician with expertise in emergency medical services
 - 2 from each of the EMS regions shall be elected by that region's EMS medical
 - 3 directors to serve as a regional EMS medical director. The regional EMS medical

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directors shall constitute the state EMS medical director's advisory committee and shall advise the department and their region's ambulance services on matters relating to medical control and medical direction in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The regional EMS medical director shall serve a term of four years. The southwest, northwest, and Kansas City regional EMS medical directors shall be elected to an initial two-year term. The central, east central, 10 and southeast regional EMS medical directors shall be elected to an initial 11 four-year term. All subsequent terms following the initial terms shall be four 12years. The state EMS medical director shall be the chair of the state EMS 13 medical director's advisory committee, and shall be elected by the members 15 of the regional EMS medical director's advisory committee, shall serve 16 a term of four years, and shall seek to coordinate EMS services between the EMS regions, promote educational efforts for agency medical 17 directors, represent Missouri EMS nationally in the role of the state 18 19 EMS medical director, and seek to incorporate the EMS system into the 20 health care system serving Missouri.

- 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.
- 27 3. The medical director, in cooperation with the ambulance service or 28 emergency medical response agency administrator, shall have the responsibility 29 and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration 30 for state and national standards as well as local area needs and resources. The 31 medical director, in cooperation with the ambulance service or emergency medical 32 33 response agency administrator, shall establish and develop triage, treatment and transport protocols, which may include authorization for standing 34 orders. Emergency medical technicians shall only perform those 35 medical procedures as directed by treatment protocols approved by the 36 local medical director or when authorized through direct 37 communication with online medical control. 38
 - 4. All ambulance services and emergency medical response agencies that

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40 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 42 granted in accordance with sections 190.001 to 190.245 and rules adopted by the 43 department pursuant to sections 190.001 to 190.245. The agreement shall also 44 include grievance procedures regarding the emergency medical response agency 45 or ambulance service, personnel and the medical director. 46

- 5. Regional EMS medical directors and the state EMS medical director 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.
- 7. Regional EMS medical directors may act to provide online telecommunication medical direction to AEMTs, 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 **AEMTs**, EMT-Bs, [EMT-Is,] EMT-Ps, and 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 62 basis across multiple political subdivisions' jurisdictional boundaries, and such 63 protocols may be used by multiple agencies including, but not limited to, 64 ambulance services, emergency response agencies, and public health departments. Treatment protocols shall include steps to ensure the receiving 65 hospital is informed of the pending arrival of the special needs patient, the 66 condition of the patient, and the treatment instituted.
- 68 9. Multiple EMS agencies including, but not limited to, ambulance 69 services, emergency response agencies, and public health departments shall take necessary steps to follow the regional EMS protocols established as provided 70 under subsection 8 of this section in cases of mass casualty or state-declared disaster incidents.
- 73 10. When regional EMS medical directors develop and implement 74 treatment protocols for patients or provide online medical direction for patients, 75 such activity shall not be construed as having usurped local medical direction

76 authority in any manner.

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11. Notwithstanding any other provision of law to the contrary, when regional EMS medical directors are providing either online telecommunication medical direction to **AEMTs**, 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.

190.105. 1. No person, either as owner, agent or otherwise, shall furnish, operate, conduct, maintain, advertise, or otherwise be engaged in or profess to be engaged in the business or service of the transportation of patients by ambulance in the air, upon the streets, alleys, or any public way or place of the state of Missouri unless such person holds a currently valid license from the department for an ambulance service issued pursuant to the provisions of sections 190.001 to 190.245.

- 8 2. No ground ambulance shall be operated for ambulance purposes, and no individual shall drive, attend or permit it to be operated for such purposes in 10 the state of Missouri unless the ground ambulance is under the immediate 11 supervision and direction of a person who is holding a currently valid Missouri 12 license as an emergency medical technician. Nothing in this section shall be 13 construed to mean that a duly registered nurse or a duly licensed physician be required to hold an emergency medical technician's license. Each ambulance 14 15 service is responsible for assuring that any person driving its ambulance is 16 competent in emergency vehicle operations and has a safe driving record. Each 17 ground ambulance shall be staffed with at least two licensed individuals when transporting a patient, except as provided in section 190.094. In emergency 18 situations which require additional medical personnel to assist the patient during 19 transportation, [a first] an emergency medical responder, firefighter, or law 20 enforcement personnel with a valid driver's license and prior experience with 2122 driving emergency vehicles may drive the ground ambulance provided the ground ambulance service stipulates to this practice in operational policies. 23
 - 3. No license shall be required for an ambulance service, or for the attendant of an ambulance, which:
- 26 (1) Is rendering assistance in the case of an emergency, major catastrophe 27 or any other unforeseen event or series of events which jeopardizes the ability of 28 the local ambulance service to promptly respond to emergencies; or

- 29 (2) Is operated from a location or headquarters outside of Missouri in 30 order to transport patients who are picked up beyond the limits of Missouri to 31 locations within or outside of Missouri, but no such outside ambulance shall be 32 used to pick up patients within Missouri for transportation to locations within 33 Missouri, except as provided in subdivision (1) of this subsection.
 - 4. The issuance of a license pursuant to the provisions of sections 190.001 to 190.245 shall not be construed so as to authorize any person to provide ambulance services or to operate any ambulances without a franchise in any city not within a county or in a political subdivision in any county with a population of over nine hundred thousand inhabitants, or a franchise, contract or mutual-aid agreement in any other political subdivision which has enacted an ordinance making it unlawful to do so.
 - 5. Sections 190.001 to 190.245 shall not preclude the adoption of any law, ordinance or regulation not in conflict with such sections by any city not within a county, or at least as strict as such sections by any county, municipality or political subdivision except that no such regulations or ordinances shall be adopted by a political subdivision in a county with a population of over nine hundred thousand inhabitants except by the county's governing body.
- 6. In a county with a population of over nine hundred thousand inhabitants, the governing body of the county shall set the standards for all ambulance services which shall comply with subsection 5 of this section. All such ambulance services must be licensed by the department. The governing body of such county shall not prohibit a licensed ambulance service from operating in the county, as long as the ambulance service meets county standards.
 - 7. An ambulance service or vehicle when operated for the purpose of transporting persons who are sick, injured, or otherwise incapacitated shall not be treated as a common or contract carrier under the jurisdiction of the Missouri division of motor carrier and railroad safety.
 - 8. Sections 190.001 to 190.245 shall not apply to, nor be construed to include, any motor vehicle used by an employer for the transportation of such employer's employees whose illness or injury occurs on private property, and not on a public highway or property, nor to any person operating such a motor vehicle.
 - 9. A political subdivision that is authorized to operate a licensed ambulance service may establish, operate, maintain and manage its ambulance service, and select and contract with a licensed ambulance service. Any political

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65 subdivision may contract with a licensed ambulance service.

- 66 10. Except as provided in subsections 5 and 6, nothing in section 67.300, or subsection 2 of section 190.109, shall be construed to authorize any 67 municipality or county which is located within an ambulance district or a fire 68 69 protection district that is authorized to provide ambulance service to promulgate 70 laws, ordinances or regulations related to the provision of ambulance services. This provision shall not apply to any municipality or county which 71 72 operates an ambulance service established prior to August 28, 1998.
- 73 11. Nothing in section 67.300 or subsection 2 of section 190.109 shall be construed to authorize any municipality or county which is located within an 74 75 ambulance district or a fire protection district that is authorized to provide 76 ambulance service to operate an ambulance service without a franchise in an 77 ambulance district or a fire protection district that is authorized to provide ambulance service which has enacted an ordinance making it unlawful to do 78 79 so. This provision shall not apply to any municipality or county which operates an ambulance service established prior to August 28, 1998. 80
- 12. No provider of ambulance service within the state of Missouri which 82 is licensed by the department to provide such service shall discriminate regarding 83 treatment or transportation of emergency patients on the basis of race, sex, age, color, religion, sexual preference, national origin, ancestry, handicap, medical 84 85 condition or ability to pay.
 - 13. No provision of this section, other than subsections 5, 6, 10 and 11 of this section, is intended to limit or supersede the powers given to ambulance districts pursuant to this chapter or to fire protection districts pursuant to chapter 321, or to counties, cities, towns and villages pursuant to chapter 67.
- 90 14. Upon the sale or transfer of any ground ambulance service ownership, the owner of such service shall notify the department of the change in ownership 91 within thirty days of such sale or transfer. After receipt of such notice, the 92 93 department shall conduct an inspection of the ambulance service to verify compliance with the licensure standards of sections 190.001 to 190.245. 94
 - 190.131. 1. The department shall accredit or certify training entities for [first] emergency medical responders, emergency medical dispatchers, and emergency medical [technicians-basic, emergency technicians-intermediate, and emergency medical technicians-paramedic technicians, for a period of five years, if the applicant meets the requirements established pursuant to sections 190.001 to 190.245.

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2. Such rules promulgated by the department shall set forth the minimum requirements for entrance criteria, training program curricula, instructors, facilities, equipment, medical oversight, record keeping, and reporting.

- 3. Application for training entity accreditation or certification shall be made upon such forms as prescribed by the department in rules adopted pursuant to sections 190.001 to 190.245. The application form shall contain such information as the department deems reasonably necessary to make a determination as to whether the training entity meets all requirements of sections 190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 190.245.
- 4. Upon receipt of such application for training entity accreditation or certification, the department shall determine whether the training entity, its instructors, facilities, equipment, curricula and medical oversight meet the requirements of sections 190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 190.245.
- 5. Upon finding these requirements satisfied, the department shall issue a training entity accreditation or certification in accordance with rules promulgated by the department pursuant to sections 190.001 to 190.245.
- 6. Subsequent to the issuance of a training entity accreditation or certification, the department shall cause a periodic review of the training entity to assure continued compliance with the requirements of sections 190.001 to 190.245 and all rules promulgated pursuant to sections 190.001 to 190.245.
 - 7. No person or entity shall hold itself out or provide training required by this section without accreditation or certification by the department.
 - 190.142. 1. (1) For applications submitted before the recognition of EMS personnel licensure interstate compact under sections 190.900 to 190.939 takes effect, the department shall, within a reasonable time after receipt of an application, cause such investigation as it deems necessary to be made of the applicant for an emergency medical technician's license; and
- 6 (2) For applications submitted after the recognition of EMS
 7 personnel licensure interstate compact under sections 190.900 to
 8 190.939 takes effect, an applicant for initial licensure as an emergency
 9 medical technician in this state shall submit to a background check by
 10 the Missouri state highway patrol and the Federal Bureau of
 11 Investigation through a process approved by the department of health
 12 and senior services. Such processes may include the use of vendors or

systems administered by the Missouri state highway patrol. The department may share the results of such a criminal background check with any emergency services licensing agency in any member state, as that term is defined under section 190.900, of the recognition of EMS personnel licensure interstate compact. The department shall not issue 17 a license until the department receives the results of an applicant's 18 criminal background check from the Missouri state highway patrol and 19 the Federal Bureau of Investigation, but, notwithstanding this 20 21subsection, the department may issue a temporary license as provided under section 190.143. Any fees due for a criminal background check 22shall be paid by the applicant. 23

- 24 The director may authorize investigations into criminal records in other states for 25 any applicant.
 - 2. The department shall issue a license to all levels of emergency medical technicians, for a period of five years, if the applicant meets the requirements established pursuant to sections 190.001 to 190.245 and the rules adopted by the department pursuant to sections 190.001 to 190.245. The department may promulgate rules relating to the requirements for an emergency medical technician including but not limited to:
 - (1) Age requirements;

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- (2) Emergency medical technician and paramedic education and training requirements based on respective [national curricula of the United States Department of Transportation] National Emergency Medical Services Education Standards and any modification to such curricula specified by the department through rules adopted pursuant to sections 190.001 to 190.245;
- (3) Paramedic accreditation requirements. Paramedic training programs shall be accredited by the Commission on Accreditation of Allied Health Education Program (CAAHEP) or hold a CAAHEP letter of review;
- 42 **(4)** Initial licensure testing requirements. Initial EMT-Plicensure testing shall be through the national registry of EMTs [or examinations developed and administered by the department of health and senior services];
 - [(4)] (5) Continuing education and relicensure requirements; and
 - [(5)] (6) Ability to speak, read and write the English language.
- 3. Application for all levels of emergency medical technician license shall be made upon such forms as prescribed by the department in rules adopted

49 pursuant to sections 190.001 to 190.245. The application form shall contain such

- 50 information as the department deems necessary to make a determination as to
- whether the emergency medical technician meets all the requirements of sections 51
- 190.001 to 190.245 and rules promulgated pursuant to sections 190.001 to 52
- 190.245. 53

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- 4. All levels of emergency medical technicians may perform only that 54 patient care which is: 55
- 56 (1) Consistent with the training, education and experience of the particular emergency medical technician; and 57
- 58 (2) Ordered by a physician or set forth in protocols approved by the 59 medical director.
- 5. No person shall hold themselves out as an emergency medical 61 technician or provide the services of an emergency medical technician unless such 62 person is licensed by the department.
- 63 6. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective 64 65 only if it complies with and is subject to all of the provisions of chapter 536 and, 66 if applicable, section 536.028. This section and chapter 536 are nonseverable and 67 if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are 68 69 subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2002, shall be invalid and void. 70
 - 190.143. 1. Notwithstanding any other provisions of law, the department may grant a ninety-day temporary emergency medical technician license to all levels of emergency medical technicians who meet the following:
- (1) Can demonstrate that they have, or will have, employment requiring 4 an emergency medical technician license; 5
- (2) Are not currently licensed as an emergency medical technician in 6 Missouri or have been licensed as an emergency medical technician in Missouri and fingerprints need to be submitted to the Federal Bureau of Investigation to 8 verify the existence or absence of a criminal history, or they are currently 9 licensed and the license will expire before a verification can be completed of the 10 11 existence or absence of a criminal history;
- 12 (3) Have submitted a complete application upon such forms as prescribed 13 by the department in rules adopted pursuant to sections 190.001 to 190.245;
- 14 (4) Have not been disciplined pursuant to sections 190.001 to 190.245 and

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- 15 rules promulgated pursuant to sections 190.001 to 190.245;
- 16 (5) Meet all the requirements of rules promulgated pursuant to sections 17 190.001 to 190.245.
- 2. A temporary emergency medical technician license shall only authorize the license to practice while under the immediate supervision of a licensed emergency medical [technician-basic, emergency medical technician-intermediate, emergency medical technician-paramedic] technician, registered nurse, or physician who is currently licensed, without restrictions, to practice in Missouri.
- 3. A temporary emergency medical technician license shall automatically expire either ninety days from the date of issuance or upon the issuance of a five-year emergency medical technician license.

190.147. 1. Emergency medical technician paramedics (EMT-Ps):

- (1) Who have completed a standard crisis intervention training course as endorsed and developed by the state EMS medical director's advisory committee;
- (2) Who have been authorized by their ground or air ambulance service's administration and medical director under subsection 3 of section 190.103; and
- 8 (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 10 11 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; provided, that such protcols shall be 14 reviewed and approved by the state EMS medical director's advisory 15 committee and that such protocols shall direct the EMT-P regarding the 16 proper use of patient restraint and coordination with area law 17 enforcement. Patient restraint protocols shall be based upon current 18 applicable national guidelines;
- 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; provided, that such determination shall be made in cooperation with at least one other EMT-P or other medical professional involved in the transport. Once in a temporary hold, the patient shall be treated with humane care in a manner that preserves human dignity, consistent with applicable federal regulations and

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27 nationally-recognized guidelines regarding the appropriate use of temporary holds and restraints in medical transport. 28

- 2. In any instance in which a good faith determination for a temporary hold of a patient has been made, such hold shall be made in a clinically appropriate and adequately justified manner, and shall be documented and attested to in writing. The writing shall be retained 32by the ambulance service and included as part of the patient's medical 33 file. 34
 - 3. 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 government employer.
 - 4. 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. The memorandum of understanding shall include, but not be limited to, the following:
- (1) Administrative oversight, including coordination between 52 ambulance services and law enforcement agencies;
 - (2) Patient restraint techniques and coordination of agency responses to situations in which patient restraint may be required;
 - (3) Field interaction between paramedics and law enforcement, including patient destination and transportation; and
 - (4) Coordination of program quality assurance.
 - 5. The physical restraint of a patient by an emergency medical technician under the authority of this section shall be permitted only in order to provide for the safety of bystanders, the patient, or emergency personnel due to an imminent or immediate danger, or upon approval bу local medical control through communications. Restraint shall also be permitted through cooperation

with on-scene law enforcement officers. All incidents involving patient restraint used under the authority of this section shall be reviewed by the ambulance service physician medical director.

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:
- 16 (1) Use or unlawful possession of any controlled substance, as defined in 17 chapter 195, or alcoholic beverage to an extent that such use impairs a person's 18 ability to perform the work of any activity licensed or regulated by sections 19 190.100 to 190.245;
- 20 (2) Being finally adjudicated and found guilty, or having entered a plea 21 of guilty or nolo contendere, in a criminal prosecution under the laws of any state 22 or of the United States, for any offense reasonably related to the qualifications, 23 functions or duties of any activity licensed or regulated pursuant to sections 24 190.100 to 190.245, for any offense an essential element of which is fraud, 25 dishonesty or an act of violence, or for any offense involving moral turpitude, 26 whether or not sentence is imposed;
- 27 (3) Use of fraud, deception, misrepresentation or bribery in securing any 28 certificate, permit or license issued pursuant to sections 190.100 to 190.245 or in 29 obtaining permission to take any examination given or required pursuant to 30 sections 190.100 to 190.245;
- 31 (4) Obtaining or attempting to obtain any fee, charge, tuition or other 32 compensation by fraud, deception or misrepresentation;

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(5) Incompetency, misconduct, gross negligence, fraud, misrepresentation

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- or dishonesty in the performance of the functions or duties of any activity licensed or regulated by sections 190.100 to 190.245;
- 36 (6) Violation of, or assisting or enabling any person to violate, any 37 provision of sections 190.100 to 190.245, or of any lawful rule or regulation 38 adopted by the department pursuant to sections 190.100 to 190.245;
- 39 (7) Impersonation of any person holding a certificate, permit or license or 40 allowing any person to use his or her certificate, permit, license or diploma from 41 any school;
- 42 (8) Disciplinary action against the holder of a license or other right to 43 practice any activity regulated by sections 190.100 to 190.245 granted by another 44 state, territory, federal agency or country upon grounds for which revocation or 45 suspension is authorized in this state;
- 46 (9) For an individual being finally adjudged insane or incompetent by a 47 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;
- 51 (11) Issuance of a certificate, permit or license based upon a material 52 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;
- 55 (13) Use of any advertisement or solicitation which is false, misleading or 56 deceptive to the general public or persons to whom the advertisement or 57 solicitation is primarily directed;
- 58 (14) Violation of the drug laws or rules and regulations of this state, any 59 other state or the federal government;
- 60 (15) Refusal of any applicant or licensee to respond to reasonable 61 department of health and senior services' requests for necessary information to 62 process an application or to determine license status or license eligibility;
- 63 (16) Any conduct or practice which is or might be harmful or dangerous 64 to the mental or physical health or safety of a patient or the public;
- 65 (17) Repeated acts of negligence or recklessness in the performance of the 66 functions or duties of any activity licensed or regulated by sections 190.100 to 67 190.245.
- 3. If the department conducts investigations, the department, prior to interviewing a licensee who is the subject of the investigation, shall explain to the

- 70 licensee that he or she has the right to:
- 71 (1) Consult legal counsel or have legal counsel present;
- 72 (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
- 75 (3) Refuse to answer any question or refuse to provide or sign any written refuse to provide or sign any written statement.
- 77 The assertion of any right listed in this subsection shall not be deemed by the 78 department to be a failure to cooperate with any department investigation.
- 79 4. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the 81 administrative hearing commission that the grounds, provided in subsection 2 of 82 this section, for disciplinary action are met, the department may, singly or in 83 combination, censure or place the person named in the complaint on probation on 84 such terms and conditions as the department deems appropriate for a period not 85 to exceed five years, or may suspend, for a period not to exceed three years, or 86 revoke the license, certificate or permit. Notwithstanding any provision of law to the contrary, the department shall be authorized to impose a suspension or 87 88 revocation as a disciplinary action only if it first files the requisite complaint with administrative hearing commission. The administrative hearing 89 90 commission shall hear all relevant evidence on remediation activities of the licensee and shall make a recommendation to the department of 91 92 health and senior services as to licensure disposition based on such 93 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.
- 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

106 for civil damages as a result thereof.

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107 8. The department of health and senior services may suspend any 108 certificate, permit or license required pursuant to sections 190.100 to 190.245 109 simultaneously with the filing of the complaint with the administrative hearing 110 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 111 112 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, 113 certificate or permit to the department. The appeal shall be filed within ten days 114 from the date of the filing of the complaint. A hearing shall be conducted by the 115116 department within ten days from the date the appeal is filed. The suspension 117 shall continue in effect until the conclusion of the proceedings, including review 118 thereof, unless sooner withdrawn by the department, dissolved by a court of competent jurisdiction or stayed by the administrative hearing commission. 119

190.173. 1. All complaints, investigatory reports, and information 2 pertaining to any applicant, holder of any certificate, permit, or license, or other individual are confidential and shall only be disclosed upon written consent of the person whose records are involved or to other administrative or law enforcement agencies acting within the scope of their statutory authority. However, no applicant, holder of any certificate, permit, or license, or other individual shall have access to any complaints, investigatory reports, or information concerning an investigation in progress until such time as the investigation has been 9 completed as required by subsection 1 of section 190.248.

- 2. Any information regarding the identity, name, address, license, final disciplinary action taken, currency of the license, permit, or certificate of an applicant for or a person possessing a license, permit, or certificate in accordance with sections 190.100 to 190.245 shall not be confidential.
- 3. Any information regarding the physical address, mailing address, phone number, fax number, or email address of a licensed ambulance service or a certified training entity, including the name of the medical director and organizational contact information, shall not be confidential.
- 19 **4.** This section shall not be construed to authorize the release of records, 20 reports, or other information which may be held in department files for any holder of or applicant for any certificate, permit, or license that is subject to other 22specific state or federal laws concerning their disclosure.

- 5. Nothing in this section shall prohibit the department from releasing aggregate information in accordance with section 192.067.
 - 190.196. 1. No employer shall knowingly employ or permit any employee
- 2 to perform any services for which a license, certificate or other authorization is
- 3 required by sections 190.001 to 190.245, or by rules adopted pursuant to sections
- 4 190.001 to 190.245, unless and until the person so employed possesses all
- 5 licenses, certificates or authorizations that are required.
- 6 2. Any person or entity that employs or supervises a person's activities as
- 7 [a first] an emergency medical responder, emergency medical dispatcher,
- 8 emergency medical [technician-basic, emergency medical technician-intermediate,
- 9 emergency medical technician-paramedic technician, registered nurse, or
- 10 physician shall cooperate with the department's efforts to monitor and enforce
- 11 compliance by those individuals subject to the requirements of sections 190.001
- 12 to 190.245.

- 3. Any person or entity who employs individuals licensed by the
- 14 department pursuant to sections 190.001 to 190.245 shall report to the
- 15 department within seventy-two hours of their having knowledge of any charges
- 16 filed against a licensee in their employ for possible criminal action involving the
- 17 following felony offenses:
 - (1) Child abuse or sexual abuse of a child;
- 19 (2) Crimes of violence; or
- 20 (3) Rape or sexual abuse.
- 4. Any licensee who has charges filed against him or her for the felony
- 22 offenses in subsection 3 of this section shall report such an occurrence to the
- 23 department within seventy-two hours of the charges being filed.
- 24 5. The department will monitor these reports for possible licensure action
- 25 authorized pursuant to section 190.165.
 - 190.246. 1. As used in this section, the following terms shall mean:
- 2 (1) "Eligible person, firm, organization or other entity", an ambulance
- 3 service or emergency medical response agency, [a certified first] an emergency
- 4 medical responder, [emergency medical technical-basic] or an emergency
- 5 medical [technician-paramedic] technician who is employed by, or an enrolled
- 6 member, person, firm, organization or entity designated by, rule of the
- department of health and senior services in consultation with other appropriate
- 8 agencies. All such eligible persons, firms, organizations or other entities shall be
- 9 subject to the rules promulgated by the director of the department of health and

- 10 senior services;
- 11 (2) "Emergency health care provider":
- 12 (a) A physician licensed pursuant to chapter 334 with knowledge and 13 experience in the delivery of emergency care; or
- 14 (b) A hospital licensed pursuant to chapter 197 that provides emergency 15 care.
- 16 2. Possession and use of epinephrine auto-injector devices shall be limited 17 as follows:
- 18 (1) No person shall use an epinephrine auto-injector device unless such 19 person has successfully completed a training course in the use of epinephrine 20 auto-injector devices approved by the director of the department of health and 21 senior services. Nothing in this section shall prohibit the use of an epinephrine 22 auto-injector device:
- 23 (a) By a health care professional licensed or certified by this state who is 24 acting within the scope of his or her practice; or
 - (b) By a person acting pursuant to a lawful prescription;
- 26 (2) Every person, firm, organization and entity authorized to possess and 27 use epinephrine auto-injector devices pursuant to this section shall use, maintain 28 and dispose of such devices in accordance with the rules of the department;
- 29 (3) Every use of an epinephrine auto-injector device pursuant to this 30 section shall immediately be reported to the emergency health care provider.
- 3. (1) Use of an epinephrine auto-injector device pursuant to this section 32 shall be considered first aid or emergency treatment for the purpose of any law 33 relating to liability.
- 34 (2) Purchase, acquisition, possession or use of an epinephrine auto-injector 35 device pursuant to this section shall not constitute the unlawful practice of 36 medicine or the unlawful practice of a profession.
- 37 (3) Any person otherwise authorized to sell or provide an epinephrine 38 auto-injector device may sell or provide it to a person authorized to possess it 39 pursuant to this section.
- 40 4. Any person, firm, organization or entity that violates the provisions of this section is guilty of a class B misdemeanor.
 - 190.900. 1. The "Recognition of EMS Personnel Licensure Interstate Compact" (REPLICA) is hereby enacted into law and entered into with all other jurisdictions legally joining therein, in the form substantially as follows in sections 190.900 to 190.939.

5 2. As used in sections 190.900 to 190.939, the following terms 6 mean:

- 7 (1) "Advanced emergency medical technician" or "AEMT", an 8 individual licensed with cognitive knowledge and a scope of practice 9 that corresponds to that level in the National EMS Education Standards and National EMS Scope of Practice Model;
- (2) "Adverse action", any administrative, civil, equitable, or criminal action permitted by a state's laws that may be imposed against licensed EMS personnel by a state EMS authority or state court including, but not limited to, actions against an individual's license such as revocation, suspension, probation, consent agreement, monitoring or other limitation, or encumbrance on the individual's practice, letters of reprimand or admonition, fines, criminal convictions, and state court judgments enforcing adverse actions by the state EMS authority;
- 20 (3) "Certification", the successful verification of entry-level 21 cognitive and psychomotor competency using a reliable, validated, and 22 legally defensible examination;
- 23 (4) "Commission", the national administrative body of which all 24 states that have enacted the compact are members;
- (5) "Emergency medical technician" or "EMT", an individual licensed with cognitive knowledge and a scope of practice that corresponds to that level in the National EMS Education Standards and National EMS Scope of Practice Model;
 - (6) "EMS", emergency medical services;

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- 30 (7) "Home state", a member state where an individual is licensed 31 to practice emergency medical services;
- 32 (8) "License", the authorization by a state for an individual to 33 practice as an EMT, AEMT, paramedic, or a level in between EMT and 34 paramedic;
- 35 (9) "Medical director", a physician licensed in a member state 36 who is accountable for the care delivered by EMS personnel;
 - (10) "Member state", a state that has enacted this compact;
- 38 (11) "Paramedic", an individual licensed with cognitive 39 knowledge and a scope of practice that corresponds to that level in the 40 National EMS Education Standards and National EMS Scope of Practice 41 Model;

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- 42 (12) "Privilege to practice", an individual's authority to deliver emergency medical services in remote states as authorized under this 43 44 compact;
- 45 (13) "Remote state", a member state in which an individual is not licensed; 46
- 47 (14) "Restricted", the outcome of an adverse action that limits a license or the privilege to practice; 48
 - (15) "Rule", a written statement by the interstate commission promulgated under section 190.930 of this compact that is of general applicability; implements, interprets, or prescribes a policy or provision of the compact; or is an organizational, procedural, or practice requirement of the commission and has the force and effect of statutory law in a member state and includes the amendment, repeal, or suspension of an existing rule;
 - (16) "Scope of practice", defined parameters of various duties or services that may be provided by an individual with specific credentials. Whether regulated by rule, statute, or court decision, it tends to represent the limits of services an individual may perform;
 - (17) "Significant investigatory information":
- (a) Investigative information that a state EMS authority, after a preliminary inquiry that includes notification and an opportunity to 62 respond if required by state law, has reason to believe, if proven true, would result in the imposition of an adverse action on a license or 65 privilege to practice; or
- 66 (b) Investigative information that indicates that the individual represents an immediate threat to public health and safety, regardless 67 of whether the individual has been notified and had an opportunity to 68 respond; 69
- 70 (18) "State", any state, commonwealth, district, or territory of the 71 **United States:**
- 72 (19) "State EMS authority", the board, office, or other agency with the legislative mandate to license EMS personnel.
- 190.903. 1. Any member state in which an individual holds a current license shall be deemed a home state for purposes of this 3 compact.
- 4 2. Any member state may require an individual to obtain and retain a license to be authorized to practice in the member state under

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6 circumstances not authorized by the privilege to practice under the 7 terms of this compact.

- 8 3. A home state's license authorizes an individual to practice in 9 a remote state under the privilege to practice only if the home state:
- 10 (1) Currently requires the use of the National Registry of 11 Emergency Medical Technicians (NREMT) examination as a condition 12 of issuing initial licenses at the EMT and paramedic levels;
 - (2) Has a mechanism in place for receiving and investigating complaints about individuals;
- 15 (3) Notifies the commission, in compliance with the terms herein, 16 of any adverse action or significant investigatory information 17 regarding an individual;
- (4) No later than five years after activation of the compact, requires a criminal background check of all applicants for initial licensure, including the use of the results of fingerprint or other biometric data checks compliant with the requirements of the Federal Bureau of Investigation, with the exception of federal employees who have suitability determination in accordance with 5 CFR 731.202 and submit documentation of such as promulgated in the rules of the commission; and
 - (5) Complies with the rules of the commission.
 - 190.906. 1. Member states shall recognize the privilege to practice of an individual licensed in another member state that is in conformance with section 190.903.
 - 2. To exercise the privilege to practice under the terms and provisions of this compact, an individual shall:
 - 6 (1) Be at least eighteen years of age;
- 7 (2) Possess a current unrestricted license in a member state as 8 an EMT, AEMT, paramedic, or state-recognized and licensed level with 9 a scope of practice and authority between EMT and paramedic; and
 - (3) Practice under the supervision of a medical director.
- 3. An individual providing patient care in a remote state under the privilege to practice shall function within the scope of practice authorized by the home state unless and until modified by an appropriate authority in the remote state, as may be defined in the rules of the commission.
- 4. Except as provided in subsection 3 of this section, an

17 individual practicing in a remote state shall be subject to the remote

- 18 state's authority and laws. A remote state may, in accordance with due
- 19 process and that state's laws, restrict, suspend, or revoke an
- 20 individual's privilege to practice in the remote state and may take any
- 21 other necessary actions to protect the health and safety of its citizens.
- 22 If a remote state takes action, it shall promptly notify the home state
- 23 and the commission.
- 5. If an individual's license in any home state is restricted,
- 25 suspended, or revoked, the individual shall not be eligible to practice
- 26 in a remote state under the privilege to practice until the individual's
- 27 home state license is restored.
- 28 6. If an individual's privilege to practice in any remote state is
- 29 restricted, suspended, or revoked, the individual shall not be eligible
- 30 to practice in any remote state until the individual's privilege to
- 31 practice is restored.
 - 190.909. An individual may practice in a remote state under a
- 2 privilege to practice only in the performance of the individual's EMS
- 3 duties as assigned by an appropriate authority, as defined in the rules
- 4 of the commission, and under the following circumstances:
- 5 (1) The individual originates a patient transport in a home state
- 6 and transports the patient to a remote state;
- 7 (2) The individual originates in the home state and enters a
- 8 remote state to pick up a patient and provides care and transport of
- 9 the patient to the home state;
- 10 (3) The individual enters a remote state to provide patient care
- 11 or transport within that remote state;
- 12 (4) The individual enters a remote state to pick up a patient and
- 13 provides care and transport to a third member state; or
- 14 (5) Other conditions as determined by rules promulgated by the
- 15 commission.
 - 190.912. Upon a member state's governor's declaration of a state
- 2 of emergency or disaster that activates the Emergency Management
- 3 Assistance Compact (EMAC), all relevant terms and provisions of EMAC
- 4 shall apply, and to the extent any terms or provisions of this compact
- 5 conflict with EMAC, the terms of EMAC shall prevail with respect to
- 6 any individual practicing in the remote state in response to such
- 7 declaration.

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190.915. 1. Member states shall consider a veteran, active military service member, or member of the National Guard and Reserves separating from an active duty tour, or a spouse thereof, who holds a current, valid, and unrestricted NREMT certification at or above the level of the state license being sought as satisfying the minimum training and examination requirements for such licensure.

- 2. Member states shall expedite the process of licensure applications submitted by veterans, active military service members, or members of the National Guard and Reserves separating from an active duty tour, or their spouses.
- 3. All individuals functioning with a privilege to practice under this section remain subject to the adverse action provisions of section 13 190.918.

190.918. 1. A home state shall have exclusive power to impose adverse action against an individual's license issued by the home state.

- 2. If an individual's license in any home state is restricted, suspended, or revoked, the individual shall not be eligible to practice in a remote state under the privilege to practice until the individual's home state license is restored.
- 7 (1) All home state adverse action orders shall include a 8 statement that the individual's compact privileges are inactive. The 9 order may allow the individual to practice in remote states with prior written authorization from both the home state and the remote state's 11 EMS authority.
- 12 (2) An individual currently subject to adverse action in the home 13 state shall not practice in any remote state without prior written 14 authorization from both the home state and remote state's EMS 15 authority.
- 3. A member state shall report adverse actions and any occurrences that the individual's compact privileges are restricted, suspended, or revoked to the commission in accordance with the rules of the commission.
- 4. A remote state may take adverse action on an individual's privilege to practice within that state.
- 5. Any member state may take adverse action against an individual's privilege to practice in that state based on the factual findings of another member state, so long as each state follows its own

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- procedures for imposing such adverse action.
- 26 6. A home state's EMS authority shall coordinate investigative 27activities, share information via the coordinated database, and take appropriate action with respect to reported conduct in a remote state 2829 as it would if such conduct had occurred within the home state. In such cases, the home state's law shall control in determining the 30 appropriate adverse action. 31
- 7. Nothing in this compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain nonpublic if required by the member state's laws. Member states shall 36 require individuals who enter any alternative programs to agree not to practice in any other member state during the term of the alternative program without prior authorization from such other member state.
- 190.921. A member state's EMS authority, in addition to any other powers granted under state law, is authorized under this compact 3 to:
- (1) Issue subpoenas for both hearings and investigations that 4 require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a member state's EMS authority for the attendance and testimony of witnesses or the production of evidence from another member state shall be enforced in the remote state by any court of competent jurisdiction according to that court's practice and procedure in considering subpoenas issued in its own 11 proceedings. The issuing state's EMS authority shall pay any witness 12fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses or evidence is located; and 13
- 14 (2) Issue cease and desist orders to restrict, suspend, or revoke an individual's privilege to practice in the state. 15
 - 190.924. 1. The compact states hereby create and establish a joint public agency known as the "Interstate Commission for EMS Personnel Practice".
- (1) The commission is a body politic and an instrumentality of 4 the compact states.
- (2) Venue is proper and judicial proceedings by or against the 6 commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the commission is

9 located. The commission may waive venue and jurisdictional defenses 10 to the extent it adopts or consents to participate in alternative dispute 11 resolution proceedings.

- 12 (3) Nothing in this compact shall be construed to be a waiver of sovereign immunity.
- 2. Each member state shall have and be limited to one delegate. The responsible official of the state EMS authority or his or her designee shall be the delegate to this compact for each member state. Any delegate may be removed or suspended from office as provided by the law of the state from which the delegate is appointed. Any vacancy occurring in the commission shall be filled in accordance with the laws of the member state in which the vacancy exists. In the event that more than one board, office, or other agency with the legislative mandate to license EMS personnel at and above the level of EMT exists, the governor of the state shall determine which entity shall be responsible for assigning the delegate.
- 25 (1) Each delegate shall be entitled to one vote with regard to the 26 promulgation of rules and creation of bylaws, and shall otherwise have 27 an opportunity to participate in the business and affairs of the 28 commission. A delegate shall vote in person or by such other means as 29 provided in the bylaws. The bylaws may provide for delegates' 30 participation in meetings by telephone or other means of 31 communication.
- 32 (2) The commission shall meet at least once during each calendar 33 year. Additional meetings shall be held as set forth in the bylaws.
- 34 (3) All meetings shall be open to the public, and public notice of 35 meetings shall be given in the same manner as required under the 36 rulemaking provisions in section 190.930.
- 37 (4) The commission may convene in a closed, nonpublic meeting 38 if the commission must discuss:
- 39 (a) Noncompliance of a member state with its obligations under 40 the compact;
- (b) The employment, compensation, discipline or other personnel matters, practices, or procedures related to specific employees, or other matters related to the commission's internal personnel practices and procedures;

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(c) Current, threatened, or reasonably anticipated litigation;

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- 46 (d) Negotiation of contracts for the purchase or sale of goods, 47 services, or real estate;
- 48 (e) Accusing any person of a crime or formally censuring any 49 person;
- 50 (f) Disclosure of trade secrets or commercial or financial 51 information that is privileged or confidential;
 - (g) Disclosure of information of a personal nature if disclosure would constitute a clearly unwarranted invasion of personal privacy;
- 54 (h) Disclosure of investigatory records compiled for law 55 enforcement purposes;
 - (i) Disclosure of information related to any investigatory reports prepared by or on behalf of or for use of the commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the compact; or
- 60 (j) Matters specifically exempted from disclosure by federal or 61 member state statute.
 - (5) If a meeting or portion of a meeting is closed under this section, the commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision. The commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken and the reasons therefor, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the commission or order of a court of competent jurisdiction.
 - 3. The commission shall, by a majority vote of the delegates, prescribe bylaws and rules to govern its conduct as may be necessary or appropriate to carry out the purposes and exercise the powers of the compact including, but not limited to:
 - (1) Establishing the fiscal year of the commission;
 - (2) Providing reasonable standards and procedures:
 - (a) For the establishment and meetings of other committees; and
- 80 (b) Governing any general or specific delegation of any authority 81 or function of the commission;
 - (3) Providing reasonable procedures for calling and conducting

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meetings of the commission, ensuring reasonable advance notice of all meetings, and providing an opportunity for attendance of such 85 meetings by interested parties, with enumerated exceptions designed 86 to protect the public's interest, the privacy of individuals, and proprietary information, including trade secrets. The commission may 87 88 meet in closed session only after a majority of the membership votes to close a meeting in whole or in part. As soon as practicable, the 89 commission shall make public a copy of the vote to close the meeting 90 91 revealing the vote of each member with no proxy votes allowed;

- (4) Establishing the titles, duties and authority, and reasonable procedures for the election of the officers of the commission;
- (5) Providing reasonable standards and procedures for the establishment of the personnel policies and programs of the commission. Notwithstanding any civil service or other similar laws of any member state, the bylaws shall exclusively govern the personnel policies and programs of the commission;
- (6) Promulgating a code of ethics to address permissible and prohibited activities of commission members and employees;
- (7) Providing a mechanism for winding up the operations of the commission and the equitable disposition of any surplus funds that may exist after the termination of the compact after the payment or reserving of all of its debts and obligations;
- 105 (8) The commission shall publish its bylaws and file a copy 106 thereof, and a copy of any amendment thereto, with the appropriate agency or officer in each of the member states, if any;
- 108 (9) The commission shall maintain its financial records in accordance with the bylaws; and 109
- 110 (10) The commission shall meet and take such actions as are consistent with the provisions of this compact and the bylaws. 111
 - 4. The commission shall have the following powers:
- 113 (1) To promulgate uniform rules to facilitate and coordinate 114 implementation and administration of this compact. The rules shall have the force and effect of law and shall be binding on all member 115 116 states;
- (2) To bring and prosecute legal proceedings or actions in the 117 118 name of the commission; provided that, the standing of any state EMS authority or other regulatory body responsible for EMS personnel 119

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120 licensure to sue or be sued under applicable law shall not be affected;

- (3) To purchase and maintain insurance and bonds;
- 122 (4) To borrow, accept, or contract for services of personnel 123 including, but not limited to, employees of a member state;
- 124 (5) To hire employees, elect or appoint officers, fix compensation, 125 define duties, grant such individuals appropriate authority to carry out 126 the purposes of the compact, and to establish the commission's 127 personnel policies and programs relating to conflicts of interest, 128 qualifications of personnel, and other related personnel matters;
- 129 (6) To accept any and all appropriate donations and grants of 130 money, equipment, supplies, materials, and services, and to receive, 131 utilize, and dispose of the same; provided that, at all times the 132 commission shall strive to avoid any appearance of impropriety and 133 conflict of interest;
- 134 (7) To lease, purchase, accept appropriate gifts or donations of, 135 or otherwise to own, hold, improve, or use any property, real, personal, 136 or mixed; provided that, at all times the commission shall strive to 137 avoid any appearance of impropriety;
 - (8) To sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property, real, personal, or mixed;
 - (9) To establish a budget and make expenditures;
- 141 (10) To borrow money;
- (11) To appoint committees, including advisory committees comprised of members, state regulators, state legislators or their representatives, consumer representatives, and such other interested persons as may be designated in this compact and the bylaws;
- 146 (12) To provide and receive information from, and to cooperate 147 with, law enforcement agencies;
 - (13) To adopt and use an official seal; and
- 149 (14) To perform such other functions as may be necessary or 150 appropriate to achieve the purposes of this compact consistent with the 151 state regulation of EMS personnel licensure and practice.
- 5. (1) The commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.
- 155 (2) The commission may accept any and all appropriate revenue 156 sources, donations, and grants of money, equipment, supplies,

157 materials, and services.

- (3) The commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the commission and its staff, which shall be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the commission, which shall promulgate a rule binding upon all member states.
- (4) The commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the commission pledge the credit of any of the member states, except by and with the authority of the member state.
- (5) The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the commission.
- 6. (1) The members, officers, executive director, employees, and representatives of the commission shall be immune from suit and liability, either personally or in their official capacity, for any claim, damage to or loss of property, personal injury, or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities; provided that, nothing in this subdivision shall be construed to protect any such person from suit or liability for any damage, loss, injury, or liability caused by the intentional, willful, or wanton misconduct of that person.
- (2) The commission shall defend any member, officer, executive director, employee, or representative of the commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred

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within the scope of commission employment, duties, or responsibilities; provided that, nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional, willful, or wanton misconduct.

- (3) The commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities; provided that, the actual or alleged act, error, or omission did not result from the intentional, willful, or wanton misconduct of the person.
- 190.927. 1. The commission shall provide for the development and maintenance of a coordinated database and reporting system containing licensure, adverse action, and significant investigatory information on all licensed individuals in member states.
- 2. Notwithstanding any other provision of state law to the contrary, a member state shall submit a uniform data set to the coordinated database on all individuals to whom this compact is applicable as required by the rules of the commission, including:
- 9 (1) Identifying information;
- 10 (2) Licensure data;
- 11 (3) Significant investigatory information;
- 12 (4) Adverse actions against an individual's license;
- 13 (5) An indicator that an individual's privilege to practice is 14 restricted, suspended, or revoked;
- 15 (6) Nonconfidential information related to alternative program 16 participation;
- 17 (7) Any denial of application for licensure and the reasons for 18 such denial; and
- 19 (8) Other information that may facilitate the administration of 20 this compact, as determined by the rules of the commission.
- 3. The coordinated database administrator shall promptly notify all member states of any adverse action taken against, or significant

- 23 investigative information on, any individual in a member state.
- 4. Member states contributing information to the coordinated database may designate information that shall not be shared with the public without the express permission of the contributing state.
- 5. Any information submitted to the coordinated database that is subsequently required to be expunged by the laws of the member state contributing the information shall be removed from the coordinated database.
 - 190.930. 1. The commission shall exercise its rulemaking powers pursuant to the criteria set forth in this section and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.
 - 2. If a majority of the legislatures of the member states rejects a rule by enactment of a statute or resolution in the same manner used to adopt the compact, then such rule shall have no further force and effect in any member state.
- 9 3. Rules or amendments to the rules shall be adopted at a regular 10 or special meeting of the commission.
- 4. Prior to promulgation and adoption of a final rule or rules by the commission, and at least sixty days in advance of the meeting at which the rule or rules shall be considered and voted upon, the commission shall file a notice of proposed rulemaking:
- 15 (1) On the website of the commission; and

- 16 (2) On the website of each member state's EMS authority or the 17 publication in which each state would otherwise publish proposed 18 rules.
 - 5. The notice of proposed rulemaking shall include:
- 20 (1) The proposed time, date, and location of the meeting at which 21 the rule shall be considered and voted upon;
- 22 (2) The text of the proposed rule or amendment and the reason 23 for the proposed rule;
- 24 (3) A request for comments on the proposed rule from any 25 interested person; and
- 26 (4) The manner in which interested parties may submit notice to 27 the commission of their intention to attend the public hearing and any 28 written comments.
- 29 6. Prior to adoption of a proposed rule, the commission shall

30 allow persons to submit written data, facts, opinions, and arguments 31 that shall be made available to the public.

- 7. The commission shall grant an opportunity for a public hearing before it adopts a rule or amendment if a hearing is requested by:
- 35 (1) At least twenty-five persons;

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- 36 (2) A governmental subdivision or agency; or
- 37 (3) An association having at least twenty-five members.
- 8. If a hearing is held on the proposed rule or amendment, the commission shall publish the place, time, and date of the scheduled public hearing.
 - (1) All persons wishing to be heard at the hearing shall notify the executive director of the commission or other designated member in writing of their desire to appear and testify at the hearing not less than five business days before the scheduled date of the hearing.
- 45 (2) Hearings shall be conducted in a manner providing each 46 person who wishes to comment a fair and reasonable opportunity to 47 comment orally or in writing.
 - (3) No transcript of the hearing is required, unless a written request for a transcript is made, in which case the person requesting the transcript shall bear the cost of producing the transcript. A recording may be made in lieu of a transcript under the same terms and conditions as a transcript. This subdivision shall not preclude the commission from making a transcript or recording of the hearing if it so chooses.
 - (4) Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the commission at hearings required by this section.
 - 9. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the commission shall consider all written and oral comments received.
- 10. The commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.
- 11. If no written notice of intent to attend the public hearing by interested parties is received, the commission may proceed with

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67 promulgation of the proposed rule without a public hearing.

- 12. Upon determination that an emergency exists, the commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing; provided that, the usual rulemaking procedures provided in the compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that shall be adopted immediately in order to:
 - (1) Meet an imminent threat to public health, safety, or welfare;
 - (2) Prevent a loss of commission or member state funds;
 - (3) Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule; or
 - (4) Protect public health and safety.
- 81 13. The commission or an authorized committee of the commission may direct revisions to a previously adopted rule or 82 amendment for purposes of correcting typographical errors, errors in 83 format, errors in consistency, or grammatical errors. Public notice of 84 any revisions shall be posted on the website of the commission. The 85 revision shall be subject to challenge by any person for a period of 86 thirty days after posting. The revision may be challenged only on 87 grounds that the revision results in a material change to a rule. A 89 challenge shall be made in writing and delivered to the chair of the 90 commission prior to the end of the notice period. If no challenge is 91 made, the revision shall take effect without further action. If the 92 revision is challenged, the revision may not take effect without the approval of the commission. 93
- 190.933. 1. The executive, legislative, and judicial branches of state government in each member state shall enforce this compact and take all actions necessary and appropriate to effectuate the compact's purposes and intent. The provisions of this compact and the rules promulgated hereunder shall have standing as statutory law.
- 2. All courts shall take judicial notice of the compact and the rules in any judicial or administrative proceedings in a member state pertaining to the subject matter of this compact which may affect the powers, responsibilities, or actions of the commission.
 - 3. The commission shall be entitled to receive service of process

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- in any such proceeding and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process to the commission shall render a judgment or order void as to the 13 14 commission, this compact, or promulgated rules.
- 4. If the commission determines that a member state has 15 defaulted in the performance of its obligations or responsibilities under 16 this compact or the promulgated rules, the commission shall: 17
 - (1) Provide written notice to the defaulting state and other member states of the nature of the default, the proposed means of curing the default, or any other action to be taken by the commission; and
 - (2) Provide remedial training and specific technical assistance regarding the default.
 - 5. If a state in default fails to cure the default, the defaulting state may be terminated from the compact upon an affirmative vote of a majority of the member states, and all rights, privileges, and benefits conferred by this compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.
 - 6. Termination of membership in the compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the commission to the governor, the majority and minority leaders of the defaulting state's legislature, and each of the member states.
- 7. A state that has been terminated is responsible for all 36 assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.
 - 8. The commission shall not bear any costs related to a state that is found to be in default or that has been terminated from the compact unless agreed upon in writing between the commission and the defaulting state.
- 43 9. The defaulting state may appeal the action of the commission by petitioning the United States District Court for the District of 44 Columbia or the federal district where the commission has its principal offices. The prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

- 10. Upon a request by a member state, the commission shall attempt to resolve disputes related to the compact that arise among member states and between member and nonmember states.
- 51 11. The commission shall promulgate a rule providing for both 52 mediation and binding dispute resolution for disputes as appropriate.
- 12. The commission, in the reasonable exercise of its discretion, shall enforce the provisions and rules of this compact.
- 55 13. By majority vote, the commission may initiate legal action in the United States District Court for the District of Columbia or the 56 federal district where the commission has its principal offices against 57 a member state in default to enforce compliance with the provisions of 58 the compact and its promulgated rules and bylaws. The relief sought 59 may include both injunctive relief and damages. In the event judicial 60 enforcement is necessary, the prevailing member shall be awarded all 61 62 costs of such litigation, including reasonable attorney's fees.
- 14. The remedies herein shall not be the exclusive remedies of the commission. The commission may pursue any other remedies available under federal or state law.
- 190.936. 1. The compact shall come into effect on the date on which the compact statute is enacted into law in the tenth member state. The provisions, which become effective at that time, shall be limited to the powers granted to the commission relating to assembly and the promulgation of rules. Thereafter, the commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the compact.
- 2. Any state that joins the compact subsequent to the commission's initial adoption of the rules shall be subject to the rules as they exist on the date on which the compact becomes law in that state. Any rule that has been previously adopted by the commission shall have the full force and effect of law on the day the compact becomes law in that state.
- 3. Any member state may withdraw from this compact by enacting a statute repealing the same.
- 16 (1) A member state's withdrawal shall not take effect until six 17 months after enactment of the repealing statute.
- 18 **(2)** Withdrawal shall not affect the continuing requirement of the withdrawing state's EMS authority to comply with the investigative and

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20 adverse action reporting requirements of this act prior to the effective 21 date of withdrawal.

- 4. Nothing contained in this compact shall be construed to invalidate or prevent any EMS personnel licensure agreement or other cooperative arrangement between a member state and a nonmember state that does not conflict with the provisions of this compact.
- 5. This compact may be amended by the member states. No amendment to this compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

190.939. This compact shall be liberally construed so as to effectuate the purposes thereof. If this compact shall be held contrary to the constitution of any member state thereto, the compact shall remain in full force and effect as to the remaining member states. Nothing in this compact supersedes state law or rules related to licensure of EMS agencies.

191.630. As used in sections 191.630 and 191.631, the following terms 2 mean:

- 3 (1) "Communicable disease", acquired immunodeficiency syndrome (AIDS), 4 cutaneous anthrax, hepatitis in any form, human immunodeficiency virus (HIV), 5 measles, meningococcal disease, mumps, pertussis, pneumonic plague, rubella, 6 severe acute respiratory syndrome (SARS-CoV), smallpox, tuberculosis, varicella 7 disease, vaccinia, viral hemorrhagic fevers, and other such diseases as the 8 department may define by rule or regulation;
- 9 (2) "Communicable disease tests", tests designed for detection of 10 communicable diseases. Rapid testing of the source patient in accordance with 11 the Occupational Safety and Health Administration (OSHA) enforcement of the 12 Centers for Disease Control and Prevention (CDC) guidelines shall be 13 recommended;
- 14 (3) "Coroner or medical examiner", the same meaning as defined in 15 chapter 58;
 - (4) "Department", the Missouri department of health and senior services;
- 17 (5) "Designated infection control officer", the person or persons within the 18 entity or agency who are responsible for managing the infection control program 19 and for coordinating efforts surrounding the investigation of an exposure such as:
- 20 (a) Collecting, upon request, facts surrounding possible exposure of an 21 emergency care provider or Good Samaritan to a communicable disease;

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- (b) Contacting facilities that receive patients or clients of potentially exposed emergency care providers or Good Samaritans to ascertain if a determination has been made as to whether the patient or client has had a communicable disease and to ascertain the results of that determination; and
- 26 (c) Notifying the emergency care provider or Good Samaritan as to 27 whether there is reason for concern regarding possible exposure;
- (6) "Emergency care provider", a person who is serving as a licensed or certified person trained to provide emergency and nonemergency medical care as a first responder, emergency medical responder, [EMT-B, EMT-I, or EMT-P] as defined in section 190.100, emergency medical technician, as defined in section 190.100, firefighter, law enforcement officer, sheriff, deputy sheriff, registered nurse, physician, medical helicopter pilot, or other certification or licensure levels adopted by rule of the department;
- 35 (7) "Exposure", a specific eye, mouth, other mucous membrane, nonintact 36 skin, or parenteral contact with blood or other potentially infectious materials 37 that results from the performance of an employee's duties;
- 38 (8) "Good Samaritan", any person who renders emergency medical 39 assistance or aid within his or her level of training or skill until such time as he 40 or she is relieved of those duties by an emergency care provider;
 - (9) "Hospital", the same meaning as defined in section 197.020;
- 42 (10) "Source patient", any person who is sick or injured and requiring the 43 care or services of a Good Samaritan or emergency care provider, for whose blood 44 or other potentially infectious materials have resulted in exposure.

217.151. 1. As used in this section, the following terms shall 2 mean:

- (1) "Extraordinary circumstance", a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of a pregnant offender in her third trimester, a postpartum offender forty-eight hours postdelivery, the staff of the correctional center or medical facility, other offenders, or the public;
 - (2) "Labor", the period of time before a birth during which contractions are present;
- 11 (3) "Postpartum", the period of recovery immediately following 12 childbirth, which is six weeks for a vaginal birth or eight weeks for a 13 cesarean birth, or longer if so determined by a physician or nurse;

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- 14 (4) "Restraints", any physical restraint or other device used to control the movement of a person's body or limbs. 15
- 16 2. Unless extraordinary circumstances exist as determined by a corrections officer, a correctional center shall not use restraints on a 17 pregnant offender in her third trimester during transportation to and 18 19 from visits to health care providers or court proceedings, or during medical appointments and examinations, labor, delivery, or forty-eight 20 21 hours postdelivery.
 - determines 3. In the event a corrections officer that extraordinary circumstances exist and restraints are necessary, the corrections officer shall fully document in writing within forty-eight hours of the incident the reasons he or she determined such extraordinary circumstances existed, the type of restraints used, and the reasons those restraints were considered the least restrictive available and the most reasonable under the circumstances. Such documents shall be kept on file by the correctional center for at least ten years from the date the restraints were used.
- 4. Any time restraints are used on a pregnant offender in her third trimester or on a postpartum offender forty-eight hours postdelivery, the restraints shall be the least restrictive available and 33 the most reasonable under the circumstances. In no case shall leg, 34 ankle, or waist restraints or any mechanical restraints be used on any 36 such offender, and if wrist restraints are used, such restraints shall be placed in the front of such offender's body to protect the offender and unborn child in the case of a forward fall.
- 39 5. If a doctor, nurse, or other health care provider treating the pregnant offender in her third trimester or the postpartum offender 40 forty-eight hours postdelivery requests that restraints not be used, the 41 42 corrections officer accompanying such offender shall immediately 43 remove all restraints.
 - 6. Pregnant offenders shall be transported in vehicles equipped with seatbelts.
- 46 7. The sentencing and corrections oversight commission established under section 217.147 and the advisory committee 47 established under section 217.015 shall conduct biannual reviews of every report written on the use of restraints on a pregnant offender in 49 her third trimester or on a postpartum offender forty-eight hours

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postdelivery in accordance with subsection 3 of this section to determine compliance with this section. The written reports shall be kept on file by the department for ten years.

- 8. The chief administrative officer, or equivalent position, of 54 55 each correctional center shall:
- (1) Ensure that employees of the correctional center are 56 provided with training, which may include online training, on the 57 provisions of this section and section 217.147; and 58
- (2) Inform female offenders, in writing and orally, of any policies and practices developed in accordance with this section and section 217.149 upon admission to the correctional center, including policies 62 and practices in any offender handbook, and post the policies and practices in locations in the correctional center where such notices are 63 64 commonly posted and will be seen by female offenders, including common housing areas and health care facilities.
- 221.520. 1. As used in this section, the following terms shall 2 mean:
- 3 (1) "Extraordinary circumstance", a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of a pregnant prisoner in her third trimester, a postpartum prisoner fortyeight hours postdelivery, the staff of the county or city jail or medical 8 facility, other prisoners, or the public;
- 9 (2) "Labor", the period of time before a birth during which 10 contractions are present;
 - (3) "Postpartum", the period of recovery immediately following childbirth, which is six weeks for a vaginal birth or eight weeks for a cesarean birth, or longer if so determined by a physician or nurse;
 - (4) "Restraints", any physical restraint or other device used to control the movement of a person's body or limbs.
- 16 2. Unless extraordinary circumstances exist as determined by a 17 sheriff or jailer, a county or city jail shall not use restraints on a pregnant prisoner in her third trimester during transportation to and 18 19 from visits to health care providers or court proceedings, medical appointments and examinations, or during labor, delivery, or fortyeight hours postdelivery. 21
 - 3. In the event a sheriff or jailer determines that extraordinary

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23 circumstances exist and restraints are necessary, the sheriff or jailer shall fully document in writing within forty-eight hours of the incident the reasons he or she determined such extraordinary circumstances existed, the type of restraints used, and the reasons those restraints 26were considered the least restrictive available and the most reasonable 27under the circumstances. Such documents shall be kept on file by the 28 county or city jail for at least five years from the date the restraints 29 were used. 30

- 4. Anytime restraints are used on a pregnant prisoner in her third trimester or on a postpartum prisoner forty-eight hours postdelivery, the restraints shall be the least restrictive available and 34 the most reasonable under the circumstances. In no case shall leg, ankle, or waist restraints or any mechanical restraints be used on any such prisoner, and if wrist restraints are used, such restraints shall be placed in the front of such prisoner's body to protect the prisoner and unborn child in the case of a forward fall.
- 39 5. If a doctor, nurse, or other health care provider treating the pregnant prisoner in her third trimester or the postpartum prisoner 40 forty-eight hours postdelivery requests that restraints not be used, the 41 42sheriff or jailer accompanying such prisoner shall immediately remove 43 all restraints.
- 44 6. Pregnant prisoners shall be transported in vehicles equipped 45 with seatbelts.
 - 7. The county or city jail shall:
- (1) Ensure that employees of the jail are provided with training, 48 which may include online training, on the provisions of this section and section 221.520; and
 - (2) Inform female prisoners, in writing and orally, of any policies and practices developed in accordance with this section and section 221.520 upon admission to the jail, and post the policies and practices in locations in the jail where such notices are commonly posted and will be seen by female prisoners.
- 8. The provisions of this section shall only apply to jails located 55 in a county with a charter form of government, any city located in a county with a charter form of government, or any city not within a 58 county.

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with, the real property of urban redevelopment corporations acquired pursuant 3 to this chapter shall not be subject to assessment or payment of general ad valorem taxes imposed by the cities affected by this law, or by the state or any political subdivision thereof, for a period not in excess of ten years after the date upon which such corporations become owners of such real property, except to such extent and in such amount as may be imposed upon such real property during such period measured solely by the amount of the assessed valuation of the land, exclusive of improvements, acquired pursuant to this chapter and owned by such urban redevelopment corporation, as was determined by the assessor of the 10 11 county in which such real property is located, or, if not located within a county, then by the assessor of such city, for taxes due and payable thereon during the 12 13 calendar year preceding the calendar year during which the corporation acquired 14 title to such real property. The amounts of such tax assessments shall not be increased during such period so long as the real property is owned by an urban 15 16 redevelopment corporation and used in accordance with a development plan authorized by the legislative authority of such cities, except as provided 17 18 under subsection 4 of this section.

2. In the event, however, that any such real property was tax exempt immediately prior to ownership by any urban redevelopment corporation, such assessor or assessors shall, upon acquisition of title thereto by the urban redevelopment corporation, promptly assess such land, exclusive of improvements, at such valuation as shall conform to but not exceed the assessed valuation made during the preceding calendar year of other land, exclusive of improvements, adjacent thereto or in the same general neighborhood, and the amount of such assessed valuation shall not be increased during the period set pursuant to subsection 1 of this section so long as the real property is owned by an urban redevelopment corporation and used in accordance with a development plan authorized by the legislative authority of such cities. For the next ensuing period not in excess of fifteen years, ad valorem taxes upon such real property shall be measured by the assessed valuation thereof as determined by such assessor or assessors upon the basis of not to exceed fifty percent of the true value of such real property, including any improvements thereon, nor shall such valuations be increased above fifty percent of the true value of such real property from year to year during such next ensuing period so long as the real property is owned by an urban redevelopment corporation and used in accordance with an authorized development plan. After a period totaling not more than twenty-five years, such

real property shall be subject to assessment and payment of all ad valorem taxes, based on the full true value of the real property; provided, that after the completion of the redevelopment project, as authorized by law or ordinance whenever any urban redevelopment corporation shall elect to pay full taxes, or at the expiration of the period, such real property shall be owned and operated free from any of the conditions, restrictions or provisions of this chapter, and of any ordinance, rule or regulation adopted pursuant thereto, any other law limiting the right of domestic and foreign insurance companies to own and operate real estate to the contrary notwithstanding.

- 3. No tax abatement or exemption authorized by this section shall become effective unless and until the governing body of the city:
- (1) Furnishes each political subdivision whose boundaries for ad valorem taxation purposes include any portion of the real property to be affected by such tax abatement or exemption with a written statement of the impact on ad valorem taxes such tax abatement or exemption will have on such political subdivisions and written notice of the hearing to be held in accordance with subdivision (2) of this subsection. The written statement and notice required by this subdivision shall be furnished as provided by local ordinance before the hearing and shall include, but need not be limited to, an estimate of the amount of ad valorem tax revenues of each political subdivision which will be affected by the proposed tax abatement or exemption, based on the estimated assessed valuation of the real property involved as such property would exist before and after it is redeveloped;
- (2) Conducts a public hearing regarding such tax abatement or exemption, at which hearing all political subdivisions described in subdivision (1) of this subsection shall have the right to be heard on such grant of tax abatement or exemption;
- (3) Enacts an ordinance which provides for expiration of development rights, including the rights of eminent domain and tax abatement, in the event of failure of the urban redevelopment corporation to acquire ownership of property within the area of the development plan. Such ordinance shall provide for a duration of time within which such property must be acquired, and may allow for acquisition of property under the plan in phases.
- 4. (1) Notwithstanding any other provision of law to the contrary, payments in lieu of taxes may be imposed by contract between a city and an urban redevelopment corporation which receives tax abatement or exemption on property pursuant to this section. Such payments shall be made to the collector

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of revenue of the county or city not within a county by December thirty-first of each year payments are due. The governing body of the city shall furnish the 76 collector a copy of any such contract requiring payment in lieu of taxes. The collector shall allocate all revenues received from such payment in lieu of taxes 77among all taxing authorities whose property tax revenues are affected by the 78 exemption or abatement on the same pro rata basis and in the same manner as 79 the ad valorem property tax revenues received by each taxing authority from such 80 property in the year such payments are due. 81

- (2) (a) The provisions of subsection 1 of this section and subdivision (1) of this subsection notwithstanding, beginning August 28, 2018, any district or county imposing a property tax for the purposes of providing emergency services under chapter 190 or 321 shall be entitled to be reimbursed in an amount that is at least fifty percent but not more than one hundred percent of the amount of ad valorem property tax revenues that the district or county would have received in the absence of the tax abatement or exemption provided under this section.
- (b) An ambulance district board operating under chapter 190, a fire protection district board operating under chapter 321, or the governing body of a county operating a 911 center providing emergency or dispatch services under chapter 190 or chapter 321 shall annually set the reimbursement rate under paragraph (a) of this subdivision prior to the time the assessment is determined by the assessor of the county in which such district is located, or, if not located within a county, then the assessor of such city. If the development plan or redevelopment project is amended by ordinance or by any other means after August 28, 2018, the ambulance or fire protection district board shall have the right to recalculate the reimbursement rate under this subdivision.
- 102 5. The provisions of subsection 3 of this section shall not apply to any amendment or future amendment to a phased development plan approved by the governing body of the city prior to the effective date of the provisions of 105 subsection 3 of this section and upon which construction has been in progress 106 pursuant to such phased plan.

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