

FIRST REGULAR SESSION

# SENATE BILL NO. 541

101ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR BROWN.

2628S.01H

ADRIANE D. CROUSE, Secretary

## AN ACT

To repeal sections 173.260, 190.001, 190.060, 190.098, 190.100, 190.103, 190.104, 190.105, 190.108, 190.109, 190.120, 190.131, 190.133, 190.142, 190.143, 190.146, 190.160, 190.165, 190.171, 190.173, 190.176, 190.180, 190.185, 190.196, 190.200, 190.241, 190.243, 190.245, 190.248, and 287.243, RSMo, and to enact in lieu thereof thirty new sections relating to emergency health care services, with existing penalty provisions.

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

Section A. Sections 173.260, 190.001, 190.060, 190.098, 190.100, 190.103, 190.104, 190.105, 190.108, 190.109, 190.120, 190.131, 190.133, 190.142, 190.143, 190.146, 190.160, 190.165, 190.171, 190.173, 190.176, 190.180, 190.185, 190.196, 190.200, 190.241, 190.243, 190.245, 190.248, and 287.243, RSMo, are repealed and thirty new sections enacted in lieu thereof, to be known as sections 173.260, 190.001, 190.060, 190.098, 190.100, 190.103, 190.104, 190.105, 190.108, 190.109, 190.120, 190.131, 190.133, 190.142, 190.143, 190.146, 190.160, 190.165, 190.171, 190.173, 190.176, 190.180, 190.185, 190.196, 190.200, 190.241, 190.243, 190.244, 190.248, and 287.243, to read as follows:

173.260. 1. As used in this section, unless the context clearly requires otherwise, the following terms mean:

(1) "Air ambulance pilot", a person certified as an air ambulance pilot in accordance with sections 190.001 to [190.245] **190.244** and corresponding regulations applicable to air ambulances adopted by the department of health and senior services;

**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) "Air ambulance registered professional nurse", a  
9 person licensed as a registered professional nurse in  
10 accordance with sections 335.011 to 335.096 and  
11 corresponding regulations adopted by the state board of  
12 nursing, 20 CSR 2200-4, et seq., who provides registered  
13 professional nursing services as a flight nurse in  
14 conjunction with an air ambulance program that is certified  
15 in accordance with sections 190.001 to [190.245] **190.244** and  
16 the corresponding regulations applicable to such programs;

17           (3) "Air ambulance registered respiratory therapist",  
18 a person licensed as a registered respiratory therapist in  
19 accordance with sections 334.800 to 334.930 and  
20 corresponding regulations adopted by the state board for  
21 respiratory care, who provides respiratory therapy services  
22 in conjunction with an air ambulance program that is  
23 certified in accordance with sections 190.001 to [190.245]  
24 **190.244** and corresponding regulations applicable to such  
25 programs;

26           (4) "Board", the coordinating board for higher  
27 education;

28           (5) "Eligible child", the natural, adopted or  
29 stepchild of a public safety officer or employee, as defined  
30 in this section, who is less than twenty-four years of age  
31 and who is a dependent of a public safety officer or  
32 employee or was a dependent at the time of death or  
33 permanent and total disability of a public safety officer or  
34 employee;

35           (6) "Emergency medical technician", a person licensed  
36 in emergency medical care in accordance with standards  
37 prescribed by sections 190.001 to [190.245] **190.244** and by  
38 rules adopted by the department of health and senior  
39 services under sections 190.001 to [190.245] **190.244**;

40           (7) "Employee", any full-time employee of the  
41 department of transportation engaged in the construction or  
42 maintenance of the state's highways, roads and bridges;

43           (8) "Flight crew member", an individual engaged in  
44 flight responsibilities with an air ambulance licensed in  
45 accordance with sections 190.001 to [190.245] **190.244** and  
46 corresponding regulations applicable to such programs;

47           (9) "Grant", the public safety officer or employee  
48 survivor grant as established by this section;

49           (10) "Institution of postsecondary education", any  
50 approved public or private institution as defined in section  
51 173.205;

52           (11) "Line of duty", any action of a public safety  
53 officer, whose primary function is crime control or  
54 reduction, enforcement of the criminal law, or suppression  
55 of fires, is authorized or obligated by law, rule,  
56 regulation or condition of employment or service to perform;

57           (12) "Public safety officer", any firefighter,  
58 uniformed employee of the office of the state fire marshal,  
59 emergency medical technician, police officer, capitol police  
60 officer, parole officer, probation officer, state  
61 correctional employee, water safety officer, park ranger,  
62 conservation officer or highway patrolman employed by the  
63 state of Missouri or a political subdivision thereof who is  
64 killed or permanently and totally disabled in the line of  
65 duty or any emergency medical technician, air ambulance  
66 pilot, air ambulance registered professional nurse, air  
67 ambulance registered respiratory therapist, or flight crew  
68 member who is killed or permanently and totally disabled in  
69 the line of duty;

70           (13) "Permanent and total disability", a disability  
71 which renders a person unable to engage in any gainful work;

72 (14) "Spouse", the husband, wife, widow or widower of  
73 a public safety officer or employee at the time of death or  
74 permanent and total disability of such public safety officer;

75 (15) "Tuition", any tuition or incidental fee or both  
76 charged by an institution of postsecondary education, as  
77 defined in this section, for attendance at that institution  
78 by a student as a resident of this state.

79 2. Within the limits of the amounts appropriated  
80 therefor, the coordinating board for higher education shall  
81 provide, as defined in this section, a grant for either of  
82 the following to attend an institution of postsecondary  
83 education:

84 (1) An eligible child of a public safety officer or  
85 employee killed or permanently and totally disabled in the  
86 line of duty; or

87 (2) A spouse of a public safety officer killed or  
88 permanently and totally disabled in the line of duty.

89 3. An eligible child or spouse may receive a grant  
90 under this section only so long as the child or spouse is  
91 enrolled in a program leading to a certificate, or an  
92 associate or baccalaureate degree. In no event shall a  
93 child or spouse receive a grant beyond the completion of the  
94 first baccalaureate degree or, in the case of a child, age  
95 twenty-four years, except that the child may receive a grant  
96 through the completion of the semester or similar grading  
97 period in which the child reaches his twenty-fourth year.  
98 No child or spouse shall receive more than one hundred  
99 percent of tuition when combined with similar funds made  
100 available to such child or spouse.

101 4. The coordinating board for higher education shall:

102 (1) Promulgate all necessary rules and regulations for  
103 the implementation of this section;

104           (2) Determine minimum standards of performance in  
105 order for a child or spouse to remain eligible to receive a  
106 grant under this program;

107           (3) Make available on behalf of an eligible child or  
108 spouse an amount toward the child's or spouse's tuition  
109 which is equal to the grant to which the child or spouse is  
110 entitled under the provisions of this section;

111           (4) Provide the forms and determine the procedures  
112 necessary for an eligible child or spouse to apply for and  
113 receive a grant under this program.

114           5. An eligible child or spouse who is enrolled or has  
115 been accepted for enrollment as an undergraduate  
116 postsecondary student at an approved institution of  
117 postsecondary education shall receive a grant in an amount  
118 not to exceed the least of the following:

119           (1) The actual tuition, as defined in this section,  
120 charged at an approved institution where the child or spouse  
121 is enrolled or accepted for enrollment; or

122           (2) The amount of tuition charged a Missouri resident  
123 at the University of Missouri for attendance as a full-time  
124 student, as defined in section 173.205.

125           6. An eligible child or spouse who is a recipient of a  
126 grant may transfer from one approved public or private  
127 institution of postsecondary education to another without  
128 losing his entitlement under this section. The board shall  
129 make necessary adjustments in the amount of the grant. If a  
130 grant recipient at anytime withdraws from the institution of  
131 postsecondary education so that under the rules and  
132 regulations of that institution he is entitled to a refund  
133 of any tuition, fees, or other charges, the institution  
134 shall pay the portion of the refund to which he is entitled

135 attributable to the grant for that semester or similar  
136 grading period to the board.

137 7. If an eligible child or spouse is granted financial  
138 assistance under any other student aid program, public or  
139 private, the full amount of such aid shall be reported to  
140 the board by the institution and the eligible child or  
141 spouse.

142 8. Nothing in this section shall be construed as a  
143 promise or guarantee that a person will be admitted to an  
144 institution of postsecondary education or to a particular  
145 institution of postsecondary education, will be allowed to  
146 continue to attend an institution of postsecondary education  
147 after having been admitted, or will be graduated from an  
148 institution of postsecondary education.

149 9. A public safety officer who is permanently and  
150 totally disabled shall be eligible for a grant pursuant to  
151 the provisions of this section.

152 10. An eligible child of a public safety officer or  
153 employee, spouse of a public safety officer or public safety  
154 officer shall cease to be eligible for a grant pursuant to  
155 this section when such public safety officer or employee is  
156 no longer permanently and totally disabled.

190.001. Sections 190.001 to [190.245] **190.244** shall  
2 be known and may be cited as the "Comprehensive Emergency  
3 Medical Services Systems Act".

190.060. 1. An ambulance district shall have the  
2 following governmental powers, and all other powers  
3 incidental, necessary, convenient or desirable to carry out  
4 and effectuate the express powers:

5 (1) To establish and maintain an ambulance service  
6 within its corporate limits, and to acquire for, develop,  
7 expand, extend and improve such service;

8           (2) To acquire land in fee simple, rights in land and  
9 easements upon, over or across land and leasehold interests  
10 in land and tangible and intangible personal property used  
11 or useful for the location, establishment, maintenance,  
12 development, expansion, extension or improvement of an  
13 ambulance service. The acquisition may be by dedication,  
14 purchase, gift, agreement, lease, use or adverse possession;

15           (3) To operate, maintain and manage the ambulance  
16 service, and to make and enter into contracts for the use,  
17 operation or management of and to provide rules and  
18 regulations for the operation, management or use of the  
19 ambulance service;

20           (4) To fix, charge and collect reasonable fees and  
21 compensation for the use of the ambulance service according  
22 to the rules and regulations prescribed by the board from  
23 time to time;

24           (5) To borrow money and to issue bonds, notes,  
25 certificates, or other evidences of indebtedness for the  
26 purpose of accomplishing any of its corporate purposes,  
27 subject to compliance with any condition or limitation set  
28 forth in sections 190.001 to 190.090 or otherwise provided  
29 by the Constitution of the state of Missouri;

30           (6) To employ or enter into contracts for the  
31 employment of any person, firm, or corporation, and for  
32 professional services, necessary or desirable for the  
33 accomplishment of the objects of the district or the proper  
34 administration, management, protection or control of its  
35 property;

36           (7) To maintain the ambulance service for the benefit  
37 of the inhabitants of the area comprising the district  
38 regardless of race, creed or color, and to adopt such  
39 reasonable rules and regulations as may be necessary to

40 render the highest quality of emergency medical care; to  
41 exclude from the use of the ambulance service all persons  
42 who willfully disregard any of the rules and regulations so  
43 established; to extend the privileges and use of the  
44 ambulance service to persons residing outside the area of  
45 the district upon such terms and conditions as the board of  
46 directors prescribes by its rules and regulations;

47 (8) To provide for health, accident, disability and  
48 pension benefits for the salaried members of its organized  
49 ambulance district and such other benefits for the members'  
50 spouses and minor children, through either, or both, a  
51 contributory or noncontributory plan. The type and amount  
52 of such benefits shall be determined by the board of  
53 directors of the ambulance district within the level of  
54 available revenue of the pension program and other available  
55 revenue of the district. If an employee contributory plan  
56 is adopted, then at least one voting member of the board of  
57 trustees shall be a member of the ambulance district elected  
58 by the contributing members. The board of trustees shall  
59 not be the same as the board of directors;

60 (9) To purchase insurance indemnifying the district  
61 and its employees, officers, volunteers and directors  
62 against liability in rendering services incidental to the  
63 furnishing of ambulance services. Purchase of insurance  
64 pursuant to this section is not intended to waive sovereign  
65 immunity, official immunity or the Missouri public duty  
66 doctrine defenses; and

67 (10) To provide for life insurance, accident,  
68 sickness, health, disability, annuity, length of service,  
69 pension, retirement and other employee-type fringe benefits,  
70 subject to the provisions of section 70.615, for the  
71 volunteer members of any organized ambulance district and



72 such other benefits for their spouses and eligible  
73 unemancipated children, either through a contributory or  
74 noncontributory plan, or both. For purposes of this  
75 section, "eligible unemancipated child" means a natural or  
76 adopted child of an insured, or a stepchild of an insured  
77 who is domiciled with the insured, who is less than twenty-  
78 three years of age, who is not married, not employed on a  
79 full-time basis, not maintaining a separate residence except  
80 for full-time students in an accredited school or  
81 institution of higher learning, and who is dependent on  
82 parents or guardians for at least fifty percent of his or  
83 her support. The type and amount of such benefits shall be  
84 determined by the board of directors of the ambulance  
85 district within available revenues of the district,  
86 including the pension program of the district. The  
87 provision and receipt of such benefits shall not make the  
88 recipient an employee of the district. Directors who are  
89 also volunteer members may receive such benefits while  
90 serving as a director of the district.

91 2. The use of any ambulance service of a district  
92 shall be subject to the reasonable regulation and control of  
93 the district and upon such reasonable terms and conditions  
94 as shall be established by its board of directors.

95 3. A regulatory ordinance of a district adopted  
96 pursuant to any provision of this section may provide for a  
97 suspension or revocation of any rights or privileges within  
98 the control of the district for a violation of any  
99 regulatory ordinance.

100 4. Nothing in this section or in other provisions of  
101 sections 190.001 to [190.245] **190.244** shall be construed to  
102 authorize the district or board to establish or enforce any  
103 regulation or rule in respect to the operation or

104 maintenance of the ambulance service within its jurisdiction  
105 which is in conflict with any federal or state law or  
106 regulation applicable to the same subject matter.

107 5. After August 28, 1998, the board of directors of an  
108 ambulance district that proposes to contract for the total  
109 management and operation of the ambulance service, when that  
110 ambulance district has not previously contracted out for  
111 said service, shall hold a public hearing within a thirty-  
112 day period and shall make a finding that the proposed  
113 contract to manage and operate the ambulance service will:

114 (1) Provide benefits to the public health that  
115 outweigh the associated costs;

116 (2) Maintain or enhance public access to ambulance  
117 service;

118 (3) Maintain or improve the public health and promote  
119 the continued development of the regional emergency medical  
120 services system.

121 6. (1) Upon a satisfactory finding following the  
122 public hearing in subsection 5 of this section and after a  
123 sixty-day period, the ambulance district may enter into the  
124 proposed contract, however said contract shall not be  
125 implemented for at least thirty days.

126 (2) The provisions of subsection 5 of this section  
127 shall not apply to contracts which were executed prior to  
128 August 28, 1998, or to the renewal or modification of such  
129 contracts or to the signing of a new contract with an  
130 ambulance service provider for services that were previously  
131 contracted out.

132 7. All ambulance districts authorized to adopt laws,  
133 ordinances, or regulations regarding basic life support  
134 ambulances shall require such ambulances to be equipped with  
135 an automated external defibrillator and be staffed by at

136 least one individual trained in the use of an automated  
137 external defibrillator.

138 8. The ambulance district may adopt procedures for  
139 conducting fingerprint background checks on current and  
140 prospective employees, contractors, and volunteers. The  
141 ambulance district may submit applicant fingerprints to the  
142 Missouri state highway patrol, Missouri criminal records  
143 repository, for the purpose of checking the person's  
144 criminal history. The fingerprints shall be used to search  
145 the Missouri criminal records repository and shall be  
146 submitted to the Federal Bureau of Investigation to be used  
147 for searching the federal criminal history files. The  
148 fingerprints shall be submitted on forms and in the manner  
149 prescribed by the Missouri state highway patrol. Fees shall  
150 be as set forth in section 43.530.

190.098. 1. In order for a person to be eligible for  
2 certification by the department as a community paramedic, an  
3 individual shall:

4 (1) Be currently certified as a paramedic;

5 (2) Successfully complete or have successfully  
6 completed a community paramedic certification program from a  
7 college, university, or educational institution that has  
8 been approved by the department or accredited by a national  
9 accreditation organization approved by the department; and

10 (3) Complete an application form approved by the  
11 department.

12 2. A community paramedic shall practice in accordance  
13 with protocols and supervisory standards established by the  
14 medical director. A community paramedic shall provide  
15 services of a health care plan if the plan has been  
16 developed by the patient's physician or by an advanced  
17 practice registered nurse through a collaborative practice

18 arrangement with a physician or a physician assistant  
19 through a collaborative practice arrangement with a  
20 physician and there is no duplication of services to the  
21 patient from another provider.

22 3. Any ambulance service shall enter into a written  
23 contract to provide community paramedic services in another  
24 ambulance service area, as that term is defined in section  
25 190.100. The contract that is agreed upon may be for an  
26 indefinite period of time, as long as it includes at least a  
27 sixty-day cancellation notice by either ambulance service.

28 4. A community paramedic is subject to the provisions  
29 of sections 190.001 to [190.245] **190.244** and rules  
30 promulgated under sections 190.001 to [190.245] **190.244**.

31 5. No person shall hold himself or herself out as a  
32 community paramedic or provide the services of a community  
33 paramedic unless such person is certified by the department.

34 6. The medical director shall approve the  
35 implementation of the community paramedic program.

36 7. Any rule or portion of a rule, as that term is  
37 defined in section 536.010, that is created under the  
38 authority delegated in this section shall become effective  
39 only if it complies with and is subject to all of the  
40 provisions of chapter 536 and, if applicable, section  
41 536.028. This section and chapter 536 are nonseverable and  
42 if any of the powers vested with the general assembly  
43 pursuant to chapter 536 to review, to delay the effective  
44 date, or to disapprove and annul a rule are subsequently  
45 held unconstitutional, then the grant of rulemaking  
46 authority and any rule proposed or adopted after August 28,  
47 2013, shall be invalid and void.

190.100. As used in sections 190.001 to [190.245]  
2 **190.244**, the following words and terms mean:

3           (1) "Advanced emergency medical technician" or "AEMT",  
4 a person who has successfully completed a course of  
5 instruction in certain aspects of advanced life support care  
6 as prescribed by the department and is licensed by the  
7 department in accordance with sections 190.001 to [190.245]  
8 **190.244** and rules and regulations adopted by the department  
9 pursuant to sections 190.001 to [190.245] **190.244**;

10           (2) "Advanced life support (ALS)", an advanced level  
11 of care as provided to the adult and pediatric patient such  
12 as defined by national curricula, and any modifications to  
13 that curricula specified in rules adopted by the department  
14 pursuant to sections 190.001 to [190.245] **190.244**;

15           (3) "Ambulance", any privately or publicly owned  
16 vehicle or craft that is specially designed, constructed or  
17 modified, staffed or equipped for, and is intended or used,  
18 maintained or operated for the transportation of persons who  
19 are sick, injured, wounded or otherwise incapacitated or  
20 helpless, or who require the presence of medical equipment  
21 being used on such individuals, but the term does not  
22 include any motor vehicle specially designed, constructed or  
23 converted for the regular transportation of persons who are  
24 disabled, handicapped, normally using a wheelchair, or  
25 otherwise not acutely ill, or emergency vehicles used within  
26 airports;

27           (4) "Ambulance service", a person or entity that  
28 provides emergency or nonemergency ambulance transportation  
29 and services, or both, in compliance with sections 190.001  
30 to [190.245] **190.244**, and the rules promulgated by the  
31 department pursuant to sections 190.001 to [190.245] **190.244**;

32           (5) "Ambulance service area", a specific geographic  
33 area in which an ambulance service has been authorized to  
34 operate;

35 (6) "Basic life support (BLS)", a basic level of care,  
36 as provided to the adult and pediatric patient as defined by  
37 national curricula, and any modifications to that curricula  
38 specified in rules adopted by the department pursuant to  
39 sections 190.001 to [190.245] **190.244**;

40 (7) "Council", the state advisory council on emergency  
41 medical services;

42 (8) "Department", the department of health and senior  
43 services, state of Missouri;

44 (9) "Director", the director of the department of  
45 health and senior services or the director's duly authorized  
46 representative;

47 (10) "Dispatch agency", any person or organization  
48 that receives requests for emergency medical services from  
49 the public, by telephone or other means, and is responsible  
50 for dispatching emergency medical services;

51 (11) "Emergency", the sudden and, at the time,  
52 unexpected onset of a health condition that manifests itself  
53 by symptoms of sufficient severity that would lead a prudent  
54 layperson, possessing an average knowledge of health and  
55 medicine, to believe that the absence of immediate medical  
56 care could result in:

57 (a) Placing the person's health, or with respect to a  
58 pregnant woman, the health of the woman or her unborn child,  
59 in significant jeopardy;

60 (b) Serious impairment to a bodily function;

61 (c) Serious dysfunction of any bodily organ or part;

62 (d) Inadequately controlled pain;

63 (12) "Emergency medical dispatcher", a person who  
64 receives emergency calls from the public and has  
65 successfully completed an emergency medical dispatcher  
66 course, meeting or exceeding the national curriculum of the

67 United States Department of Transportation and any  
68 modifications to such curricula specified by the department  
69 through rules adopted pursuant to sections 190.001 to  
70 [190.245] **190.244**;

71 (13) "Emergency medical responder", a person who has  
72 successfully completed an emergency first response course  
73 meeting or exceeding the national curriculum of the U.S.  
74 Department of Transportation and any modifications to such  
75 curricula specified by the department through rules adopted  
76 under sections 190.001 to [190.245] **190.244** and who provides  
77 emergency medical care through employment by or in  
78 association with an emergency medical response agency;

79 (14) "Emergency medical response agency", any person  
80 that regularly provides a level of care that includes first  
81 response, basic life support or advanced life support,  
82 exclusive of patient transportation;

83 (15) "Emergency medical services for children (EMS-C)  
84 system", the arrangement of personnel, facilities and  
85 equipment for effective and coordinated delivery of  
86 pediatric emergency medical services required in prevention  
87 and management of incidents which occur as a result of a  
88 medical emergency or of an injury event, natural disaster or  
89 similar situation;

90 (16) "Emergency medical services (EMS) system", the  
91 arrangement of personnel, facilities and equipment for the  
92 effective and coordinated delivery of emergency medical  
93 services required in prevention and management of incidents  
94 occurring as a result of an illness, injury, natural  
95 disaster or similar situation;

96 (17) "Emergency medical technician", a person licensed  
97 in emergency medical care in accordance with standards  
98 prescribed by sections 190.001 to [190.245] **190.244**, and by

99 rules adopted by the department pursuant to sections 190.001  
100 to [190.245] **190.244**;

101 (18) "Emergency medical technician-basic" or "EMT-B",  
102 a person who has successfully completed a course of  
103 instruction in basic life support as prescribed by the  
104 department and is licensed by the department in accordance  
105 with standards prescribed by sections 190.001 to [190.245]  
106 **190.244** and rules adopted by the department pursuant to  
107 sections 190.001 to [190.245] **190.244**;

108 (19) "Emergency medical technician-community  
109 paramedic", "community paramedic", or "EMT-CP", a person who  
110 is certified as an emergency medical technician-paramedic  
111 and is certified by the department in accordance with  
112 standards prescribed in section 190.098;

113 (20) "Emergency medical technician-paramedic" or "EMT-  
114 P", a person who has successfully completed a course of  
115 instruction in advanced life support care as prescribed by  
116 the department and is licensed by the department in  
117 accordance with sections 190.001 to [190.245] **190.244** and  
118 rules adopted by the department pursuant to sections 190.001  
119 to [190.245] **190.244**;

120 (21) "Emergency services", health care items and  
121 services furnished or required to screen and stabilize an  
122 emergency which may include, but shall not be limited to,  
123 health care services that are provided in a licensed  
124 hospital's emergency facility by an appropriate provider or  
125 by an ambulance service or emergency medical response agency;

126 (22) "Health care facility", a hospital, nursing home,  
127 physician's office or other fixed location at which medical  
128 and health care services are performed;



129           (23) "Hospital", an establishment as defined in the  
130 hospital licensing law, subsection 2 of section 197.020, or  
131 a hospital operated by the state;

132           (24) "Medical control", supervision provided by or  
133 under the direction of physicians, or their designated  
134 registered nurse, including both online medical control,  
135 instructions by radio, telephone, or other means of direct  
136 communications, and offline medical control through  
137 supervision by treatment protocols, case review, training,  
138 and standing orders for treatment;

139           (25) "Medical direction", medical guidance and  
140 supervision provided by a physician to an emergency services  
141 provider or emergency medical services system;

142           (26) "Medical director", a physician licensed pursuant  
143 to chapter 334 designated by the ambulance service or  
144 emergency medical response agency and who meets criteria  
145 specified by the department by rules pursuant to sections  
146 190.001 to [190.245] **190.244**;

147           (27) "Memorandum of understanding", an agreement  
148 between an emergency medical response agency or dispatch  
149 agency and an ambulance service or services within whose  
150 territory the agency operates, in order to coordinate  
151 emergency medical services;

152           (28) "Patient", an individual who is sick, injured,  
153 wounded, diseased, or otherwise incapacitated or helpless,  
154 or dead, excluding deceased individuals being transported  
155 from or between private or public institutions, homes or  
156 cemeteries, and individuals declared dead prior to the time  
157 an ambulance is called for assistance;

158           (29) "Person", as used in these definitions and  
159 elsewhere in sections 190.001 to [190.245] **190.244**, any  
160 individual, firm, partnership, copartnership, joint venture,

161 association, cooperative organization, corporation,  
162 municipal or private, and whether organized for profit or  
163 not, state, county, political subdivision, state department,  
164 commission, board, bureau or fraternal organization, estate,  
165 public trust, business or common law trust, receiver,  
166 assignee for the benefit of creditors, trustee or trustee in  
167 bankruptcy, or any other service user or provider;

168 (30) "Physician", a person licensed as a physician  
169 pursuant to chapter 334;

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

174 (32) "Professional organization", any organized group  
175 or association with an ongoing interest regarding emergency  
176 medical services. Such groups and associations could  
177 include those representing volunteers, labor, management,  
178 firefighters, EMT-B's, nurses, EMT-P's, physicians,  
179 communications specialists and instructors. Organizations  
180 could also represent the interests of ground ambulance  
181 services, air ambulance services, fire service  
182 organizations, law enforcement, hospitals, trauma centers,  
183 communication centers, pediatric services, labor unions and  
184 poison control services;

185 (33) "Proof of financial responsibility", proof of  
186 ability to respond to damages for liability, on account of  
187 accidents occurring subsequent to the effective date of such  
188 proof, arising out of the ownership, maintenance or use of a  
189 motor vehicle in the financial amount set in rules  
190 promulgated by the department, but in no event less than the  
191 statutory minimum required for motor vehicles. Proof of

192 financial responsibility shall be used as proof of self-  
193 insurance;

194 (34) "Protocol", a predetermined, written medical care  
195 guideline, which may include standing orders;

196 (35) "Regional EMS advisory committee", a committee  
197 formed within an emergency medical services (EMS) region to  
198 advise ambulance services, the state advisory council on EMS  
199 and the department;

200 (36) "Specialty care transportation", the  
201 transportation of a patient requiring the services of an  
202 emergency medical technician-paramedic who has received  
203 additional training beyond the training prescribed by the  
204 department. Specialty care transportation services shall be  
205 defined in writing in the appropriate local protocols for  
206 ground and air ambulance services and approved by the local  
207 physician medical director. The protocols shall be  
208 maintained by the local ambulance service and shall define  
209 the additional training required of the emergency medical  
210 technician-paramedic;

211 (37) "Stabilize", with respect to an emergency, the  
212 provision of such medical treatment as may be necessary to  
213 attempt to assure within reasonable medical probability that  
214 no material deterioration of an individual's medical  
215 condition is likely to result from or occur during ambulance  
216 transportation unless the likely benefits of such  
217 transportation outweigh the risks;

218 (38) "State advisory council on emergency medical  
219 services", a committee formed to advise the department on  
220 policy affecting emergency medical service throughout the  
221 state;

222 (39) "State EMS medical directors advisory committee",  
223 a subcommittee of the state advisory council on emergency

224 medical services formed to advise the state advisory council  
225 on emergency medical services and the department on medical  
226 issues;

227 (40) "STEMI" or "ST-elevation myocardial infarction",  
228 a type of heart attack in which impaired blood flow to the  
229 patient's heart muscle is evidenced by ST-segment elevation  
230 in electrocardiogram analysis, and as further defined in  
231 rules promulgated by the department under sections 190.001  
232 to 190.250;

233 (41) "STEMI care", includes education and prevention,  
234 emergency transport, triage, and acute care and  
235 rehabilitative services for STEMI that requires immediate  
236 medical or surgical intervention or treatment;

237 (42) "STEMI center", a hospital that is currently  
238 designated as such by the department to care for patients  
239 with ST-segment elevation myocardial infarctions;

240 (43) "Stroke", a condition of impaired blood flow to a  
241 patient's brain as defined by the department;

242 (44) "Stroke care", includes emergency transport,  
243 triage, and acute intervention and other acute care services  
244 for stroke that potentially require immediate medical or  
245 surgical intervention or treatment, and may include  
246 education, primary prevention, acute intervention, acute and  
247 subacute management, prevention of complications, secondary  
248 stroke prevention, and rehabilitative services;

249 (45) "Stroke center", a hospital that is currently  
250 designated as such by the department;

251 (46) **"Time Critical Diagnosis (TCD)", STEMI care,**  
252 **stroke care, and trauma care occurring either outside of a**  
253 **hospital or in a center designated pursuant to section**  
254 **190.241;**

255           (47) "Time Critical Diagnosis Advisory Committee", a  
256 committee formed to advise the department on policies  
257 impacting trauma, stroke, and STEMI center designation,  
258 regulations, and the transport of trauma, stroke, and STEMI  
259 patients;

260           (48) "Trauma", an injury to human tissues and organs  
261 resulting from the transfer of energy from the environment;

262           [(47)] (49) "Trauma care" includes injury prevention,  
263 triage, acute care and rehabilitative services for major  
264 single system or multisystem **trauma** injuries that  
265 potentially require immediate medical or surgical  
266 intervention or treatment;

267           [(48)] (50) "Trauma center", a hospital that is  
268 currently designated as such by the department.

190.103. 1. One physician with expertise in emergency  
2 medical services from each of the EMS regions shall be  
3 elected by that region's EMS medical directors to serve as a  
4 regional EMS medical director. The regional EMS medical  
5 directors shall constitute the state EMS medical director's  
6 advisory committee and shall advise the department and their  
7 region's ambulance services on matters relating to medical  
8 control and medical direction in accordance with sections  
9 190.001 to [190.245] **190.244** and rules adopted by the  
10 department pursuant to sections 190.001 to [190.245]  
11 **190.244**. The regional EMS medical director shall serve a  
12 term of four years. The southwest, northwest, and Kansas  
13 City regional EMS medical directors shall be elected to an  
14 initial two-year term. The central, east central, and  
15 southeast regional EMS medical directors shall be elected to  
16 an initial four-year term. All subsequent terms following  
17 the initial terms shall be four years. The state EMS  
18 medical director shall be the chair of the state EMS medical

19 director's advisory committee, and shall be elected by the  
20 members of the regional EMS medical director's advisory  
21 committee, shall serve a term of four years, and shall seek  
22 to coordinate EMS services between the EMS regions, promote  
23 educational efforts for agency medical directors, represent  
24 Missouri EMS nationally in the role of the state EMS medical  
25 director, and seek to incorporate the EMS system into the  
26 health care system serving Missouri.

27         2. A medical director is required for all ambulance  
28 services and emergency medical response agencies that  
29 provide: advanced life support services; basic life support  
30 services utilizing medications or providing assistance with  
31 patients' medications; or basic life support services  
32 performing invasive procedures including invasive airway  
33 procedures. The medical director shall provide medical  
34 direction to these services and agencies in these instances.

35         3. The medical director, in cooperation with the  
36 ambulance service or emergency medical response agency  
37 administrator, shall have the responsibility and the  
38 authority to ensure that the personnel working under their  
39 supervision are able to provide care meeting established  
40 standards of care with consideration for state and national  
41 standards as well as local area needs and resources. The  
42 medical director, in cooperation with the ambulance service  
43 or emergency medical response agency administrator, shall  
44 establish and develop triage, treatment and transport  
45 protocols, which may include authorization for standing  
46 orders. Emergency medical technicians shall only perform  
47 those medical procedures as directed by treatment protocols  
48 approved by the local medical director or when authorized  
49 through direct communication with online medical control.

50           4. All ambulance services and emergency medical  
51 response agencies that are required to have a medical  
52 director shall establish an agreement between the service or  
53 agency and their medical director. The agreement will  
54 include the roles, responsibilities and authority of the  
55 medical director beyond what is granted in accordance with  
56 sections 190.001 to [190.245] **190.244** and rules adopted by  
57 the department pursuant to sections 190.001 to [190.245]  
58 **190.244**. The agreement shall also include grievance  
59 procedures regarding the emergency medical response agency  
60 or ambulance service, personnel and the medical director.

61           5. Regional EMS medical directors and the state EMS  
62 medical director elected as provided under subsection 1 of  
63 this section shall be considered public officials for  
64 purposes of sovereign immunity, official immunity, and the  
65 Missouri public duty doctrine defenses.

66           6. The state EMS medical director's advisory committee  
67 shall be considered a peer review committee under section  
68 537.035.

69           7. Regional EMS medical directors may act to provide  
70 online telecommunication medical direction to AEMTs, EMT-Bs,  
71 EMT-Ps, and community paramedics and provide offline medical  
72 direction per standardized treatment, triage, and transport  
73 protocols when EMS personnel, including AEMTs, EMT-Bs, EMT-  
74 Ps, and community paramedics, are providing care to special  
75 needs patients or at the request of a local EMS agency or  
76 medical director.

77           8. When developing treatment protocols for special  
78 needs patients, regional EMS medical directors may  
79 promulgate such protocols on a regional basis across  
80 multiple political subdivisions' jurisdictional boundaries,  
81 and such protocols may be used by multiple agencies

82 including, but not limited to, ambulance services, emergency  
83 response agencies, and public health departments. Treatment  
84 protocols shall include steps to ensure the receiving  
85 hospital is informed of the pending arrival of the special  
86 needs patient, the condition of the patient, and the  
87 treatment instituted.

88 9. Multiple EMS agencies including, but not limited  
89 to, ambulance services, emergency response agencies, and  
90 public health departments shall take necessary steps to  
91 follow the regional EMS protocols established as provided  
92 under subsection 8 of this section in cases of mass casualty  
93 or state-declared disaster incidents.

94 10. When regional EMS medical directors develop and  
95 implement treatment protocols for patients or provide online  
96 medical direction for patients, such activity shall not be  
97 construed as having usurped local medical direction  
98 authority in any manner.

99 11. Notwithstanding any other provision of law to the  
100 contrary, when regional EMS medical directors are providing  
101 either online telecommunication medical direction to AEMTs,  
102 EMT-Bs, EMT-Ps, and community paramedics, or offline medical  
103 direction per standardized EMS treatment, triage, and  
104 transport protocols for patients, those medical directions  
105 or treatment protocols may include the administration of the  
106 patient's own prescription medications.

190.104. 1. The department is authorized to establish  
2 a program to improve the quality of emergency care for  
3 pediatric patients throughout the state and to implement a  
4 comprehensive pediatric emergency medical services system in  
5 accordance with standards prescribed by sections 190.001 to  
6 [190.245] **190.244** and rules adopted by the department  
7 pursuant to sections 190.001 to [190.245] **190.244**.



8           2. The department is authorized to receive  
9 contributions, grants, donations or funds from any private  
10 entity to be expended for the program authorized pursuant to  
11 this section.

          190.105. 1. No person, either as owner, agent or  
2 otherwise, shall furnish, operate, conduct, maintain,  
3 advertise, or otherwise be engaged in or profess to be  
4 engaged in the business or service of the transportation of  
5 patients by ambulance in the air, upon the streets, alleys,  
6 or any public way or place of the state of Missouri unless  
7 such person holds a currently valid license from the  
8 department for an ambulance service issued pursuant to the  
9 provisions of sections 190.001 to [190.245] **190.244**.

10           2. No ground ambulance shall be operated for ambulance  
11 purposes, and no individual shall drive, attend or permit it  
12 to be operated for such purposes in the state of Missouri  
13 unless the ground ambulance is under the immediate  
14 supervision and direction of a person who is holding a  
15 currently valid Missouri license as an emergency medical  
16 technician. Nothing in this section shall be construed to  
17 mean that a duly registered nurse, a duly licensed  
18 physician, or a duly licensed physician assistant be  
19 required to hold an emergency medical technician's license.  
20 When a physician assistant is in attendance with a patient  
21 on an ambulance, the physician assistant shall be exempt  
22 from any mileage limitations in any collaborative practice  
23 arrangement prescribed under law. Each ambulance service is  
24 responsible for assuring that any person driving its  
25 ambulance is competent in emergency vehicle operations and  
26 has a safe driving record. Each ground ambulance shall be  
27 staffed with at least two licensed individuals when  
28 transporting a patient, except as provided in section

29 190.094. In emergency situations which require additional  
30 medical personnel to assist the patient during  
31 transportation, an emergency medical responder, firefighter,  
32 or law enforcement personnel with a valid driver's license  
33 and prior experience with driving emergency vehicles may  
34 drive the ground ambulance provided the ground ambulance  
35 service stipulates to this practice in operational policies.

36 3. No license shall be required for an ambulance  
37 service, or for the attendant of an ambulance, which:

38 (1) Is rendering assistance in the case of an  
39 emergency, major catastrophe or any other unforeseen event  
40 or series of events which jeopardizes the ability of the  
41 local ambulance service to promptly respond to emergencies;  
42 or

43 (2) Is operated from a location or headquarters  
44 outside of Missouri in order to transport patients who are  
45 picked up beyond the limits of Missouri to locations within  
46 or outside of Missouri, but no such outside ambulance shall  
47 be used to pick up patients within Missouri for  
48 transportation to locations within Missouri, except as  
49 provided in subdivision (1) of this subsection.

50 4. The issuance of a license pursuant to the  
51 provisions of sections 190.001 to [190.245] **190.244** shall  
52 not be construed so as to authorize any person to provide  
53 ambulance services or to operate any ambulances without a  
54 franchise in any city not within a county or in a political  
55 subdivision in any county with a population of over nine  
56 hundred thousand inhabitants, or a franchise, contract or  
57 mutual-aid agreement in any other political subdivision  
58 which has enacted an ordinance making it unlawful to do so.

59 5. Sections 190.001 to [190.245] **190.244** shall not  
60 preclude the adoption of any law, ordinance or regulation

61 not in conflict with such sections by any city not within a  
62 county, or at least as strict as such sections by any  
63 county, municipality or political subdivision except that no  
64 such regulations or ordinances shall be adopted by a  
65 political subdivision in a county with a population of over  
66 nine hundred thousand inhabitants except by the county's  
67 governing body.

68         6. In a county with a population of over nine hundred  
69 thousand inhabitants, the governing body of the county shall  
70 set the standards for all ambulance services which shall  
71 comply with subsection 5 of this section. All such  
72 ambulance services must be licensed by the department. The  
73 governing body of such county shall not prohibit a licensed  
74 ambulance service from operating in the county, as long as  
75 the ambulance service meets county standards.

76         7. An ambulance service or vehicle when operated for  
77 the purpose of transporting persons who are sick, injured,  
78 or otherwise incapacitated shall not be treated as a common  
79 or contract carrier under the jurisdiction of the Missouri  
80 division of motor carrier and railroad safety.

81         8. Sections 190.001 to [190.245] **190.244** shall not  
82 apply to, nor be construed to include, any motor vehicle  
83 used by an employer for the transportation of such  
84 employer's employees whose illness or injury occurs on  
85 private property, and not on a public highway or property,  
86 nor to any person operating such a motor vehicle.

87         9. A political subdivision that is authorized to  
88 operate a licensed ambulance service may establish, operate,  
89 maintain and manage its ambulance service, and select and  
90 contract with a licensed ambulance service. Any political  
91 subdivision may contract with a licensed ambulance service.

92           10. Except as provided in subsections 5 and 6, nothing  
93 in section 67.300, or subsection 2 of section 190.109, shall  
94 be construed to authorize any municipality or county which  
95 is located within an ambulance district or a fire protection  
96 district that is authorized to provide ambulance service to  
97 promulgate laws, ordinances or regulations related to the  
98 provision of ambulance services. This provision shall not  
99 apply to any municipality or county which operates an  
100 ambulance service established prior to August 28, 1998.

101           11. Nothing in section 67.300 or subsection 2 of  
102 section 190.109 shall be construed to authorize any  
103 municipality or county which is located within an ambulance  
104 district or a fire protection district that is authorized to  
105 provide ambulance service to operate an ambulance service  
106 without a franchise in an ambulance district or a fire  
107 protection district that is authorized to provide ambulance  
108 service which has enacted an ordinance making it unlawful to  
109 do so. This provision shall not apply to any municipality  
110 or county which operates an ambulance service established  
111 prior to August 28, 1998.

112           12. No provider of ambulance service within the state  
113 of Missouri which is licensed by the department to provide  
114 such service shall discriminate regarding treatment or  
115 transportation of emergency patients on the basis of race,  
116 sex, age, color, religion, sexual preference, national  
117 origin, ancestry, handicap, medical condition or ability to  
118 pay.

119           13. No provision of this section, other than  
120 subsections 5, 6, 10 and 11 of this section, is intended to  
121 limit or supersede the powers given to ambulance districts  
122 pursuant to this chapter or to fire protection districts

123 pursuant to chapter 321, or to counties, cities, towns and  
124 villages pursuant to chapter 67.

125 14. Upon the sale or transfer of any ground ambulance  
126 service ownership, the owner of such service shall notify  
127 the department of the change in ownership within thirty days  
128 of such sale or transfer. After receipt of such notice, the  
129 department shall conduct an inspection of the ambulance  
130 service to verify compliance with the licensure standards of  
131 sections 190.001 to ~~[190.245]~~ **190.244**.

190.108. 1. The department shall, within a reasonable  
2 time after receipt of an application, cause such  
3 investigation as the department deems necessary to be made  
4 of the applicant for an air ambulance license.

5 2. The department shall have the authority and  
6 responsibility to license an air ambulance service in  
7 accordance with sections 190.001 to ~~[190.245]~~ **190.244**, and  
8 in accordance with rules adopted by the department pursuant  
9 to sections 190.001 to ~~[190.245]~~ **190.244**. The department  
10 may promulgate rules relating to the requirements for an air  
11 ambulance license including, but not limited to:

- 12 (1) Medical control plans;
- 13 (2) Medical director qualifications;
- 14 (3) Air medical staff qualifications;
- 15 (4) Response and operations standards to assure that  
16 the health and safety needs of the public are met;
- 17 (5) Standards for air medical communications;
- 18 (6) Criteria for compliance with licensure  
19 requirements;
- 20 (7) Records and forms;
- 21 (8) Equipment requirements;
- 22 (9) Five-year license renewal;
- 23 (10) Quality improvement committees; and

24           (11) Response time, patient care and transportation  
25 standards.

26           3. Application for an air ambulance service license  
27 shall be made upon such forms as prescribed by the  
28 department in rules adopted pursuant to sections 190.001 to  
29 **[190.245] 190.244**. The application form shall contain such  
30 information as the department deems necessary to make a  
31 determination as to whether the air ambulance service meets  
32 all the requirements of sections 190.001 to **[190.245]**  
33 **190.244** and rules promulgated pursuant to sections 190.001  
34 to **[190.245] 190.244**.

35           4. Upon the sale or transfer of any air ambulance  
36 service ownership, the owner of such service shall notify  
37 the department of the change in ownership within thirty days  
38 of such sale or transfer. After receipt of such notice, the  
39 department shall conduct an inspection of the ambulance  
40 service to verify compliance with the licensure standards of  
41 sections 190.001 to **[190.245] 190.244**.

190.109. 1. The department shall, within a reasonable  
2 time after receipt of an application, cause such  
3 investigation as the department deems necessary to be made  
4 of the applicant for a ground ambulance license.

5           2. Any person that owned and operated a licensed  
6 ambulance on December 31, 1997, shall receive an ambulance  
7 service license from the department, unless suspended,  
8 revoked or terminated, for that ambulance service area which  
9 was, on December 31, 1997, described and filed with the  
10 department as the primary service area for its licensed  
11 ambulances on August 28, 1998, provided that the person  
12 makes application and adheres to the rules and regulations  
13 promulgated by the department pursuant to sections 190.001  
14 to 190.245.

15           3. The department shall issue a new ground ambulance  
16 service license to an ambulance service that is not  
17 currently licensed by the department, or is currently  
18 licensed by the department and is seeking to expand its  
19 ambulance service area, except as provided in subsection 4  
20 of this section, to be valid for a period of five years,  
21 unless suspended, revoked or terminated, when the director  
22 finds that the applicant meets the requirements of ambulance  
23 service licensure established pursuant to sections 190.100  
24 to [190.245] **190.244** and the rules adopted by the department  
25 pursuant to sections 190.001 to [190.245] **190.244**. In order  
26 to be considered for a new ambulance service license, an  
27 ambulance service shall submit to the department a letter of  
28 endorsement from each ambulance district or fire protection  
29 district that is authorized to provide ambulance service, or  
30 from each municipality not within an ambulance district or  
31 fire protection district that is authorized to provide  
32 ambulance service, in which the ambulance service proposes  
33 to operate. If an ambulance service proposes to operate in  
34 unincorporated portions of a county not within an ambulance  
35 district or fire protection district that is authorized to  
36 provide ambulance service, in order to be considered for a  
37 new ambulance service license, the ambulance service shall  
38 submit to the department a letter of endorsement from the  
39 county. Any letter of endorsement required pursuant to this  
40 section shall verify that the political subdivision has  
41 conducted a public hearing regarding the endorsement and  
42 that the governing body of the political subdivision has  
43 adopted a resolution approving the endorsement. The letter  
44 of endorsement shall affirmatively state that the proposed  
45 ambulance service:

- 46           (1) Will provide a benefit to public health that  
47 outweighs the associated costs;
- 48           (2) Will maintain or enhance the public's access to  
49 ambulance services;
- 50           (3) Will maintain or improve the public health and  
51 promote the continued development of the regional emergency  
52 medical service system;
- 53           (4) Has demonstrated the appropriate expertise in the  
54 operation of ambulance services; and
- 55           (5) Has demonstrated the financial resources necessary  
56 for the operation of the proposed ambulance service.

57           4. A contract between a political subdivision and a  
58 licensed ambulance service for the provision of ambulance  
59 services for that political subdivision shall expand,  
60 without further action by the department, the ambulance  
61 service area of the licensed ambulance service to include  
62 the jurisdictional boundaries of the political subdivision.  
63 The termination of the aforementioned contract shall result  
64 in a reduction of the licensed ambulance service's ambulance  
65 service area by removing the geographic area of the  
66 political subdivision from its ambulance service area,  
67 except that licensed ambulance service providers may provide  
68 ambulance services as are needed at and around the state  
69 fair grounds for protection of attendees at the state fair.

70           5. The department shall renew a ground ambulance  
71 service license if the applicant meets the requirements  
72 established pursuant to sections 190.001 to [190.245]  
73 **190.244**, and the rules adopted by the department pursuant to  
74 sections 190.001 to [190.245] **190.244**.

75           6. The department shall promulgate rules relating to  
76 the requirements for a ground ambulance service license  
77 including, but not limited to:



- 78           (1) Vehicle design, specification, operation and  
79 maintenance standards;
- 80           (2) Equipment requirements;
- 81           (3) Staffing requirements;
- 82           (4) Five-year license renewal;
- 83           (5) Records and forms;
- 84           (6) Medical control plans;
- 85           (7) Medical director qualifications;
- 86           (8) Standards for medical communications;
- 87           (9) Memorandums of understanding with emergency  
88 medical response agencies that provide advanced life support;
- 89           (10) Quality improvement committees; and
- 90           (11) Response time, patient care and transportation  
91 standards.

92           7. Application for a ground ambulance service license  
93 shall be made upon such forms as prescribed by the  
94 department in rules adopted pursuant to sections 190.001 to  
95 **[190.245] 190.244**. The application form shall contain such  
96 information as the department deems necessary to make a  
97 determination as to whether the ground ambulance service  
98 meets all the requirements of sections 190.001 to **[190.245]**  
99 **190.244** and rules promulgated pursuant to sections 190.001  
100 to **[190.245] 190.244**.

190.120. 1. No ambulance service license shall be  
2 issued pursuant to sections 190.001 to **[190.245] 190.244**,  
3 nor shall such license be valid after issuance, nor shall  
4 any ambulance be operated in Missouri unless there is at all  
5 times in force and effect insurance coverage or proof of  
6 financial responsibility with adequate reserves maintained  
7 for each and every ambulance owned or operated by or for the  
8 applicant or licensee to provide for the payment of damages  
9 in an amount as prescribed in regulation:

10           (1) For injury to or death of individuals in accidents  
11 resulting from any cause for which the owner of such vehicle  
12 would be liable on account of liability imposed on him or  
13 her by law, regardless of whether the ambulance was being  
14 driven by the owner or the owner's agent; and

15           (2) For the loss of or damage to the property of  
16 another, including personal property, under like  
17 circumstances.

18           2. The insurance policy or proof of financial  
19 responsibility shall be submitted by all licensees required  
20 to provide such insurance pursuant to sections 190.001 to  
21 [190.245] **190.244**. The insurance policy, or proof of the  
22 existence of financial responsibility, shall be submitted to  
23 the director, in such form as the director may specify, for  
24 the director's approval prior to the issuance of each  
25 ambulance service license.

26           3. Every insurance policy or proof of financial  
27 responsibility document required by the provisions of this  
28 section shall contain proof of a provision for a continuing  
29 liability thereunder to the full amount thereof,  
30 notwithstanding any recovery thereon; that the liability of  
31 the insurer shall not be affected by the insolvency or the  
32 bankruptcy of the assured; and that until the policy is  
33 revoked the insurance company or self-insured licensee or  
34 entity will not be relieved from liability on account of  
35 nonpayment of premium, failure to renew license at the end  
36 of the year, or any act or omission of the named assured.  
37 Such policy of insurance or self-insurance shall be further  
38 conditioned for the payment of any judgments up to the  
39 limits of such policy, recovered against any person other  
40 than the owner, the owner's agent or employee, who may  
41 operate the same with the consent of the owner.

42           4. Every insurance policy or self-insured licensee or  
43 entity as required by the provisions of this section shall  
44 extend for the period to be covered by the license applied  
45 for and the insurer shall be obligated to give not less than  
46 thirty days' written notice to the director and to the  
47 insured before any cancellation or termination thereof  
48 earlier than its expiration date, and the cancellation or  
49 other termination of any such policy shall automatically  
50 revoke and terminate the licenses issued for the ambulance  
51 service covered by such policy unless covered by another  
52 insurance policy in compliance with sections 190.001 to  
53 **[190.245] 190.244.**

          190.131. 1. The department shall accredit or certify  
2 training entities for emergency medical responders,  
3 emergency medical dispatchers, and emergency medical  
4 technicians, for a period of five years, if the applicant  
5 meets the requirements established pursuant to sections  
6 190.001 to **[190.245] 190.244.**

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

          3. Application for training entity accreditation or  
12 certification shall be made upon such forms as prescribed by  
13 the department in rules adopted pursuant to sections 190.001  
14 to **[190.245] 190.244.** The application form shall contain  
15 such information as the department deems reasonably  
16 necessary to make a determination as to whether the training  
17 entity meets all requirements of sections 190.001 to  
18 **[190.245] 190.244** and rules promulgated pursuant to sections  
19 190.001 to **[190.245] 190.244.**

20           4. Upon receipt of such application for training  
21 entity accreditation or certification, the department shall  
22 determine whether the training entity, its instructors,  
23 facilities, equipment, curricula and medical oversight meet  
24 the requirements of sections 190.001 to [190.245] **190.244**  
25 and rules promulgated pursuant to sections 190.001 to  
26 [190.245] **190.244**.

27           5. Upon finding these requirements satisfied, the  
28 department shall issue a training entity accreditation or  
29 certification in accordance with rules promulgated by the  
30 department pursuant to sections 190.001 to [190.245] **190.244**.

31           6. Subsequent to the issuance of a training entity  
32 accreditation or certification, the department shall cause a  
33 periodic review of the training entity to assure continued  
34 compliance with the requirements of sections 190.001 to  
35 [190.245] **190.244** and all rules promulgated pursuant to  
36 sections 190.001 to [190.245] **190.244**.

37           7. No person or entity shall hold itself out or  
38 provide training required by this section without  
39 accreditation or certification by the department.

190.133. 1. The department shall, within a reasonable  
2 time after receipt of an application, cause such  
3 investigation as the department deems necessary to be made  
4 of the applicant for an emergency medical response agency  
5 license.

6           2. The department shall issue a license to any  
7 emergency medical response agency which provides advanced  
8 life support if the applicant meets the requirements  
9 established pursuant to sections 190.001 to [190.245]  
10 **190.244**, and the rules adopted by the department pursuant to  
11 sections 190.001 to [190.245] **190.244**. The department may  
12 promulgate rules relating to the requirements for an

13 emergency medical response agency including, but not limited  
14 to:

- 15 (1) A licensure period of five years;
- 16 (2) Medical direction;
- 17 (3) Records and forms; and
- 18 (4) Memorandum of understanding with local ambulance  
19 services.

20 3. Application for an emergency medical response  
21 agency license shall be made upon such forms as prescribed  
22 by the department in rules adopted pursuant to sections  
23 190.001 to [190.245] **190.244**. The application form shall  
24 contain such information as the department deems necessary  
25 to make a determination as to whether the emergency medical  
26 response agency meets all the requirements of sections  
27 190.001 to [190.245] **190.244** and rules promulgated pursuant  
28 to sections 190.001 to [190.245] **190.244**.

29 4. No person or entity shall hold itself out as an  
30 emergency medical response agency that provides advanced  
31 life support or provide the services of an emergency medical  
32 response agency that provides advanced life support unless  
33 such person or entity is licensed by the department.

190.142. 1. (1) For applications submitted before  
2 the recognition of EMS personnel licensure interstate  
3 compact under sections 190.900 to 190.939 takes effect, the  
4 department shall, within a reasonable time after receipt of  
5 an application, cause such investigation as it deems  
6 necessary to be made of the applicant for an emergency  
7 medical technician's license.

8 (2) For applications submitted after the recognition  
9 of EMS personnel licensure interstate compact under sections  
10 190.900 to 190.939 takes effect, an applicant for initial  
11 licensure as an emergency medical technician in this state

12 shall submit to a background check by the Missouri state  
13 highway patrol and the Federal Bureau of Investigation  
14 through a process approved by the department of health and  
15 senior services. Such processes may include the use of  
16 vendors or systems administered by the Missouri state  
17 highway patrol. The department may share the results of  
18 such a criminal background check with any emergency services  
19 licensing agency in any member state, as that term is  
20 defined under section 190.900, in recognition of the EMS  
21 personnel licensure interstate compact. The department  
22 shall not issue a license until the department receives the  
23 results of an applicant's criminal background check from the  
24 Missouri state highway patrol and the Federal Bureau of  
25 Investigation, but, notwithstanding this subsection, the  
26 department may issue a temporary license as provided under  
27 section 190.143. Any fees due for a criminal background  
28 check shall be paid by the applicant.

29 (3) The director may authorize investigations into  
30 criminal records in other states for any applicant.

31 2. The department shall issue a license to all levels  
32 of emergency medical technicians, for a period of five  
33 years, if the applicant meets the requirements established  
34 pursuant to sections 190.001 to [190.245] **190.244** and the  
35 rules adopted by the department pursuant to sections 190.001  
36 to [190.245] **190.244**. The department may promulgate rules  
37 relating to the requirements for an emergency medical  
38 technician including but not limited to:

39 (1) Age requirements;

40 (2) Emergency medical technician and paramedic  
41 education and training requirements based on respective  
42 National Emergency Medical Services Education Standards and  
43 any modification to such curricula specified by the

44 department through rules adopted pursuant to sections  
45 190.001 to [190.245] **190.244**;

46 (3) Paramedic accreditation requirements. Paramedic  
47 training programs shall be accredited by the Commission on  
48 Accreditation of Allied Health Education Programs (CAAHEP)  
49 or hold a CAAHEP letter of review;

50 (4) Initial licensure testing requirements. Initial  
51 EMT-P licensure testing shall be through the national  
52 registry of EMTs;

53 (5) Continuing education and relicensure requirements;  
54 and

55 (6) Ability to speak, read and write the English  
56 language.

57 3. Application for all levels of emergency medical  
58 technician license shall be made upon such forms as  
59 prescribed by the department in rules adopted pursuant to  
60 sections 190.001 to [190.245] **190.244**. The application form  
61 shall contain such information as the department deems  
62 necessary to make a determination as to whether the  
63 emergency medical technician meets all the requirements of  
64 sections 190.001 to [190.245] **190.244** and rules promulgated  
65 pursuant to sections 190.001 to [190.245] **190.244**.

66 4. All levels of emergency medical technicians may  
67 perform only that patient care which is:

68 (1) Consistent with the training, education and  
69 experience of the particular emergency medical technician;  
70 and

71 (2) Ordered by a physician or set forth in protocols  
72 approved by the medical director.

73 5. No person shall hold themselves out as an emergency  
74 medical technician or provide the services of an emergency

75 medical technician unless such person is licensed by the  
76 department.

77         6. Any rule or portion of a rule, as that term is  
78 defined in section 536.010, that is created under the  
79 authority delegated in this section shall become effective  
80 only if it complies with and is subject to all of the  
81 provisions of chapter 536 and, if applicable, section  
82 536.028. This section and chapter 536 are nonseverable and  
83 if any of the powers vested with the general assembly  
84 pursuant to chapter 536 to review, to delay the effective  
85 date, or to disapprove and annul a rule are subsequently  
86 held unconstitutional, then the grant of rulemaking  
87 authority and any rule proposed or adopted after August 28,  
88 2002, shall be invalid and void.

       190.143. 1. Notwithstanding any other provisions of  
2 law, the department may grant a ninety-day temporary  
3 emergency medical technician license to all levels of  
4 emergency medical technicians who meet the following:

5         (1) Can demonstrate that they have, or will have,  
6 employment requiring an emergency medical technician license;

7         (2) Are not currently licensed as an emergency medical  
8 technician in Missouri or have been licensed as an emergency  
9 medical technician in Missouri and fingerprints need to be  
10 submitted to the Federal Bureau of Investigation to verify  
11 the existence or absence of a criminal history, or they are  
12 currently licensed and the license will expire before a  
13 verification can be completed of the existence or absence of  
14 a criminal history;

15         (3) Have submitted a complete application upon such  
16 forms as prescribed by the department in rules adopted  
17 pursuant to sections 190.001 to [190.245] **190.244**;



18           (4) Have not been disciplined pursuant to sections  
19 190.001 to [190.245] **190.244** and rules promulgated pursuant  
20 to sections 190.001 to [190.245] **190.244**;

21           (5) Meet all the requirements of rules promulgated  
22 pursuant to sections 190.001 to [190.245] **190.244**.

23           2. A temporary emergency medical technician license  
24 shall only authorize the license to practice while under the  
25 immediate supervision of a licensed emergency medical  
26 technician, registered nurse, physician assistant, or  
27 physician who is currently licensed, without restrictions,  
28 to practice in Missouri.

29           3. A temporary emergency medical technician license  
30 shall automatically expire either ninety days from the date  
31 of issuance or upon the issuance of a five-year emergency  
32 medical technician license.

          190.146. Any licensee allowing a license to lapse may  
2 within two years of the lapse request that their license be  
3 returned to active status by notifying the department in  
4 advance of such intention, and submit a complete application  
5 upon such forms as prescribed by the department in rules  
6 adopted pursuant to sections 190.001 to [190.245] **190.244**.  
7 If the licensee meets all the requirements for relicensure,  
8 the department shall issue a new emergency medical  
9 technician license to the licensee.

          190.160. The renewal of any license shall require  
2 conformance with sections 190.001 to [190.245] **190.244** and  
3 sections 190.525 to 190.537, and rules adopted by the  
4 department pursuant to sections 190.001 to [190.245] **190.244**  
5 and sections 190.525 to 190.537.

          190.165. 1. The department may refuse to issue or  
2 deny renewal of any certificate, permit or license required  
3 pursuant to sections 190.100 to [190.245] **190.244** for

4 failure to comply with the provisions of sections 190.100 to  
5 [190.245] **190.244** or any lawful regulations promulgated by  
6 the department to implement its provisions as described in  
7 subsection 2 of this section. The department shall notify  
8 the applicant in writing of the reasons for the refusal and  
9 shall advise the applicant of his or her right to file a  
10 complaint with the administrative hearing commission as  
11 provided by chapter 621.

12 2. The department may cause a complaint to be filed  
13 with the administrative hearing commission as provided by  
14 chapter 621 against any holder of any certificate, permit or  
15 license required by sections 190.100 to [190.245] **190.244** or  
16 any person who has failed to renew or has surrendered his or  
17 her certificate, permit or license for failure to comply  
18 with the provisions of sections 190.100 to [190.245] **190.244**  
19 or any lawful regulations promulgated by the department to  
20 implement such sections. Those regulations shall be limited  
21 to the following:

22 (1) Use or unlawful possession of any controlled  
23 substance, as defined in chapter 195, or alcoholic beverage  
24 to an extent that such use impairs a person's ability to  
25 perform the work of any activity licensed or regulated by  
26 sections 190.100 to [190.245] **190.244**;

27 (2) Being finally adjudicated and found guilty, or  
28 having entered a plea of guilty or nolo contendere, in a  
29 criminal prosecution under the laws of any state or of the  
30 United States, for any offense reasonably related to the  
31 qualifications, functions or duties of any activity licensed  
32 or regulated pursuant to sections 190.100 to [190.245]  
33 **190.244**, for any offense an essential element of which is  
34 fraud, dishonesty or an act of violence, or for any offense

35 involving moral turpitude, whether or not sentence is  
36 imposed;

37 (3) Use of fraud, deception, misrepresentation or  
38 bribery in securing any certificate, permit or license  
39 issued pursuant to sections 190.100 to [190.245] **190.244** or  
40 in obtaining permission to take any examination given or  
41 required pursuant to sections 190.100 to [190.245] **190.244**;

42 (4) Obtaining or attempting to obtain any fee, charge,  
43 tuition or other compensation by fraud, deception or  
44 misrepresentation;

45 (5) Incompetency, misconduct, gross negligence, fraud,  
46 misrepresentation or dishonesty in the performance of the  
47 functions or duties of any activity licensed or regulated by  
48 sections 190.100 to [190.245] **190.244**;

49 (6) Violation of, or assisting or enabling any person  
50 to violate, any provision of sections 190.100 to [190.245]  
51 **190.244**, or of any lawful rule or regulation adopted by the  
52 department pursuant to sections 190.100 to [190.245] **190.244**;

53 (7) Impersonation of any person holding a certificate,  
54 permit or license or allowing any person to use his or her  
55 certificate, permit, license or diploma from any school;

56 (8) Disciplinary action against the holder of a  
57 license or other right to practice any activity regulated by  
58 sections 190.100 to [190.245] **190.244** granted by another  
59 state, territory, federal agency or country upon grounds for  
60 which revocation or suspension is authorized in this state;

61 (9) For an individual being finally adjudged insane or  
62 incompetent by a court of competent jurisdiction;

63 (10) Assisting or enabling any person to practice or  
64 offer to practice any activity licensed or regulated by  
65 sections 190.100 to [190.245] **190.244** who is not licensed

66 and currently eligible to practice pursuant to sections  
67 190.100 to [190.245] **190.244**;

68 (11) Issuance of a certificate, permit or license  
69 based upon a material mistake of fact;

70 (12) Violation of any professional trust, confidence,  
71 or legally protected privacy rights of a patient by means of  
72 an unauthorized or unlawful disclosure;

73 (13) Use of any advertisement or solicitation which is  
74 false, misleading or deceptive to the general public or  
75 persons to whom the advertisement or solicitation is  
76 primarily directed;

77 (14) Violation of the drug laws or rules and  
78 regulations of this state, any other state or the federal  
79 government;

80 (15) Refusal of any applicant or licensee to respond  
81 to reasonable department of health and senior services'  
82 requests for necessary information to process an application  
83 or to determine license status or license eligibility;

84 (16) Any conduct or practice which is or might be  
85 harmful or dangerous to the mental or physical health or  
86 safety of a patient or the public;

87 (17) Repeated acts of negligence or recklessness in  
88 the performance of the functions or duties of any activity  
89 licensed or regulated by sections 190.100 to [190.245]  
90 **190.244**.

91 3. If the department conducts investigations, the  
92 department, prior to interviewing a licensee who is the  
93 subject of the investigation, shall explain to the licensee  
94 that he or she has the right to:

95 (1) Consult legal counsel or have legal counsel  
96 present;

97           (2) Have anyone present whom he or she deems to be  
98 necessary or desirable; and

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

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

104           4. After the filing of such complaint, the proceedings  
105 shall be conducted in accordance with the provisions of  
106 chapter 621. Upon a finding by the administrative hearing  
107 commission that the grounds, provided in subsection 2 of  
108 this section, for disciplinary action are met, the  
109 department may, singly or in combination, censure or place  
110 the person named in the complaint on probation on such terms  
111 and conditions as the department deems appropriate for a  
112 period not to exceed five years, or may suspend, for a  
113 period not to exceed three years, or revoke the license,  
114 certificate or permit. Notwithstanding any provision of law  
115 to the contrary, the department shall be authorized to  
116 impose a suspension or revocation as a disciplinary action  
117 only if it first files the requisite complaint with the  
118 administrative hearing commission. The administrative  
119 hearing commission shall hear all relevant evidence on  
120 remediation activities of the licensee and shall make a  
121 recommendation to the department of health and senior  
122 services as to licensure disposition based on such evidence.

123           5. An individual whose license has been revoked shall  
124 wait one year from the date of revocation to apply for  
125 relicensure. Relicensure shall be at the discretion of the  
126 department after compliance with all the requirements of  
127 sections 190.100 to [190.245] **190.244** relative to the

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

131 6. The department may notify the proper licensing  
132 authority of any other state in which the person whose  
133 license was suspended or revoked was also licensed of the  
134 suspension or revocation.

135 7. Any person, organization, association or  
136 corporation who reports or provides information to the  
137 department pursuant to the provisions of sections 190.100 to  
138 [190.245] **190.244** and who does so in good faith shall not be  
139 subject to an action for civil damages as a result thereof.

140 8. The department of health and senior services may  
141 suspend any certificate, permit or license required pursuant  
142 to sections 190.100 to [190.245] **190.244** simultaneously with  
143 the filing of the complaint with the administrative hearing  
144 commission as set forth in subsection 2 of this section, if  
145 the department finds that there is an imminent threat to the  
146 public health. The notice of suspension shall include the  
147 basis of the suspension and notice of the right to appeal  
148 such suspension. The licensee may appeal the decision to  
149 suspend the license, certificate or permit to the  
150 department. The appeal shall be filed within ten days from  
151 the date of the filing of the complaint. A hearing shall be  
152 conducted by the department within ten days from the date  
153 the appeal is filed. The suspension shall continue in  
154 effect until the conclusion of the proceedings, including  
155 review thereof, unless sooner withdrawn by the department,  
156 dissolved by a court of competent jurisdiction or stayed by  
157 the administrative hearing commission.

190.171. Any person aggrieved by an official action of  
2 the department of health and senior services affecting the

3 licensed status of a person pursuant to the provisions of  
4 sections 190.001 to [190.245] **190.244** and sections 190.525  
5 to 190.537, including the refusal to grant, the grant, the  
6 revocation, the suspension, or the failure to renew a  
7 license, may seek a determination thereon by the  
8 administrative hearing commission pursuant to the provisions  
9 of section 621.045, and it shall not be a condition to such  
10 determination that the person aggrieved seek a  
11 reconsideration, a rehearing, or exhaust any other procedure  
12 within the department of health and senior services or the  
13 department of social services.

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

14 2. Any information regarding the identity, name,  
15 address, license, final disciplinary action taken, currency  
16 of the license, permit, or certificate of an applicant for  
17 or a person possessing a license, permit, or certificate in  
18 accordance with sections 190.100 to [190.245] **190.244** shall  
19 not be confidential.

20 3. Any information regarding the physical address,  
21 mailing address, phone number, fax number, or email address

22 of a licensed ambulance service or a certified training  
23 entity, including the name of the medical director and  
24 organizational contact information, shall not be  
25 confidential.

26 4. This section shall not be construed to authorize  
27 the release of records, reports, or other information which  
28 may be held in department files for any holder of or  
29 applicant for any certificate, permit, or license that is  
30 subject to other specific state or federal laws concerning  
31 their disclosure.

32 5. Nothing in this section shall prohibit the  
33 department from releasing aggregate information in  
34 accordance with section 192.067.

190.176. 1. The department shall develop and  
2 administer a uniform data collection system on all ambulance  
3 runs and injured patients, pursuant to rules promulgated by  
4 the department for the purpose of injury etiology, patient  
5 care outcome, injury and disease prevention and research  
6 purposes. The department shall not require disclosure by  
7 hospitals of data elements pursuant to this section unless  
8 those data elements are required by a federal agency or were  
9 submitted to the department as of January 1, 1998, pursuant  
10 to:

- 11 (1) Departmental regulation of trauma centers; or
- 12 (2) **[The Missouri brain and spinal cord injury**  
13 **registry established by sections 192.735 to 192.745; or**
- 14 **(3)]** Abstracts of inpatient hospital data; or
- 15 **[(4)] (3)** If such data elements are requested by a  
16 lawful subpoena or subpoena duces tecum.

17 2. All information and documents in any civil action,  
18 otherwise discoverable, may be obtained from any person or



19 entity providing information pursuant to the provisions of  
20 sections 190.001 to [190.245] **190.244**.

190.180. 1. Any person violating, or failing to  
2 comply with, the provisions of sections 190.001 to [190.245]  
3 **190.244** is guilty of a class B misdemeanor.

4 2. Each day that any violation of, or failure to  
5 comply with, sections 190.001 to [190.245] **190.244** is  
6 committed or permitted to continue shall constitute a  
7 separate and distinct offense and shall be punishable as  
8 such hereunder; but the court may, in appropriate cases,  
9 stay the cumulation of penalties.

10 3. The attorney general of Missouri shall have  
11 concurrent jurisdiction with any and all prosecuting  
12 attorneys to prosecute persons in violation of sections  
13 190.001 to [190.245] **190.244**, and the attorney general or  
14 prosecuting attorney may institute injunctive proceedings  
15 against any person operating in violation of sections  
16 190.001 to [190.245] **190.244**.

17 4. The prosecuting attorney for the county in which  
18 the violation of a political subdivision's law, ordinance or  
19 regulation relating to the provision of ambulance services  
20 occurs may prosecute such violations in the circuit court of  
21 that county. The legal officer or attorney for the  
22 political subdivision may be appointed by the prosecuting  
23 attorney as special assistant prosecuting attorney for the  
24 prosecution of any such violation.

25 5. A person, acting as owner, agent or otherwise, who  
26 holds a valid license for an ambulance service, shall not,  
27 incident to such person's business or service of  
28 transporting patients, violate any applicable law, ordinance  
29 or regulation of any political subdivision by providing  
30 ambulance services or operating any ambulances without a

31 franchise, contract or mutual-aid agreement in such  
32 political subdivision, or by violating any such franchise,  
33 contract or mutual-aid agreement by any political  
34 subdivision which has enacted ordinances making it unlawful  
35 to do so. If the department receives official written  
36 notification by a political subdivision that an ambulance  
37 service has been adjudicated and found to be in violation of  
38 any applicable law or ordinance, such ambulance service  
39 shall be subject to licensure action by the department.

40 6. No provision of this section is intended to limit  
41 or supersede a political subdivision's right to enforce any  
42 law, ordinance, regulation, franchise, contract or mutual-  
43 aid agreement.

44 7. The provisions of subsections 4, 5 and 6 of this  
45 section shall not apply to a city not within a county and  
46 any county with a population of over nine hundred thousand  
47 inhabitants and any licensed ambulance service when  
48 operating in a city not within a county.

190.185. The department shall adopt, amend,  
2 promulgate, and enforce such rules, regulations and  
3 standards with respect to the provisions of this chapter as  
4 may be designed to further the accomplishment of the purpose  
5 of this law in promoting state-of-the-art emergency medical  
6 services in the interest of public health, safety and  
7 welfare. When promulgating such rules and regulations, the  
8 department shall consider the recommendations of the state  
9 advisory council on emergency medical services. Any rule or  
10 portion of a rule promulgated pursuant to the authority of  
11 sections 190.001 to [190.245] **190.244** or sections 190.525 to  
12 190.537 shall become effective only if it complies with and  
13 is subject to all of the provisions of chapter 536 and, if  
14 applicable, section 536.028. This section and chapter 536

15 are nonseverable and if any of the powers vested with the  
16 general assembly pursuant to chapter 536 to review, to delay  
17 the effective date or to disapprove and annul a rule are  
18 subsequently held unconstitutional, then the grant of  
19 rulemaking authority and any rule proposed or adopted after  
20 August 28, 2002, shall be invalid and void.

190.196. 1. No employer shall knowingly employ or  
2 permit any employee to perform any services for which a  
3 license, certificate or other authorization is required by  
4 sections 190.001 to [190.245] **190.244**, or by rules adopted  
5 pursuant to sections 190.001 to [190.245] **190.244**, unless  
6 and until the person so employed possesses all licenses,  
7 certificates or authorizations that are required.

8 2. Any person or entity that employs or supervises a  
9 person's activities as an emergency medical responder,  
10 emergency medical dispatcher, emergency medical technician,  
11 registered nurse, physician assistant, or physician shall  
12 cooperate with the department's efforts to monitor and  
13 enforce compliance by those individuals subject to the  
14 requirements of sections 190.001 to [190.245] **190.244**.

15 3. Any person or entity who employs individuals  
16 licensed by the department pursuant to sections 190.001 to  
17 [190.245] **190.244** shall report to the department within  
18 seventy-two hours of their having knowledge of any charges  
19 filed against a licensee in their employ for possible  
20 criminal action involving the following felony offenses:

- 21 (1) Child abuse or sexual abuse of a child;
- 22 (2) Crimes of violence; or
- 23 (3) Rape or sexual abuse.

24 4. Any licensee who has charges filed against him or  
25 her for the felony offenses in subsection 3 of this section

26 shall report such an occurrence to the department within  
27 seventy-two hours of the charges being filed.

28 5. The department will monitor these reports for  
29 possible licensure action authorized pursuant to section  
30 190.165.

190.200. 1. The department of health and senior  
2 services in cooperation with local and regional EMS systems,  
3 **hospitals**, and agencies may provide public and professional  
4 information and education programs related to emergency  
5 medical services systems including trauma, STEMI, and stroke  
6 systems and emergency medical care and treatment. The  
7 department of health and senior services may also provide  
8 public information and education programs for informing  
9 residents of and visitors to the state of the availability  
10 and proper use of emergency medical services, **of hospital**  
11 **designation as a trauma, stroke, or STEMI center**, of the  
12 value and nature of programs to involve citizens in the  
13 administering of prehospital emergency care, including  
14 cardiopulmonary resuscitation, and of the availability of  
15 training programs in emergency care for members of the  
16 general public.

17 2. The department shall, for **trauma, stroke, and STEMI**  
18 **[care and stroke] care**, respectively:

19 (1) Compile **[and]**, assess, **and make publicly available**  
20 peer-reviewed and evidence-based clinical research and  
21 guidelines that **have been recommended by the time critical**  
22 **diagnosis advisory committee that** provide or support  
23 recommended treatment standards;

24 (2) Assess the capacity of the emergency medical  
25 services system and hospitals to deliver recommended  
26 treatments in a timely fashion;

27           (3) Use the research, guidelines, and assessment to  
28 promulgate rules establishing protocols for transporting  
29 **trauma patients to a trauma center**, STEMI patients to a  
30 STEMI center, or stroke patients to a stroke center. Such  
31 transport protocols shall direct patients to **trauma centers**,  
32 STEMI centers, and stroke centers under section 190.243  
33 based on the centers' capacities to deliver recommended  
34 acute care treatments within time limits suggested by  
35 clinical research;

36           (4) Define regions within the state for purposes of  
37 coordinating the delivery of **trauma, stroke, and** STEMI care  
38 [and stroke care], respectively;

39           (5) Promote the development of regional or community-  
40 based plans for transporting **trauma**, STEMI, or stroke  
41 patients via ground or air ambulance to **trauma centers**,  
42 STEMI centers, or stroke centers, respectively, in  
43 accordance with section 190.243; and

44           (6) Establish procedures for the submission of  
45 community-based or regional plans for department approval.

46           3. A community-based or regional plan **for the**  
47 **transport of trauma, STEMI, and stroke patients** shall be  
48 submitted to the department for approval. Such plan shall  
49 be based on the clinical research and guidelines and  
50 assessment of capacity described in subsection 1 of this  
51 section and shall include a mechanism for evaluating its  
52 effect on medical outcomes. Upon approval of a plan, the  
53 department shall waive the requirements of rules promulgated  
54 under sections 190.100 to [190.245] **190.244** that are  
55 inconsistent with the community-based or regional plan. A  
56 community-based or regional plan shall be developed by or in  
57 consultation with the representatives of hospitals,

58 physicians, and emergency medical services providers in the  
59 community or region.

190.241. 1. **Except as provided for in subsection 4 of**  
2 **this section**, the department shall designate a hospital as  
3 an adult, pediatric or adult and pediatric trauma center  
4 when a hospital, upon proper application submitted by the  
5 hospital and site review, has been found by the department  
6 to meet the applicable level of trauma center criteria for  
7 designation in accordance with rules adopted by the  
8 department as prescribed by section 190.185. **Site review**  
9 **may occur onsite or by any reasonable means of communication**  
10 **or combination thereof.** Such rules shall include  
11 designation as a trauma center without site review if such  
12 hospital is verified by a national verifying or designating  
13 body at the level which corresponds to a level approved in  
14 rule. **In developing trauma center designation criteria, the**  
15 **department shall use, as it deems practicable, peer-reviewed**  
16 **and evidence-based clinical research and guidelines,**  
17 **including, but not limited to, the most recent guidelines of**  
18 **the American College of Surgeons.**

19 2. Except as provided for in subsection [5] 4 of this  
20 section, the department shall designate a hospital as a  
21 STEMI or stroke center when such hospital, upon proper  
22 application and site review, has been found by the  
23 department to meet the applicable level of STEMI or stroke  
24 center criteria for designation in accordance with rules  
25 adopted by the department as prescribed by section 190.185.  
26 **Site review may occur onsite or by any reasonable means of**  
27 **communication or combination thereof.** In developing STEMI  
28 center and stroke center designation criteria, the  
29 department shall use, as it deems practicable, [appropriate]  
30 peer-reviewed [or] **and** evidence-based **clinical** research [on

31 such topics] **and guidelines**, including, but not limited to,  
32 the most recent guidelines of the American College of  
33 Cardiology [and], **the** American Heart Association [for STEMI  
34 centers, or the Joint Commission's Primary Stroke Center  
35 Certification program criteria for stroke centers, or  
36 Primary and Comprehensive Stroke Center Recommendations as  
37 published by] , **or** the American Stroke Association. Such  
38 rules shall include designation as a **stroke or** STEMI center  
39 without site review if such hospital is certified by a  
40 national body.

41 3. The department of health and senior services shall,  
42 not less than once every [five] **three** years, conduct [an on-  
43 site] **a site** review of every trauma, STEMI, and stroke  
44 center through appropriate department personnel or a  
45 qualified contractor, with the exception of **trauma, STEMI,**  
46 **and** stroke centers designated pursuant to subsection [5] **4**  
47 of this section; however, this provision is not intended to  
48 limit the department's ability to conduct a complaint  
49 investigation pursuant to subdivision (3) of subsection 2 of  
50 section 197.080 of any trauma, STEMI, or stroke center. [On-  
51 site] **Site** reviews shall be coordinated for the different  
52 types of centers to the extent practicable with hospital  
53 licensure inspections conducted under chapter 197. No  
54 person shall be a qualified contractor for purposes of this  
55 subsection who has a substantial conflict of interest in the  
56 operation of any trauma, STEMI, or stroke center under  
57 review. The department may deny, place on probation,  
58 suspend or revoke such designation in any case in which it  
59 has [reasonable cause to believe that] **been determined** there  
60 has been a substantial failure to comply with the provisions  
61 of this chapter or any rules or regulations promulgated  
62 pursuant to this chapter. **Centers that are placed in a**

63 **probationary status shall show compliance with the**  
64 **provisions of this chapter or any rules or regulations**  
65 **promulgated pursuant to this chapter within twelve months**  
66 **from the date of receiving notice of probationary status.**

67 If the department of health and senior services has  
68 [reasonable cause to believe] **determined** that a hospital is  
69 not in compliance with such provisions or regulations, it  
70 may conduct additional announced or unannounced site reviews  
71 of the hospital to verify compliance. If a trauma, STEMI,  
72 or stroke center fails two consecutive [on-site] **site**  
73 reviews because of substantial noncompliance with standards  
74 prescribed by sections 190.001 to [190.245] **190.244** or rules  
75 adopted by the department pursuant to sections 190.001 to  
76 [190.245] **190.244**, its center designation shall be revoked.

77 4. (1) Instead of applying for **trauma, stroke, or**  
78 STEMI center designation under [subsection] **subsections 1**  
79 **and 2** of this section, a hospital may apply for **trauma,**  
80 **stroke, or** STEMI center designation under this subsection.  
81 Upon receipt of an application [from a hospital] on a form  
82 prescribed by the department, the department shall designate  
83 such hospital[:

84 (1) A level I STEMI center if such hospital has been  
85 certified as a Joint Commission comprehensive cardiac center  
86 or another department-approved nationally recognized  
87 organization that provides comparable STEMI center  
88 accreditation; or

89 (2) A level II STEMI center if such hospital has been  
90 accredited as a Mission: Lifeline STEMI receiving center by  
91 the American Heart Association accreditation process or  
92 another department-approved nationally recognized  
93 organization that provides STEMI receiving center  
94 accreditation.



95           5. Instead of applying for stroke center designation  
96 pursuant to the provisions of subsection 2 of this section,  
97 a hospital may apply for stroke center designation pursuant  
98 to this subsection. Upon receipt of an application from a  
99 hospital on a form prescribed by the department, the  
100 department shall designate such hospital:

101           (1) A level I stroke center if such hospital has been  
102 certified as a comprehensive stroke center by the Joint  
103 Commission or any other certifying organization designated  
104 by the department when such certification is in accordance  
105 with the American Heart Association/American Stroke  
106 Association guidelines;

107           (2) A level II stroke center if such hospital has been  
108 certified as a primary stroke center by the Joint Commission  
109 or any other certifying organization designated by the  
110 department when such certification is in accordance with the  
111 American Heart Association/American Stroke Association  
112 guidelines; or

113           (3) A level III stroke center if such hospital has  
114 been certified as an acute stroke-ready hospital by the  
115 Joint Commission or any other certifying organization  
116 designated by the department when such certification is in  
117 accordance with the American Heart Association/American  
118 Stroke Association guidelines] **at a state level which**  
119 **corresponds to a similar national designation, as set forth**  
120 **in rule. The department shall draft such rules based on**  
121 **standards of nationally-recognized organizations and the**  
122 **recommendation of the time critical diagnosis advisory**  
123 **committee under section 190.244.**

124           (2) Except as provided by subsection [6] 5 of this  
125 section, the department shall not require compliance with  
126 any additional standards for establishing or renewing

127 **trauma, stroke, or STEMI** designations. The designation  
128 shall continue if such hospital remains certified **or**  
129 **verified**. The department may remove a hospital's  
130 designation as a **trauma, stroke, or STEMI** center if the  
131 hospital requests removal of the designation or the  
132 department determines that the certificate **or verification**  
133 recognizing the hospital as a [stroke] center has been  
134 suspended or revoked. Any decision made by the department  
135 to withdraw its designation of a [stroke] center pursuant to  
136 this subsection that is based on the revocation or  
137 suspension of a certification **or verification** by a  
138 certifying **or verifying** organization shall not be subject to  
139 judicial review. The department shall report to the  
140 certifying **or verifying** organization any complaint it  
141 receives related to the [stroke] center [certification of a  
142 stroke center] designated pursuant to this subsection. The  
143 department shall also advise the complainant which  
144 organization certified **or verified** the [stroke] center and  
145 provide the necessary contact information should the  
146 complainant wish to pursue a complaint with the certifying  
147 **or verifying** organization.

148 [6.] 5. Any hospital receiving designation as a  
149 [stroke] **trauma, stroke, or STEMI** center pursuant to  
150 subsection [5] 4 of this section shall:

151 (1) [Annually and] Within thirty days of any changes  
152 **or receipt of certificate or verification**, submit to the  
153 department proof of [stroke] certification **or verification**  
154 and the names and contact information of the **center's**  
155 medical director and the program manager [of the stroke  
156 center]; **and**

157           (2) [Submit to the department a copy of the certifying  
158 organization's final stroke certification survey results  
159 within thirty days of receiving such results;

160           (3) Submit every four years an application on a form  
161 prescribed by the department for stroke center review and  
162 designation;

163           (4) Participate in the emergency medical services  
164 regional system of stroke care in its respective emergency  
165 medical services region as defined in rules promulgated by  
166 the department;

167           (5)] Participate in local and regional emergency  
168 medical services systems [by reviewing and sharing outcome  
169 data and providing training and clinical educational  
170 resources] **for purposes of providing training, sharing**  
171 **clinical educational resources and collaborating on patient**  
172 **outcome improvement.**

173 Any hospital receiving designation as a level III stroke  
174 center pursuant to subsection [5] **4** of this section shall  
175 have a formal agreement with a level I or level II stroke  
176 center for physician consultative services for evaluation of  
177 stroke patients for thrombolytic therapy and the care of the  
178 patient post-thrombolytic therapy.

179           [7.] **6.** Hospitals designated as a **trauma**, STEMI, or  
180 stroke center by the department[, including those designated  
181 pursuant to subsection 5 of this section,] shall submit data  
182 [to meet the data submission requirements specified by rules  
183 promulgated by the department. Such submission of data may  
184 be done] by **one of** the following methods:

185           (1) Entering hospital data [directly] into a state  
186 registry [by direct data entry]; **or**

187 (2) [Downloading hospital data from a nationally  
188 recognized registry or data bank and importing the data  
189 files into a state registry; or

190 (3) Authorizing a nationally recognized registry or  
191 data bank to disclose or grant access to the department  
192 facility-specific data held by the] **Entering hospital data**  
193 **into a national** registry or data bank. A hospital  
194 submitting data pursuant to **this** subdivision [(2) or (3) of  
195 this subsection] shall not be required to collect and submit  
196 any additional **trauma**, STEMI, or stroke center data elements.

197 [8.] 7. When collecting and analyzing data pursuant to  
198 the provisions of this section, the department shall comply  
199 with the following requirements:

200 (1) Names of any health care professionals, as defined  
201 in section 376.1350, shall not be subject to disclosure;

202 (2) The data shall not be disclosed in a manner that  
203 permits the identification of an individual patient or  
204 encounter;

205 (3) The data shall be used for the evaluation and  
206 improvement of hospital and emergency medical services'  
207 trauma, stroke, and STEMI care; **and**

208 (4) [The data collection system shall be capable of  
209 accepting file transfers of data entered into any national  
210 recognized trauma, stroke, or STEMI registry or data bank to  
211 fulfill trauma, stroke, or STEMI certification reporting  
212 requirements; and

213 (5)] **Trauma**, STEMI, and stroke center data elements  
214 shall conform to [nationally recognized performance  
215 measures, such as the American Heart Association's Get With  
216 the Guidelines] **national registry or data bank data**  
217 **elements**, and include published detailed measure  
218 specifications, data coding instructions, and patient

219 population inclusion and exclusion criteria to ensure data  
220 reliability and validity.

221 [9. The board of registration for the healing arts  
222 shall have sole authority to establish education  
223 requirements for physicians who practice in an emergency  
224 department of a facility designated as a trauma, STEMI, or  
225 stroke center by the department under this section. The  
226 department shall deem such education requirements  
227 promulgated by the board of registration for the healing  
228 arts sufficient to meet the standards for designations under  
229 this section.]

230 **8. The department shall not have authority to**  
231 **establish additional education requirements for emergency**  
232 **medicine board-certified or eligible physicians who are**  
233 **participating in the American Board of Emergency Medicine**  
234 **(ABEM) or American Osteopathic Board of Emergency Medicine**  
235 **(AOBEM) maintenance of certification process and who are**  
236 **practicing in the emergency department of a facility**  
237 **designated as a trauma, STEMI, or stroke center by the**  
238 **department under this section. The department shall deem**  
239 **the education requirements promulgated by ABEM or AOBEM to**  
240 **meet the standards for designations under this section.**  
241 **Education requirements for non-ABEM or non-AOBEM certified**  
242 **physicians, nurses, and other providers who provide care as**  
243 **a trauma, stroke, or STEMI designated center shall mirror,**  
244 **but not exceed, those established by national designating or**  
245 **verifying bodies of trauma, stroke, or STEMI centers.**

246 [10.] **9.** The department of health and senior services  
247 may **only** establish appropriate fees to offset the costs of  
248 trauma, STEMI, and stroke center [reviews] **surveys.**

249 [11.] **10.** No hospital shall hold itself out to the  
250 public as a STEMI center, stroke center, adult trauma

251 center, pediatric trauma center, or an adult and pediatric  
252 trauma center unless it is designated as such by the  
253 department of health and senior services.

254 [12.] 11. Any person aggrieved by an action of the  
255 department of health and senior services affecting the  
256 trauma, STEMI, or stroke center designation pursuant to this  
257 chapter, including the revocation, the suspension, or the  
258 granting of, refusal to grant, or failure to renew a  
259 designation, may seek a determination thereon by the  
260 administrative hearing commission under chapter 621. It  
261 shall not be a condition to such determination that the  
262 person aggrieved seek a reconsideration, a rehearing, or  
263 exhaust any other procedure within the department.

264 12. **Failure of a hospital to provide all medical**  
265 **records and quality improvement documentation necessary for**  
266 **the department to implement provisions of sections 190.241**  
267 **to 190.244 shall result in the revocation of the hospital's**  
268 **designation as a trauma, STEMI, or stroke center. Any**  
269 **medical records obtained by the department shall be used**  
270 **only for purposes of implementing the provisions of sections**  
271 **190.241 to 190.244 and the names of hospitals, physicians,**  
272 **and patients shall not be released by the department or**  
273 **members of review teams.**

190.243. 1. Severely injured patients shall be  
2 transported to a trauma center. Patients who suffer a  
3 STEMI, as defined in section 190.100, shall be transported  
4 to a STEMI center. Patients who suffer a stroke, as defined  
5 in section 190.100, shall be transported to a stroke center.

6 2. A physician, **physician assistant**, or registered  
7 nurse authorized by a physician who has established verbal  
8 communication with ambulance personnel shall instruct the  
9 ambulance personnel to transport a severely ill or injured

10 patient to the closest hospital or designated trauma, STEMI,  
11 or stroke center, as determined according to estimated  
12 transport time whether by ground ambulance or air ambulance,  
13 in accordance with transport protocol approved by the  
14 medical director and the department of health and senior  
15 services, even when the hospital is located outside of the  
16 ambulance service's primary service area. When initial  
17 transport from the scene of illness or injury to a trauma,  
18 STEMI, or stroke center would be prolonged, the STEMI,  
19 stroke, or severely injured patient may be transported to  
20 the nearest appropriate facility for stabilization prior to  
21 transport to a trauma, STEMI, or stroke center.

22 3. Transport of the STEMI, stroke, or severely injured  
23 patient shall be governed by principles of timely and  
24 medically appropriate care; consideration of reimbursement  
25 mechanisms shall not supersede those principles.

26 4. Patients who do not meet the criteria for direct  
27 transport to a trauma, STEMI, or stroke center shall be  
28 transported to and cared for at the hospital of their choice  
29 so long as such ambulance service is not in violation of  
30 local protocols.

**190.244. 1. There shall be established within the  
2 department the "Time Critical Diagnosis Advisory  
3 Committee". The purpose of the time critical diagnosis  
4 advisory committee is to advise and make recommendations to  
5 the department on:**

6 (1) Improvement of public and professional education  
7 related to time critical diagnosis;

8 (2) Cooperative research endeavors;

9 (3) Development of standards, protocols, and policies  
10 related to time critical diagnosis, including  
11 recommendations for state regulations; and

12           (4) Review of and recommendations for community and  
13 regional time critical diagnosis plans.

14           2. The members of the committee shall serve without  
15 compensation, except that the department shall compensate  
16 members for reasonable travel expenses and meeting expenses  
17 related to the functions of the committee.

18           3. The director of the department shall appoint  
19 fourteen members to the committee from applications  
20 submitted for appointment. Four committee members shall be  
21 active participants providing emergency medical services.  
22 At least one of these shall be an EMS physician medical  
23 director, one shall be involved in air ambulance services,  
24 and at least one shall be from an urban area and one from a  
25 rural area. Ten of the fourteen members shall represent  
26 hospitals:

27           (1) A minimum of three hospital members shall be  
28 employed by a Level I or Level II center and there shall be  
29 a member representing each type of time critical diagnosis;

30           (2) A minimum of one hospital member shall be from a  
31 rural or critical access hospital; and

32           (3) A minimum of three physicians, one American Board  
33 of Emergency Medicine or American Osteopathic Board of  
34 Emergency Medicine certified emergency medicine physician  
35 and two from time critical diagnosis specialties at a Level  
36 I or Level II center.

37 In addition to the fourteen appointees, the state EMS  
38 medical director shall serve as a nonvoting ex-officio  
39 member. The director shall make a reasonable effort to  
40 ensure that the hospital members appointed to the committee  
41 have geographical representation from each of the Missouri  
42 hospital association's six districts.



43           4. Committee appointments shall be three-year terms.  
44 Initial appointments shall include extended terms to  
45 establish a rotation so that only one-third of appointments  
46 shall be up for reappointment in any given year.  
47 Individuals wishing to continue in their role on the  
48 committee shall resubmit an application as required by this  
49 section.

          190.248. 1. All investigations conducted in response  
2 to allegations of violations of sections 190.001 to  
3 [190.245] **190.244** shall be completed within six months of  
4 receipt of the allegation.

          2. In the course of an investigation the department  
6 shall have access to all records directly related to the  
7 alleged violations from persons or entities licensed  
8 pursuant to this chapter or chapter 197 or 198.

          3. Any department investigations that involve other  
10 administrative or law enforcement agencies shall be  
11 completed within six months of notification and final  
12 determination by such administrative or law enforcement  
13 agencies.

          287.243. 1. This section shall be known and may be  
2 cited as the "Line of Duty Compensation Act".

          2. As used in this section, unless otherwise provided,  
4 the following words shall mean:

          (1) "Air ambulance pilot", a person certified as an  
6 air ambulance pilot in accordance with sections 190.001 to  
7 [190.245] **190.244** and corresponding regulations applicable  
8 to air ambulances adopted by the department of health and  
9 senior services;

          (2) "Air ambulance registered professional nurse", a  
11 person licensed as a registered professional nurse in  
12 accordance with sections 335.011 to 335.096 and

13 corresponding regulations adopted by the state board of  
14 nursing, 20 CSR 2200-4, et seq., who provides registered  
15 professional nursing services as a flight nurse in  
16 conjunction with an air ambulance program that is certified  
17 in accordance with sections 190.001 to [190.245] **190.244** and  
18 the corresponding regulations applicable to such programs;

19 (3) "Air ambulance registered respiratory therapist",  
20 a person licensed as a registered respiratory therapist in  
21 accordance with sections 334.800 to 334.930 and  
22 corresponding regulations adopted by the state board for  
23 respiratory care, who provides respiratory therapy services  
24 in conjunction with an air ambulance program that is  
25 certified in accordance with sections 190.001 to [190.245]  
26 **190.244** and corresponding regulations applicable to such  
27 programs;

28 (4) "Child", any natural, illegitimate, adopted, or  
29 posthumous child or stepchild of a deceased public safety  
30 officer who, at the time of the public safety officer's  
31 fatality is:

32 (a) Eighteen years of age or under;

33 (b) Over eighteen years of age and a student, as  
34 defined in 5 U.S.C. Section 8101; or

35 (c) Over eighteen years of age and incapable of self-  
36 support because of physical or mental disability;

37 (5) "Emergency medical technician", a person licensed  
38 in emergency medical care in accordance with standards  
39 prescribed by sections 190.001 to [190.245] **190.244** and by  
40 rules adopted by the department of health and senior  
41 services under sections 190.001 to [190.245] **190.244**;

42 (6) "Firefighter", any person, including a volunteer  
43 firefighter, employed by the state or a local governmental  
44 entity as an employer defined under subsection 1 of section

45 287.030, or otherwise serving as a member or officer of a  
46 fire department either for the purpose of the prevention or  
47 control of fire or the underwater recovery of drowning  
48 victims;

49 (7) "Flight crew member", an individual engaged in  
50 flight responsibilities with an air ambulance licensed in  
51 accordance with sections 190.001 to [190.245] **190.244** and  
52 corresponding regulations applicable to such programs;

53 (8) "Killed in the line of duty", when any person  
54 defined in this section loses his or her life when:

55 (a) Death is caused by an accident or the willful act  
56 of violence of another;

57 (b) The public safety officer is in the active  
58 performance of his or her duties in his or her respective  
59 profession and there is a relationship between the accident  
60 or commission of the act of violence and the performance of  
61 the duty, even if the individual is off duty; the public  
62 safety officer is traveling to or from employment; or the  
63 public safety officer is taking any meal break or other  
64 break which takes place while that individual is on duty;

65 (c) Death is the natural and probable consequence of  
66 the injury; and

67 (d) Death occurs within three hundred weeks from the  
68 date the injury was received.

69 The term excludes death resulting from the willful  
70 misconduct or intoxication of the public safety officer.  
71 The division of workers' compensation shall have the burden  
72 of proving such willful misconduct or intoxication;

73 (9) "Law enforcement officer", any person employed by  
74 the state or a local governmental entity as a police  
75 officer, peace officer certified under chapter 590, or

76 serving as an auxiliary police officer or in some like  
77 position involving the enforcement of the law and protection  
78 of the public interest at the risk of that person's life;

79 (10) "Local governmental entity", includes counties,  
80 municipalities, townships, board or other political  
81 subdivision, cities under special charter, or under the  
82 commission form of government, fire protection districts,  
83 ambulance districts, and municipal corporations;

84 (11) "Public safety officer", any law enforcement  
85 officer, firefighter, uniformed employee of the office of  
86 the state fire marshal, emergency medical technician, police  
87 officer, capitol police officer, parole officer, probation  
88 officer, state correctional employee, water safety officer,  
89 park ranger, conservation officer, or highway patrolman  
90 employed by the state of Missouri or a political subdivision  
91 thereof who is killed in the line of duty or any emergency  
92 medical technician, air ambulance pilot, air ambulance  
93 registered professional nurse, air ambulance registered  
94 respiratory therapist, or flight crew member who is killed  
95 in the line of duty;

96 (12) "State", the state of Missouri and its  
97 departments, divisions, boards, bureaus, commissions,  
98 authorities, and colleges and universities;

99 (13) "Volunteer firefighter", a person having  
100 principal employment other than as a firefighter, but who is  
101 carried on the rolls of a regularly constituted fire  
102 department either for the purpose of the prevention or  
103 control of fire or the underwater recovery of drowning  
104 victims, the members of which are under the jurisdiction of  
105 the corporate authorities of a city, village, incorporated  
106 town, or fire protection district. Volunteer firefighter

107 shall not mean an individual who volunteers assistance  
108 without being regularly enrolled as a firefighter.

109       3. (1) A claim for compensation under this section  
110 shall be filed by survivors of the deceased with the  
111 division of workers' compensation not later than one year  
112 from the date of death of a public safety officer. If a  
113 claim is made within one year of the date of death of a  
114 public safety officer killed in the line of duty,  
115 compensation shall be paid, if the division finds that the  
116 claimant is entitled to compensation under this section.

117       (2) The amount of compensation paid to the claimant  
118 shall be twenty-five thousand dollars, subject to  
119 appropriation, for death occurring on or after June 19, 2009.

120       4. Any compensation awarded under the provisions of  
121 this section shall be distributed as follows:

122       (1) To the surviving spouse of the public safety  
123 officer if there is no child who survived the public safety  
124 officer;

125       (2) Fifty percent to the surviving child, or children,  
126 in equal shares, and fifty percent to the surviving spouse  
127 if there is at least one child who survived the public  
128 safety officer, and a surviving spouse of the public safety  
129 officer;

130       (3) To the surviving child, or children, in equal  
131 shares, if there is no surviving spouse of the public safety  
132 officer;

133       (4) If there is no surviving spouse of the public  
134 safety officer and no surviving child:

135       (a) To the surviving individual, or individuals, in  
136 shares per the designation or, otherwise, in equal shares,  
137 designated by the public safety officer to receive benefits  
138 under this subsection in the most recently executed

139 designation of beneficiary of the public safety officer on  
140 file at the time of death with the public safety agency,  
141 organization, or unit; or

142 (b) To the surviving individual, or individuals, in  
143 equal shares, designated by the public safety officer to  
144 receive benefits under the most recently executed life  
145 insurance policy of the public safety officer on file at the  
146 time of death with the public safety agency, organization,  
147 or unit if there is no individual qualifying under paragraph  
148 (a);

149 (5) To the surviving parent, or parents, in equal  
150 shares, of the public safety officer if there is no  
151 individual qualifying under subdivision (1), (2), (3), or  
152 (4) of this subsection; or

153 (6) To the surviving individual, or individuals, in  
154 equal shares, who would qualify under the definition of the  
155 term "child" but for age if there is no individual  
156 qualifying under subdivision (1), (2), (3), (4), or (5) of  
157 this subsection.

158 5. Notwithstanding subsection 3 of this section, no  
159 compensation is payable under this section unless a claim is  
160 filed within the time specified under this section setting  
161 forth:

162 (1) The name, address, and title or designation of the  
163 position in which the public safety officer was serving at  
164 the time of his or her death;

165 (2) The name and address of the claimant;

166 (3) A full, factual account of the circumstances  
167 resulting in or the course of events causing the death at  
168 issue; and

169 (4) Such other information that is reasonably required  
170 by the division.

171 When a claim is filed, the division of workers' compensation  
172 shall make an investigation for substantiation of matters  
173 set forth in the application.

174 6. The compensation provided for under this section is  
175 in addition to, and not exclusive of, any pension rights,  
176 death benefits, or other compensation the claimant may  
177 otherwise be entitled to by law.

178 7. Neither employers nor workers' compensation  
179 insurers shall have subrogation rights against any  
180 compensation awarded for claims under this section. Such  
181 compensation shall not be assignable, shall be exempt from  
182 attachment, garnishment, and execution, and shall not be  
183 subject to setoff or counterclaim, or be in any way liable  
184 for any debt, except that the division or commission may  
185 allow as lien on the compensation, reasonable attorney's  
186 fees for services in connection with the proceedings for  
187 compensation if the services are found to be necessary.  
188 Such fees are subject to regulation as set forth in section  
189 287.260.

190 8. Any person seeking compensation under this section  
191 who is aggrieved by the decision of the division of workers'  
192 compensation regarding his or her compensation claim, may  
193 make application for a hearing as provided in section  
194 287.450. The procedures applicable to the processing of  
195 such hearings and determinations shall be those established  
196 by this chapter. Decisions of the administrative law judge  
197 under this section shall be binding, subject to review by  
198 either party under the provisions of section 287.480.

199 9. Pursuant to section 23.253 of the Missouri sunset  
200 act:

201 (1) The provisions of the new program authorized under  
202 this section shall automatically sunset six years after June

203 19, 2019, unless reauthorized by an act of the general  
204 assembly; and

205 (2) If such program is reauthorized, the program  
206 authorized under this section shall automatically sunset  
207 twelve years after the effective date of the reauthorization  
208 of this section; and

209 (3) This section shall terminate on September first of  
210 the calendar year immediately following the calendar year in  
211 which the program authorized under this section is sunset.

212 10. The provisions of this section, unless specified,  
213 shall not be subject to other provisions of this chapter.

214 11. There is hereby created in the state treasury the  
215 "Line of Duty Compensation Fund", which shall consist of  
216 moneys appropriated to the fund and any voluntary  
217 contributions, gifts, or bequests to the fund. The state  
218 treasurer shall be custodian of the fund and shall approve  
219 disbursements from the fund in accordance with sections  
220 30.170 and 30.180. Upon appropriation, money in the fund  
221 shall be used solely for paying claims under this section.  
222 Notwithstanding the provisions of section 33.080 to the  
223 contrary, any moneys remaining in the fund at the end of the  
224 biennium shall not revert to the credit of the general  
225 revenue fund. The state treasurer shall invest moneys in  
226 the fund in the same manner as other funds are invested.  
227 Any interest and moneys earned on such investments shall be  
228 credited to the fund.

229 12. The division shall promulgate rules to administer  
230 this section, including but not limited to the appointment  
231 of claims to multiple claimants, record retention, and  
232 procedures for information requests. Any rule or portion of  
233 a rule, as that term is defined in section 536.010, that is  
234 created under the authority delegated in this section shall



235 become effective only if it complies with and is subject to  
236 all of the provisions of chapter 536 and, if applicable,  
237 section 536.028. This section and chapter 536 are  
238 nonseverable and if any of the powers vested with the  
239 general assembly under chapter 536 to review, to delay the  
240 effective date, or to disapprove and annul a rule are  
241 subsequently held unconstitutional, then the grant of  
242 rulemaking authority and any rule proposed or adopted after  
243 June 19, 2009, shall be invalid and void.

2           [190.245. The department shall require  
3           hospitals, as defined by chapter 197, designated  
4           as trauma, STEMI, or stroke centers to provide  
5           for a peer review system, approved by the  
6           department, for trauma, STEMI, and stroke cases,  
7           respectively to their designations, under section  
8           537.035. For purposes of sections 190.241 to  
9           190.245, the department of health and senior  
10          services shall have the same powers and  
11          authority of a health care licensing board  
12          pursuant to subsection 6 of section 537.035.  
13          Failure of a hospital to provide all medical  
14          records necessary for the department to  
15          implement provisions of sections 190.241 to  
16          190.245 shall result in the revocation of the  
17          hospital's designation as a trauma, STEMI, or  
18          stroke center. Any medical records obtained by  
19          the department or peer review committees shall  
20          be used only for purposes of implementing the  
21          provisions of sections 190.241 to 190.245 and  
22          the names of hospitals, physicians and patients  
23          shall not be released by the department or  
            members of review committees.]

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