

MAINE STATE LEGISLATURE

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1 (New Draft of H. P. 2050 L.D.2000)
2 SECOND REGULAR SESSION
3

4 ONE HUNDRED AND TENTH LEGISLATURE
5

6 **Legislative Document**

No. 2092
7

8
9 H. P. 2234 House of Representatives, March 25, 1982
Reported by the Majority from the Committee on Health and Insti-
tutional Services and printed under Joint Rules No. 2.

EDWIN H. PERT, Clerk

10
11 STATE OF MAINE
12

13 IN THE YEAR OF OUR LORD
14 NINETEEN HUNDRED AND EIGHTY-TWO
15

16 AN ACT Concerning Maine Emergency
17 Medical Services.
18

19 Be it enacted by the People of the State of Maine as follows:

20 Sec. 1. 32 MRSA c. 2-A, as amended, is repealed.

21 Sec. 2. 32 MRSA c. 2-B is enacted to read:

22 CHAPTER 2-B

23 MAINE EMERGENCY MEDICAL SERVICES ACT of 1982

24 §81. Title

25 This chapter may be cited as the "Maine Emergency Medi-
26 cal Services Act of 1982."

27 §82. Requirement for license

1 1. Licenses required. No ambulance service, ambu-
2 lance, first responder service or emergency medical ser-
3 vices' person may operate unless duly licensed by the
4 Department of Human Services pursuant to this chapter,
5 except as stated in subsection 2.

6 Failure to obtain licensure shall make an individual or
7 organization subject to a fine of not more than \$500 or by
8 imprisonment for not more than 6 months, unless other pen-
9 alties are specified.

10 2. Licenses not required. A Maine license shall not
11 be required for:

12 A. Ambulance services and ambulances licensed in
13 another state or province, provided that they do not
14 have a base of operation in Maine and do not routinely
15 pick up patients from the scene of their illness or
16 injury in Maine and do not routinely carry patients
17 between points both of which are in Maine;

18 B. Ambulance services, ambulances, first responder
19 services and emergency medical services' persons
20 responding into Maine from out-of-state in response to
21 civil emergencies or natural disasters;

22 C. Ambulance services, ambulances, first responder
23 services and emergency medical services' persons
24 responding into Maine from out-of-state pursuant to
25 department approved mutual aid agreements with Maine
26 licensed services;

27 D. A licensed physician;

28 E. A person serving as an industrial nurse or safety
29 officer, a school or camp nurse, a life guard, a ski
30 patrolman, a nurse or technician in a hospital or a
31 physician's office, or other similar occupation in
32 which the person provides on-site emergency treatment
33 at a single facility to the patrons or employees of
34 that facility; or

35 F. A person serving as a medical technician with the
36 United States Armed Forces, the Maine Army National
37 Guard or the Maine Air National Guard.

38 When any doubt exists as to the applicability of this
39 section to any person or service, that person or service
40 shall seek an advisory opinion from the department.

1 §83. Definitions

2 As used in this chapter, unless the context indicates
3 otherwise, the following terms have the following meanings.

4 1. Advanced emergency medical technician. "Advanced
5 emergency medical technician" means an emergency medical
6 services' person licensed to perform advanced emergency med-
7 ical treatment.

8 2. Advanced emergency medical treatment. "Advanced
9 emergency medical treatment" means those portions of emer-
10 gency medical treatment, as defined by the department, which
11 may be performed by persons licensed under this chapter only
12 when they are acting under the supervision of an appropriate
13 physician and within a system of emergency care approved by
14 the department.

15 3. Ambulance. "Ambulance" means any vehicle, whether
16 an air, ground or water vehicle, that is designed, con-
17 structed or routinely used or intended to be used for the
18 transportation of patients. The licensing of these vehicles
19 is in addition to any registration required by other author-
20 ities. For the purposes of this chapter, vehicles operated
21 by the Maine Army National Guard, Maine Air National Guard
22 or the United States Armed Forces shall not be considered
23 ambulances.

24 4. Ambulance equipment. "Ambulance equipment" means
25 those materials and devices which are carried in ambulances.

26 5. Ambulance service. "Ambulance service" means any
27 person, persons or organization which holds itself out to be
28 a provider of transportation of ill or injured persons or
29 which routinely provides transportation for ill or injured
30 persons. For the purposes of this chapter, the Maine Army
31 National Guard, Maine Air National Guard and the United
32 States Armed Forces shall not be considered ambulance ser-
33 vices.

34 6. Basic emergency medical services' person. "Basic
35 emergency medical services' person" means a person licensed
36 to perform basic emergency medical treatment. Licensed
37 ambulance attendants and basic emergency medical technicians
38 are basic emergency medical services' persons.

39 7. Basic emergency medical technician. "Basic emer-
40 gency medical technician" means a basic emergency medical
41 services' person who has successfully completed the United
42 States Department of Transportation course for emergency

1 medical treatments and has met the other requirements for
2 licensure at this level.

3 8. Basic emergency medical treatment. "Basic emer-
4 gency medical treatment" means those portions of emergency
5 medical treatment, as defined by the department, which may
6 be exercised by licensed emergency medical services' person-
7 nel acting under their own authority.

8 9. Commissioner. "Commissioner" means the Commis-
9 sioner of Human Services.

10 10. Department. "Department" means the Department of
11 Human Services.

12 11. Emergency Medical Services' Advisory Board.
13 "Emergency Medical Services' Advisory Board" means the board
14 appointed by the Governor which advises the department on
15 matters subject to this chapter.

16 12. Emergency medical services' person. "Emergency
17 medical services' person" means any person who routinely
18 provides emergency medical treatment to the sick or injured.

19 13. Emergency medical treatment. "Emergency medical
20 treatment" means those skills, techniques and judgments, as
21 defined by the department, which are directed to maintain-
22 ing, improving or preventing the deterioration of the medi-
23 cal condition of the patient and which are appropriate to be
24 delivered by trained persons at the scene of a patient's
25 illness or injury outside the hospital and during trans-
26 portation to the hospital.

27 14. First responder service. "First responder ser-
28 vice" means any organization, person or persons who hold
29 themselves out as providers of emergency medical treatment
30 and who do not routinely provide transportation to ill or
31 injured persons, and who routinely offer or provide services
32 to the general public beyond the boundaries of a single
33 recreational site, business, school or other facility. For
34 the purposes of this chapter, a physician making house calls
35 as a part of ordinary medical practice is not considered to
36 be a first responder service.

37 A first responder service must have an agreement with a li-
38 icensed ambulance service, to ensure continuity of care and
39 adequate transportation for its patients. An ambulance ser-
40 vice is not required to approve of or enter into an agree-
41 ment with a first responder service.

1 15. License. "License" means a full, temporary,
2 provisional or conditional license issued by the department
3 under this chapter.

4 16. Licensed ambulance attendant. "Licensed ambulance
5 attendant" means a basic emergency medical person who has
6 completed the minimum training specified in section 85, sub-
7 section 2 and has met the other conditions specified in
8 regulations under this chapter for licensure at this level.

9 17. Medical control physician. "Medical control
10 physician" means a physician who supervises advanced emer-
11 gency medical technicians.

12 18. Office of Emergency Medical Services. "Office of
13 Emergency Medical Services" means whatever administrative
14 unit of the department is assigned responsibility for carry-
15 ing out the purposes of this chapter.

16 19. Protocol. "Protocol" means the written statement,
17 representing a consensus of the physicians of an emergency
18 medical services' region and filed with the department,
19 specifying the conditions under which some form of emergency
20 medical care is to be given by emergency medical services'
21 persons.

22 20. Regional councils. "Regional councils" means
23 those groups recognized by the department which represent
24 the various regions of the State, as designated by the
25 department, with respect to matters subject to this chapter.

26 21. Regions. "Regions" means those geographical areas
27 of the State designated by the department to be represented
28 by a regional council.

29 22. Statewide emergency medical services' medical
30 director. "Statewide emergency medical services' medical
31 director" means a licensed physician appointed by the com-
32 missioner.

33 §84. Department: powers and duties; goals; work plans

34 1. Powers and duties. The department has the follow-
35 ing powers and duties.

36 A. The department shall conduct an emergency medical
37 services' program to fulfill the purposes, requirements
38 and goals of this chapter. The department shall adopt
39 such forms, regulations, procedures, testing require-
40 ments and records as may be appropriate to carry out

1 the purposes, requirements and goals of this chapter.

2 B. Notwithstanding any other provision of law, any
3 rule-making hearing held under this chapter and re-
4 quired by the Maine Administrative Procedure Act, Title
5 5, chapter 375, shall be conducted by the Director of
6 the Office of Emergency Medical Services or a person in
7 a major policy-influencing position, as defined in
8 Title 5, section 711, who has responsibility over the
9 subject matter of the proposed rule.

10 C. The department, through the commissioner, shall
11 appoint a licensed physician as statewide emergency
12 medical services' medical director. The physician
13 shall advise the Office of Emergency Medical Services
14 and shall carry out the duties assigned to the medical
15 director by this chapter and by regulations promulgated
16 thereunder.

17 D. Regulations promulgated pursuant to this chapter
18 shall include, but not be limited to, the following:

19 (1) The composition of regional councils and the
20 process by which they come to be recognized as
21 representing their regions;

22 (2) The manner in which regional councils shall
23 report their activities and finances, and the man-
24 ner in which those activities shall be carried out
25 under this chapter;

26 (3) The designation of regions within the State;

27 (4) The requirements for licensure for all vehi-
28 cles, persons and services subject to this chap-
29 ter, and including training and testing of person-
30 nel; and

31 (5) Fees to be charged for licenses under this
32 section, except that no fee may be charged for the
33 licensing of emergency medical services' persons
34 under this chapter.

35 2. Goals. The department shall establish and pursue
36 its goals as follows.

37 A. The department shall monitor the provision of emer-
38 gency medical services within the State. The depart-
39 ment shall establish, by regulation, its goals in moni-

1 toring the provision of services and in insuring that
2 these services are appropriately delivered. These
3 goals shall be in the nature of objectives and shall
4 not constitute absolute requirements.

5 B. In each year, and in conjunction with the prepara-
6 tion of the emergency medical services' report, the
7 director with the advice of the board shall prepare a
8 list of those among the goals which most need to be
9 pursued in the succeeding year. This list shall be
10 made available to the regional councils so that they
11 may propose projects to further particular goals within
12 their own regions.

13 C. In pursuing these goals, the department may make
14 grants to the regional councils for projects they have
15 proposed, and which the department has determined are
16 consistent with the requirements and goals of this
17 chapter; contract for services; cooperate with other
18 departments or agencies; accept and disburse granted
19 funds; or act in other lawful ways as may best serve
20 the public good.

21 3. Work plans. Each year, the department shall issue
22 an emergency medical services' report indicating:

23 A. The extent to which the emergency medical system
24 was used throughout the State, and the incidence of
25 various medical conditions which called it into ser-
26 vice;

27 B. The extent and nature of the continuing programs of
28 training and support for emergency medical services
29 carried out by the regional councils and the Office of
30 Emergency Medical Services;

31 C. The extent to which the goals laid down in this
32 chapter were pursued, and with what success;

33 D. The plan, for the coming year, to pursue the vari-
34 ous goals; and

35 E. The income and expenditures of the Office of Emer-
36 gency Medical Services and of the regional councils.

37 §85. Emergency medical persons

38 1. Basic and advanced skills. With advice from and in
39 consultation with each regional council and its medical con-
40 trol committee and with the statewide emergency medical ser-

1 vices' medical director, the department may provide, by
2 regulation, which skills, techniques and judgments consti-
3 tute a basic emergency medical treatment.

4 2. Advanced emergency medical treatment. With the
5 advice and consultation noted in subsection 1, the depart-
6 ment may provide, by regulation, which advanced skills,
7 techniques and judgments may be supervised by a physician by
8 means of standing orders, by voice radio and by other means.
9 Nothing in this section may preclude protocols in a partic-
10 ular region from imposing controls more strict than those
11 permitted by the department's regulations on the use of a
12 skill, technique or judgment. In every case, advanced emer-
13 gency medical treatment shall be given in accordance with
14 protocols.

15 The department may establish by regulation appropriate
16 licensure levels for advanced emergency medical technicians
17 and fix the qualifications for persons to hold those
18 licenses.

19 3. Minimum requirements for licensing. In setting
20 regulations for the licensure of emergency medical services,
21 persons, the department shall insure that no person is li-
22 censed to care for patients unless his qualifications are at
23 least those specified in this subsection. Any person who
24 meets these conditions shall be considered to have the cre-
25 dentials and skill demonstrations necessary for the licensed
26 ambulance attendant level of licensure to provide basic
27 emergency medical treatment.

28 A. The person must have completed successfully the
29 United States Department of Transportation course for
30 first responders or completed successfully the American
31 Red Cross Advanced First Aid and Emergency Care Course,
32 with supplemental training in extrication, oxygen
33 administration and airway care, patient evaluation and
34 taking of vital signs.

35 B. The person must have successfully completed the
36 American Heart Association basic rescuer course in
37 cardiopulmonary resuscitation or its American Red Cross
38 equivalent.

39 C. The person must have successfully completed a state
40 written and practical test for basic emergency medical
41 treatment.

42 D. The person must be sponsored by a Maine licensed
43 ambulance service or first responder service.

1 The department may set by regulation intervals at which
2 these qualifications must be renewed and appropriate courses
3 and testing for that renewal.

4 §86. Ambulance services and first responder services

5 1. Ambulance services and first responder to be li-
6 censed. Every ambulance service and first responder service
7 shall be licensed and shall operate in accordance with the
8 regulations adopted for such services under this chapter and
9 shall carry the equipment called for in those regulations.

10 2. Care of patient. Whenever an ambulance transports
11 a patient from the scene of an emergency, the patient shall
12 be cared for by a physician or by a person licensed under
13 this chapter to provide emergency medical care. Whenever an
14 ambulance transports a patient from a hospital or other
15 health-care facility to another place, the patient shall be
16 cared for by:

17 A. The physician in charge of the patient's case, by a
18 person licensed under this chapter or by a professional
19 nurse; or

20 B. A licensed practical nurse, or other person appro-
21 priately trained to care for the patient, acting under
22 orders from the patient's physician.

23 The person specified in this subsection as caring for the
24 patient shall accompany the patient in the portion of the
25 ambulance where the patient rides.

26 3. Air transportation. Any patient transported by air
27 must be flown on a service licensed under Federal Aviation
28 Regulations, Part 135 or Part 121. In such an instance, the
29 flight shall be deemed to be an air ambulance, and the
30 patient must be cared for as provided in subsection 2.

31 §87. Ambulances

32 Each ambulance shall be licensed pursuant to this chap-
33 ter. It shall also meet the design criteria and shall be
34 equipped as specified in regulations adopted under this
35 chapter.

36 §88. Emergency Medical Services' Advisory Board

37 1. Composition; rules; meetings. The board's composi-
38 tion, conduct and compensation shall be as follows.

1 A. The board shall have one member representing each
2 regional council, and 7 persons in addition. Of the
3 additional persons, one shall be a physician, one an
4 attorney, one a representative of the public, one a
5 representative of for-profit ambulance services, one a
6 professional nurse, one a representative of first
7 responder services and one a representative of
8 not-for-profit ambulance services. The members shall
9 serve for 3-year terms, and shall be appointed by the
10 Governor.

11 B. The board shall elect its own chairman. It may
12 adopt internal rules, that shall require, among other
13 things, that the term of a member who does not attend
14 regularly be ended. In such a case, another person
15 shall be appointed by the Governor. The Office of
16 Emergency Medical Services shall provide such staff as
17 is practicable to the board and shall maintain the
18 board's records and files.

19 C. The board shall meet at least quarterly, and shall
20 also meet at the call of its chairman or of the depart-
21 ment. When the board meets, its members shall be paid
22 their travel costs and expenses, plus \$20 each day.
23 The same fees shall be paid to board members conducting
24 hearings under this chapter.

25 2. Functions. The board shall perform the following
26 functions.

27 A. The board shall advise the department on the con-
28 duct of the emergency medical services' program.

29 B. The board shall hold public hearings on any pro-
30 posed changes in the regulations allowed for in this
31 chapter. Hearings held pursuant to this section are
32 not subject to the Maine Administrative Procedure Act,
33 Title 5, chapter 375. In order to encourage participa-
34 tion in these hearings by volunteers, the board shall
35 hold 2 hearings in each region. Each hearing shall be
36 held in the evening. At least 2 members of the board
37 shall attend each hearing.

38 C. The board shall review applications for new and
39 renewed licenses for ambulance and first responder ser-
40 vices. It shall make recommendations to the department
41 concerning the new license applications. It may do so
42 for renewed applications.

43 §89. Regions and regional councils

1 1. Regions to be established; regional councils. The
2 commissioner shall delineate regions within the State for
3 the purposes of this chapter. The commissioner shall set
4 out conditions under which an organization in each region
5 may be recognized by the department as the regional council
6 for that region. A regional council shall, at least, pro-
7 vide adequate representation for ambulance and rescue ser-
8 vices, emergency room physicians and nurses, each hospital
9 and the general public. A regional council shall be struc-
10 tured to adequately represent each major geographical part
11 of its region. Only one regional council shall be recog-
12 nized in any region.

13 2. Duties of regional councils. The regional councils
14 shall function as the primary planning and operational units
15 of the statewide emergency medical services' system. Each
16 regional council shall carry out an annual program, approved
17 by the department, to further the goals specified in section
18 84, subsection 2. Specific responsibilities of the councils
19 include, but are not limited to, the following:

20 A. The establishment of a regional medical control
21 committee;

22 B. The appointment of a regional medical director, who
23 shall be a licensed physician;

24 C. Advising the department on the licensing of new
25 ambulance, first responder and air ambulance services
26 within each region;

27 D. Assisting the department in carrying on a program
28 of testing emergency medical services' persons within
29 each region, subject to availability of financial
30 resources for the testing;

31 E. Developing a certification and decertification pro-
32 cess for advanced emergency medical services' persons
33 within each region; and

34 F. Nominating 2 or more candidates from each council
35 for a position on the Emergency Medical Services' Advi-
36 sory Board, from whom the Governor may select a member.

37 §90. Appeals

38 Any person or organization, which is aggrieved by the
39 decision of the department in refusing to issue or review a
40 license, may claim a hearing pursuant to the Maine Adminis-
41 trative Procedure Act, Title 5, chapter 375.

1 Whenever the department decides to revoke or suspend a
2 license, it shall do so by filing a complaint with the
3 Administrative Court pursuant to the Maine Administrative
4 Procedure Act, Title 5, chapter 375. The department may
5 seek an emergency suspension, to be in effect for no more
6 than 30 days, from the Administrative Court pursuant to
7 Title 4, section 1153.

8 STATEMENT OF FACT

9 This new draft adds a penalty section for failure to
10 obtain licensure and also defines the degree of use which
11 makes a vehicle subject to licensure as an ambulance.

12 In the definitions section, it clarifies the point that
13 first responder services must have an agreement with a li-
14 censed ambulance service, and also adds the position of a
15 statewide emergency medical services' medical director,
16 appointed by the Commissioner of Human Services.

17 The department's ability to regulate the practice of
18 medicine through specifying the skills, techniques and judg-
19 ments constituting basic and advanced medical treatment is
20 modified, by requiring that the appropriate regulations be
21 promulgated after advice from and consultations with the
22 medical control committees within each regional council and
23 the statewide emergency medical services' medical director.
24 In addition, the local regions may set stricter protocols
25 for advanced emergency medical treatment.

26 The new draft adds language ensuring that nurses may
27 participate in patient care during transportation between a
28 hospital or health care facility and another place. In ad-
29 dition, patients transported by air must be flown on planes
30 licensed by the Federal Aviation Administration. The Emer-
31 gency Medical Services' Advisory Board is enlarged by adding
32 representatives of nurses and first responder services, and
33 all members are now selected by the Governor.

34 The duties of the regional councils are specifically
35 delineated; among them is the nominating by each council of
36 2 or more names, from whom the Governor may select that
37 council's representative on the board. The regional coun-
38 cils are also recognized as the primary planning and opera-
39 tional units of the statewide emergency medical services'
40 system.

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