## MAINE STATE LEGISLATURE

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## 132nd MAINE LEGISLATURE

## FIRST SPECIAL SESSION-2025

**Legislative Document** 

No. 1599

H.P. 1057

House of Representatives, April 10, 2025

An Act to Establish the Maine Emergency Medical Services Commission

Reference to the Committee on Criminal Justice and Public Safety suggested and ordered printed.

ROBERT B. HUNT
Clerk

Presented by Representative SALISBURY of Westbrook. Cosponsored by Senator TALBOT ROSS of Cumberland and

Representatives: BLIER of Buxton, DUCHARME of Madison, Senator: CURRY of Waldo.

1	Be it enacted by the People of the State of Maine as follows:		
2	Sec. 1. 5 MRSA §12004-J, sub-§22 is enacted	l to read:	
3	<u>22.</u>		
4 5 6	Emergency Maine Emergency Medical Services  Medical Commission  Services	Legislative Per Diem and Expenses	32 MRSA §99
7	Sec. 2. 32 MRSA §99 is enacted to read:		
8	§99. Maine Emergency Medical Services Commissi	ion	
9 10 11 12 13 14	1. Commission established. The Maine Emergency Medical Services Commission referred to in this section as "the commission," is established pursuant to Title 5, section 12004-J, subsection 22 to monitor and evaluate the State's emergency medical services system on a continuing basis and provide recommendations to the appropriate state agencies and to the Legislature regarding necessary changes in the emergency medical services system.		
15	2. Members. The commission consists of 26 mem	bers as follows:	
16 17 18 19	A. Three members of the Senate, including at least one member of the party holding the largest number of seats in the Legislature and at least one member of the party holding the 2nd largest number of seats in the Legislature, appointed by the President of the Senate;		
20 21 22 23	B. Three members of the House of Representative the party holding the largest number of seats in the of the party holding the 2nd largest number of seats the Speaker of the House of Representatives;	Legislature and at leas	t one member
24	C. The Commissioner of Health and Human Servi	ces or the commission	er's designee
25	D. The director or the director's designee;		
26	E. The chair of the board or the chair's designee;		
27	F. A representative of the Office of the Governor,	designated by the Go	vernor;
28	G. The following 6 members, appointed by the Go	overnor:	
29	(1) A representative of a statewide association	representing hospital	<u>s;</u>
30	(2) A representative of a statewide association	representing ambular	nce services;
31	(3) A representative of a statewide association	representing municip	palities;
32	(4) A representative of a statewide association	representing counties	<u>s;</u>
33	(5) A representative of a statewide association	representing fire chie	efs; and
34	(6) A member of the public;		
35	H. The following 5 members, appointed by the Pro-	esident of the Senate:	
36 37	(1) A member who is employed or volunteers		gency medical

1 (2) A member who is employed or volunteers in the field of emergency medical 2 services and represents a community of fewer than 10,000 residents; 3 (3) A representative of the Maine Community College System; 4 (4) A member with expertise in health insurance coverage, billing and associated matters relating to the provision of emergency medical services by an emergency 5 6 medical services provider licensed under section 82; and 7 (5) A member representing an emergency medical services provider licensed 8 under section 82 primarily engaged in the provision of nonemergency transporting; 9 and 10 The following 5 members, appointed by the Speaker of the House of 11 Representatives: 12 (1) A member representing an emergency medical services provider licensed under section 82 operating primarily in a rural area of the State; 13 14 (2) A member representing an emergency medical services provider licensed 15 under section 82 operating primarily in a nonrural area of the State; 16 (3) A member who is a volunteer emergency medical services person; 17 (4) A representative of the state chapter of a national organization representing 18 emergency physicians; and 19 (5) A member representing air ambulance services. 20 **3. Terms.** Terms of appointment for members are as follows. 21 A. The terms of appointment for legislative members appointed pursuant to subsection 22 2, paragraphs A and B coincide with their respective legislative terms of office. 23 B. Of the initial appointments made under subsection 2, paragraphs G, H and I, each 24 appointing authority shall appoint 2 members for terms of 3 years, 2 members for terms 25 of 2 years and the remaining members for terms of one year. Subsequent appointments 26 must be made for terms of 3 years. 27 C. Members may serve beyond their designated terms until their successors are 28 appointed. 29 **4. Officers.** The director shall call the first meeting of the commission as soon as all 30 appointments are made and as soon as funding permits. At the first meeting, the 31 commission shall select a chair, a vice-chair, a secretary and a treasurer from among its 32 members. The commission may select new officers annually. 33 5. Meetings. The commission may meet as often as necessary but must meet at least 34 quarterly. A meeting may be called by the chair or by any 4 members. The commission 35 shall take and maintain minutes of all meetings. 36 **6. Staffing.** If funding permits, the commission may employ staff as needed. The 37 staffs of the members represented on the commission may assist the commission in carrying 38 out its functions and duties within the staffs' existing resources. The commission may 39 contract for administrative, professional and clerical services if funding permits. 40 7. Funding. The commission may seek, accept and expend outside funding to carry

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out its duties.

1	8. Duties. The commission shall:		
2 3 4 5	A. Regularly advise the Governor and executive officers, the Legislature, Main Emergency Medical Services, emergency medical services providers licensed unde section 82 and any other parties affected by the commission's recommendation regarding emergency medical services;		
6 7 8 9	B. Submit a report containing the results of the commission's studies, findings and recommendations to the Governor and to the joint standing committee of the Legislature having jurisdiction over public safety matters by January 1st of each year. As resources permit, the report must include, but is not limited to:		
10 11 12	(1) An assessment of existing and needed resources and expected resource needs within the State's emergency medical services system and recommendations for funding those needs;		
13 14 15 16	(2) An evaluation of existing emergency medical services programs, initiatives and resources, including recommendations for improvements, for new programs and initiatives and for funding options for oversight and administration of the State's emergency medical services system; and		
17 18 19 20 21	(3) Recommendations for effective management of resources within the State's emergency medical services system; for enhancing the collection and distribution of emergency medical services data; regarding evaluation methodology for the State's emergency medical services system; and for recruitment and retention of emergency medical services persons, both paid and volunteer.		
22 23	After reviewing the report submitted under this paragraph, the committee may report out legislation relating to the report;		
24 25 26	C. Adopt rules necessary to carry out the commission's duties. Rules adopted pursuant to this paragraph are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A;		
27 28 29	D. Conduct public hearings, conferences, workshops and other meetings to obtain information about and discuss and publicize the needs of and solutions to problems concerning the State's emergency medical services system; and		
30 31	E. Submit proposed legislation to the Legislature to implement any recommendations of the commission.		
32	SUMMARY		
33 34 35 36	This bill establishes the Maine Emergency Medical Services Commission to monitor and evaluate the State's emergency medical services system on a continuing basis and provide recommendations to the appropriate state agencies and to the Legislature regarding necessary changes in the emergency medical services system.		