

MAINE STATE LEGISLATURE

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119th MAINE LEGISLATURE

FIRST REGULAR SESSION-1999

Legislative Document

No. 1473

H.P. 1051

House of Representatives, February 23, 1999

An Act to Amend the Maine Emergency Medical Services Act of 1982.

Submitted by the Department of Public Safety pursuant to Joint Rule 204.
Reference to the Committee on Criminal Justice suggested and ordered printed.

A handwritten signature in black ink that reads "Joseph W. Mayo".

JOSEPH W. MAYO, Clerk

Presented by Representative McALEVEY of Waterboro.
Cosponsored by Senator CAREY of Kennebec and
Representatives: BULL of Freeport, DUPLESSIE of Westbrook, MacDOUGALL of North
Berwick, PIEH of Bremen, STANWOOD of Southwest Harbor, Senator: PARADIS of
Aroostook.

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

2 **Sec. 1. 5 MRSA §948, sub-§1, ¶J**, as amended by PL 1995, c. 560,
4 Pt. C, §1 and affected by §4, is further amended to read:

6 J. Assistant Director, Maine Drug Enforcement Agency; and

8 **Sec. 2. 5 MRSA §948, sub-§1, ¶K**, as enacted by PL 1995, c.
10 560, Pt. C, §2 and affected by §4, is amended to read:

12 K. Two majors, Bureau of State Police; and

14 **Sec. 3. 5 MRSA §948, sub-§1, ¶L** is enacted to read:

16 L. Director, Maine Emergency Medical Services.

18 **Sec. 4. 32 MRSA §83, sub-§3-A**, as enacted by PL 1989, c. 857,
§62, is amended to read:

20 **3-A. Ambulance attendant.** "Ambulance attendant" means a
22 basic emergency medical services person who has completed the
~~minimum-training-specified-in-section-85,-subsection-3, Maine~~
24 Emergency Medical Services course for ambulance attendants and
has met the other conditions specified in rules under this
chapter for licensure at this level.

26 **Sec. 5. 32 MRSA §83, sub-§7**, as amended by PL 1997, c. 644,
28 §1, is further amended to read:

30 **7. Basic emergency medical technician.** "Basic emergency
32 medical technician" means a basic emergency medical services
person who has successfully completed the Maine Emergency Medical
34 Services course for emergency medical ~~treatments~~ technicians and
has met the other requirements for licensure at this level.

36 **Sec. 6. 32 MRSA §83, sub-§§13-A and 16-B** are enacted to read:

38 13-A. First responder. "First responder" means a basic
40 emergency medical services person who has successfully completed
the Maine Emergency Medical Services course for first responders
42 and has met the other requirements for licensure at this level.

44 16-B. Medical Direction and Practices Board. "Medical
46 Direction and Practices Board" means the subcommittee of the
board consisting of each regional medical director, a
48 representative of the Maine Chapter of the American College of
Emergency Medicine Physicians and the statewide emergency medical
services medical director. The Medical Direction and Practices

2 Board is responsible for creation, adoption and maintenance of
3 Maine Emergency Medical Services protocols.

4 **Sec. 7. 32 MRSA §83, sub-§19**, as amended by PL 1989, c. 857,
5 §68, is further amended to read:

6
7 **19. Protocol.** "Protocol" means the written statement,
8 ~~representing a consensus of the medical control physicians of an~~
9 ~~emergency medical services region~~ approved by the Medical
10 Direction and Practices Board and filed with the board,
11 specifying the conditions under which some form of emergency
12 medical care is to be given by emergency medical services persons.

13
14 **Sec. 8. 32 MRSA §85, sub-§3**, as amended by PL 1995, c. 161,
15 §§5 and 6, is further amended to read:

16
17 **3. Minimum requirements for initial licensing.** In setting
18 rules for the initial licensure of emergency medical services
19 persons, the board shall ensure that a person is not licensed to
20 care for patients unless that person's qualifications are at
21 least those specified in this subsection. Any person who meets
22 these conditions is considered to have the credentials and skill
23 demonstrations necessary for ~~the ambulance attendant level of~~
24 licensure to provide basic emergency medical treatment.

25
26 A. The person must have completed successfully the training
27 specified in rules adopted by the board pursuant to the
28 Maine Administrative Procedure Act.

29
30 B. The person must have successfully completed
31 cardiopulmonary resuscitation certification requirements as
32 specified in rules adopted by the board pursuant to the
33 Maine Administrative Procedure Act.

34
35 C. The person must have successfully completed a state
36 written and practical test for basic emergency medical
37 treatment.

38
39 D. The person must be sponsored by a Maine licensed
40 ambulance service or nontransporting emergency medical
41 service.

42
43 **Sec. 9. 32 MRSA §86**, as amended by PL 1995, c. 161, §§7 and
44 8, is further amended by amending the headnote to read:

45 **§86. Ambulance services and nontransporting medical services**

46
47 **Sec. 10. 32 MRSA §86, sub-§2**, as amended by PL 1991, c. 588,
48 §14, is further amended to read:

49
50

2 **2. Care of patient.** Whenever an ambulance transports a
3 patient from the scene of an emergency, the patient must be cared
4 for by a physician, by a flight nurse or by a person licensed
5 under this chapter to provide emergency medical care. Whenever an
6 ambulance transports a patient from a hospital or other health
7 care facility to another place, the patient must be cared for by:

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

11 B. A licensed practical nurse, or other person
12 appropriately trained to care for the patient, acting under
13 orders from the patient's physician.

14 The person specified in this subsection as caring for the patient
15 shall accompany the patient in the portion of the ambulance where
16 the patient rides.
17

18 **Sec. 11. 32 MRSA §86, sub-§2-A,** as amended by PL 1995, c. 161,
19 §8, is further amended to read:

20 **2-A. Treatment to be in accord with regional medical**
21 **orders.** When an ambulance service or nontransporting emergency
22 medical service is present at an accident or other situation in
23 which a person or persons require emergency medical treatment,
24 the medical treatment of the patients must be carried out in
25 accordance with any rules adopted under this chapter, any
26 protocols ~~issued by the regional medical director~~ as defined in
27 section 83, subsection 19 and any verbal orders given under the
28 system of delegation established by the regional medical
29 director; except that:
30

31 A. When a patient is already under the supervision of a
32 personal physician or a physician's assistant or nurse
33 practitioner supervised by that physician and the physician,
34 physician's assistant or nurse practitioner assumes the care
35 of the patient, then for as long as the physician,
36 physician's assistant or nurse practitioner remains with the
37 patient, the patient must be cared for as the physician,
38 physician's assistant or nurse practitioner directs. The
39 emergency medical services persons shall assist to the
40 extent that their licenses and protocol allow; and
41

42 B. No patient is required to accept treatment to which the
43 patient does not consent.
44

45 **Sec. 12. 32 MRSA §88, sub-§2, ¶¶B and D,** as amended by PL 1991,
46 c. 588, §16, are further amended to read:
47

2 B. With the advice of the commissioner, the board shall
adopt rules in accordance with the Maine Administrative
4 Procedure Act to carry out this chapter. In order to
encourage participation at rule-making hearings by emergency
6 medical services volunteers, the board shall hold hearings
in each region as determined necessary. Each hearing must
8 be held in the evening or at times convenient to the public
and may use available technology. At least 2 members of the
board shall attend each hearing.

10 D. The board shall specify in rules the criteria that must
12 be met as a precondition to offering an emergency medical
services course, refresher course or continuing education
14 course. The board shall work toward developing consistent
educational programming in terms of course content, course
16 requirements and quality of instruction. The board shall
18 adopt rules, which are routine technical rules pursuant to
Title 5, chapter 375, subchapter II-A, regarding the
20 requirements for certification, recertification and
decertification of persons engaged in emergency medical
22 services education and training.

24 **Sec. 13. 32 MRSA §88, sub-§2, ¶F-1**, as repealed and replaced by
PL 1993, c. 575, §1, is amended to read:

26 F-1. The director must be qualified by training or by
experience and is appointed by the board with approval of
28 the commissioner. The director serves for an indefinite
term, subject to removal for cause. ~~The Governor shall set~~
30 ~~the compensation of the director.~~

32 **Sec. 14. 32 MRSA §88, sub-§2, ¶J** is enacted to read:

34 J. The board shall establish and maintain a statewide
quality assurance and improvement committee and shall adopt
36 rules, which are routine technical rules pursuant to Title
5, chapter 375, subchapter II-A, regarding the requirements
38 and authority of the statewide quality assurance and
improvement committee.

40 **Sec. 15. 32 MRSA §89, sub-§2, ¶E**, as amended by PL 1991, c.
42 588, §18, is further amended to read:

44 E. Developing Assisting the board in developing and
implementing a statewide certification and decertification
46 process for advanced emergency medical services persons
within each region;

SUMMARY

2

4 This bill amends the laws regarding emergency medical services in the following ways.

6 1. It makes the position of Director of Maine Emergency Medical Services a major policy-influencing position and deletes
8 language that requires the Governor to set the director's salary.

10 2. It amends the definitions of "ambulance attendant," "basic emergency medical technician" and "protocol." It also
12 creates new definitions for "first responder" and "Medical Direction and Practices Board."
14

16 3. It allows the Medical Direction and Practices Board to define protocols for the emergency medical services system.

18 4. It makes minor technical changes in the language regarding the minimum requirements for initial licensing of
20 emergency medical services persons.

22 5. It allows flight nurses to care for patients being transported by ambulance from the scene of an emergency.
24

26 6. It allows the Emergency Medical Services' Board to hold rule-making hearings regionally using current technology such as
28 video conferencing. It also makes it clear that the board may adopt rules establishing the requirements for certification,
30 recertification and decertification of persons engaged in emergency medical services education and training.

32 7. It provides for the certification and decertification of emergency medical services persons on a statewide rather than a
34 regional basis.

36 8. It expands the responsibilities of the Emergency Medical Services' Board to include the creation of a statewide quality
38 assurance and improvement committee.