

MAINE STATE LEGISLATURE

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121st MAINE LEGISLATURE

FIRST REGULAR SESSION-2003

Legislative Document

No. 949

H.P. 706

House of Representatives, February 25, 2003

**An Act To Eliminate the 6 Regional Emergency Medical Services
Councils and To Transfer Authority and Funding to the Technical
Colleges in Each Region**

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

Millicent M. MacFarland
MILLICENT M. MacFARLAND
Clerk

Presented by Representative BLANCHETTE of Bangor.
Cosponsored by Senator CARPENTER of York and
Representatives: BULL of Freeport, CLARK of Millinocket, DUPLESSIE of Westbrook,
GERZOFKY of Brunswick, LESSARD of Topsham, McLAUGHLIN of Cape Elizabeth,
TRAHAN of Waldoboro, Senator: DAMON of Hancock.

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

4 **Sec. 1. 32 MRSA §83, sub-§20**, as amended by PL 1985, c. 730, §§8 and 16, is repealed.

6 **Sec. 2. 32 MRSA §83, sub-§22-A** is enacted to read:

8 **22-A. Supervising technical college.** "Supervising
10 technical college" means a college designated in Title 20-A,
12 section 12714 and recognized by the board to represent a region
of the State, as designated by the board, with respect to matters
subject to this chapter.

14 **Sec. 3. 32 MRSA §84, sub-§1, ¶D**, as amended by PL 1991, c.
16 588, §9, is further amended to read:

18 D. Rules adopted pursuant to this chapter must include, but
are not limited to, the following:

20 (1) The ~~composition--of--regional--councils--and--the~~
22 process by which they the supervising technical
colleges come to be recognized as representing their
24 regions;

26 (2) The manner in which ~~regional--councils~~ the
supervising technical colleges must report their
28 activities and finances, and the manner in which those
activities must be carried out under this chapter;

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

32 (4) The requirements for licensure for all vehicles,
34 persons and services subject to this chapter, including
training and testing of personnel; and

36 (5) Fees to be charged for licenses under this section.

38 In adopting any rule under subparagraph (4) that requires
40 services that deliver advanced care to meet a specified
percentage level of performance, the regulation may not take
42 effect unless the level is specified after study, in
cooperation with ~~regional--councils~~ supervising technical
colleges and local service units.

44 **Sec. 4. 32 MRSA §84, sub-§2**, as amended by PL 1991, c. 588,
46 §11, is further amended to read:

48 **2. Goals.** The board shall establish and pursue its goals
as follows.

50

2 A. The board shall monitor the provision of emergency
3 medical services within the State. The board shall
4 establish, by rule, its goals in monitoring the provision of
5 services and in ~~insuring~~ ensuring that these services are
6 appropriately delivered. These goals must be in the nature
7 of objectives and do not constitute absolute requirements.
8 In establishing these goals, the board shall seek the input
9 of individuals, agencies, services and organizations
10 interested in emergency medical services. The board shall
11 also take into consideration the goals established by the
12 ~~regional-councils~~ supervising technical colleges pursuant to
13 section 89.

14 B. In each year, and in conjunction with the preparation of
15 the emergency medical services report, the director under
16 the direction of the board shall prepare a list of those
17 among the goals that most need to be pursued in the
18 succeeding year. This list must be made available to the
19 ~~regional-councils~~ supervising technical colleges so that the
20 ~~regional-councils~~ supervising technical colleges may propose
21 projects to further particular goals within their own
22 regions.

24 C. In pursuing these goals, the board may make grants to
25 the ~~regional-councils~~ supervising technical colleges for
26 projects the ~~regional-councils~~ supervising technical
27 colleges have proposed, and that the board has determined
28 are consistent with the requirements and goals of this
29 chapter; contract for services; cooperate with other
30 departments or agencies; accept and disburse granted funds;
31 or act in other lawful ways as may best serve the public
32 good.

34 **Sec. 5. 32 MRSA §84, sub-§3, ¶¶B and E**, as amended by PL 1991,
35 c. 588, §12, are further amended to read:

36 B. The extent and nature of the continuing programs of
37 training and support for emergency medical services carried
38 out by the ~~regional-councils~~ supervising technical colleges
39 and Maine Emergency Medical Services;

42 E. The income and expenditures of the board and of the
43 ~~regional-councils~~ supervising technical colleges on
44 emergency medical services.

46 **Sec. 6. 32 MRSA §84-A, sub-§1, ¶A**, as enacted by PL 1985, c.
47 730, §§10 and 16, is amended to read:

48 A. To review the function and operation of the board and
49 ~~regional-councils~~, in matters involving emergency medical

2 services, the supervising technical colleges to assure
3 ensure that these organizations are in compliance with their
4 statutory and public service responsibilities;

5 **Sec. 7. 32 MRSA §85, sub-§1**, as amended by PL 1985, c. 730,
6 §§11 and 16, is further amended to read:

7 **1. Basic and advanced skills.** With advice from and in
8 consultation with each ~~regional--council~~ supervising technical
9 college and its medical control committee and with the statewide
10 emergency medical services' medical director, the board may
11 provide, by rule, which skills, techniques and judgments
12 constitute a basic emergency medical treatment.

13 **Sec. 8. 32 MRSA §87-A, sub-§1**, as enacted by PL 1993, c. 311,
14 §4, is amended to read:

15 **1. Trauma care system development.** Maine Emergency Medical
16 Services shall develop a statewide trauma care system plan with
17 the advice of the State Trauma Prevention and Control Advisory
18 Committee and the ~~regional--emergency--medical--services--councils~~
19 supervising technical colleges.

20 **Sec. 9. 32 MRSA §87-A, sub-§2, ¶H**, as enacted by PL 1993, c.
21 311, §4, is amended to read:

22 **H.** A ~~regional--emergency--medical--services--coordinator~~
23 representative of a supervising technical college;

24 **Sec. 10. 32 MRSA §88, sub-§1, ¶A**, as amended by PL 2001, c.
25 713, §1, is further amended to read:

26 **A.** The board has one member representing each ~~regional~~
27 ~~council~~, supervising technical college and 11 persons in
28 addition. Of the additional persons, one is an emergency
29 physician, one an attorney, ~~two~~ 2 representatives of the
30 public, one a representative of for-profit ambulance
31 services, one an emergency professional nurse, one a
32 representative of nontransporting emergency medical
33 services, one a representative of hospitals, one a
34 representative of a statewide association of fire chiefs,
35 one a fire services provider and one a representative of
36 not-for-profit ambulance services. The members that
37 represent for-profit ambulance services, nontransporting
38 emergency medical services and not-for-profit ambulance
39 services must be licensed emergency medical services
40 persons. One of the nonpublic members must be a volunteer
41 emergency medical services provider. Appointments are for
42 3-year terms. Members are appointed by the Governor. The

2 state medical director is an ex officio nonvoting member of
the board.

4 **Sec. 11. 32 MRSA §88, sub-§2, ¶E,** as amended by PL 1989, c.
6 857, §70, is further amended to read:

8 E. The board shall keep records and minutes of its
10 activities and meetings. These records and minutes must be
12 made easily accessible to the public and be provided
14 expeditiously upon request. The board shall distribute to
all licensed emergency medical services persons a
publication listing training and testing opportunities,
meeting schedules of the board and ~~regional--councils~~
supervising technical colleges, proposed rule changes and
other information judged by the board to have merit in
improving emergency medical patient care in the State. The
board shall create, print and distribute this publication in
the most cost-efficient manner possible. Any paid
advertising utilized to accomplish this purpose may not be
solicited by board members or staff and must be included in
such a way that endorsement of a product or service by the
board can not reasonably be inferred. The board may
prepare, publish and disseminate educational and other
materials to improve emergency medical patient care.

26 **Sec. 12. 32 MRSA §88, sub-§2, ¶H,** as amended by PL 1991, c.
28 588, §16, is further amended to read:

30 H. With the approval of the commissioner, the board may
32 enter into contracts, subject to provisions of state law,
and delegate this authority to the director. The board may
also delegate, through rules, to staff, any provision
necessary to carry out this chapter, including the process
of hearings. Funds appropriated or allocated to the board
to be contracted with the ~~regional--councils~~ supervising
technical colleges may be disbursed on a sole-source
contract basis, according to guidelines established by the
board. Funds must be expended in accordance with standard
state contract or grant procedures and guidelines where
appropriate.

42 **Sec. 13. 32 MRSA §89,** as amended by PL 1999, c. 182, §15, is
44 further amended to read:

46 **§89. Regions and supervising technical colleges**

48 **1. Regions to be established; supervising technical**
50 **colleges.** The board shall delineate regions within the State to
carry out the purposes of this chapter. The board shall set out
conditions under which ~~an-organization~~ a technical college in

each region may be recognized by the board as the ~~regional~~
2 ~~eeuneil~~ supervising technical college for that region. A
3 ~~regional--eeuneil~~ supervising technical college shall, at a
4 minimum, provide adequate representation for ambulance and rescue
5 services, emergency room physicians and nurses, each hospital and
6 the general public. A ~~regional--eeuneil~~ supervising technical
7 college must be structured to adequately represent each major
8 geographical part of its region. Only one ~~regional--eeuneil~~
supervising technical college may be recognized in any region.

10
11 **2. Duties of supervising technical colleges.** The ~~regional~~
12 ~~eeuneils~~ supervising technical colleges shall function as the
13 primary planning and operational units of the statewide emergency
14 medical services system. Each ~~regional--eeuneil~~ supervising
15 technical college shall carry out an annual program, approved by
16 the board, to further the goals specified in section 84,
17 subsection 2. Specific responsibilities of the ~~eeuneils~~
18 supervising technical colleges include, but are not limited to,
19 the following:

20 A. Establishing a regional medical control committee;

21
22 B. Appointing, subject to approval by the board, a regional
23 medical director, who must be a licensed physician and shall
24 serve as an agent of Maine Emergency Medical Services. The
25 regional medical director may delegate in writing to other
26 licensed physicians, who shall similarly serve as agents of
27 Maine Emergency Medical Services, the responsibilities of
28 this position;

29
30 C. Advising the board on the licensing of new ambulance,
31 nontransporting emergency medical and air ambulance services
32 within each region;

33
34 D. Assisting Maine Emergency Medical Services in carrying
35 on a program of testing emergency medical services persons
36 within each region, subject to availability of financial
37 resources for the testing;

38
39 E. Assisting the board in developing and implementing a
40 statewide certification and decertification process for
41 emergency medical services persons;

42
43 F. Nominating 2 or more candidates from each ~~eeuneil~~
44 supervising technical college for a position on the
45 Emergency Medical Services' Services Board, from whom the
46 Governor may select a member; and

47
48 G. Establishing regional goals to carry out the provisions
49 of this chapter.
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2

SUMMARY

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This bill eliminates the current 6 regional emergency medical services councils and transfers the authority and funding to the technical colleges in each region.