

CHAPTER 343 (HB 405)

AN ACT relating to emergency medical services.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

Section 1. KRS 211.950 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

As used in KRS ~~311.652 to 311.658~~~~[211.952 to 211.956]~~, unless the context otherwise requires:

- (1)~~["Advisory committee" means the Emergency Medical Services for Children Advisory Committee of the Kentucky Emergency Medical Services Council established under KRS 211.9533;~~
- ~~(2)~~~~["Ambulance" means a vehicle which has been inspected and approved by the *board*~~[cabinet]~~, including a helicopter or fixed wing aircraft, except vehicles or aircraft operated by the United States government, that are specially designed, constructed, or have been modified or equipped with the intent of using the same, for the purpose of transporting any individual who is sick, injured, or otherwise incapacitated who may require immediate stabilization and continued medical response and intervention during transit or upon arrival at the patient's destination to safeguard the patient's life or physical well-being;~~
- ~~(2)~~~~(3)~~~~["Ambulance provider" means any individual or private or public organization, except the United States government, who is licensed by the *Kentucky Board of Emergency Medical Services*~~[Cabinet for Health Services]~~ to provide medical transportation services as either basic life support or advanced life support and who may have a vehicle or vehicles, including ground vehicles, helicopters, or fixed-wing aircraft. An ambulance provider may be licensed as an air ambulance provider; as a Class I ground ambulance provider; as a Class II ground ambulance provider; or as a Class III ground ambulance provider;~~
- (3) **"Board" means the Kentucky Board of Emergency Medical Services;**
- (4) "Department" means the Department for Public Health;
- (5) "Emergency medical facility" means a hospital, trauma center, or any other institution licensed by the Cabinet for Health Services that furnishes emergency medical services;
- (6) "Emergency medical services" means the services utilized in responding to the perceived individual need for immediate medical care to protect against loss of life, or aggravation of physiological or psychological illness or injury;
- (7) "Emergency Medical Services for Children Program" or "EMSC Program" means the program established under **Section 5 of this Act**~~[KRS 211.9531]~~;
- (8) "Emergency medical services personnel" means persons, including physicians, certified or licensed, and trained to provide emergency medical services, whether on a paid or volunteer basis, as part of basic life support, advanced life support, **or** prehospital **services**~~[-, or hospital emergency care services or in an emergency department or critical care or specialized unit in a licensed hospital or other licensed emergency or critical care medical facility]~~;
- (9) "Emergency medical services system" means a coordinated system of health-care delivery that responds to the needs of acutely sick and injured adults and children, and includes community education and prevention programs, centralized access and emergency medical dispatch, communications networks, trained emergency medical services personnel, medical

first response, ground and air ambulance services, ~~emergency medical facilities and specialty care hospitals,~~ trauma care systems, mass casualty management, medical direction, and quality control and system evaluation procedures;

- (10) ***"Emergency medical technician" or "(EMT)" means a person certified under KRS 311.652 to 311.658 as an EMT-first responder, EMT-basic, EMT-basic instructor, EMTinstructor trainer, or EMT-first responder instructor;***
- (11) ***"Medical director" means a physician licensed in Kentucky who is employed by, under contract to, or has volunteered to serve as the medical director of a licensed ambulance service;***
- (12) ***"Paramedic" means a person who is primarily involved in the delivery of emergency medical services and is licensed under KRS 311.652 to 311.658;***
- (13) ***"Prehospital care" means the provision of emergency medical services or transportation by trained and certified or licensed emergency medical services personnel at the scene of an emergency or while transporting sick or injured persons to a hospital or other emergency medical facility;***
- (14)~~(11)~~ ***"Regional emergency medical services system" means a system approved by the Kentucky Board of Emergency Medical Services~~{Cabinet for Health Services}~~ which provides for the arrangement of personnel, facilities, equipment, or any of the above, for the effective and coordinated delivery of health-care services in an appropriate geographical area;***
- (15)~~(12)~~ ***"Trauma" means a single or multisystem life-threatening or limb-threatening injury requiring immediate medical or surgical intervention or treatment to prevent death or permanent disability; and***
- (16)~~(13)~~ ***"Trauma care system" means a subsystem within the emergency medical services system consisting of an organized arrangement of personnel, equipment, and facilities designed to manage the treatment of the trauma patient.***

SECTION 2. A NEW SECTION OF KRS 311.652 TO 311.658 IS CREATED TO READ AS FOLLOWS:

- (1) ***The Kentucky Board of Emergency Medical Services is created and shall consist of sixteen (16) members who are residents of Kentucky appointed by the Governor in conjunction with recognized state emergency medical services related organizations. Membership shall be made up of the following:***
- (a) ***One (1) paramedic who works for a government agency but is not serving in an educational, management, or supervisory capacity;***
- (b) ***One (1) emergency medical technician-basic who works for a government agency but is not serving in an educational, management, or supervisory capacity;***
- (c) ***One (1) emergency medical technical-first responder who is not serving in an educational, management, or supervisory capacity;***
- (d) ***One (1) physician licensed in Kentucky having a primary practice in the delivery of emergency medical care selected from a list of three (3) physicians submitted by the Kentucky Medical Association;***

- (e) One (1) physician licensed in Kentucky serving as medical director of an advanced life support ambulance service, selected from a list of three (3) physicians submitted by the Kentucky Medical Association;*
 - (f) One (1) physician licensed in Kentucky who is routinely involved in the emergency care of ill and injured children selected from a list of three (3) physicians submitted by the Kentucky Medical Association;*
 - (g) One (1) trauma surgeon licensed in Kentucky selected from a list of three (3) physicians submitted by the Kentucky Medical Association;*
 - (h) One (1) citizen having no involvement in the delivery of medical or emergency services;*
 - (i) One (1) emergency medical services educator from a Kentucky college or university that provides an emergency medical services educational program;*
 - (j) One (1) mayor of a city that operates, either directly or through contract services, a licensed Class I ground ambulance service;*
 - (k) One (1) county judge/executive from a county that operates, whether directly or through contract services, a licensed Class I ground ambulance service;*
 - (l) One (1) volunteer-staffed, licensed Class I ground ambulance service administrator who is a certified emergency medical technician or a licensed paramedic;*
 - (m) One (1) fire-service-based, licensed Class I ground ambulance service administrator who is a certified emergency medical technician or a licensed paramedic;*
 - (n) One (1) hospital administrator selected from a list of five (5) nominees submitted by the Kentucky Hospital Association;*
 - (o) One (1) basic life support, licensed Class I government-operated ground ambulance service administrator who is a certified emergency medical technician or a licensed paramedic; and*
 - (p) One (1) advanced life support, government-operated ambulance service administrator who is a certified emergency medical technician or a licensed paramedic.*
- (2) No board member shall serve more than two (2) consecutive terms.*
 - (3) The board shall elect a chair by majority vote of the members present at its first annual meeting.*
 - (4) The board shall adopt a quorum and rules of procedure by administrative regulation.*
 - (5) A member of the board who misses three (3) meetings in one (1) year shall be deemed to have resigned from the board and his or her position shall be deemed vacant. The person removed under this subsection shall not be reappointed to the board for ten (10) years. The year specified in this subsection shall begin with the first meeting missed and end three hundred sixty-five (365) days later or with the third meeting missed, whichever occurs earlier. The Governor shall appoint a person of the same class to fill the vacancy within ninety (90) days.*
 - (6) Members of the board and of all committees shall be entitled to reimbursement for actual and necessary expenses when carrying out official duties of the board in accordance with*

state administrative regulations relating to travel reimbursement. The board shall meet at least six (6) times each year.

(7) The board shall:

- (a) Exercise all of the administrative functions of the state in the regulation of the emergency medical services system and the practice of first responders, emergency medical technicians, paramedics, ambulance services, and training institutions;**
- (b) Issue, deny, suspend, limit, restrict, and revoke any licenses or certifications, and reprimand or place an individual with a license or certificate on probation;**
- (c) Appoint an executive director and fix the compensation. The executive director shall serve at the pleasure of the board, administer the day-to-day operations of the agency, and supervise all directives of the board. The director shall possess a baccalaureate degree and shall have no less than five (5) years of experience in public administration or in the administration of an emergency medical services program;**
- (d) Appoint or contract with a physician who is board certified in emergency medicine and fix the compensation. The physician shall serve as the medical advisor to the Kentucky Board of Emergency Medical Services and the staff of the board;**
- (e) Appoint a general counsel and fix the compensation;**
- (f) Employ personnel sufficient to carry out the statutory responsibilities of the board.
 - 1. Personnel assigned to regulate or support the emergency medical technician first responder program shall be certified emergency medical technician first responders or emergency medical technicians.**
 - 2. Personnel assigned to regulate or support the emergency medical technician program shall be certified emergency medical technicians or paramedics.**
 - 3. Personnel assigned to regulate or support the paramedic program shall be licensed paramedics.**
 - 4. Personnel in purely clerical roles need not be certified in the manner specified in this section;****
- (g) Establish committees and subcommittees, who need not be members of the board, as necessary;**
- (h) Collect any fees established by the promulgation of administrative regulations;**
- (i) Investigate and hold hearings for any disciplinary proceedings in accordance with KRS Chapter 13B;**
- (j) Establish and impose fines against individuals or agencies governed by the board;**
- (k) Enter into contracts, apply for grants and federal funds, and disburse funds to local units of government as approved by the General Assembly;**
- (l) Maintain a program and provide technical assistance for the planning, development, improvement, and expansion of emergency medical services systems and trauma care systems throughout the state;**
- (m) Collect and analyze data for evaluation of emergency medical services in the Commonwealth;**

- (n) *Administer the Emergency Medical Services for Children Program; and*
 - (o) *Establish minimum curriculum and standards for emergency medical services training.*
- (8) *The board may utilize materials, services, or facilities as may be made available to it by other state agencies or may contract for materials, services, or facilities.*

Section 3. KRS 211.952 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

The Kentucky Board of Emergency Medical Services shall promulgate administrative regulations in accordance with KRS Chapter 13A to carry out the functions of KRS 311.652 to 311.658, including, but not limited to:

- (1) ~~[/The Cabinet for Health Services shall maintain a program for the planning, development, improvement, and expansion of emergency medical services systems and trauma care systems throughout the state.]~~
- (2) ~~[/The Cabinet for Health Services shall establish and designate a single lead agency under the supervision and direction of the commissioner of public health which will carry out all administrative functions related to the planning, development, improvement, and expansion of emergency medical services systems throughout the state. This will include:]~~
 - (a) ~~[/The training and certification of prehospital personnel;]~~
 - (b) ~~[/The promulgation of standards and regulations for emergency medical services personnel;]~~
 - (c) ~~[/The promulgation of administrative regulations for the]~~Licensing, *inspecting*~~[inspection]~~, and *regulating*~~[regulation]~~ of ambulance *services* and medical first-response providers. The administrative regulations shall address specific requirements for:
 - (a)~~[1.]~~—Air ambulance providers, which provide basic or advanced life support services;
 - (b)~~[2.]~~Class I ground ambulance providers, which provide basic life support or advanced life support services to all patients for~~[both]~~ emergencies and scheduled ambulance transportation which is medically necessary;
 - (c)~~[3.]~~Class II ground ambulance providers, which provide only basic life support services but do not provide initial response to the general population with medical emergencies and which are limited to providing scheduled ambulance transportation which is medically necessary;
 - (d)~~[4.]~~Class III ground ambulance providers, which provide mobile intensive care services at or above the level of advanced life support to patients with critical illnesses or injuries who must be transported between hospitals in vehicles with specialized equipment as an extension of hospital-level care; and
 - (e)~~[5.]~~Medical first-response providers, *which*~~[who]~~ provide prehospital basic life support services, or advanced life support services, but do not transport patients;
- (2)~~[(d)]~~ *Establishing*, planning, and *developing*~~[development of]~~ emergency medical services and trauma care systems;

- (3)~~(e)~~ ~~*Promulgating*~~~~[Promulgation of]~~ voluntary standards for trauma centers and other specialized emergency medical facilities;
- ~~[(f) Provision of funding and technical assistance as shall become available; and]~~
- (4)~~(g)~~ Establishing minimum data reporting requirements, including requirements specifically related to emergency medical services and trauma care of children, for ambulance providers and trauma centers~~[and other specialized emergency medical facilities]~~ and collection and analysis of data related to the provision of emergency medical services and trauma care;~~[and]~~
- (5)~~(h)~~ ~~*Maintaining*~~~~[Establishing]~~ the Emergency Medical Services for Children Program with federal funds so designated plus any additional funds that may be appropriated by the General Assembly, or any other funds that may become available to the ***Kentucky Board of Emergency Medical Services***~~[cabinet]~~, including gifts, grants, or other sources;~~[-]~~
- ~~(3) Nothing in this section shall be construed to change or alter the issuance of certificates of need for emergency medical services providers.]~~
- (6)~~(4)~~ ~~*Developing*~~~~[The cabinet shall promulgate administrative regulations and perform the necessary functions to carry out the purpose of this section including:~~
- ~~(a) Delineation, by administrative order of the secretary, of the geographic boundaries of regional emergency medical services systems.~~
- ~~(b) Promulgation of administrative regulations providing for:~~
- ~~1. Composition of regional emergency medical services advisory boards to serve in an advisory capacity to the Kentucky Emergency Medical Services Council;~~
 - ~~2. Terms of office of regional emergency medical services advisory board members;~~
 - ~~3. Appointment of regional emergency medical services advisory board members; and~~
 - ~~4. Such other matters relating to regional emergency medical services systems as may be necessary.~~
- ~~(c) Provision of technical assistance to regional emergency medical services advisory boards, units of local government, and others in planning for the development, coordination, and monitoring of emergency medical services.~~
- ~~(d) Development of] a statewide plan for the implementation of emergency medical services systems and trauma care systems within the Commonwealth of Kentucky *that*[which] specifically addresses the unique needs of rural areas;[-]~~
- (7)~~(e)~~ ~~*Issuing*~~~~[Issuance of]~~ a format for the development of regional emergency medical services plans consistent with goals and standards included in the statewide emergency medical services plan.
- (8)~~(f)~~ ~~*Applying*~~~~[Application]~~ for, ~~*receiving*~~~~[receipt of]~~, and ~~*disposing*~~~~[disposition]~~ of federal, state, or private funds by grant, appropriation, donation, or otherwise for emergency medical services programs, personnel, and equipment;~~[-]~~
- ~~(g) Awarding of funds to regional emergency medical services systems to implement specific objectives delineated in regional emergency medical services plans, including assistance to local governments for their provision of ambulance service.]~~

(9) ~~[(h)]~~ *Developing* ~~[Development]~~, monitoring, and *encouraging* ~~[encouragement]~~ of ~~[such]~~ other projects and programs *that* ~~[which]~~ may be of benefit to emergency medical services in the Commonwealth; *and*

(10) *Establishing standards related to the training of emergency medical services personnel.*

Nothing in this section shall be construed to change or alter the issuance of certificates of need for emergency medical services providers.

~~[(i)]~~ ~~Conducting verification inspections to ensure compliance with voluntary standards established by the cabinet for trauma centers, emergency departments, and specialized hospital based services for which standards have been established by the cabinet for emergency medical services and trauma care systems.~~

~~(5) The cabinet shall establish a Kentucky Emergency Medical Services Council which shall advise the cabinet on issues relating to the development, implementation, regulation, maintenance, and reimbursement of emergency medical services systems and providers. This council shall be broadly representative of individuals, providers, and public officials having expertise in emergency medical services. The council shall consult with the Kentucky Board of Medical Licensure to establish medically appropriate standards and protocols which will be utilized by emergency medical services personnel and to assist the Kentucky Board of Medical Licensure in meeting the requirements of KRS 311.654. The council shall consult with the Kentucky Board of Nursing to establish appropriate standards and protocols to meet the requirements of KRS 314.131 for nurses who practice in emergency medical service settings.~~

~~(6) Data and records generated and kept by the single emergency medical services administrative agency, the Kentucky Emergency Medical Services Council, the Emergency Medical Services for Children Advisory Committee, the Kentucky Emergency Medical Services for Children Program or their contractors regarding the evaluation of emergency medical care and trauma care in the Commonwealth, including the identities of patients, emergency medical services personnel, ambulance providers, medical first response providers, and emergency medical facilities, shall be held confidential, shall not be subject to disclosure under KRS 61.805 to 61.884, shall not be admissible in court for any purpose, and shall not be subject to discovery; provided, however, that nothing in this section shall limit the discoverability or admissibility of patient medical records regularly and ordinarily kept in the course of a patient's treatment which otherwise would be admissible or discoverable.~~

~~(7) Nothing in this section shall limit, preclude, or otherwise restrict the practices of licensed personnel in carrying out their duties under the terms of their licenses.]~~

Section 4. KRS 211.953 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

The Kentucky General Assembly declares that the purpose of *Section 5 of this Act* ~~[KRS 211.9531 and 211.9533]~~ is to establish a comprehensive emergency medical services system for children, as an integral part of Kentucky's overall emergency medical services and trauma care system, in order to provide children with access to comprehensive emergency ~~[and critical care medical services, including preventive, prehospital, hospital, rehabilitation, and other posthospital]~~ care. The General Assembly recognizes the contributions of the federally funded Emergency Medical Services for Children program in Kentucky and desires to continue and expand the activities initiated by this program. The General Assembly finds that coordination of emergency services, additional training

of emergency medical services personnel, communication among service providers, and enhanced data collection efforts will provide children with access to skilled emergency care, decrease unnecessary deaths from injury, decrease the overall costs of health care, and provide information as to the quality of emergency medical care for children.

Section 5. KRS 211.9531 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

(1)~~— There is established within the department's lead agency for emergency medical services an Emergency Medical Services for Children Program.~~

(2)~~—~~ The ***Kentucky Board of Emergency Medical Services***~~[cabinet]~~ may hire a coordinator for the ***Emergency Medical Services for Children***~~[EMSC]~~ Program~~— who shall be assigned to the department's lead agency for emergency medical services. The authorized personnel cap for the department may be increased to include the coordinator~~ and other positions for which funding is provided by the General Assembly or through any other sources, including gifts, grants, or federal funds.

(2)~~(3)~~— The coordinator shall, *subject to the direction of the Kentucky Board of Emergency Medical Services*:

(a) Implement and oversee the ***Emergency Medical Services for Children***~~[EMSC]~~ Program described in this section~~, in consultation with the advisory committee established in Section 5 of this Act~~; and

(b) Serve as liaison for collaboration and coordination between the ***Emergency Medical Services for Children***~~[EMSC]~~ Program, ***the Kentucky Board of Emergency Medical Services***, and other public and private organizations, ~~including the department's lead emergency medical services agency,~~ the state traffic safety office, the maternal and child health program, the Medicaid department, the state and local child fatality review and response teams, state and local professional organizations, private sector voluntary organizations, and consumer and community representatives.

(3)~~(4)~~— The ***Emergency Medical Services for Children***~~[EMSC]~~ Program may include, but not be limited to, the establishment of the following:

(a)~~— Guidelines for the approval of emergency medical services facilities for pediatric care, and designation of specialized regional pediatric critical care centers and pediatric trauma centers;~~

(b)~~— Guidelines for referring children to the appropriate emergency medical facility;~~

(c)~~— Guidelines for necessary *out-of-hospital*[prehospital and other pediatric emergency and critical care] medical service equipment;~~

(b)~~(d)~~— Guidelines for developing a coordinated system that will allow children to receive appropriate initial stabilization and treatment with timely provision of, or referral to, the appropriate level of care, including critical care, trauma care, or pediatric subspecialty care;

(c)~~— Guidelines and protocols for *out-of-hospital*[prehospital and hospital facilities encompassing all levels of] pediatric emergency medical services[, pediatric critical care, and pediatric trauma care];~~

(f)~~— Guidelines for rehabilitation services for critically ill or injured children;~~

- (g) ~~A system for transferring critically ill or injured children between emergency medical facilities, services, and systems;~~
- (c)(h) **Assistance in the development and provision of** ~~Initial and continuing~~ professional education programs for emergency medical services personnel, ~~which shall include training~~ in the emergency care of infants and children;
- (d)(i) — A public education program concerning the EMSC Program, including information on emergency access telephone numbers;
- (j) ~~The collection and analysis of statewide pediatric emergency and critical care medical services data from emergency medical facilities for the purpose of quality improvement by these facilities, subject to the confidentiality requirements of KRS 211.952(6);~~
- (k) ~~The establishment of cooperative interstate relationships to facilitate the provision of appropriate care for pediatric patients who must cross state borders to receive emergency medical services;~~
- (l) ~~Coordination and cooperation between the *Emergency Medical Services for Children* [EMSC] Program and other public and private organizations interested or involved in emergency ~~and critical~~ care for children, including those persons and organizations identified in subsection (2)(3)(b) of this section; and~~
- (e)(m) ~~The scope of activities carried out by the *Emergency Medical Services for Children* [EMSC] Program shall be commensurate with the availability of funds.~~

Section 6. KRS 211.954 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

A matching fund program is hereby created for the purpose of assisting local *units of government* ~~ambulance providers~~ in the purchases of ambulances and equipment, *provision of an adequate number of trained emergency medical services personnel, and provision of education for personnel*. The fund shall consist of such moneys as may be appropriated by the General Assembly or may be obtained from other sources for the fund as provided in this section ~~and KRS 211.956~~:

- (1) Application and justification of need for moneys from the fund shall be based upon the state emergency medical services plan's priorities;
- (2) Application for moneys from the fund may be made to the *Kentucky Board of Emergency Medical Services* ~~Cabinet for Health Services~~ by any city, county, *ambulance taxing district*, or regional emergency medical services system based upon guidelines established by the *Kentucky Board of Emergency Medical Services* ~~Cabinet for Health Services~~;
- (3) Moneys from the fund will provide for up to a maximum of fifty percent (50%) of the actual cost of any ambulance or other item of equipment desired to be procured. No county, including all grants to entities within the county, shall receive more than twenty-five thousand five hundred dollars (\$25,500) from the fund per year;
- (4) No funds awarded pursuant to this section shall be used for any other purpose than the purpose for which they were awarded. Funds remaining unexpended one (1) year from the date of the award shall lapse and shall be returned to the fund by the recipient ~~city, county, or regional emergency medical services system~~;

- (5) Funding periods shall coincide with the fiscal year as established by the *Kentucky Board of Emergency Medical Services*~~[Cabinet for Health Services]~~; and
- (6) Each ambulance or item of equipment purchased shall meet or exceed, if a standard has been set for the particular item of equipment, the standards set by the *Kentucky Board of Emergency Medical Services*~~[Cabinet for Health Services]~~.

Section 7. KRS 211.962 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

No person shall:

- (1) Hold himself out as certified pursuant to KRS ~~311.652 to 311.658~~~~[211.962 to 211.968]~~ nor use the *title of emergency medical technician* or ~~[initials]~~ "EMT" when he does not hold a current valid certification issued pursuant to KRS ~~311.652 to 311.658~~~~[211.962 to 211.968]~~; or
- (2) If certified, violate any provision of KRS ~~311.652 to 311.658~~~~[211.962 to 211.968]~~ or any *administrative*~~[rule or]~~ regulation, adopted by the *Kentucky Board of Emergency Medical Services*~~[Cabinet for Health Services]~~ relating to *Section 8 of this Act*~~[KRS 211.964]~~.

Section 8. KRS 211.964 is repealed, reenacted as a new section of KRS 311.652 to 311,658, and amended to read as follows:

- (1) The *Kentucky Board of Emergency Medical Services*~~[Cabinet for Health Services]~~ shall promulgate administrative regulations relating to emergency medical technicians. The *administrative* regulations may include the classification and certification of emergency medical technicians, instructors, instructor-trainers, and students and trainees; examinations; standards of training and experience; curricula standards; issuance, renewal, suspension, denial, revocation, probation, and restriction of certificates; hearing of appeals; and other reasonable standards~~[or regulations]~~ as may be necessary for the protection of public health and safety in the delivery of emergency medical services.~~[Any administrative hearing conducted under authority of this section shall be conducted in accordance with KRS Chapter 13B.]~~ No additional testing or examinations shall be required for recertification, except for proficiency testing of new skills or knowledge, or areas in which there is documented evidence of deterioration of skills.
- (2) Recertification programs shall be organized to include continuing education and in-service training approved by the *Kentucky Board of Emergency Medical Services*~~[cabinet]~~. The continuing education program shall be subject to the requirements of KRS 214.610(1).
- (3) *Beginning the effective date of this Act, a new emergency medical technician shall, for initial certification, be certified using the requirements and testing established by the National Registry of Emergency Medical Technicians.*
- (4) *Beginning the effective date of this Act, a certified emergency medical technician who seeks recertification shall obtain recertification under the requirements established and maintained by the Kentucky Board of Emergency Medical Services. These requirements shall contain a minimum of sixteen (16) hours of required topics and eight (8) hours of elective topics over a two (2) year recertification period. The Kentucky Board of Emergency Medical Services shall also recertify any emergency medical technician who chooses to obtain recertification under the requirements established by the National Registry of*

Emergency Medical Technicians in lieu of the standards established by the Kentucky Board of Emergency Medical Services.

- (5) ~~In lieu of the continuing education and in-service training requirement specified by the cabinet for recertification, an emergency medical technician, certified as of July 15, 1996, or within one (1) year of July 15, 1996, may elect to recertify utilizing the continuing education and in-service training required by the National Registry of Emergency Medical Technicians or its successor organization. Upon successful completion of the National Registry recertification requirements, the emergency medical technician shall be recertified for the period of time specified by law.~~
- (4) ~~Emergency medical technicians certifying later than one (1) year after July 15, 1996, shall, in lieu of the certification requirements specified by the cabinet under subsection (1) of this section, successfully complete the National Registry of Emergency Medical Technicians final examination for certification and shall maintain National Registry of Emergency Medical Technicians credentials in order to be recertified.~~
- (5) ~~A person who has chosen to recertify as an emergency medical technician utilizing the National Registry of Emergency Medical Technicians or its successor organization's requirements shall not be permitted to recertify utilizing the cabinet's requirements, unless the National Registry of Emergency Medical Technicians and its successor organization ceases business or there is no successor organization.~~
- (6) ~~Other than the requirements of KRS 214.610(1), the ***Kentucky Board of Emergency Medical Services*** ~~cabinet~~ shall not require any additional course work, in-service training, testing, or examinations of a person who chooses the National Registry of Emergency Medical Technicians or its successor organization for certification or recertification as an emergency medical technician.~~
- (6) ~~(7)~~ ~~Other than the requirements of KRS 214.610(1), any person ***licensed*** ~~certified~~ by the ***Kentucky Board of Emergency Medical Services*** ~~State Board of Medical Licensure~~ as a paramedic shall be certified as an emergency medical technician by the ***board*** ~~cabinet~~. The certification shall be issued without fee, without additional training, in-service training, testing, or examination. The emergency medical technician certification shall be issued and expire at the same time that ***the*** paramedic ***license*** ~~certification~~ is issued or expires, and if a paramedic voluntarily gives up his ***or her license*** ~~certification~~ prior to the expiration of his ***or her*** paramedic ***license*** ~~certification~~, his ***or her*** emergency medical technician certification shall be unaffected thereby. If a paramedic chooses not to ***be relicensed*** ~~recertify~~ as a paramedic but chooses to retain his emergency medical technician certification, the paramedic shall, prior to the expiration of his paramedic ***license*** ~~certification~~, ***complete the requirements for recertification*** ~~recertify~~ as an emergency medical technician utilizing one (1) of the methods provided for in this section.~~
- (7) ~~(8)~~ ~~A paramedic whose ***license*** ~~certification~~ as a paramedic is suspended, revoked, or denied by the ***Kentucky Board of Emergency Medical Services*** ~~State Board of Medical Licensure~~ shall have the same action taken automatically ~~by the cabinet~~ with regard to his emergency medical technician certification.~~

Section 9. KRS 211.966 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

The *Kentucky Board of Emergency Medical Services* ~~[secretary of the Cabinet for Health Services]~~ may, by *administrative* regulation, prescribe a reasonable schedule of fees and charges for examinations, for the issuance of *licenses or* certificates, and for the renewal of *licenses or* certificates issued pursuant to KRS *311.652 to 311.658* ~~[211.962 to 211.968]~~. All such fees, charges, or other moneys collected by the *Kentucky Board of Emergency Medical Services* ~~[cabinet]~~ under KRS *311.652 to 311.658* ~~[211.962 to 211.968]~~ shall be paid into the State Treasury and credited to a trust and agency fund to be used by the *Kentucky Board of Emergency Medical Services* ~~[Cabinet for Health Services]~~ for carrying out the provisions of KRS *311.652 to 311.658* ~~[211.962 to 211.968]~~.

Section 10. KRS 211.967 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

As a condition of being issued a certificate as an emergency medical technician, the applicant shall have completed a *Kentucky Board of Emergency Medical Services* ~~[cabinet]~~ approved educational course on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change.

Section 11. KRS 211.968 is repealed, reenacted as a new section of KRS 311.652 to 311.658, and amended to read as follows:

Nothing in KRS *311.652 to 311.658* ~~[211.962 to 211.966]~~ shall be construed to permit certification or utilization of any certified emergency medical technician *or emergency medical technician first responder* for the purpose of such individual working full time with primary responsibility and duties limited to hospitals, physicians' offices, clinics, or other definitive care facilities, except ~~[for certification or utilization of a person]~~ as an emergency medical technician trainee or as a full-time instructor of emergency medical technicians.

Section 12. KRS 211.990 is amended to read as follows:

- (1) Any owner or occupant who fails to comply with an order made under the provisions of KRS 211.210 shall be guilty of a violation, and each day's continuance of the nuisance, source of filth, or cause of sickness, after the owner or occupant has been notified to remove it, shall be a separate offense.
- (2) Except as otherwise provided by law, anyone who fails to comply with the provisions of the rules and regulations adopted pursuant to this chapter or who fails to comply with an order of the cabinet issued pursuant thereto shall be guilty of a violation. Each day of such violation or noncompliance shall constitute a separate offense.
- (3) Any person who violates any provision of KRS 211.182 shall, upon first offense, be guilty of a Class A misdemeanor. Each subsequent violation of any provision of KRS 211.182 shall constitute a Class D felony.
- (4) Any person who violates any provision of KRS 211.842 to 211.852 or any regulation adopted hereunder or any order issued by the Cabinet for Health Services to comply with any provision of KRS 211.842 to 211.852 or the regulations adopted thereunder shall be guilty of a Class A misdemeanor. Each day of violation or noncompliance shall constitute a separate offense.
- (5) ~~[Any person who violates KRS 211.962 or any rule or regulation of the Cabinet for Health Services adopted pursuant to KRS 211.962 to 211.968 shall be guilty of a Class A misdemeanor.]~~

- ~~(6)~~ A private review agent which performs utilization review without proper registration pursuant to KRS 211.461 to 211.466 shall be guilty of a Class A misdemeanor.
- ~~(6)~~~~(7)~~ Any properly registered private review agent which willfully violates any provision of KRS 211.461 to 211.466 or of the regulations shall be guilty of a Class D felony.
- ~~(7)~~~~(8)~~ A person who performs or offers to perform lead-hazard detection or lead-hazard abatement services in target housing or child-occupied facilities who is not certified as required by KRS 211.9063 or 211.9069 shall be guilty of a Class A misdemeanor.
- ~~(8)~~~~(9)~~ Any person who performs lead-hazard detection or lead-hazard abatement services in target housing or child-occupied facilities, who willfully violates the standards for performing lead-hazard detection or lead-hazard abatement procedures included in the administrative regulations promulgated pursuant to KRS 211.9075 shall be guilty of a Class D felony.
- ~~(9)~~~~(10)~~ The penalties provided in subsections (5), (6), (7), **and** (8)~~, and (9)~~ of this section are cumulative and are in addition to any other penalties, claims, damages, or remedies available at law or in equity.
- ~~(10)~~~~(11)~~ Any person who violates any provisions of KRS 211.760 shall be fined not less than ten dollars (\$10) nor more than one hundred dollars (\$100). Each day of violation or noncompliance shall constitute a separate offense. Section 13. KRS 216B.410 is amended to read as follows:
- (1) Each licensed ambulance provider and medical first response provider as defined in **Section 3 of this Act**~~[KRS 211.952(2)]~~ shall collect and provide to the **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ run data and information required by the **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ by administrative regulation.
 - (2) The **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ shall develop a run report form for the use of each class of ambulance provider and medical first response provider containing the data required in subsection (1) of this section. An ambulance provider or medical first response provider may utilize any run form it chooses in lieu of or in addition to the **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ developed run report form. However, the data captured on the run report form shall include at least that required by the administrative regulations promulgated pursuant to subsection (1) of this section.
 - (3) An ambulance provider or medical first response provider **shall**~~[may]~~ report the required run report data and information by **completing an annual report as established by the Kentucky Board of Emergency Medical Services**~~[sending copies of the completed run report forms to the cabinet]~~ or by transmitting the required data and information to the cabinet in an electronic format. If the **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ requires the use of a specific electronic format, it shall provide a copy of the file layout requirements, in either written or electronic format, to the licensed ambulance provider or medical first response provider at no charge.
 - ~~(4)~~ ~~Each ambulance provider or medical first response provider shall submit its run reports or data summary reports in electronic format on the time schedule specified by the cabinet by administrative regulation.~~
 - ~~(5)~~ The **Kentucky Board of Emergency Medical Services**~~[cabinet]~~ shall publish a comprehensive annual report reflecting the data collected, injury and illness data, treatment utilized, and other information deemed important by the **board**~~[cabinet]~~. The annual report shall not include

patient identifying information or any other information identifying a natural person. A copy of the comprehensive annual report shall be forwarded *to the Governor and the General Assembly*~~[by the cabinet to the Kentucky Board of Medical Licensure]~~.

- (5)~~(6)~~—Ambulance provider and medical first response provider run report forms and the information transmitted electronically to the *Kentucky Board of Emergency Medical Services*~~[cabinet]~~ shall be confidential. No person shall make an unauthorized release of information on an ambulance run report form or medical first response run report form. Only the patient or the patient's parent or legal guardian if the patient is a minor, or the patient's legal guardian or person with proper power of attorney if the patient is under legal disability as being incompetent or mentally ill, or a court of competent jurisdiction may authorize the release of information on a patient's run report form or the inspection or copying of the run report form. Any authorization for the release of information or for inspection or copying of a run report form shall be in writing.
- (6)~~(7)~~—If a medical first response provider or ambulance provider does not use a paper form but collects patient data through electronic means, it shall have the means of providing a written run report that includes all required data elements to the medical care facility. A copy of the medical first response form or a summary of the run data and patient information shall be made available to the ambulance service that transports the patient. A copy of the ambulance run report form shall be made available to any medical care facility to which a patient is transported and shall be included in the patient's medical record by that facility. If a patient is not transported to a medical facility, the copy of the run report form that is to be given to the transporting ambulance provider or medical care facility shall be given to the patient or to the patient's parent or legal guardian. If the ambulance provider, medical facility, patient, or patient's legal guardian refuses delivery of their run report form or is unavailable to receive the form, that copy of the form shall be returned to the medical first response provider or ambulance provider and destroyed.
- (7)~~(8)~~—All ambulance services shall be required to keep adequate reports and records to be maintained at the ambulance base headquarters and to be available for periodic review as deemed necessary by the board. Required records and reports are as follows:
- (a) Employee records, including a resume of each employee's training and experience and evidence of current certification; and
 - (b) Health records of all drivers and attendants including records of all illnesses or accidents occurring while on duty.
- (8) *Data and records generated and kept by the Kentucky Board of Emergency Medical Services or its contractors regarding the evaluation of emergency medical care and trauma care in the Commonwealth, including the identities of patients, emergency medical services personnel, ambulance providers, medical first-response providers, and emergency medical facilities, shall be confidential, shall not be subject to disclosure under KRS 61.805 to 61.850 or KRS 61.870 to 61.884, shall not be admissible in court for any purpose, and shall not be subject to discovery. However, nothing in this section shall limit the discoverability or admissibility of patient medical records regularly and ordinarily kept in the course of a patient's treatment that otherwise would be admissible or discoverable.*

Section 14. KRS 281.014 is amended to read as follows:

As used in this chapter, unless the context requires otherwise:

- (1)
 - (a) The term "city taxicab certificate" or "city limousine certificate" means a certificate granting authority only for the operation of a given number of motor vehicles transporting passengers for hire, the principal operation of which is confined to the corporate limits of a city of the first or second class or an urban-county area and the city's suburban area, or the corporate limits of any city and its suburban area located in a county which contains a city of the first or second class or an urban-county area, and not operating over any regular route, and the destination of which motor vehicles are designated by the passengers at the time of such transportation;
 - (b) The term "county taxicab certificate" or "county limousine certificate" means a certificate granting authority only for the operation of a given number of motor vehicles transporting passengers for hire, the principal operation of which is confined to a specific county which does not contain a city of the first or second class and is not an urban-county area, and not operating over any regular route, and the destination of which motor vehicles are designated by the passengers at the time of the transportation;
 - (c) A "taxicab" means a motor vehicle operated under one (1) or more taxicab certificates, and is a vehicle designed or constructed to transport not more than fifteen (15) passengers exclusive of the driver;
 - (d) A "limousine" means a luxury motor vehicle passenger car which has either a standard or an extended wheelbase. The vehicle shall have additional rear seating capacity, area, and comforts, but shall be designed or constructed to transport not more than fifteen (15) passengers plus the driver;
 - (e) The term "taxicab license" means a license plate issued to a taxicab authorized to operate under a taxicab certificate;
 - (f) The term "limousine license" means a license plate issued to a limousine authorized to operate under a limousine certificate;
- (2)
 - (a) An "airport shuttle certificate" means a certificate granting authority only for the operation of motor vehicles exclusively transporting passengers or baggage for hire over regular routes between points within a city or its suburban area and an airport;
 - (b) An "airport shuttle vehicle" means a motor vehicle operated under one (1) or more airport shuttle certificates and which is designed or constructed to transport not more than fifteen (15) passengers plus the driver;
 - (c) The term "airport shuttle vehicle license" means a license plate issued for a motor vehicle authorizing its operation under one (1) or more airport shuttle certificates;
- (3) The term "U-Drive-It" means any person who leases or rents a motor vehicle for a consideration to be used for the transportation of persons or property, but for which no driver is furnished, and the use of which motor vehicle is not for the transportation of persons or property for hire by the lessee or rentee;
- (4) The term "driveaway" means the transporting and delivering of motor vehicles, except semitrailers, and trailers, whether destined to be used in either a private or for-hire capacity, under their own power or by means of a full mount method, saddle mount method, the tow bar method, or any combination of them over the highways of this state from any point of origin to any point of destination for-hire. The transportation of such vehicles by the full mount method on trailers or semitrailers shall not be included in the term ; and

- (5) (a) "Disabled persons vehicle" means a motor vehicle especially equipped and used for the transportation of persons with disabilities and which is in compliance with the accessibility specifications of 49 C.F.R. Part 38, but it shall be designed and constructed to transport not more than fifteen (15) passengers plus the driver. It shall not mean an ambulance as defined in *Section 1 of this Act* ~~[KRS 211.950]~~. It shall not mean a motor vehicle equipped with a stretcher;
- (b) "Disabled persons carrier" means an irregular route common carrier for hire, transporting the general public who require transportation in disabled persons vehicles; and
- (c) "Disabled persons certificate" means a certificate that grants authority only for the operation of a given number of disabled persons vehicles for hire, the principle operation of which is confined to a specific county.

Section 15. KRS 281.605 is amended to read as follows:

The provisions of this chapter shall not apply, except as to safety regulations, to:

- (1) Motor vehicles used as school buses and while engaged in the transportation of students, under the supervision and control and at the direction of school authorities;
- (2) Except as provided in paragraph (e) of this subsection, motor vehicles, regardless of ownership, used exclusively:
 - (a) For the transportation of agricultural and dairy products, including fruit, livestock, meats, fertilizer, wood, lumber, cotton, products of grove or orchard, poultry, and eggs, while owned by the producer of the products, including landlord where the relation of landlord and tenant or landlord and cropper is involved, from the farm to a market, warehouse, dairy, or mill, or from one (1) market, warehouse, dairy, or mill to another market, warehouse, dairy, or mill;
 - (b) For the transportation of agricultural and dairy products, livestock, farm machinery, feed, fertilizer, and other materials and supplies essential to farm operation, from market or shipping terminal to farm;
 - (c) For both the purposes described in paragraphs (a) and (b) of this subsection;
 - (d) For the transportation of agricultural and dairy products from farm to regularly organized fairs and exhibits and return; or
 - (e) Motor vehicles used for the transportation of fly ash, in bags, sacks, or other containers, the aggregate weight of which does not exceed ten thousand (10,000) pounds; or bottom ash, waste ash, sludge, and pozatec which is being removed from the premises of a power generator facility for the purpose of disposal;
- (3) Motor vehicles used exclusively as church buses and while operated in the transportation of persons to and from a church or place of worship or for other religious work under the supervision and control and at the direction of church authorities;
- (4) Motor vehicles used exclusively for the transportation of property belonging to a nonprofit cooperative association or its members where the vehicle is owned or leased exclusively by the association;

- (5) Motor vehicles owned in whole or in part by any person and used by such person to transport commodities of which such person is the bona fide owner, lessee, consignee, or bailee; provided, however, that such transportation is for the purpose of sale, lease, rent, or bailment, and is an incidental adjunct to an established private business owned and operated by such person within the scope and in furtherance of any primary commercial enterprise of such person other than the business of transportation of property for hire;
- (6) Motor vehicles used in pick-up or delivery service within a city or within a city and its commercial area for a carrier by rail;
- (7) Motor vehicles used exclusively for the transportation of coal from the point at which such coal is mined to a railhead or tipple where the railhead or tipple is located at a point not more than fifty (50) air miles from the point at which the coal is mined;
- (8) Motor vehicles used as ambulances in transporting wounded, injured, or sick animals or as ambulances as defined in *Section 1 of this Act* ~~[KRS 211.950]~~;
- (9) Motor vehicles used by transit authorities as created and defined in KRS Chapter 96A except as required by KRS 96A.170. Vehicles operated under the authority and direct responsibility of such transit authorities, through contractual agreement, shall be included within this exemption, without regard to the legal ownership of the vehicles, but only for such times as they are operated under the authority and responsibility of the transit authority;
- (10) Motor vehicles having a seating capacity of fifteen (15) or fewer passengers and while transporting persons between their places of residence, on the one hand, and, on the other, their places of employment, provided the driver himself is on his way to or from his place of employment, and further provided that any person who operates or controls the operation of vehicles hereunder of which said person is the owner or lessee, and any spouse of said person and any partnership or corporation with said person or his spouse having an interest therein doing such, shall be eligible to so operate an aggregate number of not more than one (1) vehicle on other than a nonprofit basis;
- (11) Motor vehicles used to transport cash letters, data processing material, instruments, or documents, regardless of the ownership of any of said cash letters, data processing material, instruments, or documents;
- (12) Motor vehicles operated by integrated intermodal small package carriers who provide intermodal-air-and-ground-transportation. For the purposes of this section, "integrated intermodal small package carrier" shall mean an air carrier holding a certificate of public convenience and necessity or qualifying as an indirect air carrier that undertakes, by itself or through a company affiliated through common ownership, to provide intermodal-air-and-ground-transportation, and "intermodal-air-and-ground-transportation" shall mean transportation involving the carriage of articles weighing not more than one hundred fifty (150) pounds by aircraft or other forms of transportation, including by motor vehicle, wholly within the Commonwealth of Kentucky. The incidental or occasional use of aircraft in transporting packages or articles shall not constitute an integrated intermodal operation within the meaning of this section; or
- (13) Motor vehicles operated pursuant to a grant of funds in furtherance of and governed by 49 U.S.C. secs. 5310 or 5311, including all amendments, and whose operators have jurisdictions and services approved annually by the Transportation Cabinet in accordance with 49 C.F.R. Title VI.

Section 16. KRS 304.17A-580 is amended to read as follows:

- (1) Health benefit plans shall educate their insureds about the availability, location, and appropriate use of emergency and other medical services, cost-sharing provisions for emergency services, and the availability of care outside an emergency department.
- (2) *All* health benefit plans using a defined network of health care providers shall cover *emergency medical services and supplies and* emergency department screening and stabilization services both in-network and out-of-network without prior authorization for use consistent with the prudent layperson standard.
- (3) Emergency department personnel shall contact a patient's primary care provider or health benefit plan, as appropriate, as quickly as possible to discuss follow-up and poststabilization care and promote continuity of care.
- (4) *Nothing in this section shall apply to accident-only, specified disease, hospital indemnity, Medicare supplement, long-term care, disability income, or other limited benefit health insurance policies.*

Section 17. KRS 304.39-020 is amended to read as follows:

As used in this subtitle:

- (1) "Added reparation benefits" mean benefits provided by optional added reparation insurance.
- (2) "Basic reparation benefits" mean benefits providing reimbursement for net loss suffered through injury arising out of the operation, maintenance or use of a motor vehicle, subject, where applicable, to the limits, deductibles, exclusions, disqualifications and other conditions provided in this subtitle. The maximum amount of basic reparation benefits payable for all economic loss resulting from injury to any one (1) person as the result of one (1) accident shall be ten thousand dollars (\$10,000), regardless of the number of persons entitled to such benefits or the number of providers of security obligated to pay such benefits. Basic reparation benefits consist of one (1) or more of the elements defined as "loss."
- (3) "Basic reparation insured" means:
 - (a) A person identified by name as an insured in a contract of basic reparation insurance complying with this subtitle; and
 - (b) While residing in the same household with a named insured, the following persons not identified by name as an insured in any other contract of basic reparation insurance complying with this subtitle: a spouse or other relative of a named insured; and a minor in the custody of a named insured or of a relative residing in the same household with the named insured if he usually makes his home in the same family unit, even though he temporarily lives elsewhere.
- (4) "Injury" and "injury to person" mean bodily harm, sickness, disease, or death.
- (5) "Loss" means accrued economic loss consisting only of medical expense, work loss, replacement services loss, and, if injury causes death, survivor's economic loss and survivor's replacement services loss. Noneconomic detriment is not loss. However, economic loss is loss although caused by pain and suffering or physical impairment.
 - (a) "Medical expense" means reasonable charges incurred for reasonably needed products, services, and accommodations, including those for medical care, physical rehabilitation,

rehabilitative occupational training, *licensed ambulance services*, and other remedial treatment and care. "Medical expense" may include non-medical remedial treatment rendered in accordance with a recognized religious method of healing. The term includes a total charge not in excess of one thousand dollars (\$1,000) per person for expenses in any way related to funeral, cremation, and burial. It does not include that portion of a charge for a room in a hospital, clinic, convalescent or nursing home, or any other institution engaged in providing nursing care and related services, in excess of a reasonable and customary charge for semiprivate accommodations, unless intensive care is medically required. Medical expense shall include all healing arts professions licensed by the Commonwealth of Kentucky. There shall be a presumption that any medical bill submitted is reasonable.

- (b) "Work loss" means loss of income from work the injured person would probably have performed if he had not been injured, and expenses reasonably incurred by him in obtaining services in lieu of those he would have performed for income, reduced by any income from substitute work actually performed by him.
 - (c) "Replacement services loss" means expenses reasonably incurred in obtaining ordinary and necessary services in lieu of those the injured person would have performed, not for income but for the benefit of himself or his family, if he had not been injured.
 - (d) "Survivor's economic loss" means loss after decedent's death of contributions of things of economic value to his survivors, not including services they would have received from the decedent if he had not suffered the fatal injury, less expenses of the survivors avoided by reason of decedent's death.
 - (e) "Survivor's replacement services loss" means expenses reasonably incurred by survivors after decedent's death in obtaining ordinary and necessary services in lieu of those the decedent would have performed for their benefit if he had not suffered the fatal injury, less expenses of the survivors avoided by reason of the decedent's death and not subtracted in calculating survivor's economic loss.
- (6) "Use of a motor vehicle" means any utilization of the motor vehicle as a vehicle including occupying, entering into and alighting from it. It does not include:
- (a) Conduct within the course of a business of repairing, servicing, or otherwise maintaining motor vehicles unless the conduct occurs off the business premises; or
 - (b) Conduct in the course of loading and unloading the vehicle unless the conduct occurs while occupying, entering into, or alighting from it.
- (7) "Motor vehicle" means any vehicle which transports persons or property upon the public highways of the Commonwealth, propelled by other than muscular power except road rollers, road graders, farm tractors, vehicles on which power shovels are mounted, such other construction equipment customarily used only on the site of construction and which is not practical for the transportation of persons or property upon the highways, such vehicles as travel exclusively upon rails and such vehicles as are propelled by electrical power obtained from overhead wires while being operated within any municipality or where said vehicles do not travel more than five (5) miles beyond the said limits of any municipality. Motor vehicle shall not mean moped as defined in this section.

- (8) "Moped" means either a motorized bicycle whose frame design may include one (1) or more horizontal crossbars supporting a fuel tank so long as it also has pedals, or a motorized bicycle with a step through type frame which may or may not have pedals rated no more than two (2) brake horsepower, a cylinder capacity not exceeding fifty (50) cubic centimeters, an automatic transmission not requiring clutching or shifting by the operator after the drive system is engaged, and capable of a maximum speed of not more than thirty (30) miles per hour.
- (9) "Public roadway" means a way open to the use of the public for purposes of motor vehicle travel.
- (10) "Net loss" means loss less benefits or advantages, from sources other than basic and added reparation insurance, required to be subtracted from loss in calculating net loss.
- (11) "Noneconomic detriment" means pain, suffering, inconvenience, physical impairment, and other nonpecuniary damages recoverable under the tort law of this Commonwealth. The term does not include punitive or exemplary damages.
- (12) "Owner" means a person, other than a lienholder or secured party, who owns or has title to a motor vehicle or is entitled to the use and possession of a motor vehicle subject to a security interest held by another person. The term does not include a lessee under a lease not intended as security.
- (13) "Reparation obligor" means an insurer, self-insurer, or obligated government providing basic or added reparation benefits under this subtitle.
- (14) "Survivor" means a person identified in KRS 411.130 as one entitled to receive benefits by reason of the death of another person.
- (15) A "user" means a person who resides in a household in which any person owns or maintains a motor vehicle.
- (16) "Maintaining a motor vehicle" means having legal custody, possession or responsibility for a motor vehicle by one other than an owner or operator.
- (17) "Security" means any continuing undertaking complying with this subtitle, for payment of tort liabilities, basic reparation benefits, and all other obligations imposed by this subtitle.

Section 18. KRS 311.550 is amended to read as follows:

As used in KRS 311.530 to 311.620 and KRS 311.990(4) to (6):

- (1) "Board" means the State Board of Medical Licensure;
- (2) "President" means the president of the State Board of Medical Licensure;
- (3) "Secretary" means the secretary of the State Board of Medical Licensure;
- (4) "Executive director" means the executive director of the State Board of Medical Licensure or any assistant executive directors appointed by the board;
- (5) "General counsel" means the general counsel of the State Board of Medical Licensure or any assistant general counsel appointed by the board;
- (6) "Regular license" means a license to practice medicine or osteopathy at any place in this state;
- (7) "Limited license" means a license to practice medicine or osteopathy in a specific institution or locale to the extent indicated in the license;

- (8) "Temporary permit" means a permit issued to a person who has applied for a regular or limited license, and who appears from verifiable information in the application to the secretary to be qualified and eligible therefor;
- (9) "Emergency permit" means a permit issued to a physician currently licensed in another state, authorizing the physician to practice in this state for the duration of a specific medical emergency, not to exceed thirty (30) days;
- (10) Except as provided in subsection (11) of this section, the "practice of medicine or osteopathy" means the diagnosis, treatment, or correction of any and all human conditions, ailments, diseases, injuries, or infirmities by any and all means, methods, devices, or instrumentalities;
- (11) The "practice of medicine or osteopathy" does not include the practice of Christian Science, the practice of podiatry as defined in KRS 311.380, the practice of a midlevel health care practitioner as defined in KRS 216.900, the practice of dentistry as defined in KRS 313.010, the practice of optometry as defined in KRS 320.210, the practice of chiropractic as defined in subsection (2) of KRS 312.015, the practice as a nurse as defined in KRS 314.011, the practice of physical therapy as defined in KRS 327.010, the performance of duties for which they have been trained by ***paramedics licensed under KRS 311.652 to 311.658, emergency medical technician first responders, or emergency medical technicians*** ~~or medical emergency dispatchers~~ certified ***under KRS 311.652 to 311.658*** ~~by the Cabinet for Health Services~~, the practice of pharmacy by persons licensed and registered under KRS 315.050, the sale of drugs, nostrums, patented or proprietary medicines, trusses, supports, spectacles, eyeglasses, lenses, instruments, apparatus, or mechanisms that are intended, advertised, or represented as being for the treatment, correction, cure, or relief of any human ailment, disease, injury, infirmity, or condition, in regular mercantile establishments, or the practice of midwifery by women. KRS 311.530 to 311.620 shall not be construed as repealing the authority conferred on the Cabinet for Health Services by KRS Chapter 211 to provide for the instruction, examination, licensing, and registration of all midwives through county health officers;
- (12) "Physician" means a doctor of medicine or a doctor of osteopathy;
- (13) "Grievance" means any allegation in whatever form alleging misconduct by a physician;
- (14) "Charge" means a specific allegation alleging a violation of a specified provision of this chapter;
- (15) "Complaint" means a formal administrative pleading that sets forth charges against a physician and commences a formal disciplinary proceeding;
- (16) As used in KRS 311.595(4), "crimes involving moral turpitude" shall mean those crimes which have dishonesty as a fundamental and necessary element, including, but not limited to, crimes involving theft, embezzlement, false swearing, perjury, fraud, or misrepresentation;
- (17) "Physician assistant" means a person who has graduated from a physician assistant or surgeon assistant program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs and who has passed the certifying examination administered by the National Commission on Certification of Physician Assistants or who possesses a current physician assistant certificate issued by the board prior to July 15, 1998;

- (18) "Supervising physician" means a physician licensed by the board who supervises physician assistants; and
- (19) "Supervision" means overseeing the activities of, and accepting responsibility for, the medical services rendered by a physician assistant. The constant physical presence of the supervising physician is not required so long as the supervising physician and physician assistant are or can be easily in contact with one another by radio, telephone, or other telecommunication device. Each team of physicians and physician assistants shall ensure that the delegation of medical tasks is appropriate to the physician assistant's level of training and experience; that the identification of and access to the supervising physician is defined; and that a process for evaluation of the physician assistant's performance is established.

SECTION 19. A NEW SECTION OF KRS 311.652 TO 311.658 IS CREATED TO READ AS FOLLOWS:

- (1) *When the Kentucky Board of Emergency Medical Services is engaged in the investigation or discipline of an entity licensed by the Kentucky Board of Emergency Medical Services, or a paramedic, emergency medical technician first responder, or emergency medical technician, or it is alleged that a paramedic, emergency medical technician first responder, or emergency medical technician has violated a statute, administrative regulation, protocol, or practice standard relating to serving as a paramedic, emergency medical technician first responder or emergency medical technician, the paramedic, emergency medical technician first responder, emergency medical technician, his or her employer, and the ambulance service's medical director shall be parties to the action and have the right to testify at any deposition, hearing, or other proceeding relating to the investigation or discipline of the paramedic, emergency medical technician first responder, or emergency medical technician.*
- (2) *The paramedic, emergency medical technician first responder, emergency medical technical, his or her employer, and the ambulance service's medical director shall have the right to appeal any portion of a decision of the Kentucky Board of Emergency Medical Services that affects them to the Franklin Circuit Court.*
- (3) *The Kentucky Board of Emergency Medical Services shall investigate any complaint against an entity regulated by the board, a paramedic, emergency medical technician first responder, or emergency medical technician and make findings of fact and conclusions of law.*
- (4) *If it appears that the entity regulated by the board, the paramedic, emergency medical technician first responder, or emergency medical technician has violated a statute, administrative regulation, protocol, or practice standard relating to serving as an entity regulated by the board, a paramedic, emergency medical technician first responder, or emergency medical technician, the board shall hold a full hearing under KRS Chapter 13B to determine whether the violation occurred. If it is determined that an entity regulated by the Kentucky Board of Emergency Medical Services, a paramedic, emergency medical technician first responder, or emergency medical technician has violated a statute, administrative regulation, protocol, or practice standard relating to serving as an entity regulated by the board, a paramedic, emergency medical technician first responder, or emergency medical technician, the Kentucky Board of Emergency Medical Services may impose any of the sanctions provided in subsection (5) of this section. Any party to the complaint shall have the right to introduce the findings of fact and conclusions of law.*

- (5) *The Kentucky Board of Emergency Medical Services may use any one (1) or more of the following sanctions when disciplining any entity regulated by the board, paramedic, emergency medical technician first responder, or emergency medical technician:*
- (a) *Private reprimand that shall be shared with each of the paramedic's, emergency medical technician first responder's, or emergency medical technician's employer and medical director;*
 - (b) *Public reprimand;*
 - (c) *Fines;*
 - (d) *Revocation of certification or licensure;*
 - (e) *Suspension of licensure until a time certain;*
 - (f) *Suspension until a certain act or acts are performed;*
 - (g) *Limitation of practice permanently;*
 - (h) *Limitation of practice until a time certain;*
 - (i) *Limitation of practice until a certain act or acts are performed; or*
 - (j) *Repassing a portion of the paramedic or emergency medical technician examination.*

Section 20. KRS 311.652 is amended to read as follows:

No person shall:

- (1) Hold himself out as *licensed*~~[certified]~~ pursuant to KRS ~~311.652~~~~[311.650]~~ to 311.658 nor use the term "paramedic" when he does not hold a current valid *license*~~[certification]~~ issued pursuant to KRS ~~311.652~~~~[311.650]~~ to 311.658; or
- (2) If *licensed*~~[certified]~~, violate any provision of KRS ~~311.652~~~~[311.650]~~ to 311.658 or any *administrative*~~[rule or]~~ regulation, adopted by the *Kentucky Board of Emergency Medical Services*~~[board of Medical Licensure]~~, relating to KRS 311.654.

Section 21. KRS 311.654 is amended to read as follows:

- (1) The *Kentucky Board of Emergency Medical Services*~~[Licensure]~~ shall promulgate administrative regulations relating to paramedics. The regulations may include, but need not be limited to, the classification and *licensure*~~[certification]~~ of paramedics, instructor/trainers, instructors, and students and trainees; examinations; standards of training and experience; curricula standards; administration of drugs and controlled substances by paramedics under the direction or supervision of licensed physicians; issuance, renewal, suspension, denial, and revocation of *licenses*~~[certificates]~~, and such other reasonable standards or regulations as may be necessary for the protection of public health and safety in the delivery of emergency medical services.
- (2) *Relicensure programs shall be organized to include continuing education and in-service training approved by the board.* Any continuing education required by the *Kentucky Board of Emergency Medical Services*~~[Licensure]~~ shall include *an*~~[a Cabinet for Health Services]~~ approved educational course on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change, *subject to Section 26 of this Act.*

~~{(3) The Kentucky Board of Medical Licensure shall enter into an agreement with the Cabinet for Health Services whereby the cabinet's lead agency for emergency medical services shall carry out the day to day administration of this section under administrative regulations promulgated by the Board of Medical Licensure. The Kentucky Emergency Medical Services Council will provide advice and recommendations to the Kentucky Board of Medical Licensure related to the provisions of KRS 311.650 to 311.658.}~~Section

22. KRS 311.656 is amended to read as follows:

The *Kentucky Board of Emergency Medical Services* ~~{of Medical Licensure}~~ may, by *administrative* regulation, prescribe a reasonable schedule of fees and charges for examinations, for the issuance of *licenses* ~~{certificates}~~, and for the renewal of *licenses* ~~{certificates}~~ issued pursuant to KRS ~~311.652~~~~{311.650}~~ to 311.658. All such fees, charges or other moneys collected by the board ~~{of Medical Licensure}~~ under KRS ~~311.652~~~~{311.650}~~ to 311.658 shall be paid into the State Treasury and credited to a trust and agency fund to be used by the board ~~{of Medical Licensure}~~ for carrying out the provisions of KRS ~~311.652~~~~{311.650}~~ to 311.658.

Section 23. KRS 311.658 is amended to read as follows:

- (1) *At the discretion of the employer's medical director, a paramedic may perform any procedure specified in the most recent curriculum of the United States Department of Transportation training course for paramedics published by the United States Department of Transportation. An emergency medical technician may perform any procedure specified in the most recent curriculum of the United States Department of Transportation training course for emergency medical technicians. An emergency medical technician first responder may perform any procedure specified in the most recent curriculum of the United States Department of Transportation training course for emergency medical technician first responders. Any paramedic, emergency medical technician first responder, or emergency medical technician may perform any additional procedure authorized by the Kentucky Board of Emergency Medical Services if approved by the employer's medical director and within the scope of the designated practice based upon national practice standards. With the approval of the employer's medical director, a paramedic, emergency medical technician first responder, or emergency medical technician may perform any procedure specified in the most recent curriculum of the United States Department of Transportation training course for paramedics or the most recent national standard curriculum for emergency medical technicians-basic or emergency medical technician first responder published by the United States Department of Transportation respectively, and other procedure authorized by the Kentucky Board of Emergency Medical Services. Nothing in this subsection shall prevent an employer from exercising reasonable fiscal control over the costs of providing emergency medical services to its citizens nor prevent the employer from exercising any reasonable control*

over paramedics, emergency medical technician first responders, or emergency medical technicians providing emergency medical care upon behalf of the licensed entity.

- (2) *Any paramedic may draw blood samples from a criminal defendant upon the request of a peace officer and the consent of the defendant, or without the consent of the defendant upon receipt of a court order requiring the procedure, if the paramedic is authorized to do so by his or her employer. The authorization shall be in writing and may be by general written policy of the employer and the service's medical director. The paramedic who drew the blood sample shall deliver the sample to the peace officer or other person specified by*

the court in a court order and shall testify in court with regard thereto upon service of a proper subpoena.

- (3) Paramedics shall be permitted to render services only~~[in emergency situations, and shall perform such services]~~ under supervision of a qualified and licensed *physician*~~[health practitioner]~~.

Section 24. KRS 311.660 is amended to read as follows:

- (1) When it appears that a person whom a paramedic who has successfully completed training in determination of death has been called to attend is dead, the paramedic shall, utilizing the protocol specified by the board by administrative regulation, determine whether or not the patient is dead after resuscitation of the patient is attempted by the paramedic or an emergency medical technician who has responded with or after the paramedic, unless the protocol indicates that the patient is not capable of being resuscitated. If, after resuscitation has been attempted on a patient who the protocol deems is capable of being resuscitated, the patient has not been successfully resuscitated according to the protocol, the paramedic may discontinue further resuscitation efforts and proceed to determine whether the patient is dead and whether to declare the patient dead. If it is determined that death has occurred in accordance with the procedures of KRS 446.400 with regard to patients who have not been resuscitated, the paramedic may make the actual determination and pronouncement of death. This section shall not apply to patients who are in a hospital when apparent death occurs.
- (2) In the event that a paramedic determines that a person is dead, the paramedic shall make the notifications required by KRS 72.020 and take the protective actions required by that statute.
- (3) Any paramedic course taught after July 15, 1998, shall include a course of instruction on the determination of death and preservation of evidence as required by the *Kentucky Board of Emergency Medical Services*~~[board of Medical Licensure]~~ by administrative regulation.
- (4) Any paramedic *relicensed*~~[recertified]~~ within the *three (3)*~~[two (2)]~~ years following July 15, 1998, shall successfully complete in-service training required by the *Kentucky Board of Emergency Medical Services*~~[board of Medical Licensure]~~ by administrative regulation relating to determination of death and preservation of evidence. Any paramedic who does not successfully complete the required in-service training shall not be *relicensed*~~[recertified]~~.
- (5) Any paramedic from another jurisdiction desiring to become a paramedic in Kentucky shall show evidence of successful completion of a training course in Kentucky meeting the requirements of subsection (4) of this section, and *licensure*~~[certification]~~ as a paramedic shall be denied if the required evidence is not shown.
- (6) The administration of cardiopulmonary resuscitation or other basic life support measures to the apparently dead person prior to the arrival of the paramedic by any person, for the purposes of this section and KRS 446.400, shall not be considered as artificial maintenance of respiration and circulation. The administration of advanced cardiac life support procedures by any person, other than a registered nurse rendering care pursuant to KRS 314.181, prior to the arrival of the paramedic shall preclude the determination of death by the paramedic, and the provisions of KRS 446.400 shall apply. However, nothing in this section shall preclude the supervising physician from directing the paramedic to cease resuscitative efforts under approved agency medical protocols.

- (7) The resuscitative efforts of a paramedic under the protocols authorized by this section shall not invoke the provisions of KRS 446.400.

Section 25. KRS 311.990 is amended to read as follows:

- (1) Any person who violates KRS 311.250 shall be guilty of a violation.
- (2) Any college or professor thereof violating the provisions of KRS 311.300 to 311.350 shall be civilly liable on his bond for a sum not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000) for each violation, which may be recovered by an action in the name of the Commonwealth.
- (3) Any person who presents to the county clerk for the purpose of registration any license which has been fraudulently obtained, or obtains any license under KRS 311.380 to 311.510 by false or fraudulent statement or representation, or practices podiatry under a false or assumed name or falsely impersonates another practitioner or former practitioner of a like or different name, or aids and abets any person in the practice of podiatry within the state without conforming to the requirements of KRS 311.380 to 311.510, or otherwise violates or neglects to comply with any of the provisions of KRS 311.380 to 311.510, shall be guilty of a Class A misdemeanor. Each case of practicing podiatry in violation of the provisions of KRS 311.380 to 311.510 shall be considered a separate offense.
- (4) Each first violation of KRS 311.560 is a Class A misdemeanor. Each subsequent violation of KRS 311.560 shall constitute a Class D felony.
- (5) Each violation of KRS 311.590 shall constitute a Class D felony. Conviction under this subsection of a holder of a license or permit shall result automatically in permanent revocation of such license or permit.
- (6) Conviction of willfully resisting, preventing, impeding, obstructing, threatening, or interfering with the board or any of its members, or of any officer, agent, inspector, or investigator of the board or the Cabinet for Health Services, in the administration of any of the provisions of KRS 311.550 to 311.620 shall be a Class A misdemeanor.
- (7) Each violation of subsection (1) of KRS 311.375 shall, for the first offense, be a Class B misdemeanor, and, for each subsequent offense shall be a Class A misdemeanor.
- (8) Each violation of subsection (2) of KRS 311.375 shall, for the first offense, be a violation, and, for each subsequent offense, be a Class B misdemeanor.
- (9) Each day of violation of either subsection of KRS 311.375 shall constitute a separate offense.
- (10) (a) Any person who intentionally or knowingly performs an abortion contrary to the requirements of KRS 311.723(1) shall be guilty of a Class D felony; and
(b) Any person who intentionally, knowingly, or recklessly violates the requirements of KRS 311.723(2) shall be guilty of a Class A misdemeanor.
- (11) (a) 1. Any physician who performs a partial-birth abortion in violation of KRS 311.765 shall be guilty of a Class D felony. However, a physician shall not be guilty of the criminal offense if the partial-birth abortion was necessary to save the life of the mother whose life was endangered by a physical disorder, illness, or injury.
2. A physician may seek a hearing before the State Board of Medical Licensure on whether the physician's conduct was necessary to save the life of the mother whose

life was endangered by a physical disorder, illness, or injury. The board's findings, decided by majority vote of a quorum, shall be admissible at the trial of the physician. The board shall promulgate administrative regulations to carry out the provisions of this subparagraph.

3. Upon a motion of the physician, the court shall delay the beginning of the trial for not more than thirty (30) days to permit the hearing, referred to in subparagraph 2. of this paragraph, to occur.
 - (b) Any person other than a physician who performs a partial-birth abortion shall not be prosecuted under this subsection but shall be prosecuted under provisions of law which prohibit any person other than a physician from performing any abortion.
 - (c) No penalty shall be assessed against the woman upon whom the partial-birth abortion is performed or attempted to be performed.
- (12) Any person who intentionally performs an abortion with knowledge that, or with reckless disregard as to whether, the person upon whom the abortion is to be performed is an unemancipated minor, and who intentionally or knowingly fails to conform to any requirement of KRS 311.732 is guilty of a Class A misdemeanor.
- (13) Any person who negligently releases information or documents which are confidential under KRS 311.732 is guilty of a Class B misdemeanor.
- (14) Any person who performs an abortion upon a married woman either with knowledge or in reckless disregard of whether KRS 311.735 applies to her and who intentionally, knowingly, or recklessly fails to conform to the requirements of KRS 311.735 shall be guilty of a Class D felony.
- (15) Any person convicted of violating KRS 311.750 shall be guilty of a Class B felony.
- (16) Any person who violates KRS 311.760(2) shall be guilty of a Class D felony.
- (17) Any person who violates KRS 311.770 or 311.780 shall be guilty of a Class D felony.
- (18) A person convicted of violating KRS 311.780 shall be guilty of a Class C felony.
- (19) Any person who violates KRS 311.810 shall be guilty of a Class A misdemeanor.
- (20) Any professional medical association or society, licensed physician, or hospital or hospital medical staff who shall have violated the provisions of KRS 311.606 shall be guilty of a Class B misdemeanor.
- (21) Any person who *falsely represents that he or she is a paramedic, emergency medical technician first responder or medical technician*~~[violates KRS 311.652 or any rule or regulation of the board of medical licensure adopted pursuant to KRS 311.654]~~ shall be guilty of a Class A misdemeanor.
- (22) Any administrator, officer, or employee of a publicly-owned hospital or publicly-owned health care facility who performs or permits the performance of abortions in violation of KRS 311.800(1) shall be guilty of a Class A misdemeanor.
- (23) Any person who violates KRS 311.914 shall be guilty of a violation.
- (24) Any person who violates the provisions of KRS 311.820 shall be guilty of a Class A misdemeanor.

- (25) (a) Any person who fails to test organs, skin, or other human tissue which is to be transplanted, or violates the confidentiality provisions required by KRS 311.281, shall be guilty of a Class A misdemeanor;
- (b) Any person who has human immunodeficiency virus infection, who knows he is infected with human immunodeficiency virus, and who has been informed that he may communicate the infection by donating organs, skin, or other human tissue who donates organs, skin, or other human tissue shall be guilty of a Class D felony.
- (26) A person who violates any provision of KRS 311.131 to 311.139 or any regulation adopted under KRS 311.131 to 311.139 shall be guilty of a Class A misdemeanor. Each day a violation is continued after the first conviction shall be a separate offense.
- (27) Any person who sells or makes a charge for any transplantable organ shall be guilty of a Class D felony.
- (28) Any person who offers remuneration for any transplantable organ for use in transplantation into himself shall be fined not less than five thousand dollars (\$5,000) nor more than fifty thousand dollars (\$50,000).
- (29) Any person brokering the sale or transfer of any transplantable organ shall be guilty of a Class C felony.
- (30) Any person charging a fee associated with the transplantation of a transplantable organ in excess of the direct and indirect costs of procuring, distributing, or transplanting the transplantable organ shall be fined not less than fifty thousand dollars (\$50,000) nor more than five hundred thousand dollars (\$500,000).
- (31) Any hospital performing transplantable organ transplants which knowingly fails to report the possible sale, purchase, or brokering of a transplantable organ shall be fined not less than ten thousand dollars (\$10,000) or more than fifty thousand dollars (\$50,000).

Section 26. KRS 214.610 is amended to read as follows:

- (1) The Cabinet for Health Services shall approve appropriate educational courses on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change to be completed as specified in the respective chapters by each person licensed or certified under KRS Chapters 311, 312, 313, 314, 315, 320, 327, 333, 335 and emergency medical technicians *certified*~~licensed~~ pursuant to KRS Chapter *311*~~211~~.
- (2) Each licensee or certificate holder shall submit confirmation on a form provided by the cabinet of having completed the course by July 1, 1991, except persons licensed under KRS Chapters 314 and 327 for whom the completion date shall be July 1, 1992.

Section 27. The following KRS sections are repealed:

- 211.9533 Emergency Medical Services for Children Advisory Committee.
- 211.9535 Biennial report on EMSC Program.
- 211.956 Matching fund program for providing trained emergency medical service personnel.
- 211.960 Title.
- 311.650 Definition.

Section 28. The following implementation schedule shall apply to this Act:

- (1) The members of the Kentucky Board of Emergency Medical Services shall be appointed by the Governor on September 1, 2000.
- (2) The board shall hire an executive director and essential staff on November 1, 2000.
- (3) The Kentucky Board of Emergency Medical Services, the Cabinet for Health Services, and the Kentucky Board of Medical Licensure may implement a transfer of fees, funds, functions, equipment, personal property, and records at any time mutually agreed upon after January 1, 2001, but no later than April 1, 2001.
- (4) Until such time as a function is transferred by the Cabinet for Health Services to the Kentucky Board of Emergency Medical Services or the Kentucky Board of Medical Licensure the functions shall remain the duty of the Cabinet for Health Services or the Kentucky Board of Medical Licensure.
- (5) All causes relating to the provisions of Sections 1 to 26 of this Act pending before the Cabinet for Health Services on January 1, 2001, shall be transferred to the Kentucky Board of Emergency Medical Services no later than April 1, 2001.

Approved April 6, 2000