CHAPTER 243

(Home Bill 155)

AN ACT relating to emergency medical services.

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

Section 1. KRS 311A.015 is amended to read as follows:

(1) The Kentucky Board of Emergency Medical Services is created and shall be attached to the Kentucky Community and Technical College System.

(2) The board shall consist of eighteen (18) 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) 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 routinely is 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 certified by the board from a Kentucky technical college, community college, 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) licensed air ambulance service administrator or paramedic for a licensed air ambulance service headquartered in Kentucky;

(o) One (1) private licensed Class I ground ambulance service administrator who is a certified emergency medical technician or a licensed paramedic who is a resident of Kentucky;

(p) One (1) hospital administrator selected from a list of five (5) nominees submitted by the Kentucky Hospital Association;

(q) 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
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(r) One (1) advanced life support, government-operated ambulance service administrator who is a certified emergency medical technician or a licensed paramedic.

(3) No board member shall serve more than two (2) consecutive terms. A member appointed to a partial term vacancy exceeding two (2) years shall be deemed to have served a full term. A former member may be reappointed following an absence of one (1) term.

(4) The board shall annually:

(a) Meet at least six (6) times a year;
(b) At the first meeting of the board after September 1, elect a chair and vice chair by majority vote of the members present; and
(c) Set a schedule of six (6) regular meetings for the next twelve (12) month period.

(5) The board shall adopt a quorum and rules of procedure by administrative regulation.

(6) (a) A member of the board who misses three (3) regular meetings in one (1) year shall be deemed to have resigned from the board and his or her position shall be deemed vacant.
(b) The failure of a board member to attend a special or emergency meeting shall not result in any penalty.
(c) 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.
(d) The Governor shall appoint a person of the same class to fill the vacancy within ninety (90) days.
(e) The person removed under this subsection shall not be reappointed to the board for ten (10) years.

(7) Members of the board 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.

(8) Annual reports and recommendations from the board shall be sent by September 1 each year to the Governor, the president of the Kentucky Community and Technical College System, and the General Assembly.

Section 2. KRS 311A.020 is amended to read as follows:

(1) The board shall:

(a) Exercise all of the administrative functions of the state not regulated by the Board of Medical Licensure or Cabinet for Health and Family Services in the regulation of the emergency medical services system and the practice of first responders, emergency medical technicians, paramedics, ambulance services, and emergency medical services training institutions, with the exception of employment of personnel as described in subsections (5) and (6) of this section;
(b) Issue any licenses or certifications authorized by this chapter;
(c) Oversee the operations and establish the organizational structure of the Office of the Kentucky Board of Emergency Medical Services, which is created and shall be attached to the board for administrative purposes. The office shall be headed by the executive director appointed under paragraph (d) of this subsection and shall be responsible for:
1. Personnel and budget matters affecting the board;
2. Fiscal activities of the board, including grant writing and disbursement of funds;
3. Information technology, including the design and maintenance of databases;
4. Certification and recertification of first responders;
5. Certification and recertification of emergency medical technicians;
6. Licensure and relicensure of ambulances and ambulance services;
7. Licensure and relicensure of paramedics;
8. Certification and recertification of paramedic course coordinators;
9. Investigation of and resolution of quality complaints and ethics issues; and
10. Other responsibilities that may be assigned to the executive director by the board;

(d) Employ an executive director and deputy executive director and fix the compensation. The executive
director and deputy executive director shall serve at the pleasure of the board, administer the day-to-day
operations of the Office of the Kentucky Board of Emergency Medical Services, and supervise all
directives of the board. The director and deputy executive 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;

(e) Employ or contract with a physician licensed in Kentucky who is board certified in emergency
medicine and fix the compensation. The physician shall serve at the pleasure of the board and as the
medical advisor to the Kentucky Board of Emergency Medical Services and the staff of the board;

(f) Employ or contract with an attorney [general counsel] licensed to practice law in Kentucky and fix
the compensation. The attorney [general counsel] shall serve at the pleasure of the board and have
primary assignment to the board;

(g) Employ personnel sufficient to carry out the statutory responsibilities of the board.
1. Personnel assigned to investigate a first responder program complaint or regulate the first
responder programs shall be certified first responders, emergency medical technicians, or
licensed paramedics.
2. Personnel assigned to investigate an emergency medical technician program complaint or
regulate the emergency medical technician program shall be certified emergency medical
technicians or paramedics.
3. Personnel assigned to investigate a paramedic program complaint or regulate the paramedic
program shall be licensed paramedics.
4. A person who is employed by the board who is licensed or certified by the board shall retain his
or her license or certification if he or she meets the in-service training requirements and pays the
fees specified by administrative regulation.
5. A person who is employed by the board may instruct in emergency medical subjects in which he
or she is qualified, with the permission of the board. All instruction shall be rendered without
remuneration other than his or her state salary and the employee shall be considered as on state
duty when teaching.
6. A person who is employed by the board may render services for which the person is qualified at
a declared disaster or emergency or in a situation where trained personnel are not available until
those personnel arrive to take over the patient, or where insufficient trained personnel are
available to handle a specific emergency medical incident. All aid shall be rendered without
remuneration other than the employee's state salary and the employee shall be considered as on
state duty when rendering aid. In cases specified in this paragraph, the state medical advisor
shall serve as the emergency medical services medical director for the employee;

(h) Establish committees and subcommittees and the membership thereof. Members of committees and
subcommittees do not need to be members of the board;

(i) Enter into contracts, apply for grants and federal funds, and disburse funds to local units of government
as approved by the General Assembly. All funds received by the board shall be placed in a trust and
agency account in the State Treasury subject to expenditure by the board;

(j) Administer the Emergency Medical Services for Children Program; and

(k) Establish minimum curriculum and standards for emergency medical services training.

(2) 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.

(3) The board may delegate to the executive director, by written order, any function other than promulgation of an
administrative regulation specified in this chapter.
(4) Except for securing funding for trauma centers and the implementation of KRS 311A.170, the board shall not serve as the lead agency relating to the development or regulation of trauma systems but shall be a partner with other state agencies in the development, implementation, and oversight of such systems.

(5) (a) The Kentucky Community and Technical College System shall employ personnel for the work of the board, and the personnel in the positions described in this section and all other persons in administrative and professional positions shall be transferred to the personnel system of the Kentucky Community and Technical College System on the effective date of this Act in the appropriate classification to carry out the mission of the board. All employees transferred under this paragraph shall have all employment records and months of service credit transferred to the Kentucky Community and Technical Colleges System. Employees of the board transferred under this paragraph who subsequently return to state employment under KRS Chapter 18A shall have their employment records and months of service credit under the Kentucky Community and Technical College System transferred back to the KRS Chapter 18A personnel system and the employment records and months of service credit shall be used in calculations for all benefits under KRS Chapter 18A.

(b) New employees hired or contracted after the effective date of this Act shall be employed or contracted by the Kentucky Community and Technical College System.

(6) The board shall appoint a personnel committee consisting of the chair of the board, one (1) physician member of the board, one (1) ambulance service provider member of the board, one (1) additional member of the board selected by the chair of the board, and one (1) representative of the Kentucky Community and Technical College System administration. The personnel committee shall conduct an annual job performance review of the executive director, the medical advisor, and the board attorney that conforms with the personnel standards of the Kentucky Community and Technical College System and includes a recommendation for or against continued employment to be presented to the personnel office of the Kentucky Community and Technical College System.

(7) All state general funds appropriated to the board, all federal funds, all moneys collected by the board, and all equipment owned by the board shall be transferred to the Kentucky Community and Technical College System on July 1, 2006.

(8) The board shall develop a proposed biennial budget for all administrative and operational functions and duties in conjunction with the Kentucky Community and Technical College System budget submission process. The Kentucky Community and Technical System shall not make changes to the budget proposal submitted by the board, but may submit written comments on the board's budget proposal to the board and other agencies in the budget submission process.

Section 3. KRS 311A.050 is amended to read as follows:

(1) No person shall:

(a) Call or hold himself or herself out as or use the title of emergency medical technician, first responder, paramedic, first responder instructor or instructor trainer, emergency medical technician instructor or instructor trainer, or paramedic instructor, paramedic instructor trainer, or paramedic course coordinator unless licensed or certified under the provisions of this chapter. The provisions of this subsection shall not apply if the board does not license or certify a person as an instructor, instructor trainer, or course coordinator in a particular discipline regulated by the board;

(b) Operate or offer to operate or represent or advertise the operation of a school or other educational program for first responders, emergency medical technicians, paramedics, or instructor or instructor trainers for first responders, emergency medical technicians, or paramedics unless the school or educational program has been approved under the provisions of this chapter. The provisions of this paragraph shall not apply to continuing education provided by a licensed ambulance service for anyone certified or licensed by the board (in house training) given by an ambulance service for its employees or volunteers; or

(c) Knowingly employ a first responder, emergency medical technician, paramedic, or an instructor or instructor trainer for first responders, emergency medical technicians, or paramedics, or paramedic course coordinator unless that person is licensed or certified under the provisions of this chapter.
(2) No person licensed or certified by the board or who is an applicant for licensure or certification by the board shall:

(a) If licensed or certified, violate any provision of this chapter or any administrative regulation promulgated by the board;

(b) Use fraud or deceit in obtaining or attempting to obtain a license or certification from the board, or be granted a license upon mistake of a material fact;

(c) If licensed or certified by the board, grossly negligently or willfully act in a manner inconsistent with the practice of the discipline for which the person is certified or licensed;

(d) Be unfit or incompetent to practice a discipline regulated by the board by reason of negligence or other causes;

(e) Abuse, misuse, or misappropriate any drugs placed in the custody of the licensee or certified person for administration, or for use of others;

(f) Falsify or fail to make essential entries on essential records;

(g) Be convicted of a misdemeanor which involved acts that bear directly on the qualifications or ability of the applicant, licensee, or certified person to practice the discipline for which the person is an applicant, licensee, or certified person;

(h) Be convicted of a misdemeanor which involved fraud, deceit, breach of trust, or physical harm or endangerment to self or others, acts that bear directly on the qualifications or ability of the applicant, licensee, or certificate holder to practice acts in the license or certification held or sought;

(i) Be convicted of a misdemeanor offense under KRS Chapter 510 involving a patient or be found by the board to have had sexual contact as defined in KRS 510.010(7) with a patient while the patient was under the care of the licensee or certificate holder;

(j) Be convicted of, have entered a guilty plea to, have entered an Alford plea to a felony offense, or completed a diversion program for a felony offense.

(3) It shall be unlawful for any person licensed or certified by the board or an employer of a person licensed or certified by the board having knowledge of the facts to refrain from reporting to the board any person licensed or certified by the board who:

(a) Has been convicted of, has entered a guilty plea to, has entered an Alford plea to a felony offense, or has completed a diversion program for a felony offense;

(b) Has been convicted of a misdemeanor or felony which involved acts that bear directly on the qualifications or ability of the applicant, licensee, or certified person to practice the discipline for which they are an applicant, licensee, or certified person;

(c) Is reasonably suspected of fraud or deceit in procuring or attempting to procure a license or certification from the board;

(d) Is reasonably suspected of grossly negligently or willfully acting in a manner inconsistent with the practice of the discipline for which they are certified or licensed;
(e) Is reasonably suspected of being unfit or incompetent to practice a discipline regulated by the board by reason of negligence or other causes including, but not limited to, being unable to practice the discipline for which they are licensed or certified with reasonable skill or safety; 

(f) Is reasonably suspected of violating any provisions of this chapter or the administrative regulations promulgated under this chapter; 

(g) Has a license or certification to practice an activity regulated by the board denied, limited, suspended, probated, revoked, or otherwise disciplined in another jurisdiction on grounds sufficient to cause a license or certification to be denied, limited, suspended, probated, revoked, or otherwise disciplined in this Commonwealth; 

(h) Is practicing an activity regulated by the board without a current active license, or certification issued by the board; 

(i) Is reasonably suspected of abusing, misusing, or misappropriating any drugs placed in the custody of the licensee or certified person for administration, or for use of others; or 

(j) Is suspected of falsifying or in a grossly negligent manner making incorrect entries or failing to make essential entries on essential records. 

(4) A person who violates subsection (1)(a), (b), or (c) of this section shall be guilty of a Class A misdemeanor for a first offense and a Class D felony for each subsequent offense. 

(5) The provisions of this section shall not preclude prosecution for the unlawful practice of medicine, nursing, or other practice certified or licensed by an agency of the Commonwealth. 

(6) The filing of criminal charges or a criminal conviction for violation of the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the office of the board from instituting or imposing board disciplinary action authorized by this chapter against any person or organization violating this chapter or the administrative regulations promulgated thereunder. 

(7) The institution or imposition of disciplinary action by the office of the board against any person or organization violating the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the filing of criminal charges against or a criminal conviction of any person or organization for violation of the provisions of this chapter or the administrative regulations promulgated thereunder. 

Section 4. KRS 311A.055 is amended to read as follows: 

(1) In accordance with the provisions of KRS Chapter 13B, all discipline for which the board is authorized to conduct investigations, hold hearings, and impose punishments is delegated to the executive director, state medical advisor, board attorney, and hearing panels as provided herein. 

(2) Any person may make a complaint to the executive director that an entity licensed or certified by the board, first responder, emergency medical technician, paramedic, emergency medical services medical advisor or other person licensed or certified by the board has violated a provision of this chapter, an administrative regulation promulgated pursuant to this chapter, protocol, practice standard, or order of the board. 

(3) Each complaint shall: 

(a) Be in writing; 

(b) Identify specifically the person or organization against whom the complaint is made; 

(c) Set forth the facts relating to the violation alleged and any other supporting information which may have a bearing on the matter; 

(d) Contain the name, address, telephone number, facsimile number, and e-mail address, if available, of the complainant; 

(e) Be subscribed and sworn to as to the truth of the statements contained in the complaint by the complainant; and 

(f) Be notarized.
(4) A complaint which is unsigned shall not be acted upon by the executive director. A complaint which is not subscribed and sworn in the manner specified in subsection (3) of this section shall be returned to the complainant for completion.

(5) The executive director of the board may, on behalf of the board, based on knowledge available to the office of the board, make a complaint against any person or organization regulated by the board in the same manner as provided in subsection (3) of this section.

(6) Upon receipt of a properly completed complaint, the executive director shall assign the complaint to a staff investigator who shall investigate the complaint and shall make findings of fact and recommendations to the executive director who shall then convene a preliminary inquiry board.

(7) When the executive director assigns a complaint to a staff investigator he or she shall notify the person or organization against whom the complaint has been filed and shall notify the employer of a first responder, emergency medical technician, or paramedic and the emergency medical services medical director for the organization and for any paramedic against whom the complaint is filed and any other person or organization specified in this chapter.

(8) The notification shall name the person or organization complained against, the complainant, the violations alleged, and the facts presented in the complaint and shall notify the person or organization complained against, the employer, and the emergency medical services medical director of:

(a) The fact that the complaint shall be answered, the steps for answering the complaint, and the action to be taken if the complaint is not answered;

(b) The time frame and steps in the proceedings of a complaint;

(c) The rights of the parties, including the right to counsel; and

(d) The right to testify at any hearing.

(9) Upon the failure of a license or certificate holder to respond to a written accusation or to request a hearing within twenty (20) days after the sending of the accusation, the accused shall be considered to have admitted the truth of the facts and the circumstances in the allegation and appropriate discipline may be imposed.

(10) The preliminary inquiry board shall consist of one (1) member of the board selected by the chair, and two members representing the same category of certification or licensure as the defendant who are not members of the board appointed by the chairman of the board, and the board attorney.

(11) After reviewing the complaint and results of any investigation conducted on behalf of the board, the preliminary inquiry board shall consider whether the accusation is sufficient to remand the matter for a hearing as provided in this section and KRS Chapter 13B. A majority vote of the members of the preliminary inquiry board shall be necessary for action to either remand the matter for hearing or dismiss the complaint without hearing.

(12) If the preliminary inquiry board dismisses the complaint, all parties notified previously shall be notified of the action. If the preliminary inquiry board remands the matter for a hearing, all parties notified previously shall be notified of the action.

(13) Each proceeding to consider the imposition of a penalty which the board is authorized to impose pursuant to this chapter shall be conducted in accordance with KRS Chapter 13B.

(14) A hearing panel for purposes of making a decision in any disciplinary matter shall consist of one (1) physician who may be a member of the board or who meets the qualifications of an emergency medical services medical director; one (1) person from the category of persons or organizations of the same class as the defendant; and the hearing officer, who shall not be involved in emergency medical services.

(15) The hearing officer may issue subpoenas to compel the attendance of witnesses and the production of documents in the conduct of an investigation. The subpoenas may be enforced by any Circuit Court for contempt. Any order or subpoena of the court requiring the attendance and testimony of witnesses and the production of documentary evidence may be enforced and shall be valid anywhere in this state.

(16) At all hearings the board attorney or, on request of the board, the Attorney General of this state or one (1) of the assistant attorneys general designated shall appear and represent the board.
(17) The emergency medical services provider or related employer of a person licensed or certified by the board and the emergency medical services medical director of such a person who is the defendant in a hearing shall be parties to the action and may appear and testify in the matter at any deposition or hearing on the matter and may propose conclusions of law, findings of fact, and penalties to the hearing panel.

(18) To make a finding or recommend discipline, the two (2) members of the hearing panel who are not the hearing officer shall agree on the finding or discipline. In the event of a tie vote, the hearing officer shall cast the deciding vote.

(19) The final order in any disciplinary proceeding shall be prepared by the executive director and sent to all parties in the manner prescribed by law.

(20) Any person or entity aggrieved by a final order of the board may appeal to the Franklin Circuit Court in accordance with the provisions of KRS Chapter 13B.

(21) The only discipline that the board may impose against an emergency medical services medical director is denial, suspension or withdrawal of the board's approval for that person to serve as an emergency medical services medical director.

(22) If the executive director substantiates that sexual contact occurred between a licensee or certificate holder and a patient while the patient was under the care of or in a professional relationship with the licensee or certificate holder, the license or certification may be revoked or suspended with mandatory treatment of the person as prescribed by the executive director. The executive director may require the licensee or certificate holder to pay a specified amount for mental health services for the patient which are needed as a result of the sexual contact.

Section 5. KRS 311A.060 is amended to read as follows:

(1) If it is determined that an entity regulated by the board, a paramedic, 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, first responder, or emergency medical technician, the office of the board may impose any of the sanctions provided in subsection (2) of this section. Any party to the complaint shall have the right to propose findings of fact and conclusions of law, and to recommend sanctions.

(2) The office of the board shall require an acceptable plan of correction and may use any one (1) or more of the following sanctions when disciplining a paramedic, emergency medical technician first responder, emergency medical technician, or any entity regulated by the board:

(a) Private reprimand that shall be shared with each of the paramedic's, first responder's, or emergency medical technician's emergency medical services or related employer and medical director;

(b) Public reprimand;

(c) Fines of fifty dollars ($50) to five hundred dollars ($500) for a natural person or fifty dollars ($50) to five thousand dollars ($5,000) for a public agency or business entity;

(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;

(j) Repassing a portion of the paramedic, first responder, or emergency medical technician examination;

(k) Probation for a specified time; or

(l) If it is found that the person who is licensed or certified by the board has been convicted of, pled guilty to, entered an Alford plea to a felony offense, or has completed a diversion program for a felony offense the license or certification shall be revoked.
(3) The filing of criminal charges or a criminal conviction for violation of the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the office of the board from instituting or imposing board disciplinary action authorized by this chapter against any person or organization violating this chapter or the administrative regulations promulgated thereunder.

(4) The institution or imposition of disciplinary action by the office of the board against any person or organization violating the provisions of this chapter or the administrative regulations promulgated thereunder shall not preclude the filing of criminal charges against or a criminal conviction of any person or organization for violation of the provisions of this chapter or the administrative regulations promulgated thereunder.

Section 6. KRS 311A.075 is amended to read as follows:

(1) The state medical advisor, one (1) physician board member selected by the chairman of the board, and one (1) member of the board of the same category of licensure or certification as the defendant selected by the chairman of the board, in writing, may determine that immediate temporary suspension of a license or certification of a natural person against which disciplinary action or an investigation is pending is necessary in order to protect the public. If the defendant is employed by an emergency medical services provider, the input of the employer's emergency medical services medical director shall be sought with regard to the matter. In the event of an action against an organization, the determination that an immediate temporary suspension is necessary in order to protect the public shall be made by the state medical advisor, one (1) physician member of the board, and two (2) other members of the board who are appointed by the chairman of the board. When this action may be necessary, the executive director, in writing, shall issue an emergency order suspending the licensee or certificate holder. Upon appeal of an emergency order, an emergency hearing shall be conducted in accordance with KRS 13B.125.

(2) No board member shall be disqualified from serving on a disciplinary action hearing panel for the reason that he or she has previously sat on a hearing panel considering temporary suspension of the same license.

(3) Disciplinary actions in which a license or certification has been temporarily suspended and a hearing shall be held in accordance with KRS 13B.125 within ninety (90) days unless the defendant requests an extension of time.

(4) The order of immediate temporary suspension shall remain in effect until either retracted or superseded by final disciplinary action by the office of the board. In cases where disciplinary action is imposed, the office of the board may additionally order that the temporary suspension continue in effect until the later expiration of time permitted for appeal or termination of the appellate process.

Section 7. KRS 311A.125 is amended to read as follows:

(1) For each licensure renewal of a paramedic following the issuance of an initial license or certification by the board, as a prerequisite for license or certification renewal, all individuals licensed under the provisions of this chapter shall be required to document continuing competence during the immediate past licensure or certification period as prescribed in administrative regulations promulgated by the board.

(2) The compliance with continuing competency requirement shall be documented by the emergency medical services medical director and reported as set forth by the board in administrative regulations promulgated in accordance with KRS Chapter 13A.

(3) The board shall approve providers of emergency medical services education and continuing education. The approval may include recognition of providers approved by national organizations and state boards of emergency medical services with comparable standards. Standards for these approvals shall be set forth by the board in administrative regulations promulgated in accordance with KRS Chapter 13A. The board need not approve continuing education training provided by a licensed ambulance service for anyone certified or licensed by the board. [The in-house conduct of in-service training of its own employees or volunteers by a licensed ambulance service]

(4) The board shall work cooperatively with professional emergency medical services organizations, approved schools, and other potential sources of continuing education programs to ensure that adequate continuing education offerings are available statewide. The board may enter into contractual agreements to implement the provisions of this section.

Approved April 24, 2006.