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- 1 AN ACT relating to emergency medical services.
- 2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:
  - →Section 1. KRS 311A.010 is amended to read as follows:
- 4 As used in this chapter, unless the context otherwise requires:
- 5 (1) <u>"Advanced emergency medical technician" or "AEMT" means a person certified</u>
  6 under this chapter as an advanced emergency medical technician;

7 "Ambulance" means a vehicle which has been inspected and approved by the board, (2)8 including a helicopter or fixed-wing aircraft, except vehicles or aircraft operated by 9 the United States government, that are specially designed, constructed, or have been 10 modified or equipped with the intent of using the same, for the purpose of 11 transporting any individual who is sick, injured, or otherwise incapacitated who 12 may require immediate stabilization or continued medical response and intervention 13 during transit or upon arrival at the patient's destination to safeguard the patient's 14 life or physical well-being;

15 "Ambulance provider" means any individual or private or public organization, (3)[(2)]16 except the United States government, who is licensed by the board to provide 17 medical transportation services at either basic life support level or advanced life 18 support level and who may have a vehicle or vehicles, including ground vehicles, 19 helicopters, or fixed-wing aircraft to provide such transportation. An ambulance 20 provider may be licensed as a Class I, II, III, or IV ground ambulance provider, a 21 Class VI medical first response provider, a Class VII air ambulance provider, or a 22 Class VIII event medicine provider [an air ambulance provider, as a Class I ground 23 ambulance provider, as a Class II ground ambulance provider, or as a Class III 24 ground ambulance provider];

- 25 (4)[(3)] "Board" means the Kentucky Board of Emergency Medical Services;
- 26 (5)[(4)] "Emergency medical facility" means a hospital or any other institution
   27 licensed by the Cabinet for Health and Family Services that furnishes emergency

1 medical services;

# 2 (6) ''Emergency medical responder'' or ''EMR'' means a person certified under this 3 chapter as an EMR or EMR instructor;

- 4 <u>(7)</u>[(5)] "Emergency medical services" means the services utilized in providing care
  5 for the perceived individual need for immediate medical care to protect against loss
  6 of life, or aggravation of physiological or psychological illness or injury;
- 7 (8)[(6)] "Emergency Medical Services for Children Program" or "EMSC Program"
  8 means the program established under this chapter;

9 (9)[(7)] "Emergency medical services personnel" means persons, certified or licensed,
10 and trained to provide emergency medical services, and an authorized emergency
11 medical services medical director, whether on a paid or volunteer basis;

12 (10)[(8)] "Emergency medical services system" means a coordinated system of health-13 care delivery that responds to the needs of acutely sick and injured adults and 14 children, and includes community education and prevention programs, centralized 15 access and emergency medical dispatch, communications networks, trained 16 emergency medical services personnel, medical first response, ground and air 17 ambulance services, trauma care systems, mass casualty management, medical 18 direction, and quality control and system evaluation procedures;

(11)[(9)] "Emergency medical services training or educational institution" means any
 person or organization which provides emergency medical services training or
 education or in-service training, other than a licensed ambulance service which
 provides training, or in-service training in-house for its own employees or
 volunteers;

24 (12)[(10)] "Emergency medical technician" or "EMT" means a person certified under
 25 this chapter as an EMT <u>or EMT instructor</u>[-basic, EMT-basic instructor, or EMT 26 instructor trainer];

27 [(11) "First responder" means a person certified under this chapter as a first responder or

1	first responder instructor;
2	(12) ](13) "Emergency medical services medical director" means a physician licensed in
3	Kentucky who is employed by, under contract to, or has volunteered to provide
4	supervision for a paramedic or an ambulance service, or both;
5	(14)[(13)] "Paramedic" means a person who is involved in the delivery of medical
6	services and is licensed under this chapter;
7	(15) [(14)] "Paramedic course coordinator" means a person certified under this chapter to
8	coordinate a paramedic course. A paramedic course coordinator shall not practice as
9	a paramedic unless they are also licensed as a paramedic;
10	(16)[(15)] "Paramedic preceptor" means a licensed paramedic who supervises a
11	paramedic student during the field portion of the student's training;
12	(17)[(16)] "Prehospital care" means the provision of emergency medical services or
13	transportation by trained and certified or licensed emergency medical services
14	personnel at the scene or while transporting sick or injured persons to a hospital or
15	other emergency medical facility; and
16	(18) [(17)] "Trauma" means a single or multisystem life-threatening or limb-threatening
17	injury requiring immediate medical or surgical intervention or treatment to prevent
18	death or permanent disability.
19	Section 2. KRS 311A.015 is amended to read as follows:
20	(1) The Kentucky Board of Emergency Medical Services is created and shall be
21	attached to the Kentucky Community and Technical College System.
22	(2) The board shall consist of eighteen (18) members who are residents of Kentucky
23	appointed by the Governor in conjunction with recognized state emergency medical
24	services related organizations. Membership shall be made up of the following:
25	(a) One (1) paramedic who works for a government agency but is not serving in
26	an educational, management, or supervisory capacity;
27	(b) One (1) emergency medical technician[-basic] who works for a government

1 agency but is not serving in an educational, management, or supervisory 2 capacity; 3 One (1) *emergency medical*[first] responder who is not serving in an (c) 4 educational, management, or supervisory capacity; 5 (d) One (1) physician licensed in Kentucky having a primary practice in the 6 delivery of emergency medical care selected from a list of three (3) physicians 7 submitted by the Kentucky Medical Association; 8 (e) One (1) physician licensed in Kentucky serving as medical director of an 9 advanced life support ambulance service selected from a list of three (3) 10 physicians submitted by the Kentucky Medical Association; 11 (f) One (1) physician licensed in Kentucky who routinely is involved in the 12 emergency care of ill and injured children selected from a list of three (3) 13 physicians submitted by the Kentucky Medical Association; 14 (g) One (1) trauma surgeon licensed in Kentucky selected from a list of three (3) 15 physicians submitted by the Kentucky Medical Association; 16 (h) One (1) citizen having no involvement in the delivery of medical or 17 emergency services; 18 (i) One (1) emergency medical services educator certified by the board; 19 (j) One (1) mayor of a city that operates, either directly or through contract 20 services, a licensed Class I ground ambulance service; 21 (k) One (1) county judge/executive from a county that operates, whether directly 22 or through contract services, a licensed Class I ground ambulance service; 23 (1)One (1) volunteer-staffed, licensed Class I ground ambulance service 24 administrator who is a certified emergency medical technician or a licensed 25 paramedic; 26 (m) One (1) fire-service-based, licensed Class I ground ambulance service 27 administrator who is a certified emergency medical technician or a licensed

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1		paramedic;	
2		n) One (1) licensed a	air ambulance service administrator or paramedic for a
3		licensed air ambula	nce service headquartered in Kentucky;
4		o) One (1) private lice	nsed Class 1 ground ambulance service administrator who
5		is a certified emerg	ency medical technician or a licensed paramedic who is a
6		resident of Kentuck	y;
7		p) One (1) hospital a	administrator selected from a list of five (5) nominees
8		submitted by the Ke	entucky Hospital Association;
9		q) One (1) basic life	support, licensed Class I government-operated ground
10		ambulance service	administrator who is a certified emergency medical
11		technician or a licer	used paramedic; and
12		r) One (1) advanced	life support, government-operated ambulance service
13		administrator who	is a certified emergency medical technician or a licensed
14		paramedic.	
15	(3)	lo board member shall	serve more than two (2) consecutive terms. A member
16		ppointed to a partial term	n vacancy exceeding two (2) years shall be deemed to have
17		erved a full term. A for	mer member may be reappointed following an absence of
18		ne (1) term.	
19	(4)	The board shall annually:	
20		a) Meet at least six (6)	times a year;
21		b) At the first meeting	of the board after September 1, elect a chair and vice chair
22		by majority vote of	the members present; and
23		c) Set a schedule of	six (6) regular meetings for the next twelve (12) month
24		period.	
25	(5)	he board shall adopt a q	uorum and rules of procedure by administrative regulation.
26	(6)	a) A member of the be	bard who misses three (3) regular meetings in one (1) year

27 shall be deemed to have resigned from the board and his or her position shall

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1			be deemed vacant.
2		(b)	The failure of a board member to attend a special or emergency meeting shall
3			not result in any penalty.
4		(c)	The year specified in this subsection shall begin with the first meeting missed
5			and end three hundred sixty-five (365) days later or with the third meeting
6			missed, whichever occurs earlier.
7		(d)	The Governor shall appoint a person of the same class to fill the vacancy
8			within ninety (90) days.
9		(e)	The person removed under this subsection shall not be reappointed to the
10			board for ten (10) years.
11	(7)	Mer	nbers of the board shall be entitled to reimbursement for actual and necessary
12		expe	enses when carrying out official duties of the board in accordance with state
13		adm	inistrative regulations relating to travel reimbursement. The board shall meet at
14		leas	t six (6) times each year.
15	(8)	Ann	ual reports and recommendations from the board shall be sent by September 1
16		each	year to the Governor, the president of the Kentucky Community and Technical
17		Coll	ege System, and the General Assembly.
18		⇒s	ection 3. KRS 311A.020 is amended to read as follows:
19	(1)	The	board shall:
20		(a)	Exercise all of the administrative functions of the state not regulated by the
21			Board of Medical Licensure or Cabinet for Health and Family Services in the
22			regulation of the emergency medical services system and the practice of
23			emergency medical [first] responders, emergency medical technicians,
24			paramedics, ambulance services, and emergency medical services training
25			institutions, with the exception of employment of personnel as described in
26			subsections (5) and (6) of this section;
27		(b)	Issue any licenses or certifications authorized by this chapter;

1	(c)	Oversee the operations and establish the organizational structure of the Office
2		of the Kentucky Board of Emergency Medical Services, which is created and
3		shall be attached to the board for administrative purposes. The office shall be
4		headed by the executive director appointed under paragraph (d) of this
5		subsection and shall be responsible for:
6		1. Personnel and budget matters affecting the board;
7		2. Fiscal activities of the board, including grant writing and disbursement
8		of funds;
9		3. Information technology, including the design and maintenance of
10		databases;
11		4. Certification and recertification of <i><u>emergency medical</u>[first]</i> responders;
12		5. Certification and recertification of emergency medical technicians;
13		6. Certification and recertification of advanced emergency medical
14		<u>technicians;</u>
15		<u>7.</u> Licensure and relicensure of ambulances and ambulance services;
16		8.[7.] Licensure and relicensure of paramedics;
17		9.[8.] Certification and recertification of <u>EMS educators and</u> paramedic
18		course coordinators;
19		<u>10.[9.]</u> Investigation of and resolution of quality complaints and ethics
20		issues; and
21		<u>11.[10.]</u> Other responsibilities that may be assigned to the executive
22		director by the board;
23	(d)	Employ an executive director and deputy executive director and fix the
24		compensation. The executive director and deputy executive director shall
25		serve at the pleasure of the board, administer the day-to-day operations of the
26		Office of the Kentucky Board of Emergency Medical Services, and supervise
27		all directives of the board. The director and deputy executive director shall

1		poss	ess a baccalaureate degree and shall have no less than five (5) years of
2		expe	erience in public administration or in the administration of an emergency
3		med	ical services program;
4	(e)	Emp	ploy or contract with a physician licensed in Kentucky who is board
5		certi	fied in emergency medicine and fix the compensation. The physician shall
6		serv	e at the pleasure of the board and as the medical advisor to the Kentucky
7		Boa	rd of Emergency Medical Services and the staff of the board;
8	(f)	Emp	bloy or contract with an attorney licensed to practice law in Kentucky and
9		fix t	he compensation. The attorney shall serve at the pleasure of the board and
10		have	e primary assignment to the board;
11	(g)	Emp	bloy personnel sufficient to carry out the statutory responsibilities of the
12		boar	d.
13		1.	Personnel assigned to investigate an emergency medical[a first]
14			responder program complaint or regulate the <i>emergency medical</i> [first]
15			responder programs shall be certified <i>emergency medical</i> [first]
15 16			responder programs shall be certified <u>emergency medical</u> [first] responders, emergency medical technicians, <u>advanced emergency</u>
16		2.	responders, emergency medical technicians, <u>advanced emergency</u>
16 17		2.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics.
16 17 18		2.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician
16 17 18 19		2.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician
16 17 18 19 20		2.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians, <u>advanced</u>
16 17 18 19 20 21			responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians <u>, advanced</u> <u>emergency medical technicians</u> , or paramedics.
<ol> <li>16</li> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> </ol>			responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians <u>, advanced</u> <u>emergency medical technicians</u> , or paramedics. Personnel assigned to investigate a paramedic program complaint or
<ol> <li>16</li> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> </ol>		3.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians, <u>advanced</u> <u>emergency medical technicians</u> , or paramedics. Personnel assigned to investigate a paramedic program complaint or regulate the paramedic program shall be licensed paramedics.
<ol> <li>16</li> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> </ol>		3.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians, <u>advanced</u> <u>emergency medical technicians</u> , or paramedics. Personnel assigned to investigate a paramedic program complaint or regulate the paramedic program shall be licensed paramedics. A person who is employed by the board who is licensed or certified by
<ol> <li>16</li> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> </ol>		3.	responders, emergency medical technicians, <u>advanced emergency</u> <u>medical technicians</u> , or licensed paramedics. Personnel assigned to investigate an emergency medical technician program complaint or regulate the emergency medical technician program shall be certified emergency medical technicians <u>, advanced</u> <u>emergency medical technicians</u> , or paramedics. Personnel assigned to investigate a paramedic program complaint or regulate the paramedic program shall be licensed paramedics. 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

- 15.A person who is employed by the board may instruct in emergency2medical subjects in which he or she is qualified, with the permission of3the board. All instruction shall be rendered without remuneration other4than his or her state salary and the employee shall be considered as on5state duty when teaching.
- 6 6. A person who is employed by the board may render services for which 7 the person is qualified at a declared disaster or emergency or in a 8 situation where trained personnel are not available until those personnel 9 arrive to take over the patient, or where insufficient trained personnel are 10 available to handle a specific emergency medical incident. All aid shall 11 be rendered without remuneration other than the employee's state salary 12 and the employee shall be considered as on state duty when rendering 13 aid. In cases specified in this paragraph, the state medical advisor shall 14 serve as the emergency medical services medical director for the 15 employee;
- 16 (h) Establish committees and subcommittees and the membership thereof.
  17 Members of committees and subcommittees do not need to be members of the
  18 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;
- 23 (j) Administer the Emergency Medical Services for Children Program; and
- 24 (k) Establish minimum curriculum and standards for emergency medical services
  25 training.
- 26 (2) The board may utilize materials, services, or facilities as may be made available to it
  27 by other state agencies or may contract for materials, services, or facilities.

1 2 (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.

- 3 (4) Except for securing funding for trauma centers and the implementation of KRS
  4 311A.170, the board shall not serve as the lead agency relating to the development
  5 or regulation of trauma systems, but shall be a partner with other state agencies in
  6 the development, implementation, and oversight of such systems.
- 7 (5) The Kentucky Community and Technical College System shall employ (a) 8 personnel for the work of the board, and the personnel in the positions 9 described in this section and all other persons in administrative and 10 professional positions shall be transferred to the personnel system of the 11 Kentucky Community and Technical College System on July 12, 2006, in the 12 appropriate classification to carry out the mission of the board. All employees 13 transferred under this paragraph shall have all employment records and 14 months of service credit transferred to the Kentucky Community and 15 Technical College System. Employees of the board transferred under this 16 paragraph who subsequently return to state employment under KRS Chapter 17 18A shall have their employment records and months of service credit under 18 the Kentucky Community and Technical College System transferred back to 19 the KRS Chapter 18A personnel system, and the employment records and 20 months of service credit shall be used in calculations for all benefits under 21 KRS Chapter 18A.
- 22 23

(b) New employees hired or contracted after July 12, 2006, 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

1 College System administration. The personnel committee shall conduct an annual 2 job performance review of the executive director, the medical advisor, and the 3 board attorney that conforms with the personnel standards of the Kentucky 4 Community and Technical College System and includes a recommendation for or 5 against continued employment to be presented to the personnel office of the 6 Kentucky Community and Technical College System.

7 (7) All state general fund moneys appropriated to the board, all federal funds, all
8 moneys collected by the board, and all equipment owned by the board shall be
9 transferred to the Kentucky Community and Technical College System on July 1,
10 2006.

11 (8) The board shall develop a proposed biennial budget for all administrative and 12 operational functions and duties in conjunction with the Kentucky Community and 13 Technical College System budget submission process. The Kentucky Community 14 and Technical College System shall not make changes to the budget proposal 15 submitted by the board, but may submit written comments on the board's budget 16 proposal to the board and other agencies in the budget submission process.

17 → Section 4. KRS 311A.025 is amended to read as follows:

18 (1) The board shall, subject to the provisions of this chapter, create levels of
 19 certification or licensure, as appropriate for individuals providing services under
 20 this chapter. These may consist of but not be limited to:

21 (a) <u>Emergency medical responder and emergency medical responder</u>
 22 instructor[First responder and first responder instructor];

- (b) Emergency medical technician-basic, emergency medical technician-basic
   instructor, and emergency medical technician-basic instructor trainer;
- (c) Paramedic, paramedic course coordinator, paramedic instructor, and
   paramedic preceptor;
- 27 (d) Emergency medical services medical director who supervises a person or

1			organization licensed or certified by the board;
2		(e)	Emergency medical service training institution;
3		(f)	Emergency medical service testing agency;
4		(g)	Ground ambulance service, including categories thereof;
5		(h)	Air ambulance service;
6		(i)	Medical first response provider;
7		(j)	Emergency medical dispatcher, emergency medical dispatch instructor, and
8			emergency medical dispatch instructor trainer;
9		(k)	Emergency medical dispatch center or public safety answering point; and
10		(l)	Any other entity authorized by this chapter.
11	(2)	The	board shall promulgate administrative regulations for any certification or
12		licer	nse the board may create. The administrative regulations shall, at a minimum,
13		addr	ress:
14		(a)	Requirements for students, if appropriate;
15		(b)	Requirements for training;
16		(c)	Eligibility for certification or licensure; and
17		(d)	Renewal, recertification, and relicensure requirements.
18	(3)	The	board may authorize a physician licensed to practice in Kentucky to serve as an
19		eme	rgency medical services medical director if that physician meets the
20		requ	irements specified by the board by administrative regulation.
21		→s	ection 5. KRS 311A.030 is amended to read as follows:
22	The	board	I shall promulgate administrative regulations in accordance with KRS Chapter
23	13A	to ca	rry out the functions of this chapter, including but not limited to:
24	(1)	Lice	nsing, inspecting, and regulating of ambulance services and medical first-
25		resp	onse providers. The administrative regulations shall address specific
26		requ	irements for:
27		(a)	[Air ambulance providers, which provide basic or advanced life support

1	services;
2	(b)] Class I ground ambulance providers, which provide basic life support or
3	advanced life support services to all patients for emergencies or scheduled
4	ambulance transportation which is medically necessary;
5	(b) [(c)] Class II ground ambulance providers, which provide only basic life
6	support services but do not provide initial response to the general population
7	with medical emergencies and which are limited to providing scheduled
8	ambulance transportation which is medically necessary;
9	(c) [(d)] Class III ground ambulance providers, which provide mobile intensive
10	care services at or above the level of advanced life support to patients with
11	critical illnesses or injuries who must be transported between hospitals in
12	vehicles with specialized equipment as an extension of hospital-level care;
13	(d) Class IV ground ambulance providers, which provide basic life support or
14	advanced life support services and transportation for restricted locations
15	such as industrial sites and other sites that do not provide services outside a
16	designated site;
17	(e) Class VI medical first response providers, which provide prehospital or
18	advanced life support services, but do not transport patients;
19	(f) Class VII air ambulance providers, which provide basic or advanced life
20	support services; and
21	(g) Class VIII event medicine providers, which provide basic or advanced life
22	support services, but do not transport patients [ and
23	(e) Medical first-response providers, which provide prehospital or advanced life
24	support services, but do not transport patients]; and
25	(2) Emergency medical services training institutions.
26	Nothing in this section shall be construed to change or alter the issuance of certificates of
27	need for emergency medical services providers.

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→ Section 6. KRS 311A.050 is amended to read as follows:

- 2 (1) No person shall:
- 3 Call or hold himself or herself out as or use the title of emergency medical (a) 4 technician, *emergency medical*[first] responder, *advanced emergency* 5 *medical technician*, paramedic, *emergency medical*[first] responder instructor 6 or instructor trainer, emergency medical technician instructor or instructor 7 trainer, or paramedic instructor, paramedic instructor trainer, or paramedic 8 course coordinator unless licensed or certified under the provisions of this 9 chapter. The provisions of this subsection shall not apply if the board does not 10 license or certify a person as an instructor, instructor trainer, or course 11 coordinator in a particular discipline regulated by the board;
- 12 Operate or offer to operate or represent or advertise the operation of a school (b) 13 or other educational program for *emergency medical*[first] responders, 14 emergency medical technicians, advanced emergency medical technicians, 15 paramedics, or instructors or instructor trainers for *emergency medical* [first 16 tresponders, emergency medical technicians, advanced emergency medical 17 *technicians*, or paramedics unless the school or educational program has been approved under the provisions of this chapter. The provisions of this 18 19 paragraph shall not apply to continuing education provided by a licensed 20 ambulance service for anyone certified or licensed by the board given by an 21 ambulance service for its employees or volunteers; or
- (c) Knowingly employ <u>an emergency medical</u>[a first] responder, emergency
  medical technician, <u>advanced emergency medical technician</u>, paramedic, or
  an instructor or instructor trainer for <u>emergency medical</u>[first] responders,
  emergency medical technicians, <u>advanced emergency medical technicians</u>, or
  paramedics, or paramedic course coordinator unless that person is licensed or
  certified under the provisions of this chapter.

1 No person licensed or certified by the board or who is an applicant for licensure or (2)2 certification by the board shall: 3 If licensed or certified, violate any provision of this chapter or any (a) 4 administrative regulation promulgated by the board; (b) 5 Use fraud or deceit in obtaining or attempting to obtain a license or 6 certification from the board, or be granted a license upon mistake of a material 7 fact; 8 If licensed or certified by the board, grossly negligently or willfully act in a (c) 9 manner inconsistent with the practice of the discipline for which the person is 10 certified or licensed; 11 (d) Be unfit or incompetent to practice a discipline regulated by the board by 12 reason of negligence or other causes; 13 Abuse, misuse, or misappropriate any drugs placed in the custody of the (e) 14 licensee or certified person for administration, or for use of others; 15 (f) Falsify or fail to make essential entries on essential records; 16 (g) Be convicted of a misdemeanor which involved acts that bear directly on the 17 qualifications or ability of the applicant, licensee, or certified person to 18 practice the discipline for which the person is an applicant, licensee, or 19 certified person, if in accordance with KRS Chapter 335B; 20 Be convicted of a misdemeanor which involved fraud, deceit, breach of trust, (h) 21 or physical harm or endangerment to self or others, acts that bear directly on 22 the qualifications or ability of the applicant, licensee, or certificate holder to 23 practice acts in the license or certification held or sought, if in accordance 24 with KRS Chapter 335B; 25 (i) Be convicted of a misdemeanor offense under KRS Chapter 510 involving a 26 patient or be found by the board to have had sexual contact as defined in KRS 27 510.010(7) with a patient while the patient was under the care of the licensee

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1			or certificate holder;
2		(j)	Have had his or her license or credential to practice as a nurse or physician
3			denied, limited, suspended, probated, revoked, or otherwise disciplined in
4			Kentucky or in another jurisdiction on grounds sufficient to cause a license to
5			be denied, limited, suspended, probated, revoked, or otherwise disciplined in
6			this Commonwealth;
7		(k)	Have a license or certification to practice in any activity regulated by the
8			board denied, limited, suspended, probated, revoked, or otherwise disciplined
9			in another jurisdiction on grounds sufficient to cause a license or certification
10			to be denied, limited, suspended, probated, revoked, or otherwise disciplined
11			in this Commonwealth;
12		(1)	Violate any lawful order or directive previously entered by the board;
13		(m)	Have been listed on the nurse aide abuse registry with a substantiated finding
14			of abuse, neglect, or misappropriation of property; or
15		(n)	Be convicted of, have entered a guilty plea to, <u>or</u> have entered an Alford plea
16			to a felony offense[, or completed a diversion program for a felony offense,] if
17			in accordance with KRS Chapter 335B.
18	(3)	It sh	all be unlawful for an employer of a person licensed or certified by the board
19		havi	ng knowledge of the facts to refrain from reporting to the board on an official
20		<u>com</u>	plaint form approved by the board through administrative regulation any
21		perso	on licensed or certified by the board who:
22		(a)	Has been convicted of, has entered a guilty plea to, <u>or</u> has entered an Alford
23			plea to a felony offense[, or has completed a diversion program for a felony
24			offense];
25		(b)	Has been convicted of a misdemeanor or felony which involved acts that bear
26			directly on the qualifications or ability of the applicant, licensee, or certified

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person to practice the discipline for which they are an applicant, licensee, or

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1			certified person;
2		(c)	Is reasonably suspected of fraud or deceit in procuring or attempting to
3			procure a license or certification from the board;
4		(d)	Is reasonably suspected of grossly negligently or willfully acting in a manner
5			inconsistent with the practice of the discipline for which they are certified or
6			licensed;
7		(e)	Is reasonably suspected of being unfit or incompetent to practice a discipline
8			regulated by the board by reason of negligence or other causes, including but
9			not limited to being unable to practice the discipline for which they are
10			licensed or certified with reasonable skill or safety;
11		(f)	Is reasonably suspected of violating any provisions of this chapter or the
12			administrative regulations promulgated under this chapter;
13		(g)	Has a license or certification to practice an activity regulated by the board
14			denied, limited, suspended, probated, revoked, or otherwise disciplined in
15			another jurisdiction on grounds sufficient to cause a license or certification to
16			be denied, limited, suspended, probated, revoked, or otherwise disciplined in
17			this Commonwealth;
18		(h)	Is practicing an activity regulated by the board without a current active license
19			or certification issued by the board;
20		(i)	Is reasonably suspected of abusing, misusing, or misappropriating any drugs
21			placed in the custody of the licensee or certified person for administration or
22			for use of others; or
23		(j)	Is suspected of falsifying or in a grossly negligent manner making incorrect
24			entries or failing to make essential entries on essential records.
25	(4)	A pe	erson who violates subsection (1)(a), (b), or (c) of this section shall be guilty of
26		a Cl	ass A misdemeanor for a first offense and a Class D felony for each subsequent

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(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.

- 4 (6) The filing of criminal charges or a criminal conviction for violation of the
  5 provisions of this chapter or the administrative regulations promulgated thereunder
  6 shall not preclude the office of the board from instituting or imposing board
  7 disciplinary action authorized by this chapter against any person or organization
  8 violating this chapter or the administrative regulations promulgated thereunder.
- 9 (7) The institution or imposition of disciplinary action by the office of the board against 10 any person or organization violating the provisions of this chapter or the 11 administrative regulations promulgated thereunder shall not preclude the filing of 12 criminal charges against or a criminal conviction of any person or organization for 13 violation of the provisions of this chapter or the administrative regulations 14 promulgated thereunder.

15 → Section 7. KRS 311A.055 is amended to read as follows:

- 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.
- 20 (2) Any person may make a complaint to the executive director that an entity licensed
  21 or certified by the board, <u>emergency medical[first]</u> responder, emergency medical
  22 technician, <u>advanced emergency medical technician</u>, paramedic, emergency
  23 medical services medical <u>director[advisor]</u> or other person licensed or certified by
  24 the board has violated a provision of this chapter, an administrative regulation
  25 promulgated pursuant to this chapter, protocol, practice standard, or order of the
  26 board.
- 27 (3) Each complaint shall:

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- 1 Be in writing; (a) 2 (b) Identify specifically the person or organization against whom the complaint is 3 made; 4 (c) Set forth the facts relating to the violation alleged and any other supporting 5 information which may have a bearing on the matter; 6 (d) Contain the name, address, telephone number, facsimile number, and e-mail 7 address, if available, of the complainant; 8 Be subscribed and sworn to as to the truth of the statements contained in the (e) 9 complaint by the complainant; and 10 Be notarized. (f) 11 (4)A complaint which is unsigned shall not be acted upon by the executive director. A 12 complaint which is not subscribed and sworn in the manner specified in subsection 13 (3) of this section shall be returned to the complainant for completion. The executive director of the board may, on behalf of the board, based on 14 (5)15 knowledge available to the office of the board, make a complaint against any person 16 or organization regulated by the board in the same manner as provided in subsection 17 (3) of this section. 18 Upon receipt of a properly completed complaint, the executive director shall assign (6)19 the complaint to a staff investigator who shall investigate the complaint and shall 20 make findings of fact and recommendations to the executive director who shall then 21 convene a preliminary inquiry board. 22 (7)When the executive director assigns a complaint to a staff investigator, he or she 23 shall notify the person or organization against whom the complaint has been filed 24 and shall notify the employer of an emergency medical[a first] responder, 25 emergency medical technician, advanced emergency medical technician, or 26 paramedic and the emergency medical services medical director for the organization
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and for any *entity or individual certified or licensed under this chapter*[paramedic]

1		against whom the complaint is filed and any other person or organization specified
2		in this chapter.
3	(8)	The notification shall name the person or organization complained against, the
4		complainant, the violations alleged, and the facts presented in the complaint and
5		shall notify the person or organization complained against, the employer, and the
6		emergency medical services medical director of:
7		(a) The fact that the complaint shall be answered, the steps for answering the
8		complaint, and the action to be taken if the complaint is not answered;
9		(b) The time frame and steps in the proceedings of a complaint;
10		(c) The rights of the parties, including the right to counsel; and
11		(d) The right to testify at any hearing.
12	(9)	Upon the failure of a license or certificate holder to respond to a written accusation
13		or to request a hearing within twenty (20) days after the sending of the accusation,
14		the accused shall be considered to have admitted the truth of the facts and the
15		circumstances in the allegation and appropriate discipline may be imposed.
16	(10)	The preliminary inquiry board shall consist of one (1) member of the board selected
17		by the chair, and two (2) persons representing the same category of certification or
18		licensure as the defendant who are not members of the board appointed by the
19		chairman of the board.
20	(11)	After reviewing the complaint and results of any investigation conducted on behalf
21		of the board, the preliminary inquiry board shall consider whether the accusation is
22		sufficient to remand the matter for a hearing as provided in this section and KRS
23		Chapter 13B. A majority vote of the members of the preliminary inquiry board shall
24		be necessary for action to either remand the matter for hearing or dismiss the
25		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

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- the matter for a hearing, all parties notified previously shall be notified of theaction.
- 3 (13) Each proceeding to consider the imposition of a penalty which the board is
  4 authorized to impose pursuant to this chapter shall be conducted in accordance with
  5 KRS Chapter 13B.
- 6 (14) A hearing panel for purposes of making a decision in any disciplinary matter shall
  7 consist of one (1) physician who may be a member of the board or who meets the
  8 qualifications of an emergency medical services medical director; one (1) person
  9 from the category of persons or organizations of the same class as the defendant;
  10 and the hearing officer, who shall not be involved in emergency medical services.
- 11 (15) The hearing officer may issue subpoenas to compel the attendance of witnesses and 12 the production of documents in the conduct of an investigation. The subpoenas may 13 be enforced by any Circuit Court for contempt. Any order or subpoena of the court 14 requiring the attendance and testimony of witnesses and the production of 15 documentary evidence may be enforced and shall be valid anywhere in this state.
- 16 (16) At all hearings the board attorney or, on request of the board, the Attorney General
  17 of this state or one (1) of the assistant attorneys general designated shall appear and
  18 represent the board.
- 19 (17) The emergency medical services provider or related employer of a person licensed 20 or certified by the board and the emergency medical services medical director of 21 such a person who is the defendant in a hearing shall be parties to the action and 22 may appear and testify in the matter at any deposition or hearing on the matter and 23 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.
- 27 (19) The final order in any disciplinary proceeding shall be prepared by the executive

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- 1 director and sent to all parties in the manner prescribed by law. 2 (20) Any person or entity aggrieved by a final order of the board may appeal to the 3 Franklin Circuit Court in accordance with the provisions of KRS Chapter 13B. 4 (21) The only discipline that the board may impose against an emergency medical 5 services medical director is denial, suspension or withdrawal of the board's approval 6 for that person to serve as an emergency medical services medical director. 7 (22) If the executive director substantiates that sexual contact occurred between a 8 licensee or certificate holder and a patient while the patient was under the care of or 9 in a professional relationship with the licensee or certificate holder, the license or 10 certification may be revoked or suspended with mandatory treatment of the person 11 as prescribed by the executive director. The executive director may require the 12 licensee or certificate holder to pay a specified amount for mental health services 13 for the patient which are needed as a result of the sexual contact. 14 → Section 8. KRS 311A.060 is amended to read as follows: 15 If it is determined that an entity *or individual* regulated by the board, a paramedic, (1)16 *emergency medical* [first] responder, *advanced emergency medical technician*, or 17 emergency medical technician has violated a statute, administrative regulation, 18 protocol, or practice standard relating to serving as an entity regulated by the board, 19 a paramedic, *emergency medical* [first]responder, *advanced emergency medical* 20 *technician*, or emergency medical technician, the office of the board may impose 21 any of the sanctions provided in subsection (2) of this section. Any party to the 22 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,
   *advanced* emergency medical technician, *emergency medical* [first ]responder,
   emergency medical technician, or any entity *or individual* regulated by the board:

1		(a)	Private reprimand that shall be shared with each of the paramedic's,
2			emergency medical[first] responder's, advanced emergency medical
3			technician's, or emergency medical technician's emergency medical services
4			or related employer and medical director;
5		(b)	Public reprimand;
6		(c)	Fines of fifty dollars (\$50) to five hundred dollars (\$500) for a natural person
7			or fifty dollars (\$50) to five thousand dollars (\$5,000) for a public agency or
8			business entity;
9		(d)	Revocation of certification or licensure;
10		(e)	Suspension of licensure until a time certain;
11		(f)	Suspension until a certain act or acts are performed;
12		(g)	Limitation of practice permanently;
13		(h)	Limitation of practice until a time certain;
14		(i)	Limitation of practice until a certain act or acts are performed;
15		(j)	Repassing a portion of the paramedic, <i>emergency medical</i> [first] responder,
16			advanced emergency medical technician, or emergency medical technician
17			examination;
18		(k)	Probation for a specified time; or
19		(1)	If it is found that the person who is licensed or certified by the board has been
20			convicted of, pled guilty to, <u>or</u> entered an Alford plea to a felony offense <del>[, or</del>
21			has completed a diversion program for a felony offense] the license or
22			certification shall be revoked.
23	(3)	The	filing of criminal charges or a criminal conviction for violation of the
24		prov	isions of this chapter or the administrative regulations promulgated thereunder
25		shall	not preclude the office of the board from instituting or imposing board
26		disci	plinary action authorized by this chapter against any person or organization
27		viola	ting 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.

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Section 9. KRS 311A.065 is amended to read as follows:

8 If the office of the board has reasonable cause to believe that any licensee or (1)9 certificate holder or any applicant for licensure or certification by examination, 10 reinstatement, or change of status is unable to practice with reasonable skill or 11 safety or has abused alcohol or drugs, it may require the person to submit to a 12 mental health, neuropsychological, psychosocial, psychosexual, substance use disorder, or physical evaluation by a licensed or certified practitioner designated 13 14 by the board[that person to submit to a mental or physical examination by a 15 physician or psychologist it designates]. Upon the failure of the person to submit to 16 a mental health, neuropsychological, psychosocial, psychosexual, substance use 17 disorder, or physical evaluation [mental or physical examination], unless due to 18 circumstances beyond the person's control, the office of the board may initiate an 19 action for immediate temporary suspension pursuant to this chapter or deny the 20 application until the person submits to the required *evaluation*[examination]. The 21 office of the board may issue an immediate and temporary suspension from the time 22 of the *evaluation*[examination] until the hearing.

23 (2) Every licensee or certificate holder or applicant for licensure or certification by
24 examination, reinstatement, or change of status shall be deemed to have given
25 consent to submit to <u>a mental health</u>, <u>neuropsychological</u>, <u>psychosocial</u>,
26 <u>psychosexual</u>, <u>substance use disorder</u>, <u>or physical evaluation</u> [an examination
27 ]when so directed in writing by the board. The direction to submit to an

1 <u>evaluation</u>[examination] shall contain the basis of the office of the board's 2 reasonable cause to believe that the person is unable to practice with reasonable 3 skill or safety, or has abused alcohol or drugs. The person shall be deemed to have 4 waived all objections to the admissibility of the examining physician's or 5 psychologist's testimony or <u>evaluation</u>[examination] reports on the ground of 6 privileged communication.

7 (3) The licensee or certificate holder or applicant for licensure or certification by
8 examination, reinstatement, or change of status shall bear the cost of any mental
9 <u>health, neuropsychological, psychosocial, psychosexual, substance use disorder,</u>
10 <u>or physical evaluation ordered by the board[or physical examination ordered by</u>
11 the office of the board].

12 → Section 10. KRS 311A.075 is amended to read as follows:

- 13 (1)The *[state medical advisor, one (1) physician board member selected by the chair of* 14 the board, and one (1) member of the board of the same category of licensure or 15 certification as the defendant selected by the ]chair of the board, or the board 16 *chair's designee*, in writing, may determine that immediate temporary suspension 17 of a license or certification of a natural person against which disciplinary action or 18 an investigation is pending is necessary in order to protect the public. If the 19 defendant is employed by an emergency medical services provider, the input of the 20 employer's emergency medical services medical director shall be sought with regard 21 to the matter. In the event of an action against an organization, the determination 22 that an immediate temporary suspension is necessary in order to protect the public 23 shall be made by the [state medical advisor, and two (2) other members of the board 24 who are appointed by the chair of the board, or the board chair's designee in
- writing. 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

# 1 KRS 13B.125.

- 2 (2) No board member shall be disqualified from serving on a disciplinary action
   3 hearing panel for the reason that he or she has previously sat on a <u>preliminary</u>
   4 <u>inquiry panel hearing of the same licensee or certification holder[hearing panel</u>
   5 <u>considering temporary suspension of the same license].</u>
- 6 (3) Disciplinary actions in which a license or certification has been temporarily
  7 suspended and a hearing shall be held in accordance with KRS 13B.125 within
  8 ninety (90) days unless the defendant requests an extension of time.
- 9 (4) The order of immediate temporary suspension shall remain in effect until either 10 retracted or superseded by final disciplinary action by the office of the board. In 11 cases where disciplinary action is imposed, the office of the board may additionally 12 order that the temporary suspension continue in effect until the later expiration of 13 time permitted for appeal or termination of the appellate process.

14 → Section 11. KRS 311A.095 is amended to read as follows:

- 15 (1) A paramedic license, <u>emergency medical</u>[first] responder certification, <u>advanced</u>
- *emergency medical technician certification*, or emergency medical technician
   certification shall be valid for a period of two (2) years.
- 18 (2) Each paramedic license, <u>emergency medical[first]</u> responder certification,
   19 <u>advanced emergency medical technician certification</u>, or emergency medical
   20 technician certification shall expire on December 31 of the second year from its
   21 issuance.
- (3) The license or certification of every person issued under the provisions of this
   chapter shall be renewed at least biennially except as provided in this section. At
   least six (6) weeks before the renewal date the office of the board shall <u>send</u>
   <u>notification correspondence</u>[mail an application] for renewal to every person for
   whom a license or certification was issued during the current licensure or
   certification period. The applicant shall <u>complete and submit the application for</u>

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1 *renewal*[fill in the application form and return it to the office of the board] with the 2 renewal fee prescribed by the board in an administrative regulation before the 3 expiration date of his or her current license or certification. Upon receipt of the 4 application and fee, the board shall verify the accuracy of the application to determine whether the licensee or person seeking certification has met all the 5 6 requirements as set forth in this chapter and in the administrative regulations 7 promulgated by the board, and, if so, shall issue to the applicant a license or 8 certification to practice or engage in the activity for the ensuing licensure or 9 certification period. Such license or certification shall render the holder a legal 10 practitioner of the practice or activity specified in the license or certification for the period stated on it. The board shall prescribe by administrative regulation the 11 12 beginning and ending of the licensure or certification period.

(4) Any person who is licensed or certified by the board who allows his or her license
or certification to lapse by failing to renew the license or certification as provided in
this section may be reinstated by the board [on payment of the current fee for
original licensure or certification and ]by meeting the requirements of
administrative regulations promulgated by the board.

- 18(5)Correspondence regarding renewal of a license or certification shall be sent to19the electronic mail address provided by the individual certified or licensed by the
- 20 <u>board</u>[An application for renewal of a license or certification shall be sent to the last
   21 known address of each licensee or certified person].
- Any person practicing any practice or activity regulated by the board during the time
   his or her license or certification has lapsed shall be considered an illegal
   practitioner and shall be subject to the penalties provided for violations of this
   chapter.
- 26 (7) Failure to receive <u>correspondence</u>[the application] for renewal of a license or
   27 certification shall not relieve a paramedic, <u>emergency medical</u>[first] responder,

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1		advanced emergency medical technician, or emergency medical technician from
2		the duty to renew his or her license or certification prior to December 31 of the year
3		in which the license or certification expires.
4	(8)	The duration of any license or certification issued by the board may be limited by
5		disciplinary action of the board.
6	(9)	Every license or certification issued by the board shall have the seal of the board
7		affixed. A holder of a license or certification shall retain it in his or her possession
8		and be prepared to exhibit it upon demand by an employer or anyone to whom the
9		holder of the license or certification offers emergency medical services or any board
10		or staff member of the Kentucky Board of Emergency Medical Services.
11	(10)	Failure or refusal to produce a license or certification upon demand shall be prima
12		facie evidence that no such license or certification exists.
13	<del>[(11</del> )	) In order to assure a proper transition during the implementation of the provisions of
14		this section, the board may, for a period of three (3) years, extend a license or
15		certification of any person in order to utilize the expiration date provided for in this
16		section. The board shall, in writing, notify each person whose license or
17		certification is extended of the extension and the new date of expiration. The
18		extension shall be without charge.]
19		→ Section 12. KRS 311A.105 is amended to read as follows:
20	Any	person as defined in KRS 446.010 licensed or certified by the board shall maintain a
21	curre	ent mailing <u>and electronic mailing</u> address with the office of the board and
22	imm	ediately notify the board in writing of a change of mailing <i>and electronic mailing</i>
23	addr	ess. As a condition of holding a license or certification from the board, a licensee or
24	certi	ficate holder is deemed to have consented to service of notice or orders of the board
25	at th	e mailing address on file with the office of the board, and any notice or order of the
26	boar	d mailed or delivered to the mailing address on file with the board constitutes valid
27	servi	ce of the notice or order.

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1		Section 13. KRS 311A.120 is amended to read as follows:
2	(1)	As a condition of being issued a certificate or license as an emergency medical
3		technician, emergency medical responder, advanced emergency medical
4		technician, or paramedic [ or first responder], the applicant shall have completed a
5		Kentucky Board of Emergency Medical Services approved educational course on
6		the transmission, control, treatment, and prevention of the human
7		immunodeficiency virus and acquired immunodeficiency syndrome with an
8		emphasis on appropriate behavior and attitude change.
9	(2)	The board shall require continuing education for emergency medical technicians,
10		emergency medical responders, advanced emergency medical technicians, or
11		paramedics [or first responders ] that includes the completion of one and one-half
12		(1.5) hours of board approved continuing education covering the recognition and
13		prevention of pediatric abusive head trauma, as defined in KRS 620.020, at least
14		one (1) time every five (5) years. The one and one-half (1.5) hours required under
15		this section shall be included in the current number of required continuing education
16		hours.
17		→Section 14. KRS 311A.125 is amended to read as follows:
18	(1)	For each licensure renewal of a paramedic following the issuance of an initial
19		license or certification by the board, as a prerequisite for license or certification
20		renewal, all individuals licensed under the provisions of this chapter shall be
21		required to document continuing competence during the immediate past licensure or
22		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) JThe 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.

8 <u>(3)</u>[(4)] The board shall work cooperatively with professional emergency medical 9 services organizations, approved schools, and other potential sources of continuing 10 education programs to ensure that adequate continuing education offerings are 11 available statewide. The board may enter into contractual agreements to implement 12 the provisions of this section.

13 → Section 15. KRS 311A.130 is amended to read as follows:

14 (1) The conduct of proper in-service training, including but not limited to in-house in15 service training, in accordance with the standards specified by this chapter,
16 administrative regulations, and the standards of relevant United States Department
17 of Transportation curricula shall be that of the provider of the in-service training.

18 (2) If in-service training is conducted by an ambulance service, emergency medical
 19 services provider, or educational institution, the organization, the instructor, and its
 20 medical director share responsibility for the provision of training which meets or
 21 exceeds the requirements of subsection (1) of this section.

22 (3) Persons and organizations providing in-service training for <u>emergency</u>
 23 <u>medical[first]</u> responders, emergency medical technicians, <u>advanced emergency</u>
 24 <u>medical technicians</u>, or paramedics shall keep the records required by the board by
 25 administrative regulation and shall make them available to a representative of the
 26 board upon request.

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(4) Failure to keep a record required by the board by administrative regulation or

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- required to be kept by statute, falsifying a record, or grossly negligently maintaining
   a record required to be kept by administrative regulation or statute shall be subject
   to action by the office of the board.
- 4 (5) Providing in-service training not meeting or exceeding the requirements specified in
  5 subsections (1) and (2) of this section shall be subject to action of the office of the
  6 board.
- 7 (6) Penalties specified in this section shall be in addition to any action which the board
  8 may be permitted to take against the license or certification of any person or
  9 organization.
- 10 (7) The board may refuse to recognize any in-service training not conducted in 11 accordance with the provisions of this chapter, United States Department of 12 Transportation curricula, or administrative regulations promulgated pursuant to this 13 chapter. If the board determines that in-service training will not be accepted, the 14 denial of credit shall be extended to all persons who completed that specific in-15 service training.

16 → Section 16. KRS 311A.140 is amended to read as follows:

17 The board shall promulgate administrative regulations relating to emergency (1)18 medical technicians. The administrative regulations may include the classification 19 and certification of emergency medical technicians, instructors, instructor-trainers, 20 and students and trainees; examinations; standards of training and experience; 21 curricula standards; issuance or renewal of certificates; hearing of appeals; and 22 other administrative regulations as may be necessary for the protection of public 23 health and safety in the delivery of emergency medical services. No additional 24 testing or examinations shall be required for recertification, except for proficiency 25 testing of new skills or knowledge, or areas in which there is documented evidence 26 of deterioration of skills.

27 (2) Recertification programs shall be organized to include continuing education and in-

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- 1 service training approved by the board.
- 2 (3) <u>An applicant for initial certification as an emergency medical responder,</u>
  3 <u>emergency medical technician, or advanced emergency medical technician, or</u>
  4 <u>licensure as a paramedic shall</u>[Beginning July 14, 2000, a new emergency medical
  5 technician shall, for initial certification,] be certified <u>or licensed</u> using the
  6 requirements and testing established by the National Registry of Emergency
  7 Medical Technicians or other agent chosen by the board.
- 8 An applicant for certification renewal as an emergency medical responder, (4) 9 emergency medical technician, or advanced emergency medical technician, or 10 renewal of licensure as a paramedic, shall meet the educational requirements for 11 renewal of the appropriate certification or licensure credential as required by 12 administrative regulations promulgated by the board [Beginning July 14, 2000, a 13 certified emergency medical technician who seeks recertification shall obtain 14 recertification under the requirements established and maintained by the board. 15 These requirements shall contain a minimum of sixteen (16) hours of required 16 topics and eight (8) hours of elective topics over a two (2) year recertification 17 period]. The board shall also renew the certification or license of any emergency medical responder, emergency medical technician, advanced emergency medical 18 19 technician, or paramedic[recertify any emergency medical technician] who chooses 20 to obtain recertification or *licensure* under the requirements established by the
- National Registry of Emergency Medical Technicians or other agent chosen by the
  board in lieu of the standards established by the board.
- (5) Except as provided in KRS 311A.060, the board 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 other agent chosen by
   the board for certification or recertification as an emergency medical technician.
- 27 (6) Any person licensed by the board as a paramedic shall be certified as an emergency

1 medical technician by the board. The certification shall be issued without fee, 2 without additional training, in-service training, testing, or examination. The 3 emergency medical technician certification shall be issued and expire at the same 4 time that the paramedic license is issued or expires, and if a paramedic voluntarily 5 gives up his or her license prior to the expiration of his or her paramedic license, his 6 or her emergency medical technician certification shall be unaffected thereby. If a 7 paramedic chooses not to be relicensed as a paramedic but chooses to retain his 8 emergency medical technician certification, the paramedic shall, prior to the 9 expiration of his paramedic license, complete the requirements for recertification as 10 an emergency medical technician utilizing one (1) of the methods provided for in 11 this section.

12 (7) A paramedic whose license as a paramedic or certification as an emergency medical
 13 technician is suspended, revoked, or denied by the board shall have the same action
 14 taken automatically with regard to his emergency medical technician certification or
 15 paramedic license.

16 → Section 17. KRS 311A.175 is amended to read as follows:

- 17 (1) No <u>certified emergency medical</u>[first] responder shall perform any act or procedure
  18 which exceeds the scope of practice of <u>an emergency medical</u>[a first] responder as
  19 specified in this chapter and in administrative regulations promulgated by the board.
  20 (2) No emergency medical technician shall perform any act or procedure which exceeds
  21 the scope of practice of an emergency medical technician as specified in this chapter
  22 and in administrative regulations promulgated by the board.
- (3) <u>No advanced emergency medical technician shall perform any act or procedure</u>
   which exceeds the scope of practice of an advanced emergency medical
   technician as specified in this chapter and in administrative regulations
   promulgated by the board.
- 27 (4) No paramedic shall perform any act or procedure which exceeds the scope of

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practice of a paramedic as specified in this chapter, administrative regulations promulgated by the board, protocol, standing order, or other document approved by the board.

4 <u>(5)[(4)]</u> A <u>certified emergency medical[first]</u> responder, emergency medical
5 technician, <u>advanced emergency medical technician</u>, or <u>licensed</u> paramedic is
6 presumed to know the standards of practice for his or her level of certification or
7 licensure.

8 <u>(6)</u>[(5)] It is the legal duty of <u>an emergency medical</u>[a first] responder, emergency 9 medical technician, <u>advanced emergency medical technician</u>, or paramedic to 10 refuse to perform any act or procedure which is beyond his or her scope of practice 11 regardless of whether that act or procedure is ordered by a physician, physician 12 assistant, medical director, advanced practice registered nurse, registered nurse, or 13 supervisor.

14  $(7)^{[(6)]}$ No employer or organization for which an emergency medical[a first] 15 responder, emergency medical technician, advanced emergency medical 16 *technician*, or paramedic has volunteered shall reprimand, discipline, or dismiss *an* 17 emergency medical[a first] responder, emergency medical technician, advanced 18 emergency medical technician, or paramedic who has refused to perform an act or 19 procedure which the *emergency medical* [first] responder, emergency medical 20 technician, advanced emergency medical technician, or paramedic knows is in 21 violation of the provisions of this section. Violation of this section by an employer 22 or by an organization for which an emergency medical responder, emergency 23 medical technician, advanced emergency medical technician, or paramedic [a first 24 responder has volunteered shall be grounds for a legal action for wrongful 25 discipline or wrongful discharge, as appropriate.

26 (8)[(7)] The provisions of this section shall not apply to an order to perform an act or
 27 procedure:

(a)

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For which a license or certification by the board is not required and which 2 otherwise do not constitute the unlawful practice of medicine; or 3 For which no license or certification is required and does not involve medical (b) 4 care or treatment; or For which a license or certification issued by an agency other than the board is 5 (c) 6 required and the *emergency medical*[first] responder, emergency medical 7 technician, advanced emergency medical technician, or paramedic holds 8 such a license or certification. 9 Section 18. KRS 311A.190 is amended to read as follows: 10 Each licensed ambulance provider and medical first response provider as defined in (1)11 this chapter shall collect and provide to the board *patient care record*[run] data and 12 information required by the board by this chapter and administrative regulation. 13 The board shall develop a *patient care record*[run report] form for the use of each (2)14 class of ambulance provider and medical first response provider containing the data 15 required in subsection (1) of this section. An ambulance provider or medical first 16 response provider may utilize any *patient care record*[run] form it chooses in lieu 17 of or in addition to the board developed *patient care record*[run report] form. 18 However, the data captured on the *patient care record*[run report] form shall 19 include at least that required by the administrative regulations promulgated pursuant 20 to subsection (1) of this section. 21 (3)An ambulance provider or medical first response provider shall report the required 22 patient care record[run report] data as prescribed through administrative 23 regulations promulgated by the board and information by completing an annual 24 report as established by the board or] by transmitting the required data and 25 information to the board in an electronic format. If the board requires the use of a specific electronic format, it shall provide a copy of the file layout requirements, in 26 27 either written or electronic format, to the licensed ambulance provider or medical

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first response provider at no charge.

(4) The board may publish a comprehensive annual report reflecting the data collected,
injury and illness data, treatment utilized, and other information deemed important
by the board. The annual report shall not include patient identifying information or
any other information identifying a natural person. A copy of the comprehensive
annual report, if issued, shall be forwarded to the Governor and the General
Assembly.

8 (5) Ambulance provider and medical first response provider *patient care records*[run 9 report forms] and the information transmitted electronically to the board shall be 10 confidential. No person shall make an unauthorized release of information on an 11 ambulance *patient care record*[run report form] or medical first response *patient* 12 *care record*[run report form]. Only the patient or the patient's parent or legal 13 guardian if the patient is a minor, or the patient's legal guardian or person with 14 proper power of attorney if the patient is under legal disability as being incompetent 15 or mentally ill, or a court of competent jurisdiction may authorize the release of 16 information on a patient's *care record* [run report form] or the inspection or copying 17 of the run report form. Any authorization for the release of information or for 18 inspection or copying of a *patient care record*[run report form] shall be in writing.

- (6) <u>A medical first response provider or ambulance provider that collects patient data</u>
   <u>through electronic means shall have the means of providing a patient care record</u>
   <u>or summary report</u>[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 patient care record
- 25 <u>or a summary report of the patient care record[form or a summary of the run data]</u>
  26 and patient information shall be made available to the ambulance service that
  27 transports the patient. A copy of the ambulance <u>patient care record[run report</u>

1 form] shall be made available to any medical care facility to which a patient is 2 transported and shall be included in the patient's medical record by that facility. If a 3 patient is not transported to a medical facility, the copy of the *patient care* 4 *record*[run report form] that is to be given to the transporting ambulance provider or 5 medical care facility shall be given to the patient or to the patient's parent or legal 6 guardian *upon request*. If the ambulance provider, medical facility, patient, or 7 patient's legal guardian refuses delivery of their *patient care record*[run report 8 form] or is unavailable to receive the *patient care record*[form], that copy of the 9 *patient care record* [form] shall be returned to the medical first response provider or 10 ambulance provider and destroyed.

11 (7) All ambulance services shall be required to keep adequate reports and records to be
12 maintained at the ambulance base headquarters and to be available for periodic
13 review as deemed necessary by the board. Required records and reports are as
14 follows:

- (a) Employee records, including a resume of each employee's training and
  experience and evidence of current certification *or licensure*; and
- 17 (b) Health records of all *personnel*[drivers and attendants] including records of
  18 all illnesses or accidents occurring while on duty.
- 19 (8)Data and records generated and kept by the board or its contractors regarding the 20 evaluation of emergency medical care and trauma care in the Commonwealth, 21 including the identities of patients, emergency medical services personnel, 22 ambulance providers, medical first -response providers, and emergency medical 23 facilities, shall be confidential, shall not be subject to disclosure under KRS 61.805 24 to 61.850 or KRS 61.870 to 61.884, shall not be admissible in court for any 25 purpose, and shall not be subject to discovery. However, nothing in this section 26 shall limit the discoverability or admissibility of patient medical records regularly 27 and ordinarily kept in the course of a patient's treatment that otherwise would be

1		admissible or discoverable.
2		→SECTION 19. A NEW SECTION OF KRS CHAPTER 311A IS CREATED
3	TO	READ AS FOLLOWS:
4	<u>(1)</u>	An advanced emergency medical technician may, subject to the provisions of this
5		section, perform:
6		(a) Any procedure specified in the most recent curriculum of the United States
7		Department of Transportation training course for advanced emergency
8		medical technicians; and
9		(b) Any additional procedure authorized by the board by administrative
10		regulation.
11	(2)	When there is a change in the United States Department of Transportation
12		curriculum for advanced emergency medical technicians or the board approves
13		an additional skill or procedure by administrative regulation, no person who was
14		not trained under that curriculum or administrative regulation shall perform any
15		activity or procedure in the new curriculum or administrative regulation unless
16		the person has been trained according to the new curriculum or administrative
17		regulation and demonstrates competency in the new knowledge or skill. If the
18		board adopts the new procedure or skill, the board shall promulgate an
19		administrative regulation specifying the new procedure, training requirements,
20		examination requirements, and a time period during which the advanced
21		emergency medical technician shall successfully complete the new material or
22		lose his or her certification as an advanced emergency medical technician.
23	<u>(</u> 3)	Except as provided in subsection (2) of this section, nothing in this section shall
24		prevent an employer from exercising reasonable fiscal control over the costs of
25		providing emergency medical services to its citizens nor prevent the employer
26		from exercising any reasonable control over advanced emergency medical
27		technicians providing emergency medical care upon behalf of the licensed entity

## 1 or other provider.

7

2 (4) Nothing in this section shall be construed to permit utilization of a certified
 3 advanced emergency medical technician for the purpose of the individual
 4 working with primary responsibility and duties limited to hospitals, physician's
 5 offices, clinics, or other definitive care facilities, except as an advanced
 6 emergency medical technician student.

Section 20. KRS 95A.262 is amended to read as follows:

8 The Commission on Fire Protection Personnel Standards and Education shall, in (1)9 cooperation with the Cabinet for Health and Family Services, develop and 10 implement a continuing program to inoculate every paid and volunteer firefighter in 11 Kentucky against hepatitis B. The program shall be funded from revenues allocated 12 to the Firefighters Foundation Program fund pursuant to KRS 136.392 and 42.190. 13 Any fire department which has inoculated its personnel during the period of July 1, 14 1991 to July 14, 1992, shall be reimbursed from these revenues for its costs incurred 15 up to the amount allowed by the Cabinet for Human Resources for hepatitis B 16 inoculations.

17 Except as provided in subsection (3) of this section, the Commission on Fire (2)18 Protection Personnel Standards and Education shall allot on an annual basis a share 19 of the funds accruing to and appropriated for volunteer fire department aid to 20 volunteer fire departments in cities of all classes, fire protection districts organized 21 pursuant to KRS Chapter 75, county districts established under authority of KRS 22 67.083, and volunteer fire departments created as nonprofit corporations pursuant to 23 KRS Chapter 273. The commission shall allot eight thousand dollars (\$8,000) 24 annually to each qualifying department, and beginning on July 1, 2001, the 25 commission shall allot eight thousand two hundred fifty dollars (\$8,250) annually to 26 each qualifying department. Any qualifying department which fails to participate 27 satisfactorily in the Kentucky fire incident reporting system as described in KRS

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1 304.13-380 shall forfeit annually five hundred dollars (\$500) of its allotment. If two 2 (2) or more qualified volunteer fire departments, as defined in KRS 95A.500 to 3 95A.560, merge after January 1, 2000, then the allotment shall be in accordance 4 with the provisions of KRS 95A.500 to 95A.560. Administrative regulations for 5 determining qualifications shall be based on the number of both paid firefighters 6 and volunteer firemen within a volunteer fire department, the amount of equipment, 7 housing facilities available, and such other matters or standards as will best effect 8 the purposes of the volunteer fire department aid law. A qualifying department shall 9 include at least twelve (12) firefighters, a chief, and at least one (1) operational fire 10 apparatus or one (1) on order. Fifty percent (50%) of the firefighters shall have 11 completed at least one-half (1/2) of one hundred fifty (150) training hours, or as 12 otherwise established by the commission under KRS 95A.240(6), toward 13 certification within the first six (6) months of the first year of the department's 14 application for certification, and there shall be a plan to complete the one hundred 15 fifty (150) training hours, or as otherwise established by the commission by KRS 16 95A.240(6), within the second year. These personnel, equipment, and training 17 requirements shall not be made more stringent by the promulgation of 18 administrative regulations. No allotment shall exceed the total value of the funds, 19 equipment, lands, and buildings made available to the local fire units from any 20 source whatever for the year in which the allotment is made. A portion of the funds 21 provided for above may be used to purchase group or blanket health insurance and 22 shall be used to purchase workers' compensation insurance, and the remaining funds 23 shall be distributed as set forth in this section.

(3) There shall be allotted two hundred thousand dollars (\$200,000) of the insurance
premium surcharge proceeds accruing to the Firefighters Foundation Program fund
that shall be allocated each fiscal year of the biennium to the firefighters training
center fund, which is hereby created and established, for the purposes of

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1 constructing new or upgrading existing training centers for firefighters. If any 2 moneys in the training center fund remain uncommitted, unobligated, or 3 unexpended at the close of the first fiscal year of the biennium, then such moneys 4 shall be carried forward to the second fiscal year of the biennium, and shall be 5 reallocated to and for the use of the training center fund, in addition to the second 6 fiscal year's allocation of two hundred thousand dollars (\$200,000). Prior to funding 7 any project pursuant to this subsection, a proposed project shall be approved by the 8 Commission on Fire Protection Personnel Standards and Education as provided in 9 subsection (4) of this section and shall comply with state laws applicable to capital 10 construction projects.

(4) Applications for funding low-interest loans and firefighters' training centers shall be
submitted to the Commission on Fire Protection Personnel Standards and Education
for their recommendation, approval, disapproval, or modification. The commission
shall review applications periodically, and shall, subject to funds available,
recommend which applications shall be funded and at what levels, together with any
terms and conditions the commission deems necessary.

17 (5) Any department or entity eligible for and receiving funding pursuant to this section
18 shall have a minimum of fifty percent (50%) of its personnel certified as recognized
19 by the Commission on Fire Protection Personnel Standards and Education.

- 20 (6) Upon the written request of any department, the Commission on Fire Protection
  21 Personnel Standards and Education shall make available a certified training
  22 program in a county of which such department is located.
- (7) The amount of reimbursement for any given year for costs incurred by the Kentucky
  Community and Technical College System for administering these funds, including
  but not limited to the expenses and costs of commission operations, shall be
  determined by the commission and shall not exceed five percent (5%) of the total
  amount of moneys accruing to the Firefighters Foundation Program fund which are

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1		allot	ted for the purposes specified in this section during any fiscal year.
2	(8)	The	commission shall withhold from the general distribution of funds under
3		subs	section (2) of this section an amount which it deems sufficient to reimburse
4		volu	inteer fire departments for equipment lost or damaged beyond repair due to
5		haza	ardous material incidents.
6	(9)	Mor	neys withheld pursuant to subsection (8) of this section shall be distributed only
7		unde	er the following terms and conditions:
8		(a)	A volunteer fire department has lost or damaged beyond repair items of
9			personal protective clothing or equipment due to that equipment having been
10			lost or damaged as a result of an incident in which a hazardous material (as
11			defined in any state or federal statute or regulation) was the causative agent of
12			the loss;
13		(b)	The volunteer fire department has made application in writing to the
14			commission for reimbursement in a manner approved by the commission and
15			the loss and the circumstances thereof have been verified by the commission;
16		(c)	The loss of or damage to the equipment has not been reimbursed by the person
17			responsible for the hazardous materials incident or by any other person;
18		(d)	The commission has determined that the volunteer fire department does not
19			have the fiscal resources to replace the equipment;
20		(e)	The commission has determined that the equipment sought to be replaced is
21			immediately necessary to protect the lives of the volunteer firefighters of the
22			fire department;
23		(f)	The fire department has agreed in writing to subrogate all claims for and rights
24			to reimbursement for the lost or damaged equipment to the Commonwealth to
25			the extent that the Commonwealth provides reimbursement to the department;
26			and
27		(g)	The department has shown to the satisfaction of the commission that it has

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1		made reasonable attempts to secure reimbursement for its losses from the
2		person responsible for the hazardous materials incident and has been
3		unsuccessful in the effort.
4	(10)	If a volunteer fire department has met all of the requirements of subsection (9) of
5		this section, the commission may authorize a reimbursement of equipment losses
6		not exceeding ten thousand dollars (\$10,000) or the actual amount of the loss,
7		whichever is less.
8	(11)	Moneys which have been withheld during any fiscal year which remain unexpended
9		at the end of the fiscal year shall be distributed in the normal manner required by
10		subsection (2) of this section during the following fiscal year.
11	(12)	No volunteer fire department may receive funding for equipment losses more than
12		once during any fiscal year.
13	(13)	The commission shall make reasonable efforts to secure reimbursement from the
14		responsible party for any moneys awarded to a fire department pursuant to this
15		section.
16	(14)	There shall be allotted each year of the 1992-93 biennium one million dollars
17		(\$1,000,000), and each year of the 1994-95, 1996-97, 1998-99, and 2000-01
18		bienniums one million dollars (\$1,000,000) of the insurance premium surcharge
19		proceeds accruing to the Firefighters Foundation Program fund for the purpose of
20		creating a revolving low-interest loan fund, which shall thereafter be self-sufficient
21		and derive its operating revenues from principal and interest payments. The
22		commission, in accordance with the procedures in subsection (4) of this section,
23		may make low-interest loans, and the interest thereon shall not exceed three percent
24		(3%) annually or the amount needed to sustain operating expenses of the loan fund,
25		whichever is less, to volunteer fire departments for the purposes of major equipment
26		purchases and facility construction. Loans shall be made to departments which
27		achieve the training standards necessary to qualify for volunteer fire department aid

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1 allotted pursuant to subsection (2) of this section, and which do not have other 2 sources of funds at rates which are favorable given their financial resources. The 3 proceeds of loan payments shall be returned to the loan fund for the purpose of 4 providing future loans. If a department does not make scheduled loan payments, the 5 commission may withhold any grants payable to the department pursuant to 6 subsection (2) of this section until the department is current on its payments. Money 7 in the low-interest loan fund shall be used only for the purposes specified in this 8 subsection. Any funds remaining in the fund at the end of a fiscal year shall be 9 carried forward to the next fiscal year for the purposes of the fund.

(15) For fiscal year 2004-2005 and each fiscal year thereafter, there is allotted one
 million dollars (\$1,000,000) from the fund established in KRS 95A.220 to be used
 by the commission to conduct training-related activities.

(16) If funding is available from the fund established in KRS 95A.220, the Commission
on Fire Protection Personnel Standards and Education may implement the
following:

16 (a) A program to prepare emergency service personnel for handling potential 17 man-made and non-man-made threats. The commission shall work in 18 conjunction with the state fire marshal and other appropriate agencies and 19 associations to identify and make maps of gas transmission and hazardous 20 liquids pipelines in the state;

(b) A program to provide and maintain a mobile test facility in each training
region established by the Commission on Fire Protection Personnel Standards
and Education with equipment to administer Comprehensive Physical
Aptitude Tests (CPAT) to ascertain a firefighter's ability to perform the
physical requirements necessary to be an effective and safe firefighter;

26 (c) A program to provide defensive driving training tactics to firefighters. The
 27 commission shall purchase, instruct in the use of, and maintain mobile

1			equipment in each of the training regions, and fund expenses related to
2			equipment replacement;
3		(d)	A program to annually evaluate equipment adequacy and to provide for annual
4			physical examinations for instructors, adequate protective clothing and
5			personal equipment to meet NFPA guidelines, and to establish procedures for
6			replacing this equipment as needed;
7		(e)	A program to establish a rotational expansion and replacement program for
8			mobile fleet equipment currently used for training and recertification of fire
9			departments;
10		(f)	A program to expand and update current <i>emergency medical services</i> [EMS],
11			emergency medical[first] responder, emergency medical technician[EMT],
12			advanced emergency medical technician, and paramedic training and
13			certification instruction; and
14		(g)	A program to purchase thermal vision devices to comply with the provisions
15			of KRS 95A.400 to 95A.440.
16		⇒s	ection 21. KRS 189.910 is amended to read as follows:
17	(1)	As ı	used in KRS 189.920 to 189.950, "emergency vehicle" means any vehicle used
18		for e	emergency purposes by:
19		(a)	The Department of Kentucky State Police;
20		(b)	A public police department;
21		(c)	The Department of Corrections;
22		(d)	A sheriff's office;
		(e)	
23		(0)	A rescue squad;
23 24		(f)	A rescue squad; An emergency management agency if it is a publicly owned vehicle;
24		(f)	An emergency management agency if it is a publicly owned vehicle;

1			condition;
2		(h)	Any vehicle commandeered by a police officer;
3		(i)	Any vehicle with the emergency lights required under KRS 189.920 used by a
4			paid or volunteer fireman or paid or volunteer ambulance personnel, or a paid
5			or local emergency management director while responding to an emergency or
6			to a location where an emergency vehicle is on emergency call;
7		(j)	An elected coroner granted permission to equip a publicly or privately owned
8			motor vehicle with lights and siren pursuant to KRS 189.920; or
9		(k)	A deputy coroner granted permission to equip a publicly or privately owned
10			motor vehicle with lights and siren pursuant to KRS 189.920.
11	(2)	As u	used in KRS 189.920 to 189.950, "public safety vehicle" means public utility
12		repai	ir vehicle; wreckers; state, county, or municipal service vehicles and
13		equi	pment; highway equipment which performs work that requires stopping and
14		stand	ding or moving at slow speeds within the traveled portions of highways; and
15		vehi	cles which are escorting wide-load or slow-moving trailers or trucks.
16		⇒Se	ection 22. KRS 311.550 is amended to read as follows:
17	As u	ised in	n KRS 311.530 to 311.620 and KRS 311.990(4) to (6):
18	(1)	"Boa	ard" means the State Board of Medical Licensure;
19	(2)	"Pre	sident" means the president of the State Board of Medical Licensure;
20	(3)	"Sec	eretary" means the secretary of the State Board of Medical Licensure;
21	(4)	"Exe	ecutive director" means the executive director of the State Board of Medical
22		Lice	nsure or any assistant executive directors appointed by the board;
23	(5)	"Ger	neral counsel" means the general counsel of the State Board of Medical
24		Lice	nsure or any assistant general counsel appointed by the board;
25	(6)	"Reg	gular license" means a license to practice medicine or osteopathy at any place in
26		this	state;
27	(7)	"Lin	nited license" means a license to practice medicine or osteopathy in a specific

- 1 institution or locale to the extent indicated in the license;
- 2 (8) "Temporary permit" means a permit issued to a person who has applied for a regular
  3 license, and who appears from verifiable information in the application to the
  4 executive director to be qualified and eligible therefor;
- 5 (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;
- 8 (10) Except as provided in subsection (11) of this section, the "practice of medicine or
  9 osteopathy" means the diagnosis, treatment, or correction of any and all human
  10 conditions, ailments, diseases, injuries, or infirmities by any and all means,
  11 methods, devices, or instrumentalities;
- 12 (11) The "practice of medicine or osteopathy" does not include the practice of Christian 13 Science, the domestic administration of family remedies, the rendering of first aid 14 or medical assistance in an emergency in the absence of a person licensed to 15 practice medicine or osteopathy under the provisions of this chapter, the use of 16 automatic external defibrillators in accordance with the provisions of KRS 311.665 17 to 311.669, the practice of podiatry as defined in KRS 311.380, the practice of a 18 midlevel health care practitioner as defined in KRS 216.900, the practice of 19 dentistry as defined in KRS 313.010, the practice of optometry as defined in KRS 20 320.210, the practice of chiropractic as defined in subsection (2) of KRS 312.015, 21 the practice as a nurse as defined in KRS 314.011, the practice of physical therapy 22 as defined in KRS 327.010, the practice of genetic counseling as defined in KRS 23 311.690, the performance of duties for which they have been trained by paramedics 24 licensed under KRS Chapter 311A, emergency medical[first] responders, advanced 25 emergency medical technicians, or emergency medical technicians certified under 26 Chapter 311A, the practice of pharmacy by persons licensed and registered under 27 KRS 315.050, the sale of drugs, nostrums, patented or proprietary medicines,

1		trusses, supports, spectacles, eyeglasses, lenses, instruments, apparatus, or
2		mechanisms that are intended, advertised, or represented as being for the treatment,
3		correction, cure, or relief of any human ailment, disease, injury, infirmity, or
4		condition, in regular mercantile establishments, or the practice of midwifery by
5		women. KRS 311.530 to 311.620 shall not be construed as repealing the authority
6		conferred on the Cabinet for Health and Family Services by KRS Chapter 211 to
7		provide for the instruction, examination, licensing, and registration of all midwives
8		through county health officers;
9	(12)	"Physician" means a doctor of medicine or a doctor of osteopathy;
10	(13)	"Grievance" means any allegation in whatever form alleging misconduct by a
11		physician;
12	(14)	"Charge" means a specific allegation alleging a violation of a specified provision of
13		this chapter;
14	(15)	"Complaint" means a formal administrative pleading that sets forth charges against
15		a physician and commences a formal disciplinary proceeding;
16	(16)	As used in KRS 311.595(4), "crimes involving moral turpitude" shall mean those
17		crimes which have dishonesty as a fundamental and necessary element, including
18		but not limited to crimes involving theft, embezzlement, false swearing, perjury,
19		fraud, or misrepresentation;
20	(17)	"Telehealth" means the use of interactive audio, video, or other electronic media to
21		deliver health care. It includes the use of electronic media for diagnosis,
22		consultation, treatment, transfer of medical data, and medical education;
23	(18)	"Order" means a direction of the board or its panels made or entered in writing that
24		determines some point or directs some step in the proceeding and is not included in
25		the final order;
26	(19)	"Agreed order" means a written document that includes but is not limited to

stipulations of fact or stipulated conclusions of law that finally resolves a grievance,

1		a complaint, or a show cause order issued informally without expectation of further
2		formal proceedings in accordance with KRS 311.591(6);
3	(20)	"Final order" means an order issued by the hearing panel that imposes one (1) or
4		more disciplinary sanctions authorized by this chapter;
5	(21)	"Letter of agreement" means a written document that informally resolves a
6		grievance, a complaint, or a show cause order and is confidential in accordance with
7		KRS 311.619;
8	(22)	"Letter of concern" means an advisory letter to notify a physician that, although
9		there is insufficient evidence to support disciplinary action, the board believes the
10		physician should modify or eliminate certain practices and that the continuation of
11		those practices may result in action against the physician's license;
12	(23)	"Motion to revoke probation" means a pleading filed by the board alleging that the
13		licensee has violated a term or condition of probation and that fixes a date and time
14		for a revocation hearing;
15	(24)	"Revocation hearing" means a hearing conducted in accordance with KRS Chapter
16		13B to determine whether the licensee has violated a term or condition of probation;
17	(25)	"Chronic or persistent alcoholic" means an individual who is suffering from a
18		medically diagnosable disease characterized by chronic, habitual, or periodic
19		consumption of alcoholic beverages resulting in the interference with the
20		individual's social or economic functions in the community or the loss of powers of
21		self-control regarding the use of alcoholic beverages;
22	(26)	"Addicted to a controlled substance" means an individual who is suffering from a
23		medically diagnosable disease characterized by chronic, habitual, or periodic use of
24		any narcotic drug or controlled substance resulting in the interference with the
25		individual's social or economic functions in the community or the loss of powers of
26		self-control regarding the use of any narcotic drug or controlled substance;
27	(27)	"Provisional permit" means a temporary permit issued to a licensee engaged in the

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1 active practice of medicine within this Commonwealth who has admitted to 2 violating any provision of KRS 311.595 that permits the licensee to continue the 3 practice of medicine until the board issues a final order on the registration or 4 reregistration of the licensee; 5 (28) "Fellowship training license" means a license to practice medicine or osteopathy in 6 a fellowship training program as specified by the license; and 7 (29) "Special faculty license" means a license to practice medicine that is limited to the 8 extent that this practice is incidental to a necessary part of the practitioner's 9 academic appointment at an accredited medical school program or osteopathic 10 school program and any affiliated institution for which the medical school or 11 osteopathic school has assumed direct responsibility. 12 Section 23. The following KRS sections are repealed: 13 311A.110 Educational course on AIDS for paramedics, first responders, and emergency 14 medical technicians. 15 311A.115 Educational course on AIDS for paramedics.

16 311A.127 Course for paramedics on recognition and prevention of pediatric abusive
17 head trauma.