- 1 AN ACT relating to emergency medical services. 2 Be it enacted by the General Assembly of the Commonwealth of Kentucky: 3 → Section 1. KRS 311A.155 is amended to read as follows: 4 (1)There shall be an emergency medical services grant program to provide funding to 5 each county for the direct operation of emergency medical services, including but not limited to training, education, or purchase or lease of ambulances or 6 7 equipment. Funds available shall not be used to fund personnel or consultant 8 salaries. 9 (2)Funds appropriated to or received by the emergency medical services grant program 10 shall be placed in a trust and agency account in the State Treasury and shall not 11 lapse. 12 (3)The board shall administer the emergency medical services grant program and may 13 promulgate administrative regulations in accordance with KRS Chapter 13A, 14 which shall include but not be limited to funding criteria necessary for its 15 implementation and operation and procedures for awarding surplus grant funds 16 on a competitive basis. 17 [Twenty percent (20%) of the funds received each fiscal year for the grant program (4) 18 may be withheld from general distribution and shall be distributed for emergency 19 purposes only. 20 (5) Each county fiscal court may apply annually for a grant in accordance with 21 administrative regulations promulgated by the board. Grants may be made each 22 fiscal year to each county fiscal court determined to be eligible by the board for 23 distribution to public ambulance services operated by or for the county. 24 If sufficient funding is available, each county fiscal court may be eligible (5) *(a)* 25 for a grant of ten thousand dollars (\$10,000). 26 **(b)** If sufficient funding is not available to provide each county fiscal court a
- 27 grant of ten thousand dollars (\$10,000), each county fiscal court may be

1		eligible to receive an equal portion of the total funds received by the grant	
2		program for the fiscal year.	
3	<u>(6)</u> Any	funds received by the grant program for the fiscal year that are not	
4	<u>distr</u>	ibuted pursuant to subsection (5) of this section may be awarded on a	
5	<u>com</u>	petitive basis in accordance with administrative regulations promulgated by	
6	the board.		
7	<u>(7) (a)</u>	A county shall use all funds received during the fiscal year received for	
8		authorized purposes [may keep funds appropriated to them for a period of two	
9		(2) years, if desired, for expenditure for authorized purposes. At the end of	
10		two (2) years from the date of the receipt of the grant, the county shall return	
11		any funds remaining unexpended to the emergency medical services grant	
12		<del>fund]</del> .	
13	<u>(b)</u>	Each expenditure made by the fiscal court from grant funds provided to the	
14		county shall be documented, with appropriate receipts or other documents,	
15		and a copy of each receipt or other document shall be provided to the board to	
16		verify that the expenditure was proper.	
17	<u>(c)</u>	The board shall require reimbursement to the emergency medical services	
18		fund by the county, with interest at a rate of twenty percent (20%) annually,	
19		for any funds expended for an unauthorized purpose. If the county fails or	
20		refuses to reimburse the fund, the board shall notify the Attorney General,	
21		who shall seek appropriate civil and criminal remedies.	
22	<u>(8)</u> [(6)]	The board shall <del>[, annually, by January 1,]</del> promulgate administrative	
23	regu	lations <i>in accordance with KRS Chapter 13A</i> specifying items of equipment	
24	and	other authorized expenditures [ for the upcoming fiscal year].	
25	<u>(9)</u> No f	funds shall be provided to the county until after the start of the fiscal year.	
26	<del>[(7) The</del>	board may, in the event of a documented situation which the board considers to	
27	be a	n emergency and beyond the ability of the county to pay, provide emergency	

## **UNOFFICIAL COPY**

25 RS BR 873

1 funding to the fiscal court for an ambulance or authorized equipment which has 2 been damaged or destroyed. Normal replacement of an ambulance or equipment 3 shall not be considered an emergency. The amount of funding that may be provided 4 by the board shall not exceed ten thousand dollars (\$10,000). Only one (1) emergency funding request shall be granted for any county in each fiscal year. The 5 6 amount of the emergency grant to the county shall be deducted from the county's 7 grant for the next fiscal year.]

8

→ Section 2. KRS 311A.055 is amended to read as follows:

9 In accordance with the provisions of KRS Chapter 13B, all discipline for which the (1)10 board is authorized to conduct investigations, hold hearings, and impose 11 punishments is delegated to the executive director, state medical advisor, board 12 attorney, and hearing panels as provided in this section herein, except that 13 investigations and hearings for ambulance services licensed under KRS 311A.030 14 shall be conducted by the Cabinet for Health and Family Services in accordance 15 with KRS 216B.106. The board shall immediately transfer all complaints submitted 16 regarding ambulance services licensed under KRS 311A.030 to the cabinet and the 17 cabinet shall submit findings and recommendations to the board for all complaints 18 submitted by the board].

19 (2)Any person may make a complaint to the executive director that an entity licensed 20 or certified by the board, emergency medical services personnel, or any other 21 person licensed or certified by the board has violated a provision of this chapter, an 22 administrative regulation promulgated pursuant to this chapter, protocol, practice 23 standard, or order of the board.

24 Each complaint shall: (3)

25 Be made by telephone or in writing and may be submitted electronically, by (a) 26 facsimile, or by mail;

27

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

25 RS BR 873

1		made;
2		(c) Set forth the facts relating to the violation alleged and any other supporting
3		information that may have a bearing on the matter; and
4		(d) Contain the name, address and zip code, day and work telephone numbers,
5		facsimile number if appropriate, e-mail address, if available, and the nature of
6		the complainant's relationship to the licensee.
7	(4)	The executive director of the board may, on behalf of the board, based on
8		knowledge available to the office of the board, make a complaint against any person
9		or organization regulated by the board in the same manner as provided in
10		subsection (3) of this section.
11	(5)	[(a) Except as provided by paragraph (b) of this subsection, ]Upon receipt of a
12		complaint, the executive director shall assign the complaint to a staff investigator
13		who shall investigate the complaint and shall make findings of fact and
14		recommendations to the executive director who shall then convene a preliminary
15		inquiry board.
16		[(b) If the complaint is pertaining to ambulance services licensed under KRS
17		311A.030, the executive director shall transfer the complaint to the Cabinet
18		for Health and Family Services, in accordance with KRS 216B.106.]
19	(6)	When the executive director assigns a complaint to a staff investigator, he or she
20		shall notify the person or organization against whom the complaint has been filed,
21		the employer of the emergency services personnel against whom the complaint has
22		been filed, the emergency medical services medical director or mobile integrated
23		healthcare program medical director for the organization against whom the
24		complaint has been filed or that employs the emergency medical services personnel
25		against whom the complaint has been filed, and any other person or organization
26		specified in this chapter.
27	(7)	The notification shall name the person or organization complained against, the

## **UNOFFICIAL COPY**

1 violations alleged, and the facts presented in the complaint and shall notify the 2 person or organization complained against, the employer, and the emergency 3 medical services or the mobile integrated healthcare program medical director of: The fact that the complaint shall be answered, the steps for answering the 4 (a) complaint, and the action to be taken if the complaint is not answered; 5 6 (b) The time frame and steps in the proceedings of a complaint; 7 The rights of the parties, including the right to counsel; and (c) 8 (d) The right to testify at any hearing. 9 (8)Upon the failure of a license or certificate holder to respond to a written accusation 10 or to request a hearing within twenty (20) days after the sending of the accusation, 11 the accused shall be considered to have admitted the truth of the facts and the 12 circumstances in the allegation and appropriate discipline may be imposed. 13 The preliminary inquiry board shall consist of one (1) member of the board selected (9) 14 by the chair, and two (2) persons representing the same category of certification or 15 licensure as the defendant who are not members of the board appointed by the 16 chairman of the board. 17 (10) After reviewing the complaint and results of any investigation conducted on behalf 18 of the board, the preliminary inquiry board shall consider whether the accusation is 19 sufficient to remand the matter for a hearing as provided in this section and KRS 20 Chapter 13B. A majority vote of the members of the preliminary inquiry board shall 21 be necessary for action to either remand the matter for hearing or dismiss the 22 complaint without hearing. 23 (11) If the preliminary inquiry board dismisses the complaint, all parties notified 24 previously shall be notified of the action. If the preliminary inquiry board remands

- the matter for a hearing, all parties notified previously shall be notified of theaction.
- 27 (12) Each proceeding to consider the imposition of a penalty that the board is authorized

25 RS BR 873

- to impose pursuant to this chapter shall be conducted in accordance with KRS
   Chapter 13B.
- 3 (13) A hearing panel for purposes of making a decision in any disciplinary matter shall
  4 consist of one (1) physician who may be a member of the board or who meets the
  5 qualifications of an emergency medical services medical director; one (1) person
  6 from the category of persons or organizations of the same class as the defendant;
  7 and the hearing officer, who shall not be involved in emergency medical services.
- 8 (14) The hearing officer may issue subpoenas to compel the attendance of witnesses and 9 the production of documents in the conduct of an investigation. The subpoenas may 10 be enforced by any Circuit Court for contempt. Any order or subpoena of the court 11 requiring the attendance and testimony of witnesses and the production of 12 documentary evidence may be enforced and shall be valid anywhere in this state.
- (15) At all hearings the board attorney or, on request of the board, the Attorney General
   of this state or one (1) of the assistant attorneys general designated shall appear and
   represent the board.
- 16 (16) The emergency medical services provider or related employer of a person licensed 17 or certified by the board and the emergency medical services medical director of 18 such a person who is the defendant in a hearing shall be parties to the action and 19 may appear and testify in the matter at any deposition or hearing on the matter and 20 may propose conclusions of law, findings of fact, and penalties to the hearing panel. 21 (17) To make a finding or recommend discipline, the two (2) members of the hearing 22 panel who are not the hearing officer shall agree on the finding or discipline. In the 23 event of a tie vote, the hearing officer shall cast the deciding vote.
- (18) The final order in any disciplinary proceeding shall be prepared by the executive
   director and sent to all parties in the manner prescribed by law.
- (19) Any person or entity aggrieved by a final order of the board may appeal to the
   Franklin Circuit Court in accordance with the provisions of KRS Chapter 13B.

- (20) The only discipline that the board may impose against an emergency medical
   services medical director is denial, suspension or withdrawal of the board's
   approval for that person to serve as an emergency medical services medical
   director.
- (21) If the executive director substantiates that sexual contact occurred between a
  licensee or certificate holder and a patient while the patient was under the care of or
  in a professional relationship with the licensee or certificate holder, the license or
  certification may be revoked or suspended with mandatory treatment of the person
  as prescribed by the executive director. The executive director may require the
  licensee or certificate holder to pay a specified amount for mental health services
  for the patient which are needed as a result of the sexual contact.
- 12 (22) Except as specified in this section, all board proceedings, including the complaint,
  13 answer, and other records relating to a disciplinary proceeding, shall be confidential
  14 until a final determination is made by the board, except:
- (a) The board may turn over to the Attorney General, the United States Attorney,
  Commonwealth's attorney, or county attorney of the jurisdiction in which the
  offense allegedly occurred, evidence that may be used in criminal
  proceedings; and
- (b) If the complainant or alleged violator publicly discloses the existence of a
  preliminary inquiry, the board may publicly confirm the existence of the
  inquiry and, in its discretion, make public any documents that were issued to
  either party.
- $\rightarrow$  Section 3. The following KRS section is repealed:
- 24 216B.106 Ambulance service investigations and hearings -- Procedures -- Appeals.