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## HOUSE BILL 2077

2015 Regular Session State of Washington 64th Legislature

By Representatives Peterson, Stanford, Ormsby, Kagi, Appleton, Robinson, Sells, and Ryu

Read first time 02/11/15. Referred to Committee on Health Care & Wellness.

- AN ACT Relating to allowing emergency medical services to develop 1 2 community assistance referral and education services programs; and
- 3 amending RCW 35.21.930, 18.71.200, and 18.71.205.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- RCW 35.21.930 and 2013 c 247 s 1 are each amended to 5 Sec. 1. 6 read as follows:
- 7 (1) Any fire department or provider of emergency medical services that levies a tax under RCW 84.52.069 may develop a community 8 assistance referral 9 and education services program to provide 10 community outreach and assistance to residents of its district in order to advance injury and illness prevention within its community. 11 The program should identify members of the community who use the 911 12 13 system or emergency department for low acuity assistance calls (calls 14 that are nonemergency or nonurgent) and connect them to their primary care providers, other health care professionals, low-cost medication 15 16 programs, and other social services. The program may partner with 17 hospitals to reduce readmissions. The program may also provide a fire 18 department-based, nonemergency contact in order to 19 alternative resource to the 911 system. The program may hire health 20 care professionals as needed or use emergency medical technicians

certified under Title 18 RCW to perform these services.

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(2) A participating fire department or provider of emergency medical services that levies a tax under RCW 84.52.069 may seek grant opportunities and private gifts in order to support its community assistance referral and education services program.

- (3) In developing a community assistance referral and education services program, a fire department or provider of emergency medical services that levies a tax under RCW 84.52.069 may consult with the health care personnel shortage task force to identify health care professionals capable of working in a nontraditional setting and providing assistance, referral, and education services.
- (4) Community assistance referral and education services programs implemented under this section must, at least annually, measure any reduction of repeated use of the 911 emergency system and any reduction in avoidable emergency room trips attributable to implementation of the program. Results of findings under this subsection must be reportable to the legislature or other local governments upon request. Findings should include estimated amounts of medicaid dollars that would have been spent on emergency room visits had the program not been in existence.
- 20 (5) For purposes of this section, "fire department" includes city 21 and town fire departments, fire protection districts organized under 22 Title 52 RCW, and regional fire (([protection service])) protection 23 service authorities organized under chapter 52.26 RCW.
  - Sec. 2. RCW 18.71.200 and 1995 c 65 s 2 are each amended to read as follows:
  - As used in this chapter, a "physician's trained <u>advanced</u> emergency medical ((service intermediate life support)) technician and paramedic means a person who:
- 29 (1) Has successfully completed an emergency medical technician 30 course as described in chapter 18.73 RCW;
  - (2) Is trained under the supervision of an approved medical program director according to training standards prescribed in rule to perform specific phases of advanced cardiac and trauma life support under written or oral authorization of an approved licensed physician; and
- 36 (3) Has been examined and certified as a physician's trained 37 <u>advanced</u> emergency medical ((service intermediate life support)) 38 technician and paramedic, by level, by the University of Washington's 39 school of medicine or the department of health.

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**Sec. 3.** RCW 18.71.205 and 2010 1st sp.s. c 7 s 24 are each 2 amended to read as follows:

- (1) The secretary of the department of health shall prescribe:
- (a) Practice parameters, training standards for, and levels of, physician's trained advanced emergency medical ((service intermediate life support)) technicians and paramedics;
- (b) Minimum standards and performance requirements for the certification and recertification of physician's trained <u>advanced</u> emergency medical ((service intermediate life support)) technicians and paramedics; and
- (c) Procedures for certification, recertification, and decertification of physician's trained <u>advanced</u> emergency medical ((service intermediate life support)) technicians and paramedics.
- (2) Initial certification shall be for a period established by the secretary pursuant to RCW 43.70.250 and 43.70.280.
- (3) Recertification shall be granted upon proof of continuing satisfactory performance and education <u>standards</u>, <u>as determined by the approved medical program director and approved by the secretary of the department of health</u>, and shall be for a period established by the secretary pursuant to RCW 43.70.250 and 43.70.280.
- 21 (4) As used in <u>this</u> chapter((<del>s 18.71</del>)) and <u>chapter</u> 18.73 RCW, 22 "approved medical program director" means a person who:
  - (a) Is licensed to practice medicine and surgery pursuant to  $\underline{\text{this}}$  chapter (( $\frac{18.71\ \text{RCW}}{}$ )) or osteopathic medicine and surgery pursuant to chapter 18.57 RCW; and
  - (b) Is qualified and knowledgeable in the administration and management of emergency care and services; and
  - (c) Is so certified by the department of health for a county, group of counties, or cities with populations over four hundred thousand in coordination with the recommendations of the local medical community and local emergency medical services and trauma care council.
  - (5) The <u>u</u>niform <u>d</u>isciplinary <u>a</u>ct, chapter 18.130 RCW, governs uncertified practice, the issuance and denial of certificates, and the disciplining of certificate holders under this section. The secretary shall be the disciplining authority under this section. Disciplinary action shall be initiated against a person credentialed under this chapter in a manner consistent with the responsibilities and duties of the medical program director under whom such person is responsible.

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(6) Such activities of physician's trained <u>advanced</u> emergency medical ((service intermediate life support)) technicians and paramedics shall be limited to actions taken under the express written or oral order of medical program directors and shall not be construed at any time to include freestanding or nondirected actions, for actions not presenting an emergency or life-threatening condition, unless those actions are taken in conjunction with a program established under RCW 35.21.930.

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