

HOUSE BILL REPORT

HB 1276

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to providing for certain emergency medical services personnel to work in diversion centers.

Brief Description: Providing for certain emergency medical services personnel to work in diversion centers.

Sponsors: Representatives Bronoske, Lovick, Fitzgibbon, Cody, Hackney, Fey, Macri, Leavitt, Ormsby, Harris-Talley and Stonier; by request of Department of Health.

Brief History:

Committee Activity:

Health Care & Wellness: 2/1/21, 2/3/21 [DPS].

Brief Summary of Substitute Bill

- Defines "emergency services supervisory organizations" ("ESSOs").
- Allows emergency medical technicians to participate in ESSOs.
- Exempts ESSOs from the licensure requirements of ambulance service and aid service.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 15 members: Representatives Cody, Chair; Bateman, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Bronoske, Davis, Harris, Macri, Maycumber, Riccelli, Rude, Simmons, Stonier, Tharinger and Ybarra.

Staff: Kim Weidenaar (786-7120).

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Background:

Emergency Medical Services Personnel.

Emergency medical services (EMS) personnel are certified by the Department of Health (DOH). There are four primary categories of EMS personnel: paramedics; emergency medical technicians (EMTs); advanced EMTs; and emergency medical responders (also known as first responders). Emergency medical services personnel may only provide services within the scope of care established in the curriculum of the person's level of certification or any specialized training.

Emergency Medical Technicians.

Emergency medical technicians are licensed by the DOH upon completion of approved training and association with an EMS agency, a law enforcement agency, a business with an organized safety team, or as instructors or coordinators with approved EMS training programs. An EMT is defined as a person who is authorized by the Secretary of Health to render emergency medical care or under the responsible supervision and direction of an approved medical director to participate in a community assistance referral and education services (CARES) program.

Community Assistance Referral and Education Services Program.

Fire departments may establish CARES programs, which provide community outreach and assistance to residents to improve population health and promote injury and illness prevention. A CARES program identifies members of the community who use the 911 system or emergency departments for nonemergency or nonurgent assistant calls. A CARES program connects residents with health care professionals, low-cost medication programs, and social services.

Ambulance Service.

Generally, an ambulance service or aid service must be licensed by the DOH in order to operate in Washington. However, ambulance services and aid services meeting the following exceptions do not have to be licensed:

- services operated by the United States government;
- ambulance services providing service in other states when bringing patients into this state;
- owners of businesses where ambulance or aid vehicles are used exclusively on company property; and
- operators of vehicles pressed into service for transportation of patients in emergencies when licensed ambulances are not available or cannot meet the overwhelming demand.

Summary of Substitute Bill:

"Emergency services supervisory organization" (ESSO) is defined as an entity that is

authorized by the Secretary of Health to use certified emergency medical services personnel to provide medical evaluation or initial treatment, or both, to sick or injured people, while in the course of duties with the organization for on-site medical care prior to any necessary activation of emergency medical services. Emergency services supervisory organizations include law enforcement agencies, disaster management organizations, search and rescue operations, diversion centers, and businesses with organized industrial safety teams.

The definition of "emergency medical technician" is modified to include participation in an ESSO.

An ESSO is included in the licensure exception for ambulance services or aid services operating in Washington. An ESSO that employs certified emergency medical services personnel must ensure that such personnel work under the medical oversight and protocols of a medical program director and within their scope of practice, are able to meet certification training requirements, and are provided the necessary medical equipment to provide care at their level of certification.

Substitute Bill Compared to Original Bill:

The substitute bill permits an emergency services supervisory organization to use certified emergency medical services personnel instead of first responders to provide medical evaluation or initial treatment.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) This bill came by Department of Health (DOH) request. It allows emergency services supervisory organization (ESSOs) to employ emergency medical technicians (EMTs) and other emergency medical services (EMS) personnel. As an EMT, there is value in being able to work in an ESSO where EMTs can provide initial treatment and evaluation, and if there is an emergency provide emergency care until the local fire department or others can respond.

Diversion centers provide temporary shelter and a linkage to services for people with behavioral health disorders that otherwise would be taken to a hospital emergency department or jail. Diversion centers do not meet the requirements to be licensed as an ambulance or aid service and there is no current licensure exemption for them, and so the

DOH has been using temporary variances to allow EMTs to work in these centers. This bill provides a permanent solution that supports innovative efforts to address behavioral health needs and keep individuals in the most appropriate care setting. This bill is a win-win that supports the expansion of this cost-effective and medically effective program.

(Opposed) None.

Persons Testifying: Representative Bronoske, prime sponsor; Christie Spice, Washington State Department of Health; and Nick Federici, Pioneer Human Services.

Persons Signed In To Testify But Not Testifying: None.