

# SENATE AMENDMENT NO. \_\_\_\_\_

Offered by \_\_\_\_\_ of \_\_\_\_\_

Amend Senate Bill No. 180, Page 7, Section 94.902, Line 191,

2 by inserting after all of said line the following:

3 "190.100. As used in sections 190.001 to 190.245 and  
4 section 190.257, the following words and terms mean:

5 (1) "Advanced emergency medical technician" or "AEMT",  
6 a person who has successfully completed a course of  
7 instruction in certain aspects of advanced life support care  
8 as prescribed by the department and is licensed by the  
9 department in accordance with sections 190.001 to 190.245  
10 and rules and regulations adopted by the department pursuant  
11 to sections 190.001 to 190.245;

12 (2) "Advanced life support (ALS)", an advanced level  
13 of care as provided to the adult and pediatric patient such  
14 as defined by national curricula, and any modifications to  
15 that curricula specified in rules adopted by the department  
16 pursuant to sections 190.001 to 190.245;

17 (3) "Ambulance", any privately or publicly owned  
18 vehicle or craft that is specially designed, constructed or  
19 modified, staffed or equipped for, and is intended or used,  
20 maintained or operated for the transportation of persons who  
21 are sick, injured, wounded or otherwise incapacitated or  
22 helpless, or who require the presence of medical equipment  
23 being used on such individuals, but the term does not  
24 include any motor vehicle specially designed, constructed or  
25 converted for the regular transportation of persons who are  
26 disabled, handicapped, normally using a wheelchair, or

27 otherwise not acutely ill, or emergency vehicles used within  
28 airports;

29 (4) "Ambulance service", a person or entity that  
30 provides emergency or nonemergency ambulance transportation  
31 and services, or both, in compliance with sections 190.001  
32 to 190.245, and the rules promulgated by the department  
33 pursuant to sections 190.001 to 190.245;

34 (5) "Ambulance service area", a specific geographic  
35 area in which an ambulance service has been authorized to  
36 operate;

37 (6) "Basic life support (BLS)", a basic level of care,  
38 as provided to the adult and pediatric patient as defined by  
39 national curricula, and any modifications to that curricula  
40 specified in rules adopted by the department pursuant to  
41 sections 190.001 to 190.245;

42 (7) "Council", the state advisory council on emergency  
43 medical services;

44 (8) "Department", the department of health and senior  
45 services, state of Missouri;

46 (9) "Director", the director of the department of  
47 health and senior services or the director's duly authorized  
48 representative;

49 (10) "Dispatch agency", any person or organization  
50 that receives requests for emergency medical services from  
51 the public, by telephone or other means, and is responsible  
52 for dispatching emergency medical services;

53 (11) "Emergency", the sudden and, at the time,  
54 unexpected onset of a health condition that manifests itself  
55 by symptoms of sufficient severity that would lead a prudent  
56 layperson, possessing an average knowledge of health and  
57 medicine, to believe that the absence of immediate medical  
58 care could result in:

59 (a) Placing the person's health, or with respect to a  
60 pregnant woman, the health of the woman or her unborn child,  
61 in significant jeopardy;

62 (b) Serious impairment to a bodily function;

63 (c) Serious dysfunction of any bodily organ or part;

64 (d) Inadequately controlled pain;

65 (12) "Emergency medical dispatcher", a person who  
66 receives emergency calls from the public and has  
67 successfully completed an emergency medical dispatcher  
68 course[, meeting or exceeding the national curriculum of the  
69 United States Department of Transportation and any  
70 modifications to such curricula specified by the department  
71 through rules adopted pursuant to sections 190.001 to  
72 190.245] and any ongoing training requirements under section  
73 650.340;

74 (13) "Emergency medical responder", a person who has  
75 successfully completed an emergency first response course  
76 meeting or exceeding the national curriculum of the U.S.  
77 Department of Transportation and any modifications to such  
78 curricula specified by the department through rules adopted  
79 under sections 190.001 to 190.245 and who provides emergency  
80 medical care through employment by or in association with an  
81 emergency medical response agency;

82 (14) "Emergency medical response agency", any person  
83 that regularly provides a level of care that includes first  
84 response, basic life support or advanced life support,  
85 exclusive of patient transportation;

86 (15) "Emergency medical services for children (EMS-C)  
87 system", the arrangement of personnel, facilities and  
88 equipment for effective and coordinated delivery of  
89 pediatric emergency medical services required in prevention  
90 and management of incidents which occur as a result of a

91 medical emergency or of an injury event, natural disaster or  
92 similar situation;

93 (16) "Emergency medical services (EMS) system", the  
94 arrangement of personnel, facilities and equipment for the  
95 effective and coordinated delivery of emergency medical  
96 services required in prevention and management of incidents  
97 occurring as a result of an illness, injury, natural  
98 disaster or similar situation;

99 (17) "Emergency medical technician", a person licensed  
100 in emergency medical care in accordance with standards  
101 prescribed by sections 190.001 to 190.245, and by rules  
102 adopted by the department pursuant to sections 190.001 to  
103 190.245;

104 (18) "Emergency medical technician-basic" or "EMT-B",  
105 a person who has successfully completed a course of  
106 instruction in basic life support as prescribed by the  
107 department and is licensed by the department in accordance  
108 with standards prescribed by sections 190.001 to 190.245 and  
109 rules adopted by the department pursuant to sections 190.001  
110 to 190.245;

111 (19) "Emergency medical technician-community  
112 paramedic", "community paramedic", or "EMT-CP", a person who  
113 is certified as an emergency medical technician-paramedic  
114 and is certified by the department in accordance with  
115 standards prescribed in section 190.098;

116 (20) "Emergency medical technician-paramedic" or "EMT-  
117 P", a person who has successfully completed a course of  
118 instruction in advanced life support care as prescribed by  
119 the department and is licensed by the department in  
120 accordance with sections 190.001 to 190.245 and rules  
121 adopted by the department pursuant to sections 190.001 to  
122 190.245;

123           (21) "Emergency services", health care items and  
124 services furnished or required to screen and stabilize an  
125 emergency which may include, but shall not be limited to,  
126 health care services that are provided in a licensed  
127 hospital's emergency facility by an appropriate provider or  
128 by an ambulance service or emergency medical response agency;

129           (22) "Health care facility", a hospital, nursing home,  
130 physician's office or other fixed location at which medical  
131 and health care services are performed;

132           (23) "Hospital", an establishment as defined in the  
133 hospital licensing law, subsection 2 of section 197.020, or  
134 a hospital operated by the state;

135           (24) "Medical control", supervision provided by or  
136 under the direction of physicians, or their designated  
137 registered nurse, including both online medical control,  
138 instructions by radio, telephone, or other means of direct  
139 communications, and offline medical control through  
140 supervision by treatment protocols, case review, training,  
141 and standing orders for treatment;

142           (25) "Medical direction", medical guidance and  
143 supervision provided by a physician to an emergency services  
144 provider or emergency medical services system;

145           (26) "Medical director", a physician licensed pursuant  
146 to chapter 334 designated by the ambulance service, dispatch  
147 agency, or emergency medical response agency and who meets  
148 criteria specified by the department by rules pursuant to  
149 sections 190.001 to 190.245;

150           (27) "Memorandum of understanding", an agreement  
151 between an emergency medical response agency or dispatch  
152 agency and an ambulance service or services within whose  
153 territory the agency operates, in order to coordinate  
154 emergency medical services;

155           (28) "Patient", an individual who is sick, injured,  
156 wounded, diseased, or otherwise incapacitated or helpless,  
157 or dead, excluding deceased individuals being transported  
158 from or between private or public institutions, homes or  
159 cemeteries, and individuals declared dead prior to the time  
160 an ambulance is called for assistance;

161           (29) "Person", as used in these definitions and  
162 elsewhere in sections 190.001 to 190.245, any individual,  
163 firm, partnership, copartnership, joint venture,  
164 association, cooperative organization, corporation,  
165 municipal or private, and whether organized for profit or  
166 not, state, county, political subdivision, state department,  
167 commission, board, bureau or fraternal organization, estate,  
168 public trust, business or common law trust, receiver,  
169 assignee for the benefit of creditors, trustee or trustee in  
170 bankruptcy, or any other service user or provider;

171           (30) "Physician", a person licensed as a physician  
172 pursuant to chapter 334;

173           (31) "Political subdivision", any municipality, city,  
174 county, city not within a county, ambulance district or fire  
175 protection district located in this state which provides or  
176 has authority to provide ambulance service;

177           (32) "Professional organization", any organized group  
178 or association with an ongoing interest regarding emergency  
179 medical services. Such groups and associations could  
180 include those representing volunteers, labor, management,  
181 firefighters, EMT-B's, nurses, EMT-P's, physicians,  
182 communications specialists and instructors. Organizations  
183 could also represent the interests of ground ambulance  
184 services, air ambulance services, fire service  
185 organizations, law enforcement, hospitals, trauma centers,  
186 communication centers, pediatric services, labor unions and  
187 poison control services;

188           (33) "Proof of financial responsibility", proof of  
189 ability to respond to damages for liability, on account of  
190 accidents occurring subsequent to the effective date of such  
191 proof, arising out of the ownership, maintenance or use of a  
192 motor vehicle in the financial amount set in rules  
193 promulgated by the department, but in no event less than the  
194 statutory minimum required for motor vehicles. Proof of  
195 financial responsibility shall be used as proof of self-  
196 insurance;

197           (34) "Protocol", a predetermined, written medical care  
198 guideline, which may include standing orders;

199           (35) "Regional EMS advisory committee", a committee  
200 formed within an emergency medical services (EMS) region to  
201 advise ambulance services, the state advisory council on EMS  
202 and the department;

203           (36) "Specialty care transportation", the  
204 transportation of a patient requiring the services of an  
205 emergency medical technician-paramedic who has received  
206 additional training beyond the training prescribed by the  
207 department. Specialty care transportation services shall be  
208 defined in writing in the appropriate local protocols for  
209 ground and air ambulance services and approved by the local  
210 physician medical director. The protocols shall be  
211 maintained by the local ambulance service and shall define  
212 the additional training required of the emergency medical  
213 technician-paramedic;

214           (37) "Stabilize", with respect to an emergency, the  
215 provision of such medical treatment as may be necessary to  
216 attempt to assure within reasonable medical probability that  
217 no material deterioration of an individual's medical  
218 condition is likely to result from or occur during ambulance  
219 transportation unless the likely benefits of such  
220 transportation outweigh the risks;

221           (38) "State advisory council on emergency medical  
222 services", a committee formed to advise the department on  
223 policy affecting emergency medical service throughout the  
224 state;

225           (39) "State EMS medical directors advisory committee",  
226 a subcommittee of the state advisory council on emergency  
227 medical services formed to advise the state advisory council  
228 on emergency medical services and the department on medical  
229 issues;

230           (40) "STEMI" or "ST-elevation myocardial infarction",  
231 a type of heart attack in which impaired blood flow to the  
232 patient's heart muscle is evidenced by ST-segment elevation  
233 in electrocardiogram analysis, and as further defined in  
234 rules promulgated by the department under sections 190.001  
235 to 190.250;

236           (41) "STEMI care", includes education and prevention,  
237 emergency transport, triage, and acute care and  
238 rehabilitative services for STEMI that requires immediate  
239 medical or surgical intervention or treatment;

240           (42) "STEMI center", a hospital that is currently  
241 designated as such by the department to care for patients  
242 with ST-segment elevation myocardial infarctions;

243           (43) "Stroke", a condition of impaired blood flow to a  
244 patient's brain as defined by the department;

245           (44) "Stroke care", includes emergency transport,  
246 triage, and acute intervention and other acute care services  
247 for stroke that potentially require immediate medical or  
248 surgical intervention or treatment, and may include  
249 education, primary prevention, acute intervention, acute and  
250 subacute management, prevention of complications, secondary  
251 stroke prevention, and rehabilitative services;

252           (45) "Stroke center", a hospital that is currently  
253 designated as such by the department;



254 (46) "Time-critical diagnosis", trauma care, stroke  
255 care, and STEMI care occurring either outside of a hospital  
256 or in a center designated under section 190.241;

257 (47) "Time-critical diagnosis advisory committee", a  
258 committee formed under section 190.257 to advise the  
259 department on policies impacting trauma, stroke, and STEMI  
260 center designations; regulations on trauma care, stroke  
261 care, and STEMI care; and the transport of trauma, stroke,  
262 and STEMI patients;

263 (48) "Trauma", an injury to human tissues and organs  
264 resulting from the transfer of energy from the environment;

265 (49) "Trauma care" includes injury prevention, triage,  
266 acute care and rehabilitative services for major single  
267 system or multisystem injuries that potentially require  
268 immediate medical or surgical intervention or treatment;

269 (50) "Trauma center", a hospital that is currently  
270 designated as such by the department.

271 650.320. For the purposes of sections 650.320 to  
272 650.340, the following terms mean:

273 (1) "Ambulance service", the same meaning given to the  
274 term in section 190.100;

275 (2) "Board", the Missouri 911 service board  
276 established in section 650.325;

277 [(2)] (3) "Dispatch agency", the same meaning given to  
278 the term in section 190.100;

279 (4) "Medical director", the same meaning given to the  
280 term in section 190.100;

281 (5) "Memorandum of understanding", the same meaning  
282 given to the term in section 190.100;

283 (6) "Public safety answering point", the location at  
284 which 911 calls are answered;

285 [(3)] (7) "Telecommunicator", any person employed as  
286 an emergency telephone worker, call taker or public safety

287 dispatcher whose duties include receiving, processing or  
288 transmitting public safety information received through a  
289 911 public safety answering point.

290 650.340. 1. The provisions of this section may be  
291 cited and shall be known as the "911 Training and Standards  
292 Act".

293 2. Initial training requirements for telecommunicators  
294 who answer 911 calls that come to public safety answering  
295 points shall be as follows:

296 (1) Police telecommunicator, 16 hours;

297 (2) Fire telecommunicator, 16 hours;

298 (3) Emergency medical services telecommunicator, 16  
299 hours;

300 (4) Joint communication center telecommunicator, 40  
301 hours.

302 3. All persons employed as a telecommunicator in this  
303 state shall be required to complete ongoing training so long  
304 as such person engages in the occupation as a  
305 telecommunicator. Such persons shall complete at least  
306 twenty-four hours of ongoing training every three years by  
307 such persons or organizations as provided in subsection 6 of  
308 this section.

309 4. Any person employed as a telecommunicator on August  
310 28, 1999, shall not be required to complete the training  
311 requirement as provided in subsection 2 of this section.  
312 Any person hired as a telecommunicator after August 28,  
313 1999, shall complete the training requirements as provided  
314 in subsection 2 of this section within twelve months of the  
315 date such person is employed as a telecommunicator.

316 5. The training requirements as provided in subsection  
317 2 of this section shall be waived for any person who  
318 furnishes proof to the committee that such person has  
319 completed training in another state which is at least as

320 stringent as the training requirements of subsection 2 of  
321 this section.

322 6. The board shall determine by administrative rule  
323 the persons or organizations authorized to conduct the  
324 training as required by subsection 2 of this section.

325 7. [This section shall not apply to an emergency  
326 medical dispatcher or agency as defined in section 190.100,  
327 or a person trained by an entity accredited or certified  
328 under section 190.131, or a person who provides prearrival  
329 medical instructions who works for an agency which meets the  
330 requirements set forth in section 190.134.] The board shall  
331 be responsible for the approval of training courses for  
332 emergency medical dispatchers. The board shall develop  
333 necessary rules and regulations in collaboration with the  
334 state EMS medical director's advisory committee, as  
335 described in section 190.103, which may provide  
336 recommendations relating to the medical aspects of  
337 prearrival medical instructions.

338 8. A dispatch agency is required to have a memorandum  
339 of understanding with all ambulance services that it  
340 dispatches. If a dispatch agency provides prearrival  
341 medical instructions, it is required to have a medical  
342 director whose duties include the maintenance of standards  
343 and approval of protocols or guidelines.

344 [190.134. A dispatch agency is required to  
345 have a memorandum of understanding with all  
346 ambulance services that it dispatches. If a  
347 dispatch agency provides prearrival medical  
348 instructions, it is required to have a medical  
349 director, whose duties include the maintenance  
350 of standards and protocol approval.]; and

351 Further amend the title and enacting clause accordingly.