

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 0814S.02I  
Bill No.: SB 206  
Subject: Emergencies; Ambulances and Ambulance Districts; Department of Health and Senior Services; Health Care; Professional Registration and Licensing  
Type: Original  
Date: March 24, 2025

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Bill Summary: This proposal modifies provisions relating to emergency medical services.

**FISCAL SUMMARY**

<b>ESTIMATED NET EFFECT ON GENERAL REVENUE FUND</b>			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
General Revenue	(\$91,649)	(\$107,108)	(\$108,934)
<b>Total Estimated Net Effect on General Revenue</b>	<b>(\$91,649)</b>	<b>(\$107,108)</b>	<b>(\$108,934)</b>

<b>ESTIMATED NET EFFECT ON OTHER STATE FUNDS</b>			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
<b>Total Estimated Net Effect on <u>Other</u> State Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Numbers within parentheses: () indicate costs or losses.

<b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>			
<b>FUND AFFECTED</b>	<b>FY 2026</b>	<b>FY 2027</b>	<b>FY 2028</b>
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)</b>			
<b>FUND AFFECTED</b>	<b>FY 2026</b>	<b>FY 2027</b>	<b>FY 2028</b>
General Revenue	1	1	1
<b>Total Estimated Net Effect on FTE</b>	<b>1</b>	<b>1</b>	<b>1</b>

- ☐ Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- ☐ Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

<b>ESTIMATED NET EFFECT ON LOCAL FUNDS</b>			
<b>FUND AFFECTED</b>	<b>FY 2026</b>	<b>FY 2027</b>	<b>FY 2028</b>
<b>Local Government</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## **FISCAL ANALYSIS**

### **ASSUMPTION**

#### **§§ 190.053, 190.076, 190.098, 190.101, 190.109, 190.112 and 190.166 - Emergency medical services**

Officials from the **Department of Health and Senior Services (DHSS)** state § 190.053.2 of the proposed legislation requires ambulance district board members to complete three hours of continuing education training for each term of office. Training shall be offered by a statewide association or program approved by the State Advisory Council on Emergency Medical Services. This will require DHSS, Division of Regulation and Licensure's (DRL) Bureau of Emergency Medical Services (BEMS) to verify ambulance district board member training records through the licensure application review process and during inspections.

Section 190.053.3 immediately disqualifies from office any ambulance district board member who does not complete the required training under Section 190.053.2. Should a board member be found non-compliant with this provision, BEMS will be required to provide notice to the district board and other agencies in authority regarding the removal of the ineligible member.

Section 190.076 requires each ambulance district to be audited by an outside Certified Public Accountant (CPA) firm at least every three years. BEMS will verify audit compliance through the licensure application review process and during inspections.

Section 190.098.2 of the proposed legislation defines community paramedic services as those services provided by any entity that employs licensed paramedics certified by the Department of Health and Senior Services as community paramedics for services that are provided in a nonemergent setting, consistent with the education and training of a community paramedic and the supervisory standard approved by the medical director and documented in the entity's patient care plans or protocols.

Section 190.098.3 requires any ambulance service that seeks to provide community paramedic services outside of its service area to have a memorandum of understanding (MOU) with the ambulance service of that area if that ambulance service is already providing those services or shall notify the ambulance services of that area if that ambulance service is not providing community paramedic services. Emergency medical response agencies (EMRA) may provide community paramedic services in a ground ambulance service's service area. If the ground ambulance service is already providing those services or provides them after the EMRA offers them, then the EMRA and ground ambulance service shall enter into an MOU for the coordination of services.

Currently, BEMS licenses community paramedics that have completed the required program and can provide training certificates. The proposed legislation would require the BEMS to create a new type of license to issue a five-year certification to businesses and entities that employ and use community paramedics. Any newly established business or entity using community paramedics would be required to obtain this certification and existing ground ambulances that use community paramedics would have to apply and get a new, separate certification to be renewed every five (5) years. It is assumed there will be less than 10 community paramedic services licenses issued.

Section 190.098.3(4) requires the Department to promulgate rules and regulations for the purpose of certifying community paramedic services entities and the standards necessary to provide such services. Certified entities shall be eligible to provide community paramedic services for five (5) years.

Section 190.101 increases the number of members on the State Advisory Council on Emergency Medical Services from 16 to 23, outlines membership requirements and changes member appointment responsibility from the Governor to the Director of DHSS.

Sections 190.109.6(12) and 190.109.6(13) require BEMS to promulgate rules related to the requirements for a ground ambulance service license including “participation with regional emergency medical services advisory committees” and “ambulance service administrator qualifications.”

Section 190.112 requires licensed ambulance services to identify an individual to DHSS who will serve as the ambulance service administrator responsible for ambulance service operations and staffing. Additionally, the identified administrator is required to complete 40 initial training hours and two hours of continuing education annually related to the operations of an ambulance service. Training shall be offered by a statewide association or program approved by the State Advisory Council on Emergency Medical Services. Individuals serving as an ambulance service administrator as of August 28, 2025, will have until January 1, 2027, to demonstrate compliance with these provisions. This will require BEMS to verify training records through the licensure application review process for the individual administrator and the ambulance service, as well as during inspections of the ambulance service.

Section 190.166.1 allows the Department to refuse to issue, deny renewal of, or suspend an ambulance service license required pursuant to § 190.109, or take other corrective actions based on the following:

- Determined to be financially insolvent.
- Inadequate personnel to provide basic emergency operations at a level in which one ambulance unit is available twenty-four hours per day, seven days per week, with at least two licensed emergency medical technicians and a reasonable plan and schedule for the services of a second ambulance.

- Requires an inordinate amount of mutual aid from neighboring services (more than ten percent of calls in any given month or more than would be considered prudent to provide an appropriate level of response for the service area).
- Principal manager, board members, or other executives determined to be criminally liable for actions related to the license or service provided.
- License holder or principal manager, board members, or other executives determined by Centers for Medicare and Medicaid Services (CMS) to be ineligible for participation in Medicare.
- License holder or principal manager, board members, or other executives determined by MO HealthNet Division to be ineligible for participation in MO HealthNet.
- Ambulance service administrator failed to meet the required qualifications or failed to complete training required under § 190.112.
- Three or more board members failed to complete training required under § 190.053 if the ambulance service is an ambulance district.

As a result, BEMS will be required to investigate ambulance service agency financial records, operations data, number of runs and responses, ambulance vehicle inventory, training records, and determine percentage of calls covered by other agencies giving mutual aid and/or appropriate level of response for a service area. A report will be prepared to determine what action should be taken by the Department.

Section 190.166.2 requires any ambulance service determined to be financially insolvent or its operations insufficient to submit a corrective plan within fifteen days. Said plan must be implemented within thirty days. Corrective plan collection and tracking will be completed by BEMS as part of the investigation required under Section 190.166.1.

Section 190.166.3 of the proposed legislation requires the Department to provide notice of any determination of insolvency or insufficiency of operations of a license holder to other license holders operating in the license holder's vicinity; members of the general assembly who represent the license holder's service area; the governing officials of any county or municipal entity in the license holder's service area; the appropriate regional emergency medical services advisory committee; and the state advisory council on emergency medical services.” The BEMS will mail or email a notice to all entities required by this Section.

Section 190.166.4 of the proposed legislation requires the Department to, upon taking disciplinary action, immediately engage with other license holders in the affected area and allows the license holder to enter into an agreement with other license holders to provide services to the affected area. Agreements between the license holders may include an agreement to provide services, a joint powers agreement, formal consideration, or some payment for services rendered. BEMS will work with license holders as needed to ensure services are provided to any area affected by disciplinary action and will track all agreements received.

Section 190.166.5 states that any license holder who provides assistance to a service area affected by disciplinary action has a right to seek reasonable compensation from the license

holder whose license has been suspended. Reasonable compensation may include expenses incurred in actual responses and reasonable expenses to maintain ambulance service. The license holder providing assistance is entitled to an award of costs and reasonable attorney fees in any action to enforce these provisions.

Should the proposed legislation become law, BEMS will offer an educational presentation to ambulance districts that will review the law, the new requirements, and what BEMS will be reviewing during inspections and complaints as a result.

The Department will need one full-time Regulatory Auditor (\$59,112) to carry out the provisions outlined in the proposed legislation. This is assumed to be a telecommuter position.

**Oversight** does not have information to the contrary and therefore, Oversight will reflect the estimates as provided by the DHSS.

#### Responses regarding the proposed legislation as a whole

Officials from the **Department of Commerce and Insurance**, the **Department of Higher Education and Workforce Development**, the **Department of Social Services**, the **Office of the Governor**, the **City of Kansas City** and the **University of Central Missouri** each assume the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

**Oversight** only reflects the responses received from state agencies and political subdivisions; however, other cities, county officials, fire protection districts; ambulance districts, hospitals and colleges were requested to respond to this proposed legislation but did not. A listing of political subdivisions included in the Missouri Legislative Information System (MOLIS) database is available upon request.

#### Rule Promulgation

Officials from the **Joint Committee on Administrative Rules** assume this proposal is not anticipated to cause a fiscal impact beyond its current appropriation.

Officials from the **Office of the Secretary of State (SOS)** note many bills considered by the General Assembly include provisions allowing or requiring agencies to submit rules and regulations to implement the act. The SOS is provided with core funding to handle a certain amount of normal activity resulting from each year's legislative session. The fiscal impact for this fiscal note to the SOS for Administrative Rules is less than \$5,000. The SOS recognizes that this is a small amount and does not expect that additional funding would be required to meet these costs. However, the SOS also recognizes that many such bills may be passed by the General Assembly in a given year and that collectively the costs may be in excess of what the office can sustain with its core budget. Therefore, the SOS reserves the right to request funding

for the cost of supporting administrative rules requirements should the need arise based on a review of the finally approved bills signed by the governor.

<u>FISCAL IMPACT – State Government</u>	FY 2026 (10 Mo.)	FY 2027	FY 2028
<b>GENERAL REVENUE</b>			
<u>Costs – DHSS (§§190.053, 190.076, 190.098, 190.101, 190.109, 190.112 and 190.166) p. 3-6</u>			
Personal Service	(\$49,260)	(\$60,294)	(\$61,500)
Fringe Benefits	(\$32,903)	(\$39,958)	(\$40,441)
Expense & Equipment	(\$9,486)	(\$6,855)	(\$6,993)
<u>Total Costs - DHSS</u>	<u>(\$91,649)</u>	<u>(\$107,108)</u>	<u>(\$108,934)</u>
FTE Change	1	1	1
<b>ESTIMATED NET EFFECT ON GENERAL REVENUE</b>	<b><u>(\$91,649)</u></b>	<b><u>(\$107,108)</u></b>	<b><u>(\$108,934)</u></b>
Estimated Net FTE Change on General Revenue	1	1	1

<u>FISCAL IMPACT – Local Government</u>	FY 2026 (10 Mo.)	FY 2027	FY 2028
	<b><u>\$0</u></b>	<b><u>\$0</u></b>	<b><u>\$0</u></b>

#### FISCAL IMPACT – Small Business

This legislation may impact small business community paramedic services in that entities shall be certified every five years.

#### FISCAL DESCRIPTION

This act modifies provisions relating to emergency medical services, including: (1) ambulance district boards of directors; (2) ambulance district audits; (3) community paramedics; (4) the State Advisory Council on Emergency Medical Services; and (5) ambulance licenses.

## AMBULANCE DISTRICT BOARDS OF DIRECTORS

Under this act, ambulance district board members shall complete three hours of continuing education for each term of office. Failure to do so shall result in immediate disqualification and the office shall be vacant until filled. (§ 190.053)

## AMBULANCE DISTRICT AUDITS

Under this act, each ambulance district shall arrange for an audit of the district's records and accounts every three years by a certified public accountant. The audit shall be made available to the public on the district's website or otherwise freely available by other electronic means. (§ 190.076)

## COMMUNITY PARAMEDICS

Currently, community paramedics practice in accordance with protocols and supervisory standards of the ambulance service's medical director. Ambulance services that provide community paramedic services in another ambulance service area shall enter into a written contract to do so. This act repeals these provisions.

Under this act, community paramedic services shall mean those services provided by an entity that employs licensed paramedics certified by the DHSS as community paramedics for services that are provided in a nonemergent setting, consistent with the education and training of a community paramedic and the supervisory standard approved by the medical director, and documented in the entity's patient care plans or protocols.

Any ambulance service that seeks to provide community paramedic services outside of its service area shall have a memorandum of understanding (MOU) with the ambulance service of that area if that ambulance service is already providing those services or shall notify the ambulance services of that area if that ambulance service is not providing community paramedic services.

The Department shall promulgate rules and regulations for the purpose of certifying community paramedic services entities and the standards necessary to provide such services. Certified entities shall be eligible to provide community paramedic services for 5 years. (§ 190.098)

## STATE ADVISORY COUNCIL ON EMERGENCY MEDICAL SERVICES

This act modifies the State Advisory Council on Emergency Medical Services by changing the number of council members from 16 to no more than 23 and specifying the members who shall serve on the Council. (§ 190.101)

## AMBULANCE LICENSES



DHSS, as a part of regulating ground ambulance service licenses, shall promulgate rules regarding participation with regional emergency medical services advisory committees and ambulance service administrator qualifications.

Finally, the Department may refuse to issue, deny renewal of, or suspend a license required for ground ambulance services or take other corrective actions if the license holder is determined to be financially insolvent, has inadequate personnel for the service provided, requires an inordinate amount of mutual aid from neighboring services, has been determined to be criminally liable for actions related to the license or service provided, has been determined to be ineligible for participation in Medicare or MO HealthNet, whose ambulance district administrator has failed to meet the required qualifications or training, or if three or more board members have failed to complete required training.

The Department shall be required to provide notice of any determination of insolvency or insufficiency of services to other license holders operating in the license holder's vicinity, members of the General Assembly who represent that area, other governing officials, the appropriate regional emergency medical services advisory committee, and the State Advisory Council on Emergency Medical Services. (§§ 190.109, 190.112, and 190.166)

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

#### SOURCES OF INFORMATION

Department of Commerce and Insurance  
Department of Higher Education and Workforce Development  
Department of Health and Senior Services  
Department of Social Services  
Joint Committee on Administrative Rules  
Office of the Governor  
Office of the Secretary of State  
City of Kansas City  
University of Central Missouri



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