

REFERENCE TITLE: emergency care council

State of Arizona  
House of Representatives  
Forty-ninth Legislature  
Second Regular Session  
2010

# HB 2405

Introduced by  
Representative Antenori

AN ACT

AMENDING SECTIONS 36-2201, 36-2202, 36-2204, 36-2205 AND 36-2232, ARIZONA REVISED STATUTES; REPEALING SECTIONS 36-2203.01 AND 36-2222, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 21.1, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING A NEW SECTION 36-2222; RELATING TO THE EMERGENCY CARE COUNCIL.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 36-2201, Arizona Revised Statutes, is amended to  
3 read:

4 36-2201. Definitions

5 In this chapter, unless the context otherwise requires:

6 1. "Administrative medical direction" means supervision of certified  
7 emergency medical technicians by a base hospital medical director,  
8 administrative medical director or basic life support medical director. For  
9 the purposes of this paragraph, "administrative medical director" means a  
10 physician who is licensed pursuant to title 32, chapter 13 or 17 and who  
11 provides direction within the emergency medical services system.

12 2. "Advanced life support base hospital" means a health care  
13 institution that offers general medical and surgical services, that is  
14 certified by the director as an advanced life support base hospital and that  
15 is affiliated by written agreement with a licensed ambulance service,  
16 municipal rescue service, fire department, fire district or health services  
17 district for medical direction, evaluation and control of emergency medical  
18 technicians.

19 3. "Ambulance" means any publicly or privately owned surface, water or  
20 air vehicle, including a helicopter, that contains a stretcher and necessary  
21 medical equipment and supplies pursuant to section 36-2202 and that is  
22 especially designed and constructed or modified and equipped to be used,  
23 maintained or operated primarily for the transportation of individuals who  
24 are sick, injured or wounded or who require medical monitoring or aid.  
25 Ambulance does not include a surface vehicle that is owned and operated by a  
26 private sole proprietor, partnership, private corporation or municipal  
27 corporation for the emergency transportation and in-transit care of its  
28 employees or a vehicle that is operated to accommodate an incapacitated or  
29 disabled person who does not require medical monitoring, care or treatment  
30 during transport and that is not advertised as having medical equipment and  
31 supplies or ambulance attendants.

32 4. "Ambulance attendant" means any of the following:

33 (a) A certified emergency medical technician whose primary  
34 responsibility is the care of patients in an ambulance and who meets the  
35 standards and criteria adopted pursuant to section 36-2204.

36 (b) A first responder who is employed by an ambulance service  
37 operating under ~~the provisions of~~ section 36-2202, **AND** whose primary  
38 responsibility is the driving of an ambulance.

39 (c) A physician who is licensed pursuant to title 32, chapter 13 or  
40 17.

41 (d) A professional nurse who is licensed pursuant to title 32, chapter  
42 15 and who meets the state board of nursing criteria to care for patients in  
43 the prehospital care system.

- 1 (e) A professional nurse who is licensed pursuant to title 32, chapter  
2 15 and whose primary responsibility is the care of patients in an ambulance  
3 during an interfacility transport.
- 4 5. "Ambulance service" means a person who owns and operates one or  
5 more ambulances.
- 6 6. "Basic emergency medical technician" means a person who has been  
7 trained in specific emergency care in a basic emergency medical technician  
8 program certified by the director or in an equivalent training program and  
9 who is certified by the director as qualified to render services pursuant to  
10 section 36-2205.
- 11 7. "Centralized medical direction communications center" means a  
12 facility that is housed within a hospital, medical center or trauma center or  
13 a freestanding communication center that meets the following criteria:
- 14 (a) Has the ability to communicate with ambulance services and  
15 emergency medical services providers rendering patient care outside of the  
16 hospital setting via radio and telephone.
- 17 (b) Is staffed twenty-four hours a day seven days a week by at least a  
18 physician licensed pursuant to title 32, chapter 13 or 17.
- 19 8. "Certificate of necessity" means a certificate that is issued to an  
20 ambulance service by the department and that describes the following:
- 21 (a) Service area.
- 22 (b) Level of service.
- 23 (c) Type of service.
- 24 (d) Hours of operation.
- 25 (e) Effective date.
- 26 (f) Expiration date.
- 27 (g) Legal name and address of the ambulance service.
- 28 (h) Any limiting or special provisions the director prescribes.
- 29 9. "Certified emergency medical technician" means an individual who  
30 has been certified by the department as a basic emergency medical technician,  
31 an intermediate emergency medical technician or an emergency paramedic.
- 32 10. "Council" means the emergency ~~medical services~~ CARE council.
- 33 11. "Department" means the department of health services.
- 34 12. "Director" means the director of the department of health services.
- 35 13. "Division" means the division of emergency medical services within  
36 the department.
- 37 14. "Emergency medical services" means those services required  
38 following an accident or an emergency medical situation:
- 39 (a) For on-site emergency medical care.
- 40 (b) For the transportation of the sick or injured by a licensed ground  
41 or air ambulance.
- 42 (c) In the use of emergency communications media.
- 43 (d) In the use of emergency receiving facilities.
- 44 (e) In administering initial care and preliminary treatment procedures  
45 by certified emergency medical technicians.

1           15. "Emergency medical services provider" means any governmental  
2 entity, quasi-governmental entity or corporation whether public or private  
3 that renders emergency medical services in this state.

4           16. "Emergency paramedic" or "paramedic" means a person who has been  
5 trained in an emergency paramedic training program certified by the director  
6 or in an equivalent training program and who is certified by the director to  
7 render services pursuant to section 36-2205.

8           17. "Emergency receiving facility" means a licensed health care  
9 institution that offers emergency medical services, **THAT** is staffed  
10 twenty-four hours a day and **THAT** has a physician on call.

11           18. "First responder" as an ambulance attendant means a person who has  
12 been trained under the supervision of a qualified first responder instructor,  
13 who provides patient care and treatment in accordance with the United States  
14 department of transportation first responder curriculum and who meets all of  
15 the following requirements:

16           (a) Has successfully completed the United States department of  
17 transportation first responder national standard curriculum course.

18           (b) Has successfully completed the national registry first responder  
19 examination and has submitted proof of this fact to the person's current  
20 employer.

21           (c) Successfully completes the United States department of  
22 transportation first responder refresher national standard curriculum at  
23 least once every two years.

24           19. "Fit and proper" means that the director determines that an  
25 applicant for a certificate of necessity or a certificate holder has the  
26 expertise, integrity, fiscal competence and resources to provide ambulance  
27 service in the service area.

28           20. "Intermediate emergency medical technician" means a person who has  
29 been trained in an intermediate emergency medical technician program  
30 certified by the director or in an equivalent training program and who is  
31 certified by the director to render services pursuant to section 36-2205.

32           21. "Medical record" means any patient record, including clinical  
33 records, prehospital care records, medical reports, laboratory reports and  
34 statements, any file, film, record or report or oral statements relating to  
35 diagnostic findings, treatment or outcome of patients, whether written or  
36 recorded, and any information from which a patient or the patient's family  
37 might be identified.

38           22. "Physician" means ~~any~~ **A** person **WHO IS** licensed ~~under the provisions~~  
39 ~~of~~ **PURSUANT TO** title 32, chapter 13 or 17.

40           23. "Qualified first responder instructor" means a person tested and  
41 certified as a first responder instructor by the American red cross or the  
42 national safety council or an equivalent organization.

43           24. "Stretcher van" means a vehicle that contains a stretcher and that  
44 is operated to accommodate an incapacitated or disabled person who does not  
45 require medical monitoring, aid, care or treatment during transport.



1           6. Maintain a state system for recertifying emergency medical  
2 technicians, except as otherwise ~~caused~~ PROVIDED by section 36-2202.01, that  
3 is independent from any national registry of emergency medical technicians  
4 recertification process. This system shall allow emergency medical  
5 technicians to choose to be recertified under the state or the national  
6 registry of emergency medical technicians recertification system subject to  
7 subsection G of this section.

8           B. After consultation with the emergency ~~medical services~~ CARE council  
9 the director may authorize pilot programs designed to improve the safety and  
10 efficiency of ambulance inspections for governmental or quasi-governmental  
11 entities that provide emergency medical services in this state.

12           C. The rules, standards and criteria adopted by the director pursuant  
13 to subsection A, paragraphs 2, 3, 4 and 5 of this section shall be adopted in  
14 accordance with title 41, chapter 6, except that the director may adopt on an  
15 emergency basis pursuant to section 41-1026 rules relating to the regulation  
16 of ambulance services in this state necessary to protect the public peace,  
17 health and safety in advance of adopting rules, standards and criteria as  
18 otherwise provided by this subsection.

19           D. The director may waive the requirement for compliance with a  
20 protocol adopted pursuant to section 36-2205 if the director determines that  
21 the techniques, drug formularies or training ~~make~~ MAKES the protocol  
22 inconsistent with contemporary medical practices.

23           E. The director may suspend a protocol adopted pursuant to  
24 section 36-2205 if the director does all of the following:

- 25           1. Determines that the rule is not in the public's best interest.
- 26           2. Initiates procedures pursuant to title 41, chapter 6 to repeal the  
27 rule.
- 28           3. Notifies all interested parties in writing of the director's action  
29 and the reasons for that action. Parties interested in receiving  
30 notification shall submit a written request to the director.

31           F. To be eligible for appointment as director of emergency medical  
32 services, the person shall be qualified in emergency medicine and shall be  
33 licensed as a physician in one of the states of the United States.

34           G. Applicants for certification shall apply to the director for  
35 certification. Emergency medical technicians shall apply for recertification  
36 to the director every two years. The director may extend the expiration date  
37 of an emergency medical technician's certificate for thirty days. The  
38 department shall establish a fee for this extension by rule. Certified  
39 emergency medical technicians shall pass an examination administered by the  
40 department as a condition for recertification only if required to do so by  
41 the advanced life support base hospital's medical director or the certified  
42 emergency medical technician's medical director.

43           H. The medical director of emergency medical services is exempt from  
44 ~~the provisions of~~ title 41, chapter 4, articles 5 and 6 and is entitled to  
45 receive compensation pursuant to section 38-611, subsection A.

1 I. The standards, criteria and procedures adopted by the director  
2 pursuant to subsection A, paragraph 5 of this section shall require that  
3 ambulance services serving a rural or wilderness certificate of necessity  
4 area with a population of less than ten thousand persons according to the  
5 most recent United States decennial census have at least one ambulance  
6 attendant as defined in section 36-2201, paragraph 4, subdivision (a) and one  
7 ambulance attendant as defined in section 36-2201, paragraph 4, subdivision  
8 (b) staffing an ambulance while transporting a patient and that ambulance  
9 services serving a population of ten thousand persons or more according to  
10 the most recent United States decennial census ~~shall~~ have at least one  
11 ambulance attendant as defined in section 36-2201, paragraph 4, subdivision  
12 (a) and one ambulance attendant as defined in section 36-2201, paragraph 4,  
13 subdivision (a), (c), (d) or (e) staffing an ambulance while transporting a  
14 patient.

15 J. If the department determines there is not a qualified  
16 administrative medical director, the department shall ensure the provision of  
17 administrative medical direction for a certified basic emergency medical  
18 technician if the certified basic emergency medical technician meets all of  
19 the following criteria:

20 1. Is employed by a not-for-profit or governmental provider employing  
21 less than twelve full-time basic emergency medical technician employees.

22 2. Stipulates to the inability to secure a physician who is willing to  
23 provide administrative medical direction.

24 3. Stipulates that the provider agency does not provide administrative  
25 medical direction for its employees.

26 Sec. 3. Section 36-2204, Arizona Revised Statutes, is amended to read:  
27 36-2204. Medical control

28 The medical director of emergency medical services and the emergency  
29 ~~medical services~~ CARE council shall recommend to the director the following  
30 standards and criteria that pertain to the quality of emergency patient care:

31 1. Statewide standardized training, certification and recertification  
32 standards for all classifications of emergency medical technicians.

33 2. A standardized and validated testing procedure for all  
34 classifications of emergency medical technicians.

35 3. Medical standards for certification and recertification of training  
36 programs for all classifications of emergency medical technicians.

37 4. Standardized continuing education criteria for all classifications  
38 of emergency medical technicians.

39 5. Medical standards for certification and recertification of  
40 certified emergency receiving facilities and advanced life support base  
41 hospitals and approval of physicians providing medical control or medical  
42 direction for any level of emergency medical technicians who are required to  
43 be under medical control or medical direction.

44 6. Standards and mechanisms for monitoring and ongoing evaluation of  
45 performance levels of all classifications of emergency medical technicians,

1 emergency receiving facilities and advanced life support base hospitals and  
2 approval of physicians providing medical control or medical direction for any  
3 level of emergency medical technicians who are required to be under medical  
4 control or medical direction.

5 7. Objective criteria and mechanisms for decertification of all  
6 classifications of emergency medical technicians, emergency receiving  
7 facilities and advanced life support base hospitals and for disapproval of  
8 physicians providing medical control or medical direction for any level of  
9 emergency technicians who are required to be under medical control or medical  
10 direction.

11 8. Medical standards for nonphysician ~~pre-hospital~~ PREHOSPITAL  
12 treatment and ~~pre-hospital~~ PREHOSPITAL triage of patients requiring emergency  
13 medical services.

14 9. Standards for emergency medical dispatcher training, including  
15 prearrival instructions. For the purposes of this paragraph, "emergency  
16 medical dispatch" means the receipt of calls requesting emergency medical  
17 services and the response of appropriate resources to the appropriate  
18 location.

19 10. Standards for a quality assurance process for components of the  
20 emergency medical services system, including standards for maintaining the  
21 confidentiality of the information considered in the course of quality  
22 assurance and the records of the activities of quality assurance process  
23 pursuant to section 36-2401.

24 11. Standards for ambulance service and medical transportation that  
25 give consideration to the differences between urban, rural and wilderness  
26 areas.

27 12. Standards to allow an ambulance to transport a patient to a health  
28 care institution that is licensed as a special hospital and that is  
29 physically connected to an emergency receiving facility.

30 Sec. 4. Section 36-2205, Arizona Revised Statutes, is amended to read:  
31 36-2205. Permitted treatment and medication; certification  
32 requirement; protocols

33 A. The director, in consultation with the medical director of  
34 emergency medical services, ~~AND the emergency medical services CARE council~~  
35 ~~and the medical direction commission~~, shall establish protocols, which may  
36 include training criteria, governing the medical treatments, procedures,  
37 medications and techniques ~~which~~ THAT may be administered or performed by  
38 each class of emergency medical technician. These protocols shall consider  
39 the differences in treatments and procedures for regional, urban, rural and  
40 wilderness areas and shall require that intermediate emergency medical  
41 technicians, emergency paramedics and basic emergency medical technicians  
42 certified to perform advanced procedures render these treatments, procedures,  
43 medications or techniques only under the direction of a physician.

44 B. Certified emergency medical technicians, ~~as defined in section~~  
45 ~~36-2201~~, shall complete training certified by the director on the nature of

1 sudden infant death syndrome in order to be certified by the director under  
2 this section.

3 C. The protocols adopted by the director pursuant to this section are  
4 exempt from title 41, chapter 6.

5 D. Notwithstanding subsection C of this section, a person may petition  
6 the director, pursuant to section 41-1033, to amend a protocol adopted by the  
7 director.

8 E. In consultation with the medical director of emergency medical  
9 services, ~~AND the emergency medical services CARE council and the medical~~  
10 ~~direction commission~~, the director of the department of health services shall  
11 establish protocols for emergency medical providers to refer and advise a  
12 patient or transport a patient by the most appropriate means to the most  
13 appropriate provider of medical services based on the patient's condition.  
14 The protocols shall consider the differences in treatments and procedures for  
15 regional, urban, rural and wilderness areas and shall require that  
16 intermediate emergency medical technicians, emergency paramedics and basic  
17 emergency medical technicians certified to perform advanced procedures render  
18 these treatments, procedures, medications or techniques only under the  
19 direction of a physician.

20 F. The protocols established pursuant to subsection E of this section  
21 shall include triage and treatment protocols that allow all classes of  
22 emergency medical technicians responding to a person who has accessed 911, or  
23 a similar public dispatch number, for a condition that does not pose an  
24 immediate threat to life or limb to:

25 1. Refer and advise a patient or transport a patient to the most  
26 appropriate health care institution, as defined in section 36-401, based on  
27 the patient's condition, taking into consideration factors including patient  
28 choice, the patient's health care provider, specialized health care  
29 facilities and local protocols.

30 2. Provide a list of alternative sites available to deliver care.

31 Sec. 5. Repeal

32 Sections 36-2203.01 and 36-2222, Arizona Revised Statutes, are  
33 repealed.

34 Sec. 6. Title 36, chapter 21.1, article 1, Arizona Revised Statutes,  
35 is amended by adding a new section 36-2222, to read:

36 36-2222. Emergency care council; membership; duties

37 A. THE EMERGENCY CARE COUNCIL IS ESTABLISHED CONSISTING OF THE  
38 FOLLOWING MEMBERS:

39 1. THE MEDICAL DIRECTOR OF EMERGENCY MEDICAL SERVICES IN THE  
40 DEPARTMENT OF HEALTH SERVICES WHO SHALL SERVE AS CHAIRPERSON.

41 2. THE DIRECTOR OF THE DEPARTMENT OF PUBLIC SAFETY OR THE DIRECTOR'S  
42 DESIGNEE.

43 3. ONE REPRESENTATIVE FROM THE GOVERNOR'S OFFICE OF HIGHWAY SAFETY.  
44 THE GOVERNOR SHALL APPOINT THIS MEMBER.

- 1           4. THE FOLLOWING MEMBERS WHO ARE APPOINTED BY THE DIRECTOR OF THE  
2 DEPARTMENT OF HEALTH SERVICES:
- 3           (a) FOUR MEMBERS REPRESENTING THE FOUR LOCAL EMERGENCY MEDICAL  
4 SERVICES COORDINATING SYSTEMS PURSUANT TO SECTION 36-2210.
- 5           (b) FOUR EMERGENCY PHYSICIANS WHO ARE LICENSED PURSUANT TO TITLE 32,  
6 CHAPTER 13 OR 17 AND WHO REPRESENT THE FOUR LOCAL EMERGENCY MEDICAL SERVICES  
7 COORDINATING SYSTEMS PURSUANT TO SECTION 36-2210.
- 8           (c) ONE PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR  
9 17 AND WHO SPECIALIZES IN CARDIAC CARE.
- 10           (d) ONE PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR  
11 17 AND WHO SPECIALIZED IN NEUROLOGIC CARE.
- 12           (e) ONE PROFESSIONAL NURSE WHO IS LICENSED PURSUANT TO TITLE 32,  
13 CHAPTER 15 AND WHO SPECIALIZES IN EMERGENCY MEDICINE.
- 14           (f) TWO HOSPITAL ADMINISTRATORS, ONE OF WHOM REPRESENTS A COUNTY WITH  
15 A POPULATION OF LESS THAN FIVE HUNDRED THOUSAND PERSONS ACCORDING TO THE MOST  
16 RECENT UNITED STATES DECENNIAL CENSUS.
- 17           (g) ONE REPRESENTATIVE FROM EACH OF THE THREE EMPLOYERS OF THE LARGEST  
18 NUMBER OF EMERGENCY MEDICAL TECHNICIANS AND PARAMEDICS IN THIS STATE.
- 19           (h) ONE REPRESENTATIVE FROM THE FIRE DISTRICTS IN THIS STATE.
- 20           (i) ONE PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR  
21 17 AND WHO SPECIALIZES IN TRAUMA SURGERY.
- 22           (j) ONE REPRESENTATIVE OF A PREHOSPITAL EMERGENCY MEDICAL TRAINING  
23 PROGRAM.
- 24           (k) ONE REPRESENTATIVE FROM A FEDERAL INDIAN HEALTH SERVICES  
25 ORGANIZATION.
- 26           (l) ONE REPRESENTATIVE FROM A STATEWIDE HOSPITAL ASSOCIATION.
- 27           (m) ONE REPRESENTATIVE FROM AN ADVANCED LIFE SUPPORT BASE HOSPITAL  
28 THAT IS NOT A TRAUMA CENTER.
- 29           (n) ONE REPRESENTATIVE FROM A STATEWIDE AMBULANCE ASSOCIATION.
- 30           (o) ONE FULL-TIME FACULTY REPRESENTATIVE OF AN EMERGENCY MEDICINE  
31 RESIDENCY PROGRAM APPROVED BY A RESIDENCY REVIEW COMMISSION.
- 32           (p) ONE PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR  
33 17 AND WHO SPECIALIZES IN PEDIATRIC MEDICINE.
- 34           (q) ONE REPRESENTATIVE FROM THE UNIVERSITY OF ARIZONA, OFFICE OF RURAL  
35 HEALTH.
- 36           (r) ONE PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 13 OR  
37 17 AND WHO SPECIALIZES IN TOXICOLOGY.
- 38           B. COUNCIL MEMBERS WHO ARE APPOINTED BY THE DIRECTOR SERVE TWO YEAR  
39 TERMS AND MAY NOT SERVE CONSECUTIVE TERMS.
- 40           C. COUNCIL MEMBERS ARE NOT ELIGIBLE TO RECEIVE COMPENSATION BUT  
41 MEMBERS WHO ARE APPOINTED BY THE DIRECTOR ARE ELIGIBLE FOR REIMBURSEMENT OF  
42 EXPENSES UNDER TITLE 38, CHAPTER 4, ARTICLE 2.
- 43           D. THE COUNCIL SHALL MAKE RECOMMENDATIONS TO THE DIRECTOR REGARDING:  
44 1. MEDICAL PROTOCOLS GOVERNING DISPATCH, TRIAGE, TREATMENT, MODE OF  
45 TRANSPORT AND TRANSPORT DESTINATION.

1           2. MEDICATIONS AND ADMINISTRATION TECHNIQUES THAT MAY BE ADMINISTERED  
2 OR PERFORMED BY EACH CLASS OF EMERGENCY MEDICAL TECHNICIANS.

3           3. INITIAL AND RENEWAL VERIFICATION AND DESIGNATION PROCESSES OF  
4 TRAUMA CENTERS LEVELS, INCLUDING EVALUATION OF TRAUMA CENTER COMPLIANCE  
5 CRITERIA.

6           4. DEVELOPMENT AND IMPLEMENTATION OF COMPREHENSIVE, REGIONAL,  
7 TIME-SENSITIVE INJURY AND ILLNESS SYSTEMS OF CARE BASED ON OBJECTIVE  
8 BENCHMARKS.

9           5. DEVELOPMENT OF A COMPREHENSIVE, NONPUNITIVE AND NONDISCOVERABLE  
10 EMERGENCY CARE QUALITY ASSURANCE PROCESS ENCOMPASSING DISPATCH, PREHOSPITAL  
11 AND HOSPITAL ASPECTS OF INJURY, ILLNESS AND PREVENTION.

12           E. ON OR BEFORE OCTOBER 1 OF EACH YEAR, THE COUNCIL SHALL SUBMIT A  
13 WRITTEN REPORT OF ITS ACCOMPLISHMENTS AND RECOMMENDATIONS TO THE DIRECTOR AND  
14 SHALL SUBMIT A COPY OF THIS REPORT TO THE SECRETARY OF STATE.

15           F. THE CHAIRPERSON SHALL APPOINT SUBCOMMITTEES AS NECESSARY TO ASSIST  
16 THE COUNCIL IN MEETING THE REQUIREMENTS OF THIS SECTION, INCLUDING THE  
17 DETERMINATION OF ISSUES RELATING TO PREVENTION, CLINICAL CARE, PEDIATRIC CARE  
18 AND QUALITY IMPROVEMENT.

19           Sec. 7. Section 36-2232, Arizona Revised Statutes, is amended to read:  
20 36-2232. Director; powers and duties; regulation of ambulance  
21 services; inspections; response time compliance

22           A. The director shall adopt rules to regulate the operation of  
23 ambulances and ambulance services in this state. Each rule shall identify  
24 all sections and subsections of this chapter under which the rule was  
25 formulated. The rules shall provide for the department to do the following:

26           1. Determine, fix, alter and regulate just, reasonable and sufficient  
27 rates and charges for the provision of ambulances, including rates and  
28 charges for advanced life support service, basic life support service,  
29 patient loaded mileage, standby waiting, subscription service contracts and  
30 other contracts for services related to the provision of ambulances. The  
31 director may establish a rate and charge structure as defined by federal  
32 medicare guidelines for ambulance services. The director shall inform all  
33 ambulance services of the procedures and methodology used to determine  
34 ambulance rates or charges.

35           2. Regulate operating and response times of ambulances to meet the  
36 needs of the public and to insure adequate service. The rules adopted by the  
37 director for certificated ambulance service response times shall include  
38 uniform standards for urban, suburban, rural and wilderness geographic areas  
39 within the certificate of necessity based on, but not limited to, population  
40 density, geographic and medical considerations.

41           3. Determine, fix, alter and regulate bases of operation. The  
42 director may issue a certificate of necessity to more than one ambulance  
43 service within any base of operation. For the purposes of this paragraph,  
44 "base of operation" means a service area granted under a certificate of  
45 necessity.

- 1           4. Issue, amend, transfer, suspend or revoke certificates of necessity  
2 under terms and conditions consistent with this article.
- 3           5. Prescribe a uniform system of accounts to be used by ambulance  
4 services that conforms to standard accounting forms and principles for the  
5 ambulance industry.
- 6           6. Require the filing of an annual financial report and other data.  
7 These rules shall require an ambulance service to file the report with the  
8 department not later than one hundred eighty days after the completion of its  
9 annual accounting period.
- 10          7. Regulate ambulance services in all matters affecting services to  
11 the public ~~to the end that the provisions of~~ SO THAT this article may be  
12 fully carried out.
- 13          8. Prescribe bonding requirements, if any, for ambulance services  
14 granted authority to provide any type of subscription service.
- 15          9. Offer technical assistance to ambulance services to maximize a  
16 healthy and viable business climate for the provision of ambulances.
- 17          10. Offer technical assistance to ambulance services in order to obtain  
18 or to amend a certificate of necessity.
- 19          11. Inspect, at a maximum of twelve month intervals, each ambulance  
20 registered pursuant to section 36-2212 to assure that the vehicle is  
21 operational and safe and that all required medical equipment is operational.  
22 At the request of the provider, the inspection may be performed by a facility  
23 approved by the director. If a provider requests that the inspection be  
24 performed by a facility approved by the director, the provider shall pay the  
25 cost of the inspection.
- 26          B. The director may require any ambulance service offering  
27 subscription service contracts to obtain a bond in an amount determined by  
28 the director that is based on the number of subscription service contract  
29 holders and to file the bond with the director for the protection of all  
30 subscription service contract holders in this state who are covered under  
31 that subscription contract.
- 32          C. An ambulance service shall:
- 33           1. Maintain, establish, add, move or delete suboperation stations  
34 within its base of operation to assure that the ambulance service meets the  
35 established response times or those approved by the director in a political  
36 subdivision contract.
- 37           2. Determine the operating hours of its suboperation stations to  
38 provide for coverage of its base of operation.
- 39           3. Provide the department with a list of suboperation station  
40 locations.
- 41           4. Notify the department at least thirty days before the ambulance  
42 service makes a change in the number or location of its suboperation  
43 stations.
- 44          D. At any time the director or the director's agents may:

1           1. Inquire into the operation of an ambulance service including a  
2 person operating an ambulance that has not been issued a certificate of  
3 registration or a person who does not have or is operating outside of a  
4 certificate of necessity.

5           2. Conduct on-site inspections of facilities, communications  
6 equipment, vehicles, procedures, materials and equipment.

7           3. Review the qualifications of ambulance attendants.

8           E. If all ambulance services that have been granted authority to  
9 operate within the same service area or that have overlapping certificates of  
10 necessity apply for uniform rates and charges, the director may establish  
11 uniform rates and charges for the service area.

12           F. In consultation with the medical director of emergency medical  
13 services, ~~AND the emergency medical services CARE council and the medical~~  
14 ~~direction commission~~, the director of the department of health services shall  
15 establish protocols for ambulance services to refer and advise a patient or  
16 transport a patient by the most appropriate means to the most appropriate  
17 provider of medical services based on the patient's condition. The protocols  
18 shall include triage and treatment protocols that allow all classes of  
19 emergency medical technicians responding to a person who has accessed 911, or  
20 a similar public dispatch number, for a condition that does not pose an  
21 immediate threat to life or limb to:

22           1. Refer and advise a patient or transport a patient to the most  
23 appropriate health care institution as defined ~~by~~ **IN** section 36-401 based on  
24 the patient's condition, taking into consideration factors including patient  
25 choice, the patient's health care provider, specialized health care  
26 facilities and local protocols.

27           2. Provide a list of alternative sites available to deliver care.

28           G. The director, when reviewing an ambulance service's response time  
29 compliance with its certificate of necessity, shall consider in addition to  
30 other factors the effect of hospital diversion, delayed emergency department  
31 admission and the number of ambulances engaged in response or transport in  
32 the affected area.