

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2001

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HOUSE BILL 452

Short Title: Emergency Medical Services Act Update-AB. (Public)

Sponsors: Representatives Wright; and Wainwright.

Referred to: Health.

March 1, 2001

A BILL TO BE ENTITLED

AN ACT TO REVISE AND UPDATE THE EMERGENCY MEDICAL SERVICES
ACT OF 1973.

The General Assembly of North Carolina enacts:

SECTION 1. Article 56 of Chapter 143 reads as rewritten:

"Article 56.

"Emergency Medical Services Act of 1973.

"§ 143-507. Establishment of emergency medical services program.

(a) There is ~~hereby~~ established a comprehensive emergency medical services program in the Department of Health and Human Services. All responsibility for this program shall be vested in the Secretary of the Department of Health and Human Services and other ~~such~~ officers, boards, and commissions specified by law or regulation.

(b) This Article is to enable and assist providers of emergency medical services in the delivery of ~~adequate~~ emergency medical services for all the people of North Carolina and the provision of medical care during a disaster.

(c) Emergency medical services referred to in this Article include all services rendered in responding to improve the health and wellness of the community and to address the individual's need for immediate emergency medical care in order to prevent loss of life or further aggravation of physiological or psychological illness or injury. The Statewide Emergency Medical Services System medical care is further described as also includes first aid by members of the community; public knowledge and easy access into the system; prompt emergency medical dispatch of well designed, equipped, and staffed ambulances; effective care by trained attendants credentialed personnel with appropriate disposition at the scene of the emergency and while in transit; communications with the treatment center while at the scene and while in transit; routing and referral to the appropriate treatment facility; immediate definitive care at the emergency treatment facility; injury prevention initiatives; wellness initiatives within

1 the community and the public health system; and follow-up lifesaving and restorative
2 care.

3 **"§ 143-508. Department of Health and Human Services to establish program; rules**
4 **and regulations of North Carolina Medical Care Commission.**

5 (a) The State Department of Health and Human Services shall establish and
6 maintain a program for the improvement and upgrading of emergency medical services
7 throughout the State. The Department shall consolidate all State functions relating to
8 emergency medical services, both regulatory and developmental, under the auspices of
9 this program.

10 (b) ~~The North Carolina Medical Care Commission is authorized and directed to~~
11 ~~adopt~~ shall adopt, amend, and rescind rules and regulations to carry out the purpose of
12 this Article and ~~Article 26~~ Articles 7 and 7A of Chapter ~~130~~ 131E of the General
13 Statutes of ~~North Carolina~~ regardless of other provisions of rule or law. ~~Such~~ These
14 ~~rules and regulations~~ shall be adopted with the advice of the Emergency Medical
15 Services Advisory Council. The Department of Health and Human Services shall
16 enforce all rules adopted by the Commission.

17 (c) The North Carolina Medical Care Commission may adopt rules with regard
18 to emergency medical services, not inconsistent with the laws of this State, that may be
19 required by the federal government for grants-in-aid for emergency medical services
20 and licensure which may be made available to the State by the federal government. This
21 section is to be liberally construed in order that the State and its citizens may benefit
22 from such grants-in-aid.

23 (d) The North Carolina Medical Care Commission shall adopt rules to do all of
24 the following:

- 25 (1) Establish standards and criteria for the credentialing of emergency
26 medical services agencies to carry out the purpose of Article 7 of
27 Chapter 131E of the General Statutes of North Carolina.
- 28 (2) Establish standards and criteria for the credentialing of trauma centers
29 to carry out the purpose of Article 7A of Chapter 131E of the General
30 Statutes of North Carolina.
- 31 (3) Establish standards and criteria for the education and credentialing of
32 emergency medical services personnel to carry out the purpose of
33 Article 7 of Chapter 131E of the General Statutes of North Carolina.
- 34 (4) Establish standards and criteria for the credentialing of EMS
35 educational institutions to carry out the purpose of Article 7 of Chapter
36 131E of the General Statutes of North Carolina.
- 37 (5) Establish standards and criteria for data collection as part of the
38 statewide emergency medical services information system to carry out
39 the purpose of G.S. 143-509(5).
- 40 (6) Define the scope of practice of credentialed emergency medical
41 services personnel.
- 42 (7) Define the practice settings of credentialed emergency medical
43 services personnel.

- 1 (8) Establish standards for vehicles and equipment used within the
2 emergency medical services system.
- 3 (9) Establish standards for a statewide EMS communications system.
- 4 (10) Establish standards and criteria for the denial, suspension, or
5 revocation of emergency medical services credentials for emergency
6 medical services agencies, educational institutions, and personnel
7 including the establishment of fines for credentialing violations.
- 8 (11) Establish standards and criteria for the education and credentialing of
9 persons trained to administer lifesaving treatment to a person who
10 suffers a severe adverse reaction to insect stings.

11 ~~All rules and regulations not inconsistent with the provisions of this Article~~
12 ~~heretofore adopted by the State Board of Health or the Commission for Health Services~~
13 ~~shall remain in full force and effect until repealed or superseded by action of the North~~
14 ~~Carolina Medical Care Commission.~~

15 **"§ 143-509. Powers and duties of Secretary.**

16 The Secretary of the Department of Health and Human Services has full
17 responsibilities for supervision and direction of the emergency medical services
18 program and, to that end, ~~shall~~ shall accomplish all of the following:

- 19 (1) After consulting with the Emergency Medical Services Advisory
20 Council and with ~~such~~ any local governments ~~as that~~ may be involved,
21 seek the establishment of a statewide, regional and local emergency
22 medical services ~~operations~~ system, integrated with other health care
23 providers and networks including, but not limited to, public health,
24 community health monitoring activities, and special needs populations.
- 25 (2) Repealed by Session Laws 1989, c. 74.
- 26 (3) ~~Encourage and assist in the development of appropriately located~~
27 ~~comprehensive emergency treatment centers;~~ Establish and maintain a
28 comprehensive statewide trauma system in accordance with the
29 provisions of Article 7A of Chapter 131E of the General Statutes of
30 North Carolina and the rules of the North Carolina Medical Care
31 Commission.
- 32 (4) ~~Encourage and assist in the development of~~ Establish and maintain a
33 statewide emergency medical services communications system
34 including designation of EMS radio frequencies and coordination of
35 EMS radio communications networks within FCC rules and
36 regulations, ~~which will enable transport vehicles to communicate with~~
37 treatment facilities;
- 38 (5) Establish and maintain a ~~State~~ statewide emergency medical services
39 records system; information that provides information linkage between
40 various public safety services and other health care providers.
- 41 (6) ~~Inspect ambulances, issue permits for operation of ambulance vehicles,~~
42 ~~train and license ambulance~~ Credential emergency medical services
43 providers, vehicles, EMS educational institutions, and personnel after
44 documenting that the requirements of the North Carolina Medical Care

- 1 Commission are met, and shall be responsible for the enforcement of
2 all other quality control provisions of the Ambulance Act of 1967,
3 Article 26 of Chapter 130 of the General Statutes of North Carolina;
- 4 (7) ~~Designate emergency medical services radio frequencies and~~
5 ~~coordinate emergency medical services radio communications~~
6 ~~networks within FCC rules and regulations; and~~
- 7 (8) ~~Promote the development of an air ambulance support system to~~
8 ~~supplement ground vehicle operations.~~
- 9 (9) Promote a means of training individuals to administer life-saving
10 treatment to persons who suffer a severe adverse reaction to insect
11 stings. Individuals, upon successful completion of this training
12 program, may be approved by the North Carolina Medical Board-Care
13 Commission to administer epinephrine to these persons, in the absence
14 of the availability of physicians or other practitioners who are
15 authorized to administer the treatment. This training may also be
16 offered as part of the emergency medical technician services training
17 program.
- 18 (10) Establish and maintain a collaborative effort with other community
19 resources and agencies to educate the public regarding EMS systems
20 and issues.
- 21 (11) Collaborate with community agencies and other health care providers
22 to integrate the principles of injury prevention into the statewide EMS
23 system to improve community health.
- 24 (12) Establish and maintain a means of medical direction and control for
25 the statewide EMS system.

26 **"§ 143-510. North Carolina Emergency Medical Services Advisory Council.**

27 (a) There is ~~hereby~~ created an Emergency Medical Services Advisory Council
28 ~~composed of 21 members~~ to consult with the Secretary of the Department of Health and
29 Human Services in the administration of this Article. ~~The Secretary of the Department~~
30 ~~of Health and Human Services shall appoint 17 members with at least one member~~
31 ~~representing each of the following categories:~~

- 32 (1) ~~Physicians licensed to practice medicine versed in treatment of trauma~~
33 ~~and suddenly occurring illnesses;~~
- 34 (2) ~~Emergency room nurses;~~
- 35 (3) ~~Hospitals;~~
- 36 (4) ~~Providers of ambulance service (including rescue squads);~~
- 37 (5) ~~Local government; and~~
- 38 (6) ~~The general public.~~

39 ~~The President Pro Tempore of the Senate shall appoint two members from the~~
40 ~~Senate, and the Speaker of the House of Representatives shall appoint two members~~
41 ~~from the House of Representatives.~~

42 (b) ~~Members appointed by the Secretary of the Department of Health and Human~~
43 ~~Services shall hold office for a term of four years beginning July 1, 1973, and~~
44 ~~quadrennially thereafter, except the terms of the members first taking office shall expire,~~

1 as designated at the time of appointment, six at the end of the second year, six at the end
2 of the third year, and five at the end of the fourth year. Members appointed by the
3 President Pro Tempore and the Speaker shall serve for two years coinciding with the
4 term for which they were elected to the General Assembly. Vacancies shall be filled by
5 the office making the initial appointment and for the remainder of the unexpired term
6 only.

7 (e) ~~The Council shall meet at least once each quarter and at the call of the~~
8 ~~Secretary of the Department of Health and Human Services. The Council shall elect its~~
9 ~~chairman annually.~~

10 (d) ~~Council members who are not members of the General Assembly or State~~
11 ~~employees or officers shall receive per diem, travel, and subsistence as provided by G.S.~~
12 ~~138-5 while engaged in Council business or attending Council meetings. Council~~
13 ~~members who are members of the General Assembly shall receive travel and~~
14 ~~subsistence allowances as provided by G.S. 120-3.1. Council members who are State~~
15 ~~employees or officers shall receive travel and subsistence as provided by G.S. 138-6.~~

16 The North Carolina Emergency Medical Services Advisory Council shall consist of
17 21 members appointed by the Secretary of the Department of Health and Human
18 Services to serve four-year terms. Three of the members shall represent the North
19 Carolina Medical Society, and include one licensed pediatrician, surgeon, and public
20 health physician. Three members shall represent the North Carolina College of
21 Emergency Physicians, two of whom shall be current local EMS Medical Directors.
22 Two members shall represent the North Carolina Committee on Trauma. One member
23 each shall represent the North Carolina Association of Rescue and Emergency Medical
24 Services, the North Carolina Association of EMS Administrators, the North Carolina
25 Hospital Association, the North Carolina Nurses Association, and the North Carolina
26 Association of County Commissioners. The remaining eight members shall be
27 appointed so as to fairly represent the general public, credentialed and practicing EMS
28 personnel, EMS educators, local public health officials, and other EMS interest groups
29 in North Carolina.

30 (b) The initial membership of the Council shall be the current 21 members of the
31 North Carolina Emergency Medical Services Advisory Council. These persons shall
32 serve as members of the Council for a period equal to the remainder of their current
33 terms. Upon the expiration of these terms, the Secretary shall make appointments as
34 hereinabove provided. The two Council members appointed by the General Assembly
35 upon the recommendation of the President Pro Tempore of the Senate and the two
36 Council members appointed by the General Assembly upon the recommendation of the
37 Speaker of the House of Representatives shall not be reappointed at the end of their
38 current terms on the Council.

39 (c) Any appointment to fill a vacancy on the Council created by the resignation,
40 dismissal, death, or disability of a member shall be for the balance of the unexpired
41 term. Vacancies on the Council among the membership nominated by a society,
42 association, or foundation as provided in subsection (a) of this section shall be filled by
43 appointment of the Secretary upon consideration of a nomination by the Executive
44 Committee or other authorized agent of the society, association, or foundation until the

1 next meeting of the society, association, or foundation at which time the society,
2 association, or foundation shall nominate a member to fill the vacancy for the unexpired
3 term.

4 (d) The members of the Council shall receive per diem and necessary travel and
5 subsistence expenses in accordance with the provisions of G.S. 138-5.

6 (e) A majority of the Council shall constitute a quorum for the transaction of
7 business. All clerical and other services required by the Council shall be supplied by the
8 Department of Health and Human Services, Division of Facility Services, Office of
9 Emergency Medical Services.

10 **"§ 143-511. Powers and duties of the Council.**

11 The Emergency Medical Services Advisory Council shall may advise the Secretary
12 of the Department of Health and Human Services on personnel and policy issues
13 regarding the statewide Emergency Medical Services program, including all rules
14 proposed to be adopted by the North Carolina Medical Care Commission.

15 (1) ~~Advise the Secretary of the Department of Health and Human Services~~
16 ~~on recommendation to the commission or commissions as to~~
17 ~~designation of multicounty emergency medical services regions,~~

18 (2) ~~Give their advice as to all rules and regulations proposed to be adopted~~
19 ~~by the commission or commissions, and~~

20 (3) ~~Advise the Secretary on all other matters pertaining to this Article.~~

21 **"§ 143-512. Regional demonstration plans.**

22 The Secretary of the Department of Health and Human Services is authorized to may
23 develop and implement, in conjunction with such any local sponsors as that may agree
24 to participate, regional emergency medical services systems in order to demonstrate the
25 desirability of comprehensive regional emergency medical services systems and to
26 determine the optimum characteristics of such plans. The Secretary may make special
27 grants-in-aid to participants.

28 **"§ 143-513. Regional emergency medical services councils.**

29 The Secretary of the Department of Health and Human Services may establish
30 emergency medical services regional councils to implement and coordinate emergency
31 medical services programs within regions.

32 **~~"§ 143-514. Training programs; utilization of emergency services personnel.~~**

33 ~~The Department of Health and Human Services in cooperation with educational~~
34 ~~institutions shall develop training programs for emergency medical service personnel.~~
35 ~~Upon successful completion of such training programs and other programs approved by~~
36 ~~the North Carolina Medical Board, emergency medical services personnel may, in the~~
37 ~~course of their emergency medical services duties, perform such acts, tasks and~~
38 ~~functions as they have been trained to perform and as provided in rules and regulations~~
39 ~~of such Board, regardless of other provisions of law.~~

40 **"§ 143-515. Establishment of regions.**

41 The Secretary is authorized to establish an appropriate number of multicounty
42 emergency medical services regions.

43 **"§ 143-516. Single State agency.**

1 The Department of Health and Human Services is hereby designated as the single
2 agency for North Carolina for the purposes of all federal emergency medical services
3 legislation as has or may be hereafter enacted to assist in development of emergency
4 medical services plans and programs.

5 **"§ 143-517. Ambulance support; free enterprise.**

6 Each county shall ensure that emergency medical services are provided to its
7 citizens. Nothing in this Article affects the power of local governments to finance
8 ambulance operations or to support rescue squads. Nothing in this Article shall be
9 construed to allow infringement on the private practice of medicine or the lawful
10 operation of health care facilities.

11 **"§ 143-518. Confidentiality of patient information.**

12 (a) Medical records compiled and maintained by the Department or EMS
13 providers in connection with dispatch, response, treatment, or transport of individual
14 patients or in connection with the statewide trauma system pursuant to Article 7 of
15 Chapter 131E of the General Statutes may contain identifiable data which will allow
16 linkage to other health care-based data systems for the purposes of quality management,
17 peer review, and public health initiatives.

18 This data shall be strictly confidential and shall not be released or made public
19 except under any of the following conditions:

- 20 (1) Release is made of specific medical or epidemiological information for
21 statistical purposes in a way that no person can be identified.
- 22 (2) Release is made of all or part of the medical record with the written
23 consent of the person or persons identified or their guardians.
- 24 (3) Release is made to health care personnel providing medical care to the
25 patient.
- 26 (4) Release is made pursuant to subpoena or court order. Upon request of
27 the person identified in the record, the record shall be reviewed in
28 camera. In the trial, the trial judge may, during the taking of testimony
29 concerning such information, exclude from the courtroom all persons
30 except the officers of the court, the parties, and those engaged in the
31 trial of the case.
- 32 (5) Release is made for the purposes of bona fide research purposes. The
33 North Carolina Medical Care Commission shall adopt rules to
34 establish standards and criteria providing for the use of the information
35 for research purposes.

36 (b) Charges, accounts, credit histories, and other personal financial records
37 compiled and maintained by the Department or EMS providers in connection with the
38 admission, treatment, and discharge of individual patients are strictly confidential and
39 shall not be released.

40 **"§§ ~~143-518~~ 143-519 through 143-520: Reserved for future codification purposes."**

41 **SECTION 2.** This act is effective when it becomes law.