

1.1 Senator moves to amend the delete-everything amendment (SCS4198A-2)
1.2 to S.F. No. 4198 as follows:

1.3 Page 18, after line 20, insert:

1.4 "Sec. 16. TEMPORARY REQUIREMENTS GOVERNING AMBULANCE SERVICE
1.5 OPERATIONS AND THE PROVISION OF EMERGENCY MEDICAL SERVICES.

1.6 Subdivision 1. Application. Notwithstanding any law to the contrary in Minnesota
1.7 Statutes, chapter 144E, an ambulance service may operate according to this section, and
1.8 emergency medical technicians, advanced emergency medical technicians, and paramedics
1.9 may provide emergency medical services according to this section.

1.10 Subd. 2. Definitions. (a) The terms defined in this subdivision apply to this section.

1.11 (b) "Advanced emergency medical technician" has the meaning given in Minnesota
1.12 Statutes, section 144E.001, subdivision 5d.

1.13 (c) "Advanced life support" has the meaning given in Minnesota Statutes, section
1.14 144E.001, subdivision 1b.

1.15 (d) "Ambulance" has the meaning given in Minnesota Statutes, section 144E.001,
1.16 subdivision 2.

1.17 (e) "Ambulance service personnel" has the meaning given in Minnesota Statutes, section
1.18 144E.001, subdivision 3a.

1.19 (f) "Basic life support" has the meaning given in Minnesota Statutes, section 144E.001,
1.20 subdivision 4b.

1.21 (g) "Board" means the Emergency Medical Services Regulatory Board.

1.22 (h) "Emergency medical technician" has the meaning given in Minnesota Statutes, section
1.23 144E.001, subdivision 5c.

1.24 (i) "Paramedic" has the meaning given in Minnesota Statutes, section 144E.001,
1.25 subdivision 5e.

1.26 (j) "Primary service area" means the area designated by the board according to Minnesota
1.27 Statutes, section 144E.06, to be served by an ambulance service.

1.28 Subd. 3. Staffing. (a) For emergency ambulance calls in an ambulance service's primary
1.29 service area, an ambulance service must staff an ambulance that provides basic life support
1.30 with at least:

2.1 (1) one emergency medical technician, who must be in the patient compartment when
2.2 a patient is being transported; and

2.3 (2) one individual to drive the ambulance. The driver must hold a valid driver's license
2.4 from any state, must have attended an emergency vehicle driving course approved by the
2.5 ambulance service, and must have completed a course on cardiopulmonary resuscitation
2.6 approved by the ambulance service.

2.7 (b) For emergency ambulance calls in an ambulance service's primary service area, an
2.8 ambulance service must staff an ambulance that provides advanced life support with at least:

2.9 (1) one paramedic; one registered nurse who meets the requirements in Minnesota
2.10 Statutes, section 144E.001, subdivision 3a, clause (2); or one physician assistant who meets
2.11 the requirements in Minnesota Statutes, section 144E.001, subdivision 3a, clause (3), and
2.12 who must be in the patient compartment when a patient is being transported; and

2.13 (2) one individual to drive the ambulance. The driver must hold a valid driver's license
2.14 from any state, must have attended an emergency vehicle driving course approved by the
2.15 ambulance service, and must have completed a course on cardiopulmonary resuscitation
2.16 approved by the ambulance service.

2.17 (c) The ambulance service director and medical director must approve the staffing of
2.18 an ambulance according to this subdivision.

2.19 (d) An ambulance service staffing an ambulance according to this subdivision must
2.20 immediately notify the board in writing and in a manner prescribed by the board. The notice
2.21 must specify how the ambulance service is staffing its basic life support or advanced life
2.22 support ambulances and the time period the ambulance service plans to staff the ambulances
2.23 according to this subdivision. If an ambulance service continues to staff an ambulance
2.24 according to this subdivision after the date provided to the board in its initial notice, the
2.25 ambulance service must provide a new notice to the board in a manner that complies with
2.26 this paragraph.

2.27 (e) If an individual serving as a driver under this subdivision commits an act listed in
2.28 Minnesota Statutes, section 144E.27, subdivision 5, paragraph (a), the board may temporarily
2.29 suspend or prohibit the individual from driving an ambulance or place conditions on the
2.30 individual's ability to drive an ambulance using the procedures and authority in Minnesota
2.31 Statutes, section 144E.27, subdivisions 5 and 6.

2.32 Subd. 4. **Use of expired emergency medications and medical supplies.** (a) If an
2.33 ambulance service experiences a shortage of an emergency medication or medical supply,

3.1 ambulance service personnel may use an emergency medication or medical supply for up
3.2 to six months after the emergency medication's or medical supply's specified expiration
3.3 date, provided:

3.4 (1) the ambulance service director and medical director approve the use of the expired
3.5 emergency medication or medical supply;

3.6 (2) ambulance service personnel use an expired emergency medication or medical supply
3.7 only after depleting the ambulance service's supply of that emergency medication or medical
3.8 supply that is unexpired;

3.9 (3) the ambulance service has stored and maintained the expired emergency medication
3.10 or medical supply according to the manufacturer's instructions;

3.11 (4) if possible, ambulance service personnel obtain consent from the patient to use the
3.12 expired emergency medication or medical supply prior to its use; and

3.13 (5) when the ambulance service obtains a supply of that emergency medication or medical
3.14 supply that is unexpired, ambulance service personnel cease use of the expired emergency
3.15 medication or medical supply and instead use the unexpired emergency medication or
3.16 medical supply.

3.17 (b) Before approving the use of an expired emergency medication, an ambulance service
3.18 director and medical director must consult with the Board of Pharmacy regarding the safety
3.19 and efficacy of using the expired emergency medication.

3.20 (c) An ambulance service must keep a record of all expired emergency medications and
3.21 all expired medical supplies used and must submit that record in writing to the board in a
3.22 time and manner specified by the board. The record must list the specific expired emergency
3.23 medications and medical supplies used and the time period during which ambulance service
3.24 personnel used the expired emergency medication or medical supply.

3.25 **Subd. 5. Provision of emergency medical services after certification expires. (a) At**
3.26 **the request of an emergency medical technician, advanced emergency medical technician,**
3.27 **or paramedic, and with the approval of the ambulance service director, an ambulance service**
3.28 **medical director may authorize the emergency medical technician, advanced emergency**
3.29 **medical technician, or paramedic to provide emergency medical services for the ambulance**
3.30 **service for up to three months after the certification of the emergency medical technician,**
3.31 **advanced emergency medical technician, or paramedic expires.**

3.32 (b) An ambulance service must immediately notify the board each time its medical
3.33 director issues an authorization under paragraph (a). The notice must be provided in writing

4.1 and in a manner prescribed by the board and must include information on the time period
4.2 each emergency medical technician, advanced emergency medical technician, or paramedic
4.3 will provide emergency medical services according to an authorization under this subdivision;
4.4 information on why the emergency medical technician, advanced emergency medical
4.5 technician, or paramedic needs the authorization; and an attestation from the medical director
4.6 that the authorization is necessary to help the ambulance service adequately staff its
4.7 ambulances.

4.8 Subd. 6. **Reports.** The board must provide quarterly reports to the chairs and ranking
4.9 minority members of the legislative committees with jurisdiction over the board regarding
4.10 actions taken by ambulance services according to subdivisions 3, 4, and 5. The board must
4.11 submit reports by June 30, September 30, and December 31 of 2022; and by March 31, June
4.12 30, September 30, and December 31 of 2023. Each report must include the following
4.13 information:

4.14 (1) for each ambulance service staffing basic life support or advanced life support
4.15 ambulances according to subdivision 3, the primary service area served by the ambulance
4.16 service, the number of ambulances staffed according to subdivision 3, and the time period
4.17 the ambulance service has staffed and plans to staff the ambulances according to subdivision
4.18 3;

4.19 (2) for each ambulance service that authorized the use of an expired emergency
4.20 medication or medical supply according to subdivision 4, the expired emergency medications
4.21 and medical supplies authorized for use and the time period the ambulance service used
4.22 each expired emergency medication or medical supply; and

4.23 (3) for each ambulance service that authorized the provision of emergency medical
4.24 services according to subdivision 5, the number of emergency medical technicians, advanced
4.25 emergency medical technicians, and paramedics providing emergency medical services
4.26 under an expired certification and the time period each emergency medical technician,
4.27 advanced emergency medical technician, or paramedic provided and will provide emergency
4.28 medical services under an expired certification.

4.29 Subd. 7. **Expiration.** This section expires January 1, 2024.

4.30 **EFFECTIVE DATE.** This section is effective the day following final enactment."

4.31 Renumber the sections in sequence and correct the internal references