

Senator moves to amend S.F. No. 4835 as follows:

Page 5, after line 26, insert:

"Sec. 7. [144E.105] ALTERNATIVE EMS RESPONSE MODEL PILOT PROGRAM.

Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.

(b) "Partnering ambulance services" means the basic life support ambulance service and the advanced life support ambulance service that partner to jointly respond to emergency ambulance calls under the pilot program.

(c) "Pilot program" means the alternative EMS response model pilot program established under this section.

Subd. 2. **Pilot program established.** The board must establish and administer an alternative EMS response model pilot program. Under the pilot program, the board may authorize basic life support ambulance services to partner with advanced life support ambulance services to provide expanded advanced life support service intercept capability and staffing support for emergency ambulance calls.

Subd. 3. **Application.** A basic life support ambulance service that wishes to participate in the pilot program must apply to the board. An application from a basic life support ambulance service must be submitted jointly with the advanced life support ambulance service with which the basic life support ambulance service proposes to partner. The application must identify the ambulance services applying to be partnering ambulance services and must include:

(1) approval to participate in the pilot program from the medical directors of the proposed partnering ambulance services;

(2) procedures the basic life support ambulance service will implement to respond to emergency ambulance calls when the basic life support ambulance service is unable to meet the minimum staffing requirements under section 144E.101, subdivision 6, and the partnering advanced life support ambulance service is unavailable to jointly respond to emergency ambulance calls;

(3) an agreement between the proposed partnering ambulance services specifying which ambulance service is responsible for:

(i) workers' compensation insurance;

(ii) motor vehicle insurance; and

(iii) billing, identifying which if any ambulance service will bill the patient or the patient's insurer and specifying how payments received will be distributed among the proposed partnering ambulance services;

(4) communication procedures to coordinate and make known the real-time availability of the advanced life support ambulance service to its proposed partnering basic life support ambulance services and public safety answering points;

(5) an acknowledgment that the proposed partnering ambulance services must coordinate compliance with the prehospital care data requirements in section 144E.123; and

(6) an acknowledgment that the proposed partnering ambulance services remain responsible for providing continual service as required under section 144E.101, subdivision 3.

Subd. 4. **Operation.** Under the pilot program, an advanced life support ambulance service may partner with one or more basic life support ambulance services. Under this partnership, the advanced life support ambulance service and basic life support ambulance service must jointly respond to emergency ambulance calls originating in the primary service area of the basic life support ambulance service. The advanced life support ambulance service must respond to emergency ambulance calls with either an ambulance or a nontransporting vehicle fully equipped with the advanced life support complement of equipment and medications required for that nontransporting vehicle by that ambulance service's medical director.

Subd. 5. **Staffing.** (a) When responding to an emergency ambulance call and when an ambulance or nontransporting vehicle from the partnering advanced life support ambulance service is confirmed to be available and is responding to the call:

(1) the basic life support ambulance must be staffed with a minimum of one emergency medical technician; and

(2) the advanced life support ambulance or nontransporting vehicle must be staffed with a minimum of one paramedic.

(b) The staffing specified in paragraph (a) is deemed to satisfy the staffing requirements in section 144E.101, subdivisions 6 and 7.

Subd. 6. **Medical director oversight.** The medical director for an ambulance service participating in the pilot program retains responsibility for the ambulance service personnel of their ambulance service. When a paramedic from the partnering advanced life support ambulance service makes contact with the patient, the standing orders, clinical policies,

3.1 protocols, and triage, treatment, and transportation guidelines for the advanced life support
3.2 ambulance service shall direct patient care related to the encounter.

3.3 Subd. 7. **Waivers and variances.** The board may issue any waivers of or variances to
3.4 this chapter or Minnesota Rules, chapter 4690, to partnering ambulance services that are
3.5 needed to implement the pilot program, provided the waiver or variance does not adversely
3.6 affect the public health or welfare.

3.7 Subd. 8. **Data and evaluation.** In administering the pilot program, the board shall collect
3.8 from partnering ambulance services, data needed to evaluate the impacts of the pilot program
3.9 on response times, patient outcomes, and patient experience for emergency ambulance calls.

3.10 Subd. 9. **Transfer of authority.** Effective January 1, 2025, the duties and authority
3.11 assigned to the board in this section are transferred to the director.

3.12 Subd. 10. **Expiration.** This section expires June 30, 2026.

3.13 **EFFECTIVE DATE.** This section is effective July 1, 2024."

3.14 Renumber the sections in sequence and correct the internal references

3.15 Amend the title accordingly