House	Amendment NO.
Offered By	
AMEND Senate Substitute for Senate Bill No. 732, Page 5, Section 44.032, Line 107, by inserting after all of said line and section the following:	
"190.102. 1. The department shall design committees. The purpose of the regional EMS as	dvisory committees is to advise and make
recommendations to the region and the department	
(1) Coordination of emergency resources	
(2) Improvement of public and profession	nal education;
(3) Cooperative research endeavors;	1 1:
(4) Development of standards, protocols	
(5) Voluntary multiagency quality improv	*
	dation for action to be taken on community and
regional time critical diagnosis plans.	garva without companyation avant that the
department of health and senior services shall but	serve without compensation except that the
expenses related to the functions of the committee	
•	no less than six regional EMS committees from
recommendations provided by recognized profess	
four years with individuals serving until reappoint	
director shall serve as a member of the regional E	
	e in emergency medical services from each of the
EMS regions shall be elected by that region's EM	
medical director. The regional EMS medical dire	
S	e department and their region's ambulance service
	al direction in accordance with sections 190.001 to
<del>_</del>	suant to sections 190.001 to 190.245. The region
	years. The southwest, northwest, and Kansas City
regional EMS medical directors shall be elected t	o an initial two-year term. The central, east
central, and southeast regional EMS medical dire	ctors shall be elected to an initial four-year term.
All subsequent terms following the initial terms s	shall be four years.
2. A medical director is required for all a	mbulance services and emergency medical
response agencies that provide: advanced life sup	pport services; basic life support services utilizing
medications or providing assistance with patients	
performing invasive procedures including invasiv	
provide medical direction to these services and ag	
3. The medical director, in cooperation w	with the ambulance service or emergency medical
Standing Action Taken	Date
Select Action Taken	Date
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response agency administrator, shall have the responsibility and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration for state and national standards as well as local area needs and resources. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall establish and develop triage, treatment and transport protocols, which may include authorization for standing orders.

- 4. All ambulance services and emergency medical response agencies that are required to have a medical director shall establish an agreement between the service or agency and their medical director. The agreement will include the roles, responsibilities and authority of the medical director beyond what is granted in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The agreement shall also include grievance procedures regarding the emergency medical response agency or ambulance service, personnel and the medical director.
- 190.144. No emergency medical technician licensed under sections 190.142 or 190.143, if acting in good faith and without gross negligence, shall be liable for:
- (1) Transporting a person for whom an application for detention for evaluation and treatment has been filed under section 631.115 or 632.305; or
- (2) Physically or chemically restraining an at-risk behavioral health patient as that term is defined under section 190.240 if such restraint is to ensure the safety of the patient or technician.
- 190.165. 1. The department may refuse to issue or deny renewal of any certificate, permit or license required pursuant to sections 190.100 to 190.245 for failure to comply with the provisions of sections 190.100 to 190.245 or any lawful regulations promulgated by the department to implement its provisions as described in subsection 2 of this section. The department shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.
- 2. The department may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate, permit or license required by sections 190.100 to 190.245 or any person who has failed to renew or has surrendered his or her certificate, permit or license for failure to comply with the provisions of sections 190.100 to 190.245 or any lawful regulations promulgated by the department to implement such sections. Those regulations shall be limited to the following:
- (1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any activity licensed or regulated by sections 190.100 to 190.245;
- (2) Being finally adjudicated and found guilty, or having entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any activity licensed or regulated pursuant to sections 190.100 to 190.245, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
- (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate, permit or license issued pursuant to sections 190.100 to 190.245 or in obtaining permission to take any examination given or required pursuant to sections 190.100 to 190.245;
- (4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;
- (5) Incompetency, misconduct, gross negligence, fraud, misrepresentation or dishonesty in the performance of the functions or duties of any activity licensed or regulated by sections 190.100 to 190.245;

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(6) Violation of, or assisting or enabling any person to violate, any provision of sections 190.100 to 190.245, or of any lawful rule or regulation adopted by the department pursuant to sections 190.100 to 190.245;

- (7) Impersonation of any person holding a certificate, permit or license or allowing any person to use his or her certificate, permit, license or diploma from any school;
- (8) Disciplinary action against the holder of a license or other right to practice any activity regulated by sections 190.100 to 190.245 granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
- (9) For an individual being finally adjudged insane or incompetent by a court of competent jurisdiction;
- (10) Assisting or enabling any person to practice or offer to practice any activity licensed or regulated by sections 190.100 to 190.245 who is not licensed and currently eligible to practice pursuant to sections 190.100 to 190.245;
  - (11) Issuance of a certificate, permit or license based upon a material mistake of fact;
- (12) Violation of any [professional trust or confidence] <u>legally protected privacy rights of a</u> patient by means of an unauthorized or unlawful disclosure;
- (13) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
- (14) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
- (15) Refusal of any applicant or licensee to [cooperate with the] <u>respond to reasonable</u> department of health and senior [services during any investigation] <u>services' requests for necessary information to process an application or to determine license status or license eligibility;</u>
- (16) Any conduct or practice which is or might be harmful or dangerous to the mental or physical health or safety of a patient or the public as defined by applicable national standards;
- (17) Repeated <u>acts of negligence or recklessness</u> in the performance of the functions or duties of any activity licensed or regulated by sections 190.100 to 190.245.
- 3. If the department conducts investigations, the department, prior to interviewing a licensee who is the subject of the investigation, shall explain to the licensee that he or she has the right to:
  - (1) Consult legal counsel or have legal counsel present;
  - (2) Have anyone present whom he or she deems to be necessary or desirable; and
  - (3) Refuse to answer any question or refuse to provide or sign any written statement.

The assertion of any right listed in this subsection shall not be deemed by the department to be a failure to cooperate with any department investigation.

- 4. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the department may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the department deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate or permit. Notwithstanding any provision of law to the contrary, the department shall be authorized to impose a suspension or revocation as a disciplinary action only if it first files the requisite complaint with the administrative hearing commission. The commission shall not be permitted to grant summary decision in such instances if the licensee files an answer contesting the department's intended licensure action.
- [4.] 5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the department after

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compliance with all the requirements of sections 190.100 to 190.245 relative to the licensing of an applicant for the first time. Any individual whose license has been revoked twice within a ten-year period shall not be eligible for relicensure.

- [5.] <u>6.</u> The department may notify the proper licensing authority of any other state in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.
- [6.] 7. Any person, organization, association or corporation who reports or provides information to the department pursuant to the provisions of sections 190.100 to 190.245 and who does so in good faith shall not be subject to an action for civil damages as a result thereof.
- [7.] 8. The department of health and senior services may suspend any certificate, permit or license required pursuant to sections 190.100 to 190.245 simultaneously with the filing of the complaint with the administrative hearing commission as set forth in subsection 2 of this section, if the department finds that there is an imminent threat to the public health. The notice of suspension shall include the basis of the suspension and notice of the right to appeal such suspension. The licensee may appeal the decision to suspend the license, certificate or permit to the department. The appeal shall be filed within ten days from the date of the filing of the complaint. A hearing shall be conducted by the department within ten days from the date the appeal is filed. The suspension shall continue in effect until the conclusion of the proceedings, including review thereof, unless sooner withdrawn by the department, dissolved by a court of competent jurisdiction or stayed by the administrative hearing commission.
- 190.173. 1. All complaints, investigatory reports, and information pertaining to any applicant; holder of any certificate, permit, or license; or other individual are confidential and shall only be disclosed upon written consent of the person whose records are involved or to other administrative or law enforcement agencies acting with the scope of their statutory authority. However, no applicant; holder of any certificate, permit, or license; or other individual shall have access to any complaints, investigatory reports, or information concerning an investigation in progress until such time as the investigation has been completed as required by subsection 1 of section 190.248.
- 2. Any information regarding the identity, name, address, license, final disciplinary action taken, or currency of the license of the person possessing a license in accordance with sections 190.100 to 190.245, of any applicant shall not be confidential.
- 3. This section shall not be construed to authorize the release of records, reports, or other information that may be held in department files for any holder of any certificate, permit, or license, or applicant which is subject to other specific state or federal laws concerning their disclosure.
- 190.240. 1. Any hospital licensed under chapter 197 or any nursing home facility licensed under chapter 198 shall have policies and procedures that require the hospital or facility to give advance notification to emergency medical services personnel prior to the transportation of any atrisk behavioral health patient.
- 2. Any emergency medical services personnel licensed under this chapter who conducts interfacility transfers of at-risk behavioral health patients may be properly trained as determined by the ambulance services and emergency medical response agency medical director, established under section 190.103, with regard to proper restraining procedures and nonmedical management techniques, such as verbal de-escalation techniques, to handle such patients before their transportation.
- 3. Any physician treating an at-risk behavioral patient in an emergency situation who, after assessing the patient, determines that there is a reasonable cause to believe there is a likelihood that the patient may cause an imminent serious harm to himself, herself, or others unless the patient is immediately transported to another appropriate facility may place the patient on a temporary

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involuntary hold for a period of time necessary to effectuate the patient's transport. During the
transport, the emergency medical services personnel may rely on the physician's hold order as a
basis for implied consent to treat and transport the patient and shall not be liable for any claims of
negligence, false imprisonment, or invasion of privacy based on such temporary hold, treatment, or
transport of the patient.

- 4. Nothing in this section shall be construed to limit the patient's rights under the federal Mental Health Patient's Bill of Rights under 42 U.S.C. Section 9501(1)(A) and (F).
- 5. For the purposes of this section, "at-risk behavioral health patient" shall mean any patient who displays violent, homicidal, or suicidal ideation or behavior."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

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