

HOUSE BILL No. 2387

AN ACT concerning emergency medical services; amending K.S.A. 2015 Supp. 65-6102, 65-6111, 65-6112, 65-6120, 65-6121, 65-6129b, 65-6129c, 65-6133, 65-6135 and 65-6144 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2015 Supp. 65-6102 is hereby amended to read as follows: 65-6102. (a) There is hereby established the emergency medical services board. The office of the emergency medical services board shall be located in the city of Topeka, Kansas.

(b) The emergency medical services board shall be composed of 15 members to be appointed as follows:

(1) Eleven members shall be appointed by the governor. Of such members:

(A) Three shall be physicians who are actively involved in emergency medical services;

(B) two shall be county commissioners of counties making a levy for ambulance service, at least one of whom shall be from a county having a population of less than 15,000;

(C) one shall be an instructor-coordinator;

(D) one shall be a hospital administrator actively involved in emergency medical services;

(E) one shall be a member of a firefighting unit which provides emergency medical service; and

(F) three shall be attendants who are actively involved in emergency medical service. At least two classifications of attendants shall be represented. At least one of such members shall be from a volunteer emergency medical service; and

(2) four members shall be appointed as follows:

(A) One shall be a member of the Kansas senate to be appointed by the president of the senate;

(B) one shall be a member of the Kansas senate to be appointed by the minority leader of the senate;

(C) one shall be a member of the Kansas house of representatives to be appointed by the speaker of the house of representatives; and

(D) one shall be a member of the Kansas house of representatives to be appointed by the minority leader of the house of representatives.

All members of the board shall be residents of the state of Kansas. Appointments to the board shall be made with due consideration that representation of the various geographical areas of the state is ensured. The governor may remove any member of the board upon recommendation of the board. Any person appointed to a position on the board shall forfeit such position upon vacating the office or position which qualified such person to be appointed as a member of the board.

(c) ~~Of the two additional physician members appointed by the governor on and after July 1, 2011, one shall be appointed for a term of three years and one shall be appointed for a term of four years. Thereafter,~~ Members shall be appointed for terms of four years and until their successors are appointed and qualified. In the case of a vacancy in the membership of the board, the vacancy shall be filled for the unexpired term.

(d) The board shall meet at least six times annually and at least once each quarter and at the call of the chairperson or at the request of the ~~administrator~~ *executive director* of the emergency medical services board or of any ~~six~~ *seven* members of the board. At the first meeting of the board after January 1 each year, the members shall elect a chairperson and a vice-chairperson who shall serve for a term of one year. The vice-chairperson shall exercise all of the powers of the chairperson in the absence of the chairperson. If a vacancy occurs in the office of the chairperson or vice-chairperson, the board shall fill such vacancy by election of one of its members to serve the unexpired term of such office. Members of the board attending meetings of the board or attending a subcommittee meeting thereof authorized by the board shall be paid compensation, subsistence allowances, mileage and other expenses as provided in K.S.A. 75-3223, and amendments thereto.

(e) Except as otherwise provided by law, all vouchers for expenditures and all payrolls of the emergency medical services board shall be approved by the emergency medical services board or a person designated by the board.

Sec. 2. K.S.A. 2015 Supp. 65-6111 is hereby amended to read as follows: 65-6111. (a) The emergency medical services board shall:

- (1) Adopt any rules and regulations necessary to carry out the provisions of this act;
- (2) review and approve the allocation and expenditure of moneys appropriated for emergency medical services;
- (3) conduct hearings for all regulatory matters concerning ambulance services, attendants, instructor-coordinators, training officers and ~~providers of training~~ *sponsoring organizations*;
- (4) submit a budget to the legislature for the operation of the board;
- (5) develop a state plan for the delivery of emergency medical services;
- (6) enter into contracts as may be necessary to carry out the duties and functions of the board under this act;
- (7) review and approve all requests for state and federal funding involving emergency medical services projects in the state or delegate such duties to the ~~administrator~~ *executive director*;
- (8) approve all training programs for attendants, instructor-coordinators and training officers and prescribe certification application fees by rules and regulations;
- (9) approve methods of examination for certification of attendants, training officers and instructor-coordinators and prescribe examination fees by rules and regulations;
- (10) appoint a medical advisory council of not less than six members, including ~~two one~~ board members, ~~one of whom~~ *member who* shall be a physician and not less than ~~four five~~ other physicians who are active and knowledgeable in the field of emergency medical services who are not members of the board to advise and assist the board in medical standards and practices as determined by the board. The medical advisory council shall elect a chairperson from among its membership and shall meet upon the call of the chairperson; and
- (11) approve ~~providers of training~~ *sponsoring organizations* by prescribing standards and requirements by rules and regulations and withdraw or modify such approval in accordance with the Kansas administrative ~~procedures~~ *procedure* act and the rules and regulations of the board.
 - (b) The emergency medical services board may grant a temporary variance from an identified rule or regulation when a literal application or enforcement of the rule or regulation would result in serious hardship and the relief granted would not result in any unreasonable risk to the public interest, safety or welfare.

Sec. 3. K.S.A. 2015 Supp. 65-6112 is hereby amended to read as follows: 65-6112. As used in this act:

- (a) “Administrator” means the executive director of the emergency medical services board.
- (b) “Advanced emergency medical technician” means a person who holds an advanced emergency medical technician certificate issued pursuant to this act.
- (c) “Advanced practice registered nurse” means an advanced practice registered nurse as defined in K.S.A. 65-1113, and amendments thereto.
- (d) “Ambulance” means any privately or publicly owned motor vehicle, airplane or helicopter designed, constructed, prepared, staffed and equipped for use in transporting and providing emergency care for individuals who are ill or injured.
- (e) “Ambulance service” means any organization operated for the purpose of transporting sick or injured persons to or from a place where medical care is furnished, whether or not such persons may be in need of emergency or medical care in transit.
- (f) “Attendant” means a first responder, an emergency medical responder, emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator, emergency medical technician-intermediate/defibrillator, advanced emergency medical technician, ~~mobile intensive care technician~~ or paramedic certified pursuant to this act.
- (g) “Board” means the emergency medical services board established pursuant to K.S.A. 65-6102, and amendments thereto.
- (h) “Emergency medical service” means the effective and coordinated delivery of such care as may be required by an emergency which includes the care and transportation of individuals by ambulance services and the performance of authorized emergency care by a physician, ad-

vanced practice registered nurse, professional nurse, a licensed physician assistant or attendant.

(i) “Emergency medical technician” means a person who holds an emergency medical technician certificate issued pursuant to this act.

(j) “Emergency medical technician-defibrillator” means a person who holds an emergency medical technician-defibrillator certificate issued pursuant to this act.

(k) “Emergency medical technician-intermediate” means a person who holds an emergency medical technician-intermediate certificate issued pursuant to this act.

(l) “Emergency medical technician-intermediate/defibrillator” means a person who holds both an emergency medical technician-intermediate and emergency medical technician-defibrillator certificate issued pursuant to this act.

(m) “Emergency medical responder” means a person who holds an emergency medical responder certificate issued pursuant to this act.

(n) “First responder” means a person who holds a first responder certificate issued pursuant to this act.

(o) “Hospital” means a hospital as defined by K.S.A. 65-425, and amendments thereto.

(p) “Instructor-coordinator” means a person who is certified under this act to teach *or coordinate both* initial certification and continuing education classes.

(q) “Medical director” means a physician.

(r) “Medical protocols” mean written guidelines which authorize attendants to perform certain medical procedures prior to contacting a physician, physician assistant authorized by a physician, advanced practice registered nurse authorized by a physician or professional nurse authorized by a physician. The medical protocols shall be approved by a county medical society or the medical staff of a hospital to which the ambulance service primarily transports patients, or if neither of the above are able or available to approve the medical protocols, then the medical protocols shall be submitted to the medical advisory council for approval.

~~(s) “Mobile intensive care technician” means a person who holds a mobile intensive care technician certificate issued pursuant to this act.~~

~~(t)~~ “Municipality” means any city, county, township, fire district or ambulance service district.

~~(u)~~(t) “Nonemergency transportation” means the care and transport of a sick or injured person under a foreseen combination of circumstances calling for continuing care of such person. As used in this subsection, transportation includes performance of the authorized level of services of the attendant whether within or outside the vehicle as part of such transportation services.

~~(v)~~(u) “Operator” means a person or municipality who has a permit to operate an ambulance service in the state of Kansas.

~~(w)~~(v) “Paramedic” means a person who holds a paramedic certificate issued pursuant to this act.

~~(x)~~(w) “Person” means an individual, a partnership, an association, a joint-stock company or a corporation.

~~(y)~~(x) “Physician” means a person licensed by the state board of healing arts to practice medicine and surgery.

~~(z)~~(y) “Physician assistant” means a person who is licensed under the physician assistant licensure act and who is acting under the direction of a supervising physician *assistant as defined in K.S.A. 65-28a02, and amendments thereto.*

~~(aa)~~(z) “Professional nurse” means a licensed professional nurse as defined by K.S.A. 65-1113, and amendments thereto.

~~(bb)~~ “Provider of training” means a corporation, partnership, accredited postsecondary education institution, ambulance service, fire department, hospital or municipality that conducts training programs that include, but are not limited to, initial courses of instruction and continuing education for attendants, instructor-coordinators or training officers

(aa) “Sponsoring organization” means any professional association, accredited postsecondary educational institution, ambulance service which holds a permit to operate in this state, fire department, other officially organized public safety agency, hospital, corporation, governmental entity or emergency medical services regional council, as approved

by the executive director, to offer initial courses of instruction or continuing education programs.

~~(cc) “Supervising physician” means supervising physician as such term is defined under K.S.A. 65-28a02, and amendments thereto.~~

~~(dd)(bb) “Training officer” means a person who is certified pursuant to this act to teach; or coordinate or both, initial courses of instruction for first responders or emergency medical responders and continuing education as prescribed by the board.~~

Sec. 4. K.S.A. 2015 Supp. 65-6120 is hereby amended to read as follows: 65-6120. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-intermediate may:

(1) Perform any of the activities identified by K.S.A. 65-6121(a), and amendments thereto;

(2) when approved by medical protocols or where voice contact by radio or telephone is monitored by a physician, physician assistant where authorized by a physician, advanced practice registered nurse where authorized by a physician or ~~licensed~~ professional nurse where authorized by a physician, and direct communication is maintained, upon order of such person, may perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline solutions, dextrose and water solutions or ringers lactate IV solutions, endotracheal intubation and administration of nebulized albuterol;

(3) perform, during an emergency, those activities specified in subsection (a)(2) before contacting the persons identified in subsection (a)(2) when specifically authorized to perform such activities by medical protocols; or

(4) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.

(b) An individual who holds a valid certificate as an emergency medical technician-intermediate once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to become an advanced emergency medical technician. Alternatively, upon application for renewal, such individual shall be deemed to hold a certificate as an advanced emergency medical technician under this act, provided such individual has completed all continuing education hour requirements inclusive of the successful completion of a transition course and such individual shall not be required to file an original application for certification as an advanced emergency medical technician under this act.

(c) “Renewal” as used in subsection (b), refers to the first or second opportunity after December 31, 2011, that an emergency medical technician-intermediate has to apply for renewal of a certificate.

(d) Emergency medical technician-intermediates who fail to meet the transition requirements as specified may complete either the board prescribed emergency medical technician transition course or emergency medical responder transition course, provide validation of cognitive and psychomotor competency and all continuing education hour requirements inclusive of the successful completion of a transition course as determined by rules and regulations of the board. Upon completion, such emergency medical technician-intermediate may apply to transition to become an emergency medical technician or an emergency medical responder, depending on the transition course that was successfully completed. Alternatively, upon application for renewal of an emergency medical technician-intermediate certificate, the applicant shall be renewed as an emergency medical technician or an emergency medical responder, depending on the transition course that was successfully completed. Such individual shall not be required to file an original application for certification as an emergency medical technician or emergency medical responder.

(e) Failure to successfully complete either an advanced emergency medical technician transition course, an emergency medical technician transition course or emergency medical responder transition course will result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to the contrary, an advanced emergency medical technician may:

(1) Perform any of the activities identified by K.S.A. 65-6121, and amendments thereto; and

(2) perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, as specifically identified in rules and regulations, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference with a physician, physician assistant where authorized by a physician, an advanced practice registered nurse where authorized by a physician, or licensed professional nurse where authorized by a physician upon order of such a person: ~~(A) Continuous positive airway pressure devices; (B) Advanced airway management; (C) (B) referral of patient of alternate medical care site based on assessment; (D) (C) transportation of a patient with a capped arterial line; (E) (D) venipuncture for obtaining blood sample; (F) (E) initiation and maintenance of intravenous infusion or saline lock; (G) (F) initiation of intraosseous infusion; (H) (G) nebulized therapy; (I) (H) manual defibrillation and cardioversion; (J) (I) cardiac monitoring; (K) (J) electrocardiogram interpretation; (K) monitoring of a nasogastric tube; (L) administration of generic or trade name medications by one or more of the following methods: (i) Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v) rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix) sublingual as specified by rules and regulations of the board.~~

(g) An individual who holds a valid certificate as both an emergency medical technician-intermediate and as an emergency medical technician-defibrillator once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to an advanced emergency medical technician. Alternatively, upon application for renewal, such individual shall be deemed to hold a certificate as an advanced emergency medical technician under this act, provided such individual has completed all continuing education hour requirements inclusive of successful completion of a transition course, and such individual shall not be required to file an original application for certification as an advanced emergency medical technician under this act.

(h) “Renewal” as used in subsection (g), refers to the first or second opportunity after December 31, 2011, that an emergency medical technician-intermediate and emergency medical technician-defibrillator has to apply for renewal of a certificate.

(i) An individual who holds both an emergency medical technician-intermediate certificate and an emergency medical technician-defibrillator certificate, who fails to meet the transition requirements as specified may complete either the board prescribed emergency medical technician transition course or emergency medical responder transition course, and provide validation of cognitive and psychomotor competency and all continuing education hour requirements inclusive of successful completion of a transition course as determined by rules and regulations of the board. Upon completion, such individual may apply to transition to become an emergency medical technician or emergency medical responder, depending on the transition course that was successfully completed. Alternatively, upon application for renewal of an emergency medical technician-intermediate certificate and an emergency medical technician-defibrillator certificate, the applicant shall be renewed as an emergency medical technician or an emergency medical responder, depending on the transition course that was successfully completed. Such individual shall not be required to file an original application for certification as an emergency medical technician or emergency medical responder.

(j) Failure to successfully complete either the advanced emergency medical technician transition requirements, an emergency medical technician transition course or the emergency medical responder transition course will result in loss of certification.

Sec. 5. K.S.A. 2015 Supp. 65-6121 is hereby amended to read as follows: 65-6121. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the following activities:

~~(1) Patient assessment and vital signs;~~

- ~~(2) airway maintenance including the use of:~~
 - ~~(A) Oropharyngeal and nasopharyngeal airways;~~
 - ~~(B) esophageal obturator airways with or without gastric suction device;~~
 - ~~(C) multi-lumen airway; and~~
 - ~~(D) oxygen demand valves.~~
- ~~(3) Oxygen therapy;~~
- ~~(4) oropharyngeal suctioning;~~
- ~~(5) cardiopulmonary resuscitation procedures;~~
- ~~(6) control accessible bleeding;~~
- ~~(7) apply pneumatic anti-shock garment;~~
- ~~(8) manage outpatient medical emergencies;~~
- ~~(9) extricate patients and utilize lifting and moving techniques;~~
- ~~(10) manage musculoskeletal and soft tissue injuries including dressing and bandaging wounds or the splinting of fractures, dislocations, sprains or strains;~~
 - ~~(11) use of backboards to immobilize the spine;~~
 - ~~(12) administer activated charcoal and glucose;~~
 - ~~(13) monitor intravenous line delivering intravenous fluids during interfacility transport with the following restrictions:~~
 - ~~(A) The physician approves the transfer by an emergency medical technician;~~
 - ~~(B) no medications or nutrients have been added to the intravenous fluids; and~~
 - ~~(C) the emergency medical technician may monitor, maintain and shut off the flow of intravenous fluid;~~
 - ~~(14) use automated external defibrillators;~~
 - ~~(15) administer epinephrine auto-injectors provided that:~~
 - ~~(A) The emergency medical technician successfully completes a course of instruction approved by the board in the administration of epinephrine;~~
 - ~~(B) the emergency medical technician serves with an ambulance service or a first response organization that provides emergency medical services; and~~
 - ~~(C) the emergency medical technician is acting pursuant to medical protocols;~~
 - ~~(16) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols; or~~
 - ~~(17) when authorized by medical protocol, assist the patient in the administration of the following medications which have been prescribed for that patient: Auto-injection epinephrine, sublingual nitroglycerin and inhalers for asthma and emphysema.~~
- ~~(b) An individual who holds a valid certificate as an emergency medical technician at the current basic level once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to become an emergency medical technician. Alternatively, upon application for renewal, such individual shall be deemed to hold a certificate as an emergency medical technician under this act, provided such individual has completed all continuing education hour requirements inclusive of successful completion of a transition course, and such individual shall not be required to file an original application for certification as an emergency medical technician.~~
- ~~(c) “Renewal” as used in subsection (b), refers to the first opportunity after December 31, 2011, that an emergency medical technician has to apply for renewal of a certificate following the effective date of this act.~~
- ~~(d) Emergency medical technicians who fail to meet the transition requirements as specified may successfully complete the board prescribed emergency medical responder transition course, provide validation of cognitive and psychomotor competency and all continuing education hour requirements inclusive of the successful completion of a transition course as determined by rules and regulations of the board. Alternatively, upon application for renewal of an emergency medical technician certificate, the applicant shall be deemed to hold a certificate as an emergency medical responder under this act, and such individual shall not be required to file an original application for certification as an emergency medical responder.~~

~~(e) Failure to successfully complete either an emergency medical technician transition course or emergency medical responder transition course will result in loss of certification.~~

~~(f) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any activities identified in K.S.A. 65-6144, and amendments thereto, and any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse when authorized by a physician or a licensed professional nurse when authorized by a physician, upon order of such person:~~

- ~~(1) Airway maintenance including use of:~~
 - ~~(A) Single lumen airways as approved by the board;~~
 - ~~(B) multilumen airways;~~
 - ~~(C) ventilator devices;~~
 - ~~(D) non-invasive positive pressure ventilation;~~
 - ~~(E) forceps removal of airway obstruction;~~
 - ~~(F) CO2 monitoring;~~
 - ~~(G) airway suctioning;~~
- ~~(2) apply pneumatic anti-shock garment;~~
- ~~(3) assist with childbirth;~~
- ~~(4) monitoring urinary catheter;~~
- ~~(5) (3) capillary blood sampling;~~
- ~~(6) cardiac monitoring;~~
- ~~(7) (4) administration of patient assisted medications as approved by the board;~~
- ~~(8) (5) administration of medications as approved by the board by appropriate routes; and~~
- ~~(9) (6) monitor, maintain or discontinue flow of IV line if a physician approves transfer by an emergency medical technician; and~~
- ~~(7) application of a traction splint.~~

Sec. 6. K.S.A. 2015 Supp. 65-6129b is hereby amended to read as follows: 65-6129b. (a) Application for an instructor-coordinator's certificate shall be made to the board upon forms provided by the ~~administrator~~ *executive director*. The board may grant an instructor-coordinator's certificate to an attendant who: (1) Has served as an attendant in the emergency medical services field during the preceding 12 months prior to applying for such certificate; (2) has made application within one year after successfully completing the training, approved by the board, in instructing and coordinating attendant training programs; (3) has passed an examination prescribed by the board; and (4) has paid a fee as prescribed by rules and regulations of the board.

(b) The board may grant an instructor-coordinator's certificate to a physician or a professional nurse who: (1) Has made application within one year after successfully completing the training, approved by the board, in instructing and coordinating attendant training programs; (2) has passed an examination prescribed by the board; and (3) has paid a fee as prescribed by rules and regulations of the board.

(c) An instructor-coordinator's certificate shall expire on the expiration date of the attendant's certificate if the instructor-coordinator is an attendant or on the expiration date of the physician's or professional nurse's license if the instructor is a physician or professional nurse. An instructor-coordinator's certificate may be renewed for the same period as the attendant's certificate or the physician's or professional nurse's license upon payment of a fee as prescribed by rule and regulation of the board and upon presentation of satisfactory proof that the instructor-coordinator has successfully completed continuing education as prescribed by the board. The board may prorate to the nearest whole month the fee fixed under this subsection as necessary to implement the provisions of this subsection.

(d) An instructor-coordinator's certificate may be denied, revoked, limited, modified or suspended by the board or the board may refuse to renew such certificate if such individual:

(1) Does not hold an attendant's certificate or a physician's or professional nurse's license;

(2) has made misrepresentations intentionally in obtaining a certificate or renewing a certificate;

(3) has demonstrated incompetence or engaged in unprofessional conduct as defined by rules and regulations adopted by the board;

(4) has violated or aided and abetted in the violation of any provision of this act or rules and regulations adopted by the board; or

(5) has been convicted of any state or federal crime that is related substantially to the qualifications, functions and duties of an instructor-coordinator or any crime punishable as a felony under any state or federal statute, and the board determines that such individual has not been sufficiently rehabilitated to warrant the public trust. A conviction means a plea of guilty, a plea of nolo contendere or a verdict of guilty. The board may take disciplinary action pursuant to this section when the time for appeal has elapsed, or after the judgment of conviction is affirmed on appeal or when an order granting probation is made suspending the imposition of sentence.

(e) The board may *deny*, limit, modify, revoke or suspend a certificate or the board may refuse to renew such certificate in accordance with the provisions of the Kansas administrative procedure act.

(f) All fees received pursuant to this section shall be remitted to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the state general fund.

(g) If a person who was previously certified as an instructor-coordinator applies for an instructor-coordinator certificate within two years of the date of its expiration, the board may grant a certificate without the person completing the training or passing an examination if the person complies with the other provisions of subsection (a) or (b) and completes continuing education requirements prescribed by the board.

Sec. 7. K.S.A. 2015 Supp. 65-6129c is hereby amended to read as follows: 65-6129c. (a) Application for a training officer's certificate shall be made to the emergency medical services board upon forms provided by the ~~administrator~~ *executive director*. The board may grant a training officer's certificate to an applicant who: (1) Is an ~~emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator, mobile intensive care technician, advanced emergency medical technician, paramedic~~ *attendant certified pursuant to K.S.A. 65-6119, 65-6120 and 65-6121, and amendments thereto*, physician, physician assistant, advanced practice registered nurse or professional nurse; (2) successfully completes an initial course of training approved by the board; (3) passes an examination prescribed by the board; (4) is appointed by a ~~provider of training~~ *sponsoring organization* approved by the board; and (5) has paid a fee established by the board.

(b) A training officer's certificate shall expire on the expiration date of the attendant's certificate if the training officer is an attendant or on the expiration date of the physician's, physician assistant's, advanced practice registered nurse's or professional nurse's license if the training officer is a physician, physician assistant, advanced practice registered nurse or professional nurse. A training officer's certificate may be renewed for the same period as the attendant's certificate or the physician's, physician assistant's, advanced practice registered nurse's or professional nurse's license upon payment of a fee as prescribed by rules and regulations and upon presentation of satisfactory proof that the training officer has successfully completed continuing education prescribed by the board and is certified as an ~~emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator, mobile intensive care technician, advanced emergency medical technician, paramedic~~ *an attendant certified pursuant to K.S.A. 65-6119, 65-6120 and 65-6121, and amendments thereto*, physician, physician assistant, advanced practice registered nurse or professional nurse. The board may prorate to the nearest whole month the fee fixed under this subsection as necessary to implement the provisions of this subsection.

(c) A training officer's certificate may be denied, revoked, limited,

modified or suspended by the board or the board may refuse to renew such certificate if such individual:

(1) Fails to maintain certification or licensure as ~~an emergency medical technician, emergency medical technician intermediate, emergency medical technician-defibrillator, mobile intensive care technician, advanced emergency medical technician, paramedic~~ *an attendant certified pursuant to K.S.A. 65-6119, 65-6120 and 65-6121, and amendments thereto*, physician, physician assistant, advanced practice registered nurse or professional nurse;

(2) fails to maintain support of appointment by a ~~provider of training sponsoring organization~~;

(3) fails to successfully complete continuing education;

(4) has made intentional misrepresentations in obtaining a certificate or renewing a certificate;

(5) has demonstrated incompetence or engaged in unprofessional conduct as defined by rules and regulations adopted by the board;

(6) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated by the board; or

(7) has been convicted of any state or federal crime that is related substantially to the qualifications, functions and duties of a training officer or any crime punishable as a felony under any state or federal statute and the board determines that such individual has not been sufficiently rehabilitated to warrant public trust. A conviction means a plea of guilty, a plea of *nolo contendere* or a verdict of guilty. The board may take disciplinary action pursuant to this section when the time for appeal has elapsed, or after the judgment of conviction is affirmed on appeal or when an order granting probation is made suspending the imposition of sentence.

(d) The board may *deny*, revoke, limit, modify or suspend a *training officer* certificate or the board may refuse to renew such certificate in accordance with the provisions of the Kansas administrative procedure act.

(e) If a person who previously was certified as a training officer applies for a training officer's certificate within two years of the date of its expiration, the board may grant a certificate without the person completing an initial course of training or taking an examination if the person complies with the other provisions of subsection (a) and completes continuing education requirements.

Sec. 8. K.S.A. 2015 Supp. 65-6133 is hereby amended to read as follows: 65-6133. (a) An attendant's, ~~instructor-coordinator's or training officer's~~ certificate may be denied, revoked, limited, modified or suspended by the board or the board may refuse to renew such certificate upon proof that such individual:

(1) Has made intentional misrepresentations in obtaining a certificate or renewing a certificate;

(2) has performed or attempted to perform activities not authorized by statute at the level of certification held by the individual;

(3) has demonstrated incompetence as defined by rules and regulations adopted by the board or has provided inadequate patient care as determined by the board;

(4) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations adopted by the board;

(5) has been convicted of a felony and, after investigation by the board, it is determined that such person has not been sufficiently rehabilitated to warrant the public trust;

(6) has demonstrated an inability to perform authorized activities with reasonable skill and safety by reason of illness, alcoholism, excessive use of drugs, controlled substances or any physical or mental condition;

(7) has engaged in unprofessional conduct, as defined by rules and regulations adopted by the board; or

(8) has had a certificate, license or permit to practice emergency medical services as an attendant denied, revoked, limited or suspended or has been publicly or privately censured, by a licensing or other regulatory authority of another state, agency of the United States government, territory of the United States or other country or has had other disciplinary action taken against the applicant or holder of a permit, license or certificate by a licensing or other regulatory authority of another state,

agency of the United States government, territory of the United States or other country. A certified copy of the record or order of public or private censure, denial, suspension, limitation, revocation or other disciplinary action of the licensing or other regulatory authority of another state, agency of the United States government, territory of the United States or other country shall constitute prima facie evidence of such a fact for purposes of this paragraph.

(b) The board may *deny*, limit, modify, revoke or suspend an attendant's ~~or instructor-coordinator's~~ certificate or the board may refuse to renew such certificate in accordance with the provisions of the Kansas administrative procedure act.

Sec. 9. K.S.A. 2015 Supp. 65-6135 is hereby amended to read as follows: 65-6135. (a) All ambulance services providing emergency care as defined by the rules and regulations adopted by the board shall offer service 24 hours per day every day of the year.

(b) Whenever an operator is required to have a permit, at least one person on each vehicle providing emergency medical service shall be an attendant certified ~~as an emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator, a mobile intensive care technician, emergency medical technician-intermediate/defibrillator, advanced emergency medical technician, a paramedic pursuant to K.S.A. 65-6119, 65-6120 or 65-6121, and amendments thereto~~, a physician, ~~a licensed~~ physician assistant, ~~a licensed~~ an advanced practice registered nurse or a professional nurse.

Sec. 10. K.S.A. 2015 Supp. 65-6144 is hereby amended to read as follows: 65-6144. (a) ~~A first responder may perform any of the following activities:~~

- ~~(1) Initial scene management including, but not limited to, gaining access to the individual in need of emergency care, extricating, lifting and moving the individual;~~
- ~~(2) cardiopulmonary resuscitation and airway management;~~
- ~~(3) control of bleeding;~~
- ~~(4) extremity splinting excluding traction splinting;~~
- ~~(5) stabilization of the condition of the individual in need of emergency care;~~
- ~~(6) oxygen therapy;~~
- ~~(7) use of oropharyngeal airways;~~
- ~~(8) use of bag valve masks;~~
- ~~(9) use automated external defibrillators; and~~
- ~~(10) other techniques of preliminary care a first responder is trained to provide as approved by the board.~~

~~(b) An individual who holds a valid certificate as a first responder, once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to become an emergency medical responder. Alternatively, upon application for renewal of such certificate, such individual shall be deemed to hold a certificate as an emergency medical responder under this act, provided such individual has completed all continuing education hour requirements inclusive of a transition course and such individual shall not be required to file an original application for certification as an emergency medical responder.~~

~~(c) "Renewal" as used in subsection (b), refers to the first opportunity after December 31, 2011, that an attendant has to apply for renewal of a certificate.~~

~~(d) First responder attendants who fail to meet the transition requirements as specified will forfeit their certification.~~

~~(e) Upon transition, notwithstanding any other provision of law to the contrary, An emergency medical responder may perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse when authorized by a physician or a licensed professional nurse when authorized by a physician, upon order of such person: (1) Emergency vehicle operations; (2) initial~~

scene management; (3) patient assessment and stabilization; (4) *cardiac arrest management through the use of cardiopulmonary resuscitation and airway management the use of an automated external defibrillator*; (5) *airway management and oxygen therapy*; (6) *utilization of equipment for the purposes of acquiring an EKG rhythm strip*; (7) control of bleeding; ~~(6)~~ (8) extremity splinting; ~~(7)~~ (9) spinal immobilization; ~~(8)~~ *oxygen therapy*; (9) *use of bag-valve-mask*; ~~(10)~~ *use of automated external defibrillator*; ~~(11)~~ (10) nebulizer therapy; ~~(12)~~ (11) intramuscular injections with auto-injector; ~~(13)~~ (12) administration of oral glucose; ~~(14)~~ *administration of aspirin*; ~~(15)~~ *medications as approved by the board by appropriate routes*; (13) recognize and comply with advanced directives; ~~(16)~~ *insertion and maintenance of oral and nasal pharyngeal airways*; ~~(17)~~ (14) use of blood glucose monitoring; (15) *assist with childbirth*; (16) *non-invasive monitoring of hemoglobin derivatives*; and ~~(18)~~ (17) other techniques and devices of preliminary care an emergency medical responder is trained to provide as approved by the board.

Sec. 11. K.S.A. 2015 Supp. 65-6102, 65-6111, 65-6112, 65-6120, 65-6121, 65-6129b, 65-6129c, 65-6133, 65-6135 and 65-6144 are hereby repealed.

Sec. 12. This act shall take effect and be in force from and after its publication in the statute book.

I hereby certify that the above BILL originated in the HOUSE, and passed that body

HOUSE concurred in
SENATE amendments _____

Speaker of the House.

Chief Clerk of the House.

Passed the SENATE
as amended _____

President of the Senate.

Secretary of the Senate.

APPROVED _____

Governor.