

CHAPTER 94

(HB 57)

AN ACT relating to emergency medical services and declaring an emergency.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

➔Section 1. KRS 311A.030 is amended to read as follows:

(1) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to carry out the functions of this chapter, including but not limited to:

(a) **Classifying**, licensing, inspecting, and regulating ~~{of}~~ ambulance services, mobile integrated healthcare programs, and medical first response providers~~[- The administrative regulations shall address specific requirements for:~~

1. ~~Class I Ground ambulance providers, which provide basic life support or advanced life support services to all patients for emergencies or scheduled ambulance transportation that is medically necessary;~~
2. ~~Class II Ground ambulance providers, which provide only basic life support services but do not provide initial response to the general population with medical emergencies and which are limited to providing scheduled ambulance transportation that is medically necessary;~~
3. ~~Class III Ground ambulance providers, which provide mobile intensive care services at or above the level of advanced life support to patients with critical illnesses or injuries who must be transported between hospitals in vehicles with specialized equipment as an extension of hospital-level care;~~
4. ~~Class IV Ground ambulance providers, which provide basic life support or advanced life support services and transportation for restricted locations such as industrial sites and other sites that do not provide services outside a designated site;~~
5. ~~Class V Mobile integrated healthcare programs, which do not transport patients as a function of the program and which must be operated by or in affiliation with a Class I ambulance provider that provides emergency medical response in the geographic area;~~
6. ~~Class VI medical first response providers, which provide basic or advanced life support services, but do not transport patients;~~
7. ~~Class VII air ambulance providers, which provide basic or advanced life support services; and~~
8. ~~Class VIII event medicine providers, which provide basic or advanced life support services, but do not transport patients}; and~~

(b) Licensing, inspecting, and regulating ~~{of}~~ emergency medical services training institutions.

(2) The licensure standards for ~~{Class I}~~ ground ambulance providers shall distinguish between an ambulance service that provides only emergency transportation, only scheduled ambulance transportation, or both types of transportation.

➔Section 2. KRS 311A.142 is amended to read as follows:

- (1) Any member of the United States military who is registered by the National Registry of Emergency Medical Technicians as an emergency medical responder, emergency medical technician, advanced emergency medical technician, or paramedic shall be eligible for reciprocity for Kentucky certification or licensure at the same certification or licensure level.
- (2) Any emergency medical responder, emergency medical technician, advanced emergency medical technician, or paramedic that is currently certified or licensed and in good standing with **another state may**~~{a state contiguous to Kentucky shall}~~ be eligible for reciprocity at the same certification or licensure level in accordance with administrative regulations promulgated in accordance with KRS Chapter 13A.
- (3) The Kentucky Board of Emergency Medical Services shall promulgate administrative regulations in accordance with KRS Chapter 13A as necessary to implement the provisions of this section.

➔Section 3. KRS 142.301 is amended to read as follows:

As used in KRS 142.301 to 142.363:

- (1) "Ground ambulance provider" means a ~~Class I, II, or III~~ ground ambulance provider *licensed in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services and designated by the Kentucky Board of Emergency Medical Services to pay an assessment* ~~(described in KRS 311A.030)~~;
- (2) "Assessment" means the Medicaid ambulance service provider assessment established in KRS 142.318;
- (3) "Department" means the Department of Revenue;
- (4) "Charitable provider" means any provider which does not charge its patients for health-care items or services, and which does not seek or accept Medicare, Medicaid, or other financial support from the federal government or any state government. The collaboration with public hospitals, agencies, or other providers in the delivery of patient care; affiliation with public institutions to provide health-care education; or the pursuit of research in cooperation with public institutions or agencies shall not be considered as the receipt of government support by a charitable provider;
- (5) "Dispensing" means to deliver one (1) or more doses of a prescription drug in a suitable container, appropriately labeled for subsequent administration or use by a patient or other individual entitled to receive the prescription drug;
- (6) "Entity" means any firm, partnership, joint venture, association, corporation, company, joint stock association, trust, business trust, syndicate, cooperative, or other group or combination acting as a unit;
- (7) "Gross revenues" means the total amount received in money or otherwise by a provider for the provision of health-care items or services in Kentucky, less the following:
 - (a) Amounts received by any provider as an employee or independent contractor from another provider for the provision of health-care items or services if:
 1. The employing or contracting provider receives revenue attributable to health-care items or services provided by the employee or independent contractor receiving payment; and
 2. The employing or contracting provider is subject to the tax imposed by KRS 142.303, 142.307, 142.309, 142.311, 142.314, 142.315, 142.316, 142.361, or 142.363 on the receipt of that revenue;
 - (b) Amounts received as a grant or donation by any provider from federal, state, or local government or from an organization recognized as exempt from federal income taxation under Section 501(c)(3) of the Internal Revenue Code for:
 1. Research; or
 2. Administrative or operating costs associated with the implementation and operation of an experimental program;
 - (c) Salaries or wages received by an individual provider as an employee of a charitable provider, the federal government, or any state or local governmental entity;
 - (d) Salaries or wages received by an individual provider as an employee of a public university for the provision of services at a student health facility; and
 - (e) Amounts received by an HMO on a fixed, prepayment basis as premium payments;
- (8) "Health-care items or services" means:
 - (a) Inpatient hospital services;
 - (b) Outpatient hospital services;
 - (c) Nursing-facility services;
 - (d) Services of intermediate-care facilities for individuals with intellectual disabilities;
 - (e) Physicians' services provided prior to July 1, 1999;
 - (f) Licensed home-health-care-agency services;

- (g) Outpatient prescription drugs;
 - (h) HMO services;
 - (i) Regional community services for mental health and individuals with intellectual disabilities;
 - (j) Psychiatric residential treatment facility services;
 - (k) Medicaid managed care organization services; and
 - (l) Supports for community living waiver program services;
- (9) "Health-maintenance organization" or "HMO" means an organization established and operated pursuant to the provisions of Subtitle 38 of KRS Chapter 304;
- (10) "Hospital" means an acute-care, rehabilitation, or psychiatric hospital licensed under KRS Chapter 216B;
- (11) "Hospital services" means all inpatient and outpatient services provided by a hospital. "Hospital services" does not include services provided by a noncontracted, university-operated hospital, or any freestanding psychiatric hospital, if necessary waivers are obtained by the Cabinet for Human Resources, Cabinet for Health Services, or Cabinet for Health and Family Services from the Health Care Financing Administration or Centers for Medicare and Medicaid Services, or hospitals operated by the federal government;
- (12) "Health and family services secretary" means the secretary of the Cabinet for Health and Family Services or that person's authorized representative;
- (13) "Inpatient hospital services," "outpatient hospital services," "intermediate-care-facility services for individuals with intellectual disabilities," "physician services," "licensed home-health-care-agency services," and "outpatient prescription drugs" have the same meaning as set forth in regulations promulgated by the Secretary of the Department of Health and Human Services and codified at 42 C.F.R. pt. 440, as in effect on December 31, 1993;
- (14) "Medicaid" means the state program of medical assistance as administered by the Cabinet for Health and Family Services in compliance with 42 U.S.C. sec. 1396;
- (15) "Nursing-facility services" means services provided by a licensed skilled-care facility, nursing facility, nursing home, or intermediate-care facility, excluding services provided by intermediate-care facilities for individuals with intellectual disabilities and services provided through licensed personal care beds;
- (16) "Person" means any individual, firm, partnership, joint venture, association, corporation, company, joint stock association, estate, trust, business trust, receiver, trustee, syndicate, cooperative, assignee, governmental unit or agency, or any other group or combination acting as a unit and the legal successor thereof;
- (17) "Provider" means any person receiving gross revenues for the provision of health-care items or services in Kentucky, excluding any facility operated by the federal government;
- (18) "Commissioner" means the commissioner of the Department of Revenue or that person's authorized representative;
- (19) "Total bed capacity" means the combination of licensed nursing home beds, licensed nursing facility beds, and licensed intermediate-care facility beds;
- (20) "Regional community services programs for mental health and individuals with an intellectual disability" means programs created under the provisions of KRS 210.370 to 210.480;
- (21) "Psychiatric residential treatment facility" has the same meaning as provided in KRS 216B.450; and
- (22) "Supports for Community Living Waiver Program" has the same meaning as provided in KRS 205.6317.

➔Section 4. KRS 205.5602 is amended to read as follows:

- (1) For purposes of this section and KRS 205.5601 and 205.5603:
- (a) "Ground ambulance provider" means a ~~{Class I, II, or III}~~ground ambulance provider ***licensed in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services***~~{described in KRS 311A.030}~~;
 - (b) "Assessment" means the Medicaid ambulance service provider assessment imposed in KRS 142.318;
 - (c) "Board" means the Kentucky Board of Emergency Medical Services;

- (d) "Commissioner" means the commissioner of the Department for Medicaid Services; and
 - (e) "Department" means the Department for Medicaid Services.
- (2) The department shall:
- (a) Promulgate administrative regulations to establish the standards and procedures necessary to implement the provisions of this section and KRS 205.5601 and 205.5603;
 - (b) Calculate an assessment on emergency ground transport collections pursuant to subsection (3) of this section;
 - (c) Administer assessment proceeds according to subsection (6) of this section;
 - (d) Apply uniformly to all assessed ground ambulance providers any annual changes to the assessment rate according to the process described in subsection (3) of this section; and
 - (e) Evaluate current ground ambulance provider reimbursement rates paid by managed care organizations and require increases consistent with:
 - 1. KRS 205.5601 and this section;
 - 2. Current fee-for-service reimbursement rates; and
 - 3. An adequate network of ambulance service providers.
- (3) (a) The assessment due from a ground ambulance provider on emergency ground transport collections shall be not less than one-half of one percent (0.5%) lower than the maximum limit for a provider assessment as approved by the Centers for Medicare and Medicaid Services.
- (b) For illustrative purposes only, if the maximum limit for a provider assessment as approved by the Centers for Medicare and Medicaid Services is six percent (6%) of the emergency revenues collected by the ground ambulance provider, the minimum taxable limit under this section would be five and one-half percent (5.5%) of the emergency revenues collected.
- (4) The assessment shall not generate more than the maximum amount as approved by the Centers for Medicare and Medicaid Services.
- (5) (a) 1. Within ninety (90) days after July 15, 2020, the commissioner shall determine whether a state plan amendment or an amendment to any Kentucky federal Medicaid waiver is required to implement this section.
2. If the commissioner determines that a state plan amendment or an amendment to a Kentucky federal waiver is necessary, the commissioner is authorized to seek any necessary state plan or waiver amendment, and the assessment shall not take effect until the state plan or waiver amendment is approved.
- (b) The assessment shall not be implemented until the first day of the calendar quarter after the Department for Medicaid Services receives notice of federal matching funds approval from the Centers for Medicare and Medicaid Services and has notified the Department of Revenue of that approval.
- (c) The commissioner shall implement this section to the extent that it is not inconsistent with the state Medicaid plan or any Kentucky federal Medicaid waivers.
- (d) Payments to ground ambulance providers shall begin within ninety (90) days of the later of the approval of federal matching funds, the state plan, or waiver amendment. The first monthly assessment payment shall be due sixty (60) days after the implementation of the enhanced fee schedule.
- (6) The assessment shall be administered as follows:
- (a) An annual amount of two hundred thousand dollars (\$200,000) shall be returned to the department to offset the Medicaid administration expenses;
 - (b) The remaining portion of the assessment shall:
 - 1. Be utilized to increase the rates paid by a managed care organization for emergency ambulance services up to the amount paid by the fee-for-service Medicaid program for emergency ambulance services; or

2. Be paid as supplemental payments to ground ambulance providers in a proportional amount according to the total Medicaid ambulance transports; and
- (c) If any funds are remaining after the department's duties have been completed under paragraph (b) of this subsection, the remaining funds shall be utilized by the department to increase non-emergency medical transport rates.
- (7) Each ground ambulance provider shall report to the board, at the time and in the manner required by the board, ground emergency revenue collected to accomplish the purposes of this section and KRS 205.5603.
- (8) (a) No more than one hundred eighty (180) days after the end of each calendar year, the board shall submit to the cabinet transport data for all ground ambulance providers licensed in Kentucky.
- (b) The data required by paragraph (a) of this subsection shall, at a minimum, include the number of emergency ground transports completed during the previous calendar year and the emergency revenue collected.

➔Section 5. KRS 211.9523 is amended to read as follows:

- (1) The category of nonemergency health transportation provider shall be abolished effective December 31, 1996.
- (2) A provider licensed as of March 31, 1996, as a nonemergency health transportation provider may apply to convert to either a disabled persons carrier pursuant to KRS 281.6185 or ***a ground ambulance service licensed and authorized in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services***~~[a Class II ground ambulance provider]~~ without requiring an additional certificate of need. Prior to licensure or certificate approval, the provider shall meet the respective licensing or certificate requirements.
- (3) No later than August 15, 1996, the Cabinet for Human Resources shall notify each nonemergency health transportation provider of the provisions of this section and the procedures necessary to apply for the conversion.
- (4) To apply for the conversion provided for in subsection (2) of this section, each nonemergency health transportation provider shall notify the appropriate agency of its intentions within ninety (90) days of July 15, 1996, or cease to act as a nonemergency health transportation provider effective December 31, 1996.

➔Section 6. KRS 311A.010 is amended to read as follows:

As used in this chapter, unless the context otherwise requires:

- (1) "Advanced emergency medical technician" or "AEMT" means a person certified by the board under this chapter as an advanced emergency medical technician;
- (2) "Advanced practice paramedic" or "APP" means a paramedic licensed by the board under this chapter as a paramedic and certified by the board under this chapter in at least one (1) emergency medical services subspecialty, including community paramedic, critical care paramedic, wilderness paramedic, tactical paramedic, or flight paramedic;
- (3) "Ambulance" means a vehicle which has been inspected and approved by the board, including a helicopter or fixed-wing aircraft, except vehicles or aircraft operated by the United States government, that are specially designed, constructed, or have been modified or equipped with the intent of using the same, for the purpose of transporting any individual who is sick, injured, or otherwise incapacitated who may require immediate stabilization or continued medical response and intervention during transit or upon arrival at the patient's destination to safeguard the patient's life or physical well-being;
- (4) "Ambulance provider" ***or "ambulance service"*** means any individual or private or public organization, except the United States government, who is licensed by the board to provide medical services that may include transport at either basic life support level or advanced life support level and who may have a vehicle or vehicles, including ground vehicles, helicopters, or fixed-wing aircraft, to provide such transportation~~[-. An ambulance provider may be licensed as a Class I, II, III, or IV ground ambulance provider, a Class VI medical first response provider, a Class VII air ambulance provider, or a Class VIII event medicine provider];~~
- (5) "Board" means the Kentucky Board of Emergency Medical Services;
- (6) "Community paramedic" or "CP" means an advanced practice paramedic certified under this chapter as a CP;

- (7) "Emergency medical facility" means a hospital or any other institution licensed by the Cabinet for Health and Family Services that furnishes emergency medical services;
- (8) "Emergency medical responder" or "EMR" means a person certified under this chapter as an EMR or EMR instructor;
- (9) "Emergency medical services" or "EMS" means the services utilized in providing care for the perceived individual need for immediate medical care to protect against loss of life, or aggravation of physiological or psychological illness or injury;
- (10) "Emergency medical services educator" or "EMS educator" means a person who is certified and licensed by the board under this chapter as a Level I, II, or III EMS educator to provide emergency medical services education and training with the scope of practice established by the board through administrative regulations;
- (11) "Emergency Medical Services for Children Program" or "EMSC Program" means the program established under this chapter;
- (12) "Emergency medical services medical director" means a physician licensed in Kentucky and certified by the board under this chapter who is employed by, under contract to, or has volunteered to provide supervision for a paramedic or an ambulance service, or both;
- (13) "Emergency medical services personnel" means:
 - (a) Persons trained to provide emergency medical services and certified or licensed by the board under this chapter as an AEMT, APP, EMR, EMR instructor, EMT, EMT instructor, paramedic, or paramedic instructor; and
 - (b) Authorized emergency medical services medical directors and mobile integrated healthcare program medical directors, whether on a paid or volunteer basis;
- (14) "Emergency medical services system" means a coordinated system of health-care delivery that responds to the needs of acutely sick and injured adults and children, and includes community education and prevention programs, mobile integrated healthcare programs, centralized access and emergency medical dispatch, communications networks, trained emergency medical services personnel, medical first response, ground and air ambulance services, trauma care systems, mass casualty management, medical direction, and quality control and system evaluation procedures;
- (15) "Emergency medical services training or educational institution" means any organization licensed by the board under this chapter to provide emergency medical services training or education or in-service training, other than a licensed ambulance service which provides training, or in-service training in-house for its own employees or volunteers;
- (16) "Emergency medical technician" or "EMT" means a person certified under this chapter as an EMT or EMT instructor;
- (17) "Executive director" means the executive director of the Kentucky Board of Emergency Medical Services;
- (18) "Mobile integrated healthcare" or "MIH" means a program licensed by the board under this chapter to provide services including evaluation, advice, and medical care for the purpose of preventing or improving a particular medical condition outside of a hospital setting to eligible patients who do not require or request emergency medical transportation;
- (19) "Mobile integrated healthcare program medical director" or "MIH program medical director" means a physician licensed in Kentucky and certified by the board under this chapter who is employed by, under contract to, or has volunteered to provide supervision for a licensed MIH program;
- (20) "Paramedic" means a person who is involved in the delivery of medical services and is licensed under this chapter;
- (21) "Paramedic preceptor" means a licensed paramedic who supervises a paramedic student during the field portion of the student's training;
- (22) "Prehospital care" means the provision of emergency medical services, mobile integrated healthcare, or transportation by trained and certified or licensed emergency medical services personnel at the scene or while transporting sick or injured persons to a hospital or other emergency medical facility; and
- (23) "Trauma" means a single or multisystem life-threatening or limb-threatening injury requiring immediate medical or surgical intervention or treatment to prevent death or permanent disability.

➔Section 7. KRS 311A.170 is amended to read as follows:

- (1) Subject to the provisions of this section, a paramedic may perform any procedure:
 - (a) Specified in the most recent curriculum of the United States Department of Transportation training course for paramedics; and
 - (b) Any additional procedure specified by the board by administrative regulation.
- (2) When there is a change in the United States Department of Transportation curriculum for paramedics, or the board approves an additional skill or procedure by administrative regulation, or approves a protocol differing from the curriculum or administrative regulations, no person who was not trained under that curriculum or administrative regulation shall perform any activity or procedure in the new curriculum, administrative regulation, or protocol unless the person has been trained according to the new curriculum, administrative regulation, or protocol and demonstrates competency in the new knowledge or skill. Competency in a new skill shall be demonstrated through a return demonstration to a competent evaluator. If the board adopts the new procedure or skill, the board shall promulgate an administrative regulation specifying the new procedure, training requirements, examination requirements, and a time period during which the paramedic shall successfully complete the material or lose his or her license as a paramedic.
- (3) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A establishing the educational requirements, testing requirements, credentialing, and licensure requirements of advanced practice paramedics. Advanced practice paramedics shall validate competency as prescribed in administrative regulations and be identified as one (1) or more of the following certification levels of advanced practice paramedic:
 - (a) Certified community paramedic;
 - (b) Certified critical care paramedic;
 - (c) Certified flight paramedic;
 - (d) Certified tactical paramedic; or
 - (e) Certified wilderness paramedic.
- (4) A paramedic may draw blood samples from a criminal defendant upon the request of a peace officer and the consent of the defendant, or without the consent of the defendant upon receipt of a court order requiring the procedure, if the paramedic is authorized to do so by his or her employer. The authorization shall be in writing and may be by general written policy of the employer and the service's medical director. The paramedic who drew the blood sample shall deliver the sample to the peace officer or other person specified by the court in a court order and shall testify in court with regard thereto upon service of a proper subpoena.
- (5) A paramedic shall be permitted to render services only under the supervision of a certified emergency medical services medical director, certified mobile integrated healthcare program medical director, or under the direct supervision of an emergency department medical director.
- (6) A paramedic holding board certification as a community paramedic may provide mobile integrated healthcare services only as an employee of a mobile integrated healthcare program **licensed and authorized in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services** ~~holding a Class V mobile integrated healthcare license in affiliation with a Class I ground ambulance provider~~.
- (7) Any provision of this chapter other than this section relating to the requirement for additional training, requirement for skill examination, or approval of standing orders, protocols, or medical procedures to the contrary notwithstanding, a paramedic may be employed by a hospital to work as a licensed paramedic in the emergency department of the hospital subject to the following conditions:
 - (a) The hospital in collaboration with the medical staff shall provide operating procedures and policies under which the paramedic shall operate consistent with the paramedic's scope of practice;
 - (b) A paramedic shall provide patient care services under the orders of a physician, physician assistant, advanced practice registered nurse, or as delegated by a registered nurse;

- (c) Subject to the provisions relating to the scope of practice of a paramedic, a hospital may require a paramedic to take additional training on any subject or skill which the paramedic may be required to perform in a hospital and demonstrate competency in the skill or subject to a competent evaluator; and
- (d) The paramedic does not violate the provisions of KRS 311A.175 or any other statute or administrative regulation relating to a paramedic.

No provision of this section shall prevent a paramedic from being employed in any other section of the hospital where the paramedic's job duties do not require certification or licensure by the board and do not otherwise constitute the unlawful practice of medicine.

- (8) Except as provided in subsection (2) of this section, nothing in this section shall prevent an employer from exercising reasonable fiscal control over the costs of providing medical services to its citizens nor prevent the employer from exercising any reasonable control over paramedics providing care on behalf of the licensed entity.

➔Section 8. KRS 405.075 is amended to read as follows:

- (1) As used in this section:

- (a) "Newborn infant" means an infant who is medically determined to be less than thirty (30) days old;
- (b) "Newborn safety device" means a device:
 1. Designed to permit a parent to anonymously place a newborn infant in the device with the intent to leave the newborn and for an emergency medical services provider to remove the newborn from the device and take custody of the newborn infant;
 2. Installed with an adequate dual alarm system connected to the physical location where the device is physically installed. The dual alarm system shall be:
 - a. Tested at least one (1) time per month to ensure the alarm system is in working order; and
 - b. Visually checked at least two (2) times per day to ensure the alarm system is in working order;
 3. Approved by and physically located inside a participating staffed~~{ Class I, Class II, Class III, or Class IV }~~ ground ambulance provider *licensed and authorized in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services*, staffed police station, staffed fire station, or staffed hospital that:
 - a. Is licensed or otherwise legally operating in this state; and
 - b. Is staffed continuously on a twenty-four (24) hour basis every day by a licensed emergency medical services provider; and
 4. Located in an area that is conspicuous and visible to a~~{ Class I, Class II, Class III, or Class IV }~~ ground ambulance provider *licensed and authorized in accordance with administrative regulations promulgated by the Kentucky Board of Emergency Medical Services*, or to police station, fire station, or hospital staff; and
- (c) "Participating place of worship" means a recognized place of religious worship that has voluntarily agreed to perform the duty granted in this section and display signage prominently on its premises regarding its participation in this section and its operating hours during which staff will be present.

- (2) A parent shall have the right to remain anonymous, shall not be pursued, and shall not be considered to have abandoned or endangered a newborn infant under KRS Chapters 508 and 530 if the parent:

- (a) Places a newborn infant:
 1. With an emergency medical services provider;
 2. At a staffed police station, fire station, or hospital;
 3. At a participating place of worship; or
 4. Inside a newborn safety device that meets the requirements of subsection (1) of this section; and
- (b) Expresses no intent to return for the newborn infant.

- (3) (a) Any emergency medical services provider, police officer, or firefighter who accepts physical custody of a newborn infant, or who physically retrieves a newborn infant from a newborn safety device that meets the requirements of subsection (1) of this section, in accordance with this section shall immediately arrange for the infant to be taken to the nearest hospital emergency room and shall have implied consent to any and all appropriate medical treatment.
- (b) Any staff member at a participating place of worship who accepts physical custody of a newborn infant in accordance with this section shall immediately contact the 911 emergency telephone service as set forth in KRS 65.750 to 65.760, wireless enhanced 911 system as set forth in KRS 65.7621 to 65.7643, or emergency medical services as set forth in KRS Chapter 311A for transportation to the nearest hospital emergency room.
- (4) By placing a newborn infant in the manner described in this section, the parent:
- (a) Waives the right to notification required by subsequent court proceedings conducted under KRS Chapter 620 until such time as a claim of parental rights is made; and
- (b) Waives legal standing to make a claim of action against any person who accepts physical custody of the newborn infant.
- (5) A staffed police station, fire station, hospital, emergency medical facility, or participating place of worship may post a sign easily seen by the public stating that: "This facility is a safe and legal place to surrender a newborn infant who is less than 30 days old. A parent who places a newborn infant at this facility and expresses no intent to return for the infant shall have the right to remain anonymous and not be pursued and shall not be considered to have abandoned or endangered their newborn infant under KRS Chapters 508 and 530."
- (6) Actions taken by an emergency medical services provider, police officer, firefighter, or staff member at a participating place of worship in conformity with the duty granted in this section shall be immune from criminal or civil liability. Nothing in this subsection shall limit liability for negligence.
- (7) The provisions of subsection (2) of this section shall not apply when indicators of child physical abuse or child neglect are present.
- (8) KRS 211.951, 216B.190, 405.075, 620.350, and 620.355 shall be known as "The Representative Thomas J. Burch Safe Infants Act."

➔Section 9. The following KRS section is repealed:

311A.185 Determination of death by paramedic -- Notification -- Instruction in making determination -- Administration of life support measures.

➔Section 10. Whereas emergency medical services providers are an essential public service to the well-being of the citizens of the Commonwealth and flexibility in credentialing emergency medical services providers may help to serve the growing need for services, an emergency is declared to exist, and this Act takes effect upon its passage and approval by the Governor or upon its otherwise becoming a law.

Signed by Governor April 5, 2024.