.3	project in Hennepin County; establishing an advisory committee; requiring a report.
.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
.6	Section 1. SPECIAL TRANSPORTATION SERVICES PILOT PROJECT.
.7	Subdivision 1. Project authorized. The Minnesota Ambulance Association and
.8	the Minnesota Paratransit Providers Association shall conduct a pilot project in Hennepin
.9	County to test methods for reducing the unnecessary use of ambulances. The pilot project
.10	shall be initiated on or before January 1, 2010, and continue until June 30, 2011.
.11	Subd. 2. Project requirements. The project shall test the feasibility and
.12	cost-effectiveness of the following protocol:
.13	(1) when a 911 call is received for an ambulance, the ambulance shall respond to
.14	the request for service as assigned by the dispatch center;
.15	(2) upon arrival at the scene, a paramedic must evaluate the patient's medical
.16	condition;
.17	(3) if the paramedic decides that the patient's medical condition is an emergency, the
.18	patient shall be transported in the ambulance to appropriate medical care;
.19	(4) if the paramedic decides the patient's medical condition is not an emergency or
.20	does not require immediate transportation, the paramedic shall discuss transportation
.21	options with the patient. With the agreement of the patient, the paramedic shall request a
.22	special transportation services vehicle to provide transportation to an emergency room,
.23	urgent care setting, clinic, or other appropriate medical facility;

A bill for an act

relating to human services; establishing a special transportation services pilot

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Section 1. 1

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2.1	(5) the paramedic shall remain with the patient until the patient is accepted for
2.2	transport by another service provider; and
2.3	(6) if the special transportation services driver and the paramedic disagree on the
2.4	type of transportation needed by the patient, the decision of the paramedic shall prevail.
2.5	Subd. 3. Reimbursement. Transportation services under the pilot project shall
2.6	be reimbursed as follows:
2.7	(1) when an ambulance responds and transports the patient for care, the ambulance
2.8	service shall charge for care as provided under current law;
2.9	(2) when the ambulance service responds and the paramedic evaluates the patient,
2.10	and the paramedic and patient agree that special transportation services are appropriate to
2.11	transport the patient, \$ shall be paid by medical assistance to the ambulance service,
2.12	of which \$ shall be retained by the ambulance service as a patient assessment fee
2.13	and \$ shall be paid by the ambulance service to the special transportation services
2.14	provider;
2.15	(3) reimbursement rates from health plans, insurers, and other payers shall be
2.16	negotiated with the pilot project; and
2.17	(4) for patients who are uninsured and have no public program eligibility, the
2.18	ambulance service provider shall bill the patient. For patients with no ability to pay, the
2.19	charges shall be absorbed as bad debt by the pilot project participants.
2.20	Subd. 4. Service providers; requirements. (a) Ambulance services for the pilot
2.21	project shall be provided by any licensed ambulance service in Hennepin County that
2.22	agrees to participate in the pilot project.
2.23	(b) Special transportation services for the pilot project shall be provided by special
2.24	transportation service providers under contract to the participating ambulance service
2.25	providers. Special transportation service providers must:
2.26	(1) carry at least \$1,000,000 in liability insurance;
2.27	(2) agree to abide by standard operating procedures approved by the ambulance
2.28	service medical director; and
2.29	(3) provide services 24 hours per day, seven days per week.
2.30	(c) Special transportation service drivers for the pilot project must:
2.31	(1) be uniformed with visible identification; and
2.32	(2) undergo periodic drug testing as outlined in Code of Federal Regulations, title
2.33	49, part 383.
2.34	Subd. 5. Liability. Tort liability for participants in the pilot project shall be limited
2.35	according to Minnesota Statutes, section 466.04. Participants include, but are not limited
2.36	to, the following pilot program participants: special transportation services personnel;

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3.1	owners of special transportation services; ambulance services personnel regulated under
3.2	Minnesota Statutes, chapter 144E; and ambulance service medical directors regulated
3.3	under Minnesota Statutes, chapter 144E.
3.4	Subd. 6. Privacy requirements; data sharing. Participating ambulance services
3.5	and special transportation services must include in their contracts guidelines for sharing
3.6	data according to state and federal privacy requirements.
3.7	Subd. 7. Advisory committee. The Minnesota Ambulance Association and the
3.8	Minnesota Paratransit Providers Association shall establish a pilot project advisory
3.9	committee. Membership shall include a representative of the Hennepin County Emergency
3.10	Medical Services Council; the Minnesota Emergency Medical Services Regulatory Board;
3.11	the Minnesota Council of Health Plans; the Department of Human Services; the American
3.12	College of Emergency Physicians; and a medical director from each participating
3.13	emergency ambulance service.
3.14	Subd. 8. Report. The Minnesota Ambulance Association and the Minnesota
3.15	Paratransit Providers Association, in consultation with the advisory committee, shall report
3.16	to the house of representatives and senate policy and finance committees with jurisdiction
3.17	over health care by March 1, 2011, regarding the pilot project. The report shall include:
3.18	(1) a recommendation on whether the pilot project should be expanded or modified;
3.19	(2) data on the number of patients directed to alternative transportation, including
3.20	the type of alternative transportation provided and the destination of the trip; and
3.21	(3) estimated savings to the medical assistance program, health plans, and other
3.22	payers.

Section 1. 3