

CHAPTER 5-C. HEALTH PROVISIONS: EMERGENCY MEDICAL SERVICES
PART I. GENERAL PROVISIONS

§1131. Definitions

For purposes of this Chapter:

- (1) "Air ambulance" means any aircraft, either fixed-wing or rotary-winged, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such.
- (2) "Air ambulance service" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in air ambulances, individuals who may need medical attention during transport.
- (3) "Ambulance" means any authorized emergency vehicle, equipped with warning devices, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such. "Ambulance" shall not mean a hearse or other funeral home vehicle utilized for the transportation of the dead.
- (4) "Ambulance service" or "ambulance provider" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in ambulances, individuals who may need medical attention during transport. However, "ambulance service" and "ambulance provider" shall not include any of the following:
 - (a) An agency of the federal government.
 - (b) A volunteer nonprofit organization or municipal nonprofit organization operating an invalid coach or coaches.
 - (c) An entity rendering assistance to a licensed ambulance or ambulances in the case of a major disaster.
 - (d) A licensed hospital providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital.
 - (e) An entity operating an ambulance or ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport a patient or patients from a medical facility inside of the state to a location outside of the state.
 - (f) An entity providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.
- (5) "Auto-injector" means a spring-loaded needle and syringe with a single dose of epinephrine that will automatically release and inject the medicine.
- (6) "Bureau" means the Department of Health and Hospitals, bureau of emergency medical services.
- (7) "Commission" means the Louisiana Emergency Medical Services Certification Commission.
- (8) "Department" means the Department of Health and Hospitals.
- (9) "Emergency medical response vehicle" means a marked emergency vehicle with fully visual and audible warning signals operated by a certified ambulance service, the primary purpose of which is to respond to the scene of a medical emergency to provide emergency medical stabilization or support, or command, control, and communications, but which is not an ambulance designed or intended for the purpose of transporting a victim from the scene to a medical facility regardless of its designation. Included are such vehicles referred to but not limited to the designation as "sprint car", "quick response vehicle", "special response vehicle", "triage trucks", "staff cars", "supervisor units", and other similar designations. Emergency medical response vehicles shall not include fire apparatus and law enforcement patrol vehicles which carry first aid or emergency medical supplies and which respond to medical emergencies as part of their routine duties.
- (10) "Emergency medical services" or "EMS" means a system that represents the combined efforts of several professionals and agencies to provide prehospital emergency care to the sick and injured.
- (11) "EMS medical director" means a physician licensed by the Louisiana State Board of Medical Examiners who has responsibility and authority to ensure quality of care and provide guidance for all medical aspects of EMS.
- (12) "EMS practitioner" means an individual who is a licensed emergency medical responder, licensed emergency medical technician, licensed advanced emergency medical technician, or a licensed paramedic.

- (13) "EMS task force" means the Emergency Medical Services Task Force, composed of individuals subject to the approval of the secretary of the department, which advises and makes recommendations to the bureau of emergency medical services and the department on matters related to emergency medical services.
- (14) "Industrial ambulance" means any vehicle owned and operated by an industrial facility and used for transporting any employee who becomes sick, injured, or otherwise incapacitated in the course and scope of his employment from a job site to an appropriate medical facility.
- (15) "Licensed emergency medical responder" means any individual who has successfully completed an emergency medical responder education program based on National EMS Education Standards approved by the bureau and who is licensed by the bureau.
- (16) "Licensed emergency medical services practitioner" means an individual who is a licensed emergency medical responder or who is nationally registered, who has successfully completed an emergency medical services practitioner education program based on national EMS education standards, and who is licensed as any one of the following:
 - (a) A licensed emergency medical technician.
 - (b) A licensed advanced emergency medical technician.
 - (c) A licensed paramedic.
- (17) "Moral turpitude" means an act of baseness, vileness, or depravity in the duties which one person owes another, or to society in general, which is contrary to the usual, accepted, and customary rule of right and duty which a person should follow.
- (18) "Municipal nonprofit organization" means an organization owned by a parish, municipality, or entity of a parish or municipality which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician.
- (19) "National EMS education standards" means the document that outlines current nationally recognized EMS education standards, has been adopted by the bureau, and defines terminal objectives for each nationally defined EMS licensing level.
- (20) "Physician" means a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.
- (21) "Volunteer nonprofit organization" means an organization which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician and which is chartered as a nonprofit organization under Section 501(c) of the United States Internal Revenue Code, as a volunteer fire department by the Louisiana state fire marshal's office, or as a nonprofit organization by the Louisiana secretary of state.
- (22) "Reciprocity" means the application process by which an EMS Practitioner who is licensed or certified in another state or who has completed the National Registry certification process in another state is licensed by the Bureau of EMS.
- (23) "Inactive" means an EMS Practitioner who is not employed by an EMS Provider and/or an EMS Practitioner who does not have a Medical Director that can verify psychomotor skill competency.
- (24) "EMS Professional" means and EMS Practitioner (Paramedic, Advanced Emergency Medical Technician, Emergency Medical Technician, or Emergency Medical Responder) who is certified by the National Registry of EMTs and/or is licensed to practice in the state of Louisiana by the Louisiana Bureau of EMS.

Amended by Acts 1968, No. 278, §1; Acts 1976, No. 393, §1; Acts 1977, No. 626, §1; Acts 1978, No. 469, §1; Acts 1978, No. 786, §5, eff. July 17, 1978; Acts 1979, No. 554, §1; Acts 1985, No. 750, §1, eff. Jan. 1, 1987; Acts 1991, No. 974, §1, eff. July 24, 1991; Acts 1997, No. 297, §2; Acts 1997, No. 913, §2; Acts 1999, No. 1113, §1; Acts 1999, No. 1114, §1; Acts 2001, No. 385, §1; Acts 2001, No. 625, §2; Acts 2003, No. 208, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1231 by HCR 84 of 2015 R.S.

§1131.1. Emergency medical services program; cooperation of other state departments

- A. The department shall establish and maintain a program for the improvement and regulation of emergency medical services in the state. The responsibility for implementation and conduct of this program shall be vested in the bureau of emergency medical services.

- B. The bureau shall develop a state plan for the prompt and efficient delivery of adequate emergency medical services to acutely sick and injured individuals.
- C. The bureau shall serve as the primary agency for participation in any federal program involving emergency medical services and may receive and, pursuant to legislative appropriation, disburse available federal funds to implement any service program.
- D. The bureau shall identify all public and private agencies, institutions, and individuals that are or may be engaged in emergency medical services training and set minimum standards for course approval, instruction, and examination.
- E. The department shall promulgate and enforce such rules, regulations, and minimum standards as needed to carry out the provisions of this Section.

Added by Acts 1977, No. 502, §1, eff. July 13, 1977. Amended by Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1231.1 by HCR 84 of 2015 R.S.

§1131.2. Immunity from civil damages

No parish, specialty, component, or state medical society or organization, or its designee, which is statutorily mandated by this Chapter to participate without compensation or gratuitously participates in an emergency services system, nor any committee of such parish, specialty, component, or state medical society or organization, including the individual members of such committee, or its designee, shall be liable for any civil damages as a result of any act or omission in the performance of their administrative duties or donated services with such emergency services system, including, without limitation, advice, instructions, or other duties regarding policy, protocol, administration, and efficiency of the emergency medical services system. The immunity extended to a parish, specialty, component, or state medical society or organization, or any committee thereof, including the individual members of such committee, including their insurers, or its designee, shall not be applicable for willful or wanton acts or omissions. The immunity extended herein shall be applicable only to an action brought by the person damaged as a result of the performance of any administrative duties or donated services rendered pursuant to the provisions of this Section.

Added by Acts 1979, No. 554, §2. Amended by Acts 1990, No. 428, §1; Acts 1997, No. 913, §2; Redesignated from R.S. 40:1231.2 by HCR 84 of 2015 R.S.

PART II. EMERGENCY MEDICAL PERSONNEL

§1133.1. Emergency medical personnel training; licensure

- A. The bureau shall promulgate rules and regulations in accordance with the Administrative Procedure Act for the following:
 - (1) To define and authorize appropriate education programs based on national EMS education standards for emergency medical services practitioners. All such education programs shall meet or exceed national EMS education standards.
 - (2) To specify minimum operational requirements which will ensure medical direction, supervision, and control over emergency medical services.
 - (3) To specify minimum examination and continuing education requirements for all emergency medical services practitioners.
 - (4) To provide for the issuance of licenses, renewals of licenses, and requirements for emergency medical services practitioners.
 - (5) To establish fees for licensure and license renewal.
- B. An individual petitioning for licensure or license renewal as an emergency medical services practitioner shall submit an application to the bureau on forms provided by the bureau. The application shall be accompanied by the appropriate fee.
- C. The bureau shall affirmatively provide that there is no discrimination toward any individual in the licensure process on the basis of race, religion, creed, national origin, sex, or age.

Amended by Acts 1976, No. 393, §§2, 3; Acts 1977, No. 626, §1; Acts 1985, No. 750, §1, eff. Jan. 1, 1987; Acts 1987, No. 665, §2, eff. July 9, 1987; Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Acts 2013, No. 220, §17, eff. June 11, 2013; Redesignated from R.S. 40:1232 by HCR 84 of 2015 R.S.

§1133.2. Fee schedule; fees for license prohibited

A.

- (1) The bureau shall not require or collect any fee or charges for licensure or license renewal of emergency medical services practitioners who serve as such on a voluntary basis and who receive no compensation of any kind for such services.
- (2) The bureau shall not set the fee for licensure of an emergency medical technician to exceed fifteen dollars for any individual who is an employee or volunteer of the state of Louisiana or another public entity, a municipal fire department, a fire protection district, a volunteer fire department, or a municipal law enforcement agency who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.
- (3) The bureau shall not set the fee for license renewal of an emergency medical technician to exceed ten dollars for any individual who is an employee or volunteer of the state of Louisiana or another public entity, a municipal fire department, a fire protection district, a volunteer fire department, or a municipal law enforcement agency who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.

B. Except as provided in Subsection A of this Section, the bureau shall assess fees for testing and licenses based on the following schedule:

(1) Test fees:	Fee
(a) Emergency medical responder written only	\$ 15.00
(b) Emergency medical responder written only (out of state)	15.00
(c) Emergency medical technician initial written & practical <u>full psychomotor exam</u>	60.00
(d) Emergency medical technician entire practical exam	30.00
(e) Emergency medical technician partial practical <u>psychomotor exam</u>	15.00
(f) Emergency medical technician testing/retesting written only	15.00
(g) Emergency medical technician testing/retesting written only (out of state)	15.00
(h) Advanced emergency medical technician initial written & practical <u>full psychomotor exam</u>	75.00
(i) Advanced emergency medical technician initial written & practical <u>full psychomotor exam</u> (out of state)	100.00
(j) Advanced emergency medical technician retest entire practical	50.00
(k) Advanced emergency medical technician retest entire practical (out of state)	65.00
(l) Advanced emergency medical technician retest partial practical <u>psychomotor exam</u>	30.00
(m) Advanced emergency medical technician retest partial practical <u>psychomotor exam</u> (out of state)	30.00
(n) Advanced emergency medical technician testing/retesting written only (exam only)	15.00
(o) Advanced emergency medical technician testing/retesting written only (exam only) (out of state)	15.00
(p) Paramedic initial written & practical <u>full psychomotor exam</u>	90.00
(q) Paramedic initial written & practical <u>full psychomotor exam</u> (out of state)	125.00
(r) Paramedic retesting-entire practical	60.00
(s) Paramedic retesting-entire practical (out of state)	75.00
(t) Paramedic retesting-partial practical <u>psychomotor exam</u>	35.00
(u) Paramedic retesting-partial practical <u>psychomotor exam</u> (out of state)	40.00
(v) Paramedic testing/retesting written	15.00
(w) Paramedic testing/retesting written (out of state)	15.00
(2) License fees	
(a) Emergency medical responder	10.00
(b) Emergency medical technician	30.00
(c) Advanced emergency medical technician	40.00
(d) Paramedic	50.00
(3) Recertification	
(a) Emergency medical responder	5.00
(b) Emergency medical technician	25.00

(c) Advanced emergency medical technician	35.00
(d) Paramedic	45.00
(4) Reciprocity	
(a) Emergency medical technician	60.00
(b) Advanced emergency medical technician	80.00
(c) Paramedic	100.00

C. The department may adopt rules and regulations in accordance with the Administrative Procedure Act to provide for the collection of fees required by the fee schedule provided in this Section.

Acts 1997, No. 913, §2; Acts 2001, No. 515, §1; Acts 2010, No. 935, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.1 by HCR 84 of 2015 R.S.

§1133.3. Louisiana Emergency Medical Services Certification Commission; creation; membership; qualifications; terms; vacancies; meetings; officers; compensation; domicile

A. The Louisiana Emergency Medical Services Certification Commission is hereby created within the Department of Health and Hospitals.

B.

- (1) The commission shall be composed of ~~fourteen~~ ~~eleven~~ voting members appointed by the governor as follows:
 - (a) Two emergency medical services administrators, including one representing the private sector and one representing the public sector.
 - (b) ~~Five~~ ~~Two~~ licensed ~~EMS Practitioners paramedics and one licensed emergency medical technician~~ who are approved as emergency medical services educators by the bureau. At least one of the members as provided in this Subparagraph shall be appointed by the Louisiana Fire Chiefs Association.
 - (c) Four physicians, one from each of the following organizations:
 - (i) The American College of Emergency Physicians.
 - (ii) The American College of Surgeons.
 - (iii) The Louisiana State Medical Society.
 - (iv) The American Academy of Pediatrics.
 - (d) One member who is, at a minimum, a state-certified emergency medical technician nominated by the Louisiana Municipal Association.
 - (e) One member nominated by the Professional Firefighters Association of Louisiana.

- (2) The commission shall also have one voting member appointed by the governor who is a registered nurse and who is a state-licensed paramedic to be nominated by the Louisiana State Nurses Association from a list of two names submitted by the Louisiana Emergency Nurses Association.

C. Each member of the commission shall be a resident of Louisiana for at least one year, have had three years experience in his respective field of practice, and be actively engaged in the practice of emergency medical services at the time of his appointment.

D.

- (1) The initial voting members of the commission shall be appointed no later than October 1, 1997, from a list of two nominees for each appointment submitted by the task force. If the task force fails to submit a list of nominees to the governor by September 1, 1997, the governor shall appoint the respective members of the commission without the nomination list required by this Section.
- (2) ~~The nonvoting member shall be appointed to serve terms of three years. The initial member shall be appointed by the governor to an initial term of three years by October 1, 1997 or within thirty days of receipt of the list from the Louisiana State Nurses Association, whichever is later.~~

E. Each appointment by the governor shall be submitted to the Senate for confirmation.

F.

- (1) The voting members appointed to the commission shall serve as follows: three members shall be appointed to serve an initial term of one year; three members shall be appointed to serve an initial term of two years; and three members shall be appointed to serve an initial term of three years. Thereafter, each member shall be appointed to serve a term of three years.

- (2) No individual shall serve more than two consecutive terms.
- G. Subsequent to the appointment of the initial members, the voting members shall be appointed from a list of two nominees for each appointment submitted by the task force. No later than thirty days prior to the termination date of a member's term, the task force shall submit a list of nominees to the governor. If the Louisiana State Nurses Association or the task force fails to submit the required list of nominees to the governor within thirty days, the governor shall appoint the respective member to fill the vacancy without the nomination list required.
- H. The governor shall call the first meeting of the commission no later than November 30, 1997. At a minimum, the commission shall meet on a quarterly basis and, in addition, shall meet when called by the chairman or upon the written request of at least four voting members of the commission.
- I. The commission shall annually elect a chairman, vice chairman, and secretary from among its voting membership and shall maintain a record of the attendance of its members at commission meetings.
- J. For each day while performing his official duties, a member of the commission may be reimbursed for expenses and mileage at the same rate set by the division of administration for state employees under the provisions of R.S. 39:231.
- K. The commission shall be domiciled in Baton Rouge.
- L. The governor shall remove a member of the commission after a hearing by the commission during which charges for removal have been established and provided that a majority of the members have recommended removal.

Acts 1997, No. 913, §2; Acts 2010, No. 329, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.2 by HCR 84 of 2015 R.S.

§1133.4. Powers and duties of the commission; exceptions

- A. The commission shall:
- (1) Recommend to the bureau requirements and standards of practice for individuals seeking to be certified under this Part.
 - (2) Approve requirements and standards of practice submitted by the bureau for emergency medical services practitioners consistent with this Part.
 - (3) Recommend continuing education requirements and standards to the bureau in accordance with criteria established by the National Registry of Emergency Medical Technicians for individuals seeking to renew a license.
 - (4) Conduct disciplinary hearings for emergency medical personnel.
 - (5) Request that the bureau conduct investigations as necessary.
 - (6) Cause the prosecution of any individual who violates any provision of this Part.
 - (7) Maintain a record of all commission proceedings.
 - (8) Adopt rules and regulations to implement the provisions of this Part in accordance with the Administrative Procedure Act, R.S. 49:950 et seq.
- B. Except as they relate to scope of practice or patient care issues, Paragraphs (A)(4), (5), and (6) of this Section shall not apply to anyone who is a volunteer of or employed by the state of Louisiana or another public entity, a municipal fire department, a fire protection district, or a volunteer fire department who has successfully completed an education program based on national EMS education standards and who possesses a current national certification and state license, until the commission has forwarded the nonmedical practice complaint to the local governing body and received a response with investigative results and any disciplinary disposition. In the event that the local governing body does not send a response or request for extension to the commission within sixty days after receipt of the complaint, the commission may proceed with the powers and duties as defined in Subsection A of this Section. Notwithstanding any law to the contrary, in the event the commission determines by a two-thirds vote of the membership of the commission that public health and safety would be jeopardized by waiting for a response from the local governing authority, the commission shall have the right to exercise its powers and duties as provided in Subsection A of this Section without receipt of an investigative report from the local governing authority or the expiration of the sixty-day period as provided in this Subsection.

C. The EMS Certification Commission shall:

- (1) Have the authority to:

- (a) Request and obtain state and national criminal history record information on any person applying for any license or permit which the Bureau of EMS is authorized by law to issue, including permission to enroll as a student EMS Practitioner in clinical EMS courses.
 - (b) Require any applicant for any license or permit, which the Bureau of EMS is authorized to issue, including permission to enroll as a student in clinical EMS courses, to submit a full set of fingerprints, in a form and manner prescribed by the EMS Certification Commission, as a condition to the Bureau of EMS' consideration of his or her application.
 - (c) Charge and collect from an applicant for any license or permit which the Bureau of EMS is authorized to issue, including permission to enroll as a student in EMS clinical courses, in addition to all other applicable fees and costs, such amount as may be incurred by the Bureau of EMS in requesting and obtaining criminal history record information on the applicant.
 - (d) Promulgate rules and regulations in accordance with the Administrative Procedure Act to implement the provisions of the Paragraph.
- (2) Have the authority and jurisdiction to regulate student EMS Practitioners in the clinical phase of EMS education.
 - (3) Have the authority to share any information in the custody of the Bureau of EMS, including information not subject to the laws relative to public records pursuant to R.S.44:4(9), with any regulator or law enforcement agency upon written request of the regulatory or law enforcement agency.
 - (4) Upon finding of sufficient evidence that the public health and safety are at risk, the EMS Certification Commission may require licensees and applicants for licensure to submit to a physical or mental examination by a health care provider designed by the EMS Certification Commission who is licensed to perform such examination. The licensee or applicant may request a second health care provider to perform an independent medical examination. Refusal of or failure by the licensees or applicant to submit to such examination and to sign for release the findings of such examination to the EMS Certification Commission shall constitute evidence of any allegations related to such conditions.

D. Authorization to obtain criminal history record information

- (1) As used in this Section the following terms shall have the following meaning:

- (a) "Applicant" means a person who has made application to the Bureau of EMS for the issuance or reinstatement of any form of licensure.
- (b) "EMS Certification Commission" means the EMS Certification Commission.
- (c) "Bureau" means the Louisiana Bureau of Criminal Identification and Information of the office of state police within the Department of Public Safety and Corrections.
- (d) "Bureau of EMS" means the Louisiana Bureau of EMS within the Louisiana Department of Health, Office of Public Health
- (e) "Criminal history record information" means information collected by state and federal criminal justice agencies on individuals consisting of identifiable descriptions and notations of arrests, detentions, indictments, bills of information, or any formal criminal changes, and any disposition arising there from, including sentencing an criminal correctional supervision and release, but does not include intelligence for investigatory purposes, nor does it include any identification information which does not indicate involvement of the individual in the criminal justice system.
- (f) "FBI" means the Federal Bureau of Investigation of the United States Department of Justice
- (g) "Licensure" means any license or permit which the board is authorized to issue, including permission to enroll as a student in clinical EMS courses.

- (2) In addition to any other requirements established by law or EMS Certification Rules, the EMS Certification Commission shall require an applicant who answers affirmatively on the application for licensure:

- (a) To submit a full set of fingerprints, in a form and manner prescribed by the board.
- (b) To permit the board to request and obtain state and national criminal history record information on the applicant

(c) To charge and collect from the applicant, in addition to all other applicable fees and costs, such amount as may be incurred by the Bureau of EMS in requesting and obtaining state and national criminal history record information on the applicant.

(3) In accordance with the provisions and procedure prescribed by this Section, the EMS Certification Commission shall request and obtain state and national criminal history record information from the Louisiana Bureau of Criminal Identification and Information of the office of state police within the Department of Public Safety and Corrections and the Federal Bureau of Investigation of the United States Department of Justice relative to any applicant for licensure whose fingerprints the EMS Certification Commission has obtained pursuant to this Section for the purpose of determining the applicant's suitability and eligibility for licensure.

(4) Upon request by the EMS Certification Commission and upon the Bureau of EMS' submission of an applicant's fingerprints, and such other identifying information as may be required, the bureau shall conduct a search of its criminal history record information relative to the applicant and report the results of its search to the Bureau of EMS within sixty days after receipt of any such request. The bureau may charge the Bureau of EMS a reasonable processing fee for conducting and reporting on any such search.

(5) If the criminal history record information reported by the bureau to the Bureau of EMS does not provide grounds for disqualification of the applicant for licensure under the applicable law administered by the EMS Certification Commission, the EMS Certification Commission shall have the authority to forward the applicant's fingerprints and such other identifying information as may be required to the FBI with a request for a search of national criminal history record information relative to the applicant.

(6) Any and all state or national criminal history record information obtained by the Bureau of EMS for the EMS Certification Commission from the Bureau or FBI which is not already a matter of public record shall be deemed nonpublic and confidential information restricted to the exclusive use of the EMS Certification Commission, its members, officers, investigators, agents and attorneys in evaluating the applicant's eligibility or disqualification for licensure. No such information or records related thereto shall, except with the written consent of the applicant or by order of a court of competent jurisdiction, be related or otherwise disclosed by the Bureau of EMS or the EMS Certification Commission to any other person or agency.

Acts 1997, No. 913, §2; Acts 2003, No. 208, §1; Acts 2010, No. 935, §1; Acts 2012, No. 789, §2, eff. June 13, 2012;
Redesignated from R.S. 40:1232.3 by HCR 84 of 2015 R.S.

§1133.5. Powers and duties of the bureau

The bureau shall:

- (1) Issue a license and renew a license to any duly qualified applicant for licensure and license renewal as an emergency medical services practitioner.
- (2) Prescribe application forms for licensure and license renewal.
- (3) Adopt requirements and standards of practice approved by the commission for emergency medical services practitioners.
- (4) Conduct investigations as requested by the commission.
- (5) Deny, withhold, revoke, restrict, probate, or suspend a license as directed by the commission under the provisions of R.S. 40:1133.7.
- (6) Prepare, publish, and update a roster of all emergency medical personnel, including the name and address of each individual.
- (7) Adopt continuing education requirements and standards for individuals seeking to renew a license.
- (8) Prepare an annual report detailing the activities of the commission during the past fiscal year including the number and nature of the hearings conducted under the provisions of R.S. 40:1133.8.
- (9) Adopt rules and regulations to implement the provisions of this Part in accordance with the Administrative Procedure Act.
- (10) Adopt and amend the title and the definition of licensed emergency medical services practitioners.

Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Acts 2013, No. 220, §17, eff. June 11, 2013;
Redesignated from R.S. 40:1232.4 by HCR 84 of 2015 R.S.

§1133.6. License; requirements; renewal

A. Applicants for initial licensure as emergency medical services practitioners shall submit the following evidence to the bureau:

- (1) Completion of the required approved educational program.
- (2) Documentation that the applicant meets the qualifications and requirements as established by the bureau.

B. In lieu of the evidence required by Subsection A of this Section, an applicant may submit evidence that he has been duly licensed or certified in another state, territory, or country or has received military training and certification or license as emergency medical services practitioner as defined in R.S. 40:1131, and meets the qualifications and requirements established by the bureau.

C.

- (1) The license shall be renewed every two years provided the applicant seeking renewal completes the application and meets the requirements for renewal established by the bureau prior to the expiration date on his current license.
- (2) An individual whose license expires by his failure to renew as provided may be reinstated provided the applicant submits a completed application and meets any additional requirements established by the bureau for an individual who has failed to timely renew his license.

Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.5 by HCR 84 of 2015 R.S.

§1133.7. Grounds for disciplinary proceedings

The commission may discipline emergency medical services practitioners by directing the bureau to deny, withhold, revoke, restrict, probate, or suspend a license to practice as an emergency medical services practitioner, impose fines and assess costs, or otherwise discipline an emergency medical services practitioner, and the commission may direct the bureau to limit, restrict, or deny a student emergency medical services practitioner from entering or continuing the clinical phase of EMS education for the following causes:

- (1) Conviction of selling or attempting to sell, falsely obtaining, or furnishing to a person a licensed emergency medical services practitioner document.
- (2) Conviction of a crime or offense which reflects the inability of an emergency medical services practitioner to provide emergency medical services with due regard for the health and safety of clients or patients or enters a plea of guilty or nolo contendere to a criminal charge regardless of final disposition of the criminal proceeding, including but not limited to expungement or nonadjudication.
- (3) Is unfit or incompetent by reason of negligence, habit, or other cause.
- (4) Is habitually intemperate in the use of or abuses alcohol or habit-forming drugs.
- (5) Is guilty of aiding or abetting another person in the violation of this Part.
- (6) Is mentally incompetent.
- (7) Endeavors to deceive or defraud the public.
- (8) Professional or medical incompetency.
- (9) Unprofessional conduct.
- (10) Continuing or recurring practices which fail to meet the standards of EMS care in this state.
- (11) Abandonment of a patient.
- (12) Has had a certification or license to practice as an emergency medical services practitioner or to practice as another health care provider denied, revoked, suspended, or otherwise restricted.
- (13) Is guilty of moral turpitude.
- (14) Has violated any rules and regulations of the commission or the bureau or any provision of this Part.
- (15) Intentional falsification of any document related to license, emergency medical services education, or related to the care of the patient.

Acts 1997, No. 913, §2; Acts 2003, No. 208, §1; Acts 2004, No. 797, §1, eff. July 8, 2004; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.6 by HCR 84 of 2015 R.S.

§1133.8. Hearings of the commission; appeal of decision

- A. If the commission determines there are grounds for a disciplinary proceeding against an individual based upon an investigation by the bureau, the chairman of the commission shall set a time and place for a hearing. No later than ten days prior to the date set for the hearing, the commission shall send notice of the time and place for the hearing and an explanation of the grounds for the disciplinary proceedings to the individual by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.
- B. The commission may compel or subpoena the attendance of witnesses, the production of books, papers, and documents, and administer oaths at the hearing. Subpoenas shall be issued in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. The commission shall not be bound by strict rules of procedure or other laws of evidence in the conduct of its proceedings. The individual under investigation may appear personally, by counsel, or personally and by counsel, produce witnesses and evidence on his own behalf, and cross-examine witnesses. Such proceedings shall be closed to the general public and the records of the proceeding shall be confidential.
- C. Notwithstanding any privilege of confidentiality recognized by law, a physician or health care agency with which the individual under investigation is associated shall not assert such privilege by failing or refusing to respond to a lawfully issued subpoena of the commission for any medical information, testimony, records, data, reports, or other documents, tangible items, or information relative to any patient cared for or assigned to the individual under investigation. Any such items obtained pursuant to a subpoena shall be confidential. Furthermore, the transcript of testimony from the hearing shall be altered to prevent the disclosure of the identity of the patient to whom such records relate.
- D. Notice of the commission's decision to revoke, restrict, suspend, or deny a license shall be sent to the individual under investigation by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.
- E. An individual whose license has been revoked, restricted, suspended, placed in probation, or denied may have the proceedings of the commission reviewed by a court of competent jurisdiction, provided that an appeal is made no later than thirty days after the date indicated on the registered mail receipt of the notice required by Subsection D of this Section. The decision of the commission shall remain in force until an appeal is granted unless the court orders a stay. If an appeal is granted, the decision of the commission shall be suspended until a final disposition of the matter is ultimately rendered by the court affirming the decision of the commission.
- F. The commission may maintain the confidentiality of an individual under investigation whenever the commission determines the public interest will be best served by alternatives to the disciplinary hearing process.

Acts 1997, No. 913, §2; Acts 2003, No. 208, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.7 by HCR 84 of 2015 R.S.

§1133.9. Injunction

The commission, through the bureau, may obtain an injunction without bond forbidding any person from violating or continuing to violate any of the provisions of this Part. This injunction shall not be subject to release upon bond.

Acts 1997, No. 913, §2; Redesignated from R.S. 40:1232.8 by HCR 84 of 2015 R.S.

§1133.10. Violations

No person or individual shall engage in any of the following activities:

- (1) Sell, or attempt to sell, falsely obtain, or furnish to any person any emergency medical services practitioner diploma, license document, or record, or aid or abet therein.
- (2) Practice as an emergency medical services practitioner under any diploma, certificate, or license illegally obtained or signed or issued unlawfully.
- (3) Practice as an emergency medical services practitioner unless licensed to do so under the provisions of this Part.
- (4) Use in connection with his name any designation tending to imply that he is an emergency medical services practitioner unless duly authorized to practice under the provisions of this Part.

- (5) Practice as an emergency medical services practitioner during the time the license issued under the provisions of this Part is suspended or revoked.
- (6) Practice as an emergency medical services practitioner during the time his license has lapsed by reason of his intentional failure to renew the license.
- (7) Conduct or serve as an educator in conducting any course claiming to prepare students for licensure as emergency medical services practitioner under the provisions of this Part, unless both the course and the educator have been approved by the bureau.
- (8) Knowingly aid or abet another person in the violation of this Part.

Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Acts 2013, No. 220, §17, eff. June 11, 2013; Redesignated from R.S. 40:1232.9 by HCR 84 of 2015 R.S.



§1133.11. Prosecution

- A. Any person who violates the provisions of R.S. 40:1133.10 shall be subject to prosecution. This prosecution shall be brought in the name of the state, provided the provisions of this Part shall not prevent or interfere with a prosecution brought by the district attorney of a parish when a prosecution or a pre-prosecution proceeding has been initiated by the district attorney.
- B. Whoever is found guilty of violating any provision of R.S. 40:1133.10 shall, upon a first conviction, be fined not more than five hundred dollars or imprisoned for not more than six months, or both. Upon a second or subsequent conviction, the offender shall be imprisoned with or without hard labor for not more than two years and fined not more than five thousand dollars.

Acts 1997, No. 913, §2; Redesignated from R.S. 40:1232.10 by HCR 84 of 2015 R.S.

§1133.12. Exceptions

This Part shall not apply to the practice of emergency medical services by a legally qualified emergency medical services practitioner who is employed by the United States government, or by any bureau, division, or agency thereof, while in the discharge of his official duties.

Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1232.11 by HCR 84 of 2015 R.S.

§1133.13. Civil immunity

- A.
 - (1) Any emergency medical services practitioner, licensed pursuant to the provisions of this Part who renders emergency medical care to an individual while in the performance of his medical duties and following the instructions of a physician shall not be individually liable to such an individual for civil damages as a result of acts or omissions in rendering the emergency medical care, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to such an individual. Nothing herein shall relieve the driver of the emergency vehicle from liability arising from the operation or use of such vehicle.
 - (2) The immunity granted to emergency medical services practitioners by the provisions of this Part shall extend to parish governing authorities, police departments, sheriffs' offices, fire departments, or other public agencies engaged in rendering emergency medical services and its insurers with respect to such emergency medical services unless the emergency medical services practitioner employed by such agencies would be personally liable under the provisions of Paragraph (1) of this Subsection.
- B. Any physician who provides instructions to any emergency medical services practitioner by use of electronic or other means of transmission in connection with the rendering of emergency medical services to an individual shall not be liable unto such practitioner or to an individual or both for civil damages arising from his opinion, judgments, actions, or duties, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to the individual, while exercising that degree of skill and care ordinarily employed by members of his profession in good standing.

- C. No hospital facility which allows the use of telemetry or other equipment to maintain contact between an emergency medical services practitioner and a physician shall be liable for any civil damages arising out of the use of such equipment except for acts or omissions by hospital personnel that are grossly negligent which result in harm to an individual.
- D. No registered nurse, licensed emergency medical services practitioner, or other health professional licensed in Louisiana who supervises, instructs, or trains emergency medical services practitioners in accordance with curricula developed or adopted by the bureau shall be liable for any civil damages arising out of the actions or negligence of the emergency medical personnel whom he supervised, educated, or trained.
- E. There shall be no cause of action or civil liability, and no license holder or applicant shall have any cause of action or any claim for damages against any individual, person, or institution providing information to the commission or its agents or employees when that individual, person, or institution acts without malice and when there is a reasonable belief that such information is accurate.

Acts 1977, No. 626, §2. Amended by Acts 1978, No. 469, §1; Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1233 by HCR 84 of 2015 R.S.

§1133.14. Duties of emergency medical personnel

- A.
 - (1) A licensed emergency medical services practitioner may perform any of the following functions:
 - (a) Services, treatment, and procedures consistent with national EMS education standards that have been approved and adopted by the bureau, and to the extent that he has been trained to perform such services.
 - (b) Administration of other drugs or procedures for which the licensed emergency medical services practitioner has received training, license, and approval by the commission and which may be considered necessary by the ordering physician.
 - (2) The functions authorized by Paragraph (1) of this Subsection may be performed by the licensed emergency medical services practitioner while he is caring for a patient or at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's order; or under a protocol that has been approved by the local parish medical society or the emergency medical services practitioner's medical director, ~~until voice communication with the physician is established.~~
- B. An emergency medical services practitioner student may, while he is enrolled in good standing in a state approved clinical or field internship program under the direct supervision of a physician, registered nurse, paramedic, or other preceptor recognized by the bureau:
 - (1) Perform services, treatments, and procedures consistent with national EMS education standards that have been approved and adopted by the bureau, and to the extent that he has been trained to perform such services.
 - (2) Administer automated cardiac defibrillation in accordance with rules and regulations promulgated by the bureau in accordance with the Administrative Procedure Act and a protocol that shall be approved by the local parish medical society, or its designee, and the local physician medical director.
- C. In a case of a life-threatening situation as determined by a licensed emergency medical services practitioner, when voice contact with a physician is delayed, not possible, or when the delay in treatment could endanger the life of the patient, such a person may render services, in accordance with a protocol that shall be established by the emergency medical services committee or the executive committee of the parish or component medical society, or its designee, ~~until voice communication can be established at the earliest possible time.~~
- D. Any individual, education organization, organization, or other entity violating the provisions of this Section shall be guilty of a misdemeanor, conviction of which shall subject the offender to a fine of not less than five hundred dollars nor more than one thousand dollars for each separate offense.
- E. In the event that there is no organized or functional local parish medical society in a parish of the state, the provisions of this Section which require the approval of an emergency medical service protocol by the local parish medical society or its designee may be performed by a parish or multiparish medical society which is adjacent or contiguous to the parish without an organized or functional local parish medical society. In the absence of such

adjacent or contiguous parish or multiparish medical society, the district medical society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society. In the event the district medical society does not approve an emergency medical service protocol for the parish without an organized or functional local parish medical society, the disaster and emergency medical services committee of the Louisiana State Medical Society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society.

- F. The department shall promulgate rules and regulations establishing basic guidelines for statewide emergency medical service protocols. Such rules and regulations shall be based on the recommendations of the Louisiana State Medical Society's disaster and emergency medical services committee, which shall serve as an advisory committee to the department for this purpose.

Acts 1977, No. 626, §2; Amended by Acts 1978, No. 469, §1; Acts 1979, No. 688, §1; Acts 1984, No. 242, §1; Acts 1984, No. 243, §1; Acts 1986, No. 630, §1, eff. July 6, 1986; Acts 1987, No. 665, §1, eff. July 9, 1987; Acts 1988, No. 776, §1; Acts 1989, No. 195, §1, eff. June 26, 1989; Acts 1990, No. 211, §1, eff. Jan. 1, 1991; Acts 1991, No. 974, §1, eff. July 24, 1991; Acts 1997, No. 913, §§2, 3; Acts 1999, No. 427, §1; Acts 2001, No. 385, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1234 by HCR 84 of 2015 R.S.

§1133.15. Hazardous substance transportation emergencies; payment for emergency medical services

The person or entity who in the course of transporting hazardous substances or materials causes or contributes to a discharge of a hazardous substance or material that causes an emergency condition shall be obligated to pay the reasonable costs of any emergency medical services provider whose presence or service, including standby, is requested at such hazardous substance emergency by any person authorized by the Department of Public Safety and Corrections or the Department of Environmental Quality to respond to a hazardous substance transportation emergency. Nothing in this Section shall affect the rights of any party to recover under any other provision of law.

Acts 1999, No. 209, §1; Redesignated from R.S. 40:1234.1 by HCR 84 of 2015 R.S.

PART III. EMERGENCY MEDICAL TRANSPORTATION

§1135.1. Qualifications to operate ambulances; equipment; penalty

A.

- (1) No person or individual shall conduct, maintain, or operate an ambulance on any street, alley, or public way or place in the state unless the ambulance is staffed with a minimum of two persons, one of whom shall be a licensed emergency medical technician.
- (2)
 - (a) No person or individual shall provide services in any capacity on any ambulance unless he is a licensed emergency medical responder, a licensed emergency medical technician, a licensed advance emergency medical technician, a licensed paramedic, a licensed respiratory therapist, a licensed nurse practitioner, a licensed physician assistant, a licensed occupational therapist, a licensed registered or practical nurse, or a physician.
 - (b) Except as provided in R.S. 40:1135.3(A) of this Part, no individual shall transport any ill or injured person on a stretcher in a vehicle that is not staffed, equipped, insured, and licensed as an ambulance under this Part.
 - (c) No individual shall provide services in any capacity on any ambulance without holding an American Heart Association Health Care Provider, or American Red Cross Professional Rescuer, or the equivalent cardio-pulmonary resuscitation certification that has been approved by the Department of Health and Hospitals.
 - (d) No individual shall transport any ill or injured person by ambulance unless the sick or injured person is attended by a licensed emergency medical technician, a licensed advance emergency medical technician, a licensed paramedic, a registered nurse, or a physician in the patient compartment.
- (3)
 - (a) The Department of Health and Hospitals shall promulgate rules and regulations establishing a list of required medical and safety equipment which shall be carried as part of the regular equipment of every ambulance. No person shall conduct, maintain, or operate an ambulance which does not carry with it, in

fully operational condition, all of the equipment included in the list, which shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1133.14.

(b) After its initial establishment, the list shall be subject to review after four years and at any time thereafter. The list shall not be changed more often than once every four years. However, nothing in this Paragraph shall prohibit the department from supplementing the list with state-of-the-art, newly developed devices, equipment, or medications that may be carried in lieu of other items on the list.

(4) Repealed by Acts 2013, No. 184, §2(B).

(5) Nothing herein shall prohibit the transportation of an injured or ill person in an ambulance or industrial ambulance staffed by persons with less than the required qualifications in an emergency situation where there is no reasonable expectation of the prompt response by an ambulance staffed by persons with the required qualifications.

(6) Nothing herein shall prohibit a firefighter, law enforcement officer, or good Samaritan from assisting an ambulance at the scene of an emergency or while transporting a patient to a medical facility at the request of the emergency medical technician.

(7) Nothing herein shall prohibit an individual without the required qualifications from riding in an ambulance for the purpose of training, observation, or continuing education.

B.

(1) Repealed by Acts 2001, No. 625, §2.

(2) Nothing in this Part shall be construed to prohibit the transportation of an injured or ill individual in an invalid coach in an emergency situation where there is no reasonable expectation of the prompt response of an ambulance or industrial ambulance.

C. The department shall conduct or may authorize another public agency to conduct an inspection of any ambulance service provider or invalid coach provider and to report any violation to the appropriate district attorney's office.

D.

(1) The provisions of this Section shall not apply:

(a) To ambulances operated by a federal agency of the United States government.

(b) Repealed by Acts 2001, No. 625, §2.

(c) To ambulances which are rendering assistance to licensed ambulances in the case of a major disaster, be it natural or manmade, in which the licensed ambulances are insufficient or otherwise not capable of coping.

(d) Repealed by Acts 2001, No. 625, §2.

(e) To ambulances which are operated from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside the state, but no such ambulance shall transport any patient point to point within the state except in the case of disaster as outlined in this Part.

(2) This provision shall not apply to individuals who are employed to function on licensed air ambulances solely to act as pilots.

(3) The provisions of this Section shall not apply to industrial ambulances providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

E. The provisions of this Section shall apply to all parishes or municipalities except those electing not to comply as expressed to the department in a written resolution by the governing body of such parish or municipality. If any parish or municipality elects to be excluded from this Section, it may later elect to be included by resolution. The election of any parish to be included or excluded from this Section shall in no way affect the election of any municipality to be included or excluded.

F. Whoever violates this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days or both. The penalty prescribed by this Section shall be doubled for any subsequent offense.

Acts 1977, No. 626, §2. Amended by Acts 1978, No. 469, §1; Acts 1986, No. 632, §1; Acts 1987, No. 480, §1, eff. July 9, 1987; Acts 1997, No. 913, §2; Acts 1997, No. 982, §1, eff. July 10, 1997; Acts 2001, No. 625, §§1 and 2; Acts 2003,

No. 751, §1, eff. June 27, 2003; Acts 2012, No. 789, §2, eff. June 13, 2012; Acts 2013, No. 184, §2(A) and (B); Redesignated from R.S. 40:1235 by HCR 84 of 2015 R.S.

§1135.2. Qualifications to operate emergency medical response vehicles; vehicle requirements; equipment; penalties

A.

- (1) No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle on any street, alley, or public way or place in the state unless the vehicle is staffed with at least one individual who is a licensed emergency medical responder.
- (2) No person shall provide services in any capacity on an emergency medical response vehicle unless he is at least a licensed emergency medical responder, or a holder of a certificate of licensure as a registered nurse or licensed practical nurse, or is a physician or surgeon licensed to practice medicine by the Louisiana State Board of Medical Examiners, a licensed respiratory therapist, a licensed nurse practitioner, a licensed physician assistant, or a licensed occupational therapist. No person shall provide services in any capacity on these vehicles without holding an American Heart Association Health Care Provider, or American Red Cross Professional Rescuer, or the equivalent cardio-pulmonary resuscitation certification that has been approved by the Department of Health and Hospitals.

B. No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle which:

- (1) Does not carry with it as part of its regular equipment the list of equipment for emergency medical response vehicles as prescribed in rules and regulations promulgated by the Department of Health and Hospitals. This list shall be based upon the recommendations of the American College of Surgeons as provided in R.S. 40:1135.1(A)(3). The list shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1133.14. After initial promulgation, such list shall be subject to review after four years and anytime thereafter. The list shall not be changed more often than once every four years. However, nothing shall preclude the Department of Health and Hospitals from supplementing the list with state of the art, newly developed devices, equipment, or medications that may be carried in lieu of other items on the list of equipment.
- (2) Is not marked with the company name or logo on both sides and the rear and does not have fully visible and audible warning signals in accordance with rules and regulations promulgated by the Department of Health and Hospitals.
- (3) Does not meet the minimum motor vehicle safety standards as prescribed in the rules and regulations promulgated pursuant to the Motor Vehicle Inspection Act, R.S. 32:1302 et seq.
- (4) Is not insured in accordance with the provisions of R.S. 40:1135.9.
- (5) Is not owned or leased by the certified ambulance service operating the vehicle.

C.

- (1) The Department of Health and Hospitals or its designee shall be empowered to conduct inspections of emergency medical response vehicles. The department shall certify such vehicles and shall have the authority to deny, probate, suspend, or revoke certifications. The department shall also have the authority to report any violations to the appropriate district attorney's office.
- (2) Certification issued by the Department of Health and Hospitals shall serve as authorization of the ambulance service to operate the emergency medical response vehicle pursuant to the provisions of this Section.

D. Whoever violates the provisions of this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days, or both. The penalty prescribed by this Subsection shall be doubled for any subsequent offense.

Acts 1997, No. 297, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Acts 2013, No. 184, §2(A); Redesignated from R.S. 40:1235.1 by HCR 84 of 2015 R.S.

§1135.3. Ambulance providers; licensure

- A. No person, firm, corporation, association, or government entity shall conduct, manage, operate, or maintain an ambulance service in Louisiana without a valid current license from the department, except that no license shall be required for any hospital that operates a vehicle solely for the purpose of moving its own patients between parts of its own campus, provided that all of the following conditions are met:
- (1) The parts of the hospital's campus are not more than ten miles apart. For the purposes of this Section, "campus" means the grounds and facilities of any licensed hospital operating under the same provider number.
 - (2) At the time of transport, the patient is attended by at least two individuals who are an emergency medical technician, a licensed practical or registered nurse, or a physician.
 - (3) The vehicle utilized by the hospital for transport contains the same equipment as is required for a licensed ambulance and successfully completes an inspection by the department to determine that it is in a safe and working order.
- B. The application for such license shall be submitted to the department on forms provided for that purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an ambulance provider as specified by regulations promulgated by the department under the Administrative Procedure Act.
- C. An applicant seeking licensure as an ambulance provider shall:
- (1) Submit a completed application to the department on such forms and including such information and supporting documentation as required by the department. Such information shall include:
 - (a) A notarized certificate of insurance verifying that the provider has the legally mandated insurance coverage.
 - (b) Proof that the provider has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.
 - (c) All medical protocols signed by the physician-medical director with their prescribed approvals by the parish or component medical society.
 - (d) Copies of personnel certifications. However, the department may provide for inspection and review of these certifications at an applicant's offices by prior agreement between the applicant and the department.
 - (e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.
 - (2) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.
 - (3) Successfully complete an inspection by the department which includes the following:
 - (a) An inspection of all vehicles to determine that they are in safe and working order and that they are equipped with all of the prescribed medical equipment as required by this Section and R.S. 40:1135.1 and 1135.2. What is safe and working order shall be determined pursuant to provisions of Title 32 of the Louisiana Revised Statutes of 1950 and the Louisiana Motor Vehicle Inspection Manual in addition to the provisions of this Section and R.S. 40:1135.1 and 1135.2. Each vehicle successfully completing the inspection shall receive a permit authorizing it to be operated as part of the applicant's service.
 - (b) An inspection of all personnel certifications to verify that they meet the requirements of law.
 - (c) Inspection and, when deemed necessary by the department, verification of the information provided as required by Paragraph (1) of this Subsection and that such information remains current.
 - (d) Verification that the provider has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the provider has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.
 - (e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.

- D. If an applicant's background investigation indicates that the applicant has a felony conviction or has had any license pertaining to the provision of emergency medical services revoked in another jurisdiction, then the license may be denied.
- E. In order to renew an ambulance provider license, the applicant shall:
 - (1) Submit a renewal application to the department not more than thirty days prior to expiration of the license.
 - (2) Provide any required documentation.
 - (3) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any vehicle as deemed appropriate by the department.
- F. Intentional falsification of material information provided pursuant to this Section shall be grounds for immediate revocation of any license granted pursuant to this Section.
- G. Failure to comply with any of the provisions of this Section shall constitute grounds for probation or license suspension or revocation in accordance with rules and regulations established pursuant to the Administrative Procedure Act.
- H. Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.
- I. Any entity currently certified to provide ambulance services in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1999, No. 1113, §1; Acts 2001, No. 517, §1; Acts 2001, No. 1032, §14; Acts 2003, No. 751, §1, eff. June 27, 2003; Acts 2006, No. 450, §1; Redesignated from R.S. 40:1235.2 by HCR 84 of 2015 R.S.

§1135.4. Ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity currently operating or planning to operate an ambulance service shall pay the following fees to the department, as applicable:

- (1) An initial licensing fee of one hundred fifty dollars, to be submitted with the initial application for a license.
- (2) An annual license renewal fee of one hundred dollars, to be submitted with each annual application for renewal of a license.
- (3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.
- (4) A vehicle inspection fee of seventy-five dollars for each ambulance or emergency medical response vehicle, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for a vehicle added to service by the applicant.
- (5) A delinquent fee of one hundred dollars for each ambulance and emergency medical response vehicle, for failure to timely pay a vehicle inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the vehicle inspection fee.
- (6) A change of address fee of ten dollars for each change of address.
- (7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1113, §1; Redesignated from R.S. 40:1235.3 by HCR 84 of 2015 R.S.

§1135.5. Ambulance services; violations; penalties; fines; notices; hearings; appeals

- A. The opening or operation of an ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars. Each day's violation shall constitute a separate offense.

B.

- (1) Any person or entity violating the provisions of this Chapter when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules, in accordance with the Administrative Procedure Act, which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.
- (2) The schedule of civil fines and other penalties by class of violation is as follows:
 - (a) Class A violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Chapter concerning the number or qualifications of personnel, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (b) Class B violations: If an ambulance service is found to have been operating in violation of any of the requirements of this Chapter concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (c) Class C violations: If an ambulance or emergency medical response vehicle is found to have been operated without undergoing any inspection required under the provisions of this Chapter, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (d) Class D violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Chapter concerning medical and safety equipment, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.
 - (e) Class E violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of Chapter 7 of Title 32 of the Louisiana Revised Statutes of 1950, the ambulance or emergency response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

- C. The department shall adopt rules and regulations, in accordance with the Administrative Procedure Act, to provide notice to the ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.
- D. The ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.
- E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients or clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1113, §1; Redesignated from R.S. 40:1235.4 by HCR 84 of 2015 R.S.

§1135.6. Advanced emergency medical technicians

In addition to the requirements of R.S. 40:1135.1, any hospital, ancillary medical facility, or ambulance service, whether public or private, may conduct a program utilizing any emergency medical services practitioner to supervise and direct the delivery of emergency medical care to the sick and injured at the scene of an emergency during transport to a hospital, while in the hospital emergency department, and until care responsibility is assumed by the regular hospital staff.

Acts 1977, No. 626, §2. Amended by Acts 1978, No. 469, §1; Acts 1997, No. 913, §2; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1236 by HCR 84 of 2015 R.S.

§1135.7. Unauthorized response by commercial ambulances; penalties

- A. No commercial ambulance shall make any emergency run based solely on information intercepted by use of a radio communication scanner or similar device except in cases where human life is threatened, unless that commercial ambulance has been specifically requested to respond to such emergency. Nothing in this Section shall be construed to prohibit service to a subscriber of a commercial ambulance service. No person certified under this Chapter or certified or licensed pursuant to any provision of Louisiana law shall operate a commercial ambulance in violation of this Section.
- B. The certificate or license of any person certified under this Chapter or certified or licensed pursuant to Louisiana law who violates the provisions of this Section shall be suspended by the appropriate certification or licensing authority for not less than thirty days, nor more than six months.
- C. Proceedings to enforce the provisions of this Section shall be conducted in accordance with the Administrative Procedure Act.

Acts 1987, No. 187, §1; Redesignated from R.S. 40:1236.1 by HCR 84 of 2015 R.S.

§1135.8. Air ambulance services; licensure

- A. No person, firm, corporation, association, or governmental entity shall conduct, manage, operate, or maintain an air ambulance service in the state without a valid current license from the department.
- B. The application for such license shall be submitted to the department on forms provided for this purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an air ambulance service as specified by regulations promulgated by the department in accordance with the Administrative Procedure Act.
- C. An applicant seeking licensure as an air ambulance service shall:
 - (1) Submit a completed application to the department on such forms and including such information as specified by the department.
 - (2) Submit the appropriate initial license fee as provided in this Chapter.
 - (3) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.
 - (4) Submit to and successfully complete an inspection by the department to include the following:
 - (a) An inspection of all aircraft utilized as air ambulances to ensure that all required medical and safety equipment is present and operational. The medical and safety equipment shall conform to local protocol as established by the medical director of the air ambulance service. The list of required medical and safety equipment shall be established under rules promulgated by the department and shall be based upon the recommendations of an advisory committee to be composed of the following persons:
 - (i) The medical director of the department.
 - (ii) The director of the bureau.
 - (iii) One representative of the health standards section of the department's office of the secretary, bureau of health services financing.
 - (iv) One representative of the Governor's Emergency Medical Services for Children Advisory Council.
 - (v) One representative of the Department of Transportation and Development, office of engineering, aviation section.

- (vi) One representative of each air ambulance service certified or licensed in accordance with this Chapter.
 - (b) Verification that all aircraft meet the appropriate Federal Aviation Administration requirements.
 - (c) Review of certifications of all personnel to ensure that they meet all Federal Aviation Administration requirements and local pilot and medical personnel staffing protocols.
 - (d) Verification that the applicant is in receipt of an original notarized certificate of insurance for the following coverage:
 - (i) Five hundred thousand dollars of aircraft liability insurance.
 - (ii) Five hundred thousand dollars of medical malpractice insurance or proof of participation in the Patient's Compensation Fund.
 - (iii) Five hundred thousand dollars of commercial general liability insurance.
 - (e) Verification that the service has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.
 - (f) A review of medical protocols signed by the physician medical director of the air ambulance service, accompanied by the necessary approvals of the parish or component medical society in the service's parish of domicile.
 - (g) Verification that the service has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the service has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.
- (5) Certify that all aircraft and crew members meet applicable Federal Aviation Administration regulations.
- (6) Specify if the service uses either fixed-wing or rotary-winged aircraft, or both.
- D. If a service provides interhospital air transport, air transport from hospital to another facility, air transport from hospital to home, or similar air transport, the service must certify that a medical director is employed to advise the service on the appropriate staffing, equipment, and supplies to be used for the transport of patients aboard an air ambulance.
- E. In order to renew a license for an air ambulance service, the applicant shall:
 - (1) Submit a renewal application to the department not more than ninety days before the expiration of the license.
 - (2) Submit the appropriate fee as provided herein in Subsection B.
 - (3) Provide documentation that current standards for issuance of a license are met.
 - (4) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any airplane deemed appropriate by the department.
- F. Intentional falsification of information provided pursuant to this Section or failure to comply with any provisions hereof shall be grounds for immediate revocation of any license granted pursuant to this Section.
- G.
 - (1) Nothing in this Section shall be construed to prohibit, limit, or regulate random mercy flights made by a person or corporation in privately or publicly owned aircraft who may on occasion transport individuals who may need medical attention during transport, or human organs, intended for transplantation, including but not limited to the heart, lungs, kidneys, liver, and other soft tissue and bones, on either a not-for-profit basis or gratuitously.
 - (2) Failure to comply with any of the provisions of this Section shall constitute grounds for probation, suspension, revocation of license, or other administrative sanction in accordance with rules and regulations established by the department.
 - (3) Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.

- H. Any entity currently certified to provide ambulance service in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1988, No. 982, §1; Acts 1999, No. 1114, §1; Acts 2001, No. 517, §1; Acts 2006, 1st Ex. Sess., No. 6, §4; Acts 2012, No. 753, §6; Redesignated from R.S. 40:1236.2 by HCR 84 of 2015 R.S.

§1135.9. Required insurance coverage

- A. Notwithstanding the provisions of R.S. 33:4791 and 4791.1, each ambulance provider, as defined in this Section, shall continuously have in effect the following minimum amounts of insurance:
- (1) Medical malpractice liability insurance in the amount of five hundred thousand dollars.
 - (2) Automobile liability insurance in the amount of five hundred thousand dollars in combined single limits and five hundred thousand dollars in the aggregate.
 - (3) General liability insurance in the amount of five hundred thousand dollars per occurrence and five hundred thousand dollars in the aggregate.
 - (4) Repealed by Acts 1999, No. 1113, §2.
- B. Each ambulance provider shall submit a certificate of insurance issued by its insurance carrier to the Department of Health and Hospitals as proof of the minimum insurance coverage required by this Section. Each ambulance provider shall also be required to notify the department in writing at least thirty days prior to any material change in or cancellation of such coverage.
- C. For purposes of this Section, "ambulance provider" shall mean any entity owning, controlling, or operating any business or service which, as a substantial portion of its business, furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting persons who may need medical attention during transport. However, "ambulance provider" shall not include:
- (1) Agencies of the federal government;
 - (2) Volunteer nonprofit organizations or municipal nonprofit organizations operating invalid coaches, as defined in R.S. 40:1131(7);
 - (3) Entities rendering assistance to licensed ambulances in the case of a major disaster;
 - (4) Licensed hospitals providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital;
 - (5) Entities operating ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside of the state; or
 - (6) Entities providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

Acts 1990, No. 442, §1; Acts 1992, No. 678, §1; Acts 1999, No. 1113, §2; Redesignated from R.S. 40:1236.4 by HCR 84 of 2015 R.S.

§1135.10. Emergency medical technician fund

- A. There is hereby established a special fund in the state treasury to be known as the Emergency Medical Technician Fund, hereafter referred to as "fund", which shall consist of monies generated by the fees collected from the purchase of prestige license plates for certified emergency medical technicians as provided in R.S. 47:463.47. In addition, the legislature may make annual appropriations to the fund for the purposes set forth in this Section.
- B. All monies collected pursuant to R.S. 47:463.47 shall be deposited in the Bond Security and Redemption Fund as required by Article VII, Section 9(B) of the Constitution of Louisiana and thereafter shall be credited to the fund.
- C. The monies in the fund shall be appropriated to the Department of Health and Hospitals solely for purchasing equipment for the testing of applicants for certification as an emergency medical technician and to cover other testing-related costs. All unexpended and unencumbered monies remaining in the fund at the close of each fiscal year shall remain in the fund. Monies in the fund shall be invested by the state treasurer in the same manner as monies in the state general fund. All interest earned from the investment of monies in the fund shall be deposited and remain to the credit of the fund.

§1135.11. Air ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity, currently operating or planning to operate an air ambulance service shall pay the following fees to the department, as applicable:

- (1) An initial licensing fee of one hundred fifty dollars, which shall be submitted with the initial application for a license.
- (2) An annual license renewal fee of one hundred dollars, which shall be submitted with each annual application for renewal of a license.
- (3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.
- (4) An aircraft inspection fee of seventy-five dollars for each aircraft, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for an aircraft added to the service by the applicant.
- (5) A delinquent fee of twenty-five dollars for each aircraft for failure to timely pay an aircraft inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the aircraft inspection fee.
- (6) A change of address fee of ten dollars for each change of address.
- (7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1114, §1; Redesignated from R.S. 40:1236.6 by HCR 84 of 2015 R.S.

§1135.12. Air ambulance services; violations; penalties; fines; notice; hearings; appeal

- A. The opening or operation of an air ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars, and each day's violation shall constitute a separate offense.
- B.
- (1) Any person or entity violating the provisions of this Chapter when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules in accordance with the Administrative Procedure Act which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.
 - (2) The schedule of civil fines and other penalties by class of violation is as follows:
 - (a) Class A Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Chapter concerning the number or qualifications of personnel, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (b) Class B Violations: If an air ambulance service is found to have been operating in violation of any of the requirements of this Chapter concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (c) Class C Violations: If an air ambulance is found to have been operated without undergoing any inspection required under the provisions of this Chapter, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.
 - (d) Class D Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Chapter concerning medical and safety equipment, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.
- C. The department shall adopt rules and regulations in accordance with the Administrative Procedure Act to provide notice to the air ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.
- D. The air ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the air ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.
- E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No air ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients and clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1114, §1; Redesignated from R.S. 40:1236.7 by HCR 84 of 2015 R.S.

PART IV. AUTOMATED EXTERNAL DEFIBRILLATORS

§1137.1. Legislative findings

- A. The Legislature of Louisiana finds that each year more than three hundred fifty thousand Americans die from out-of-hospital sudden cardiac arrest. More than ninety-five percent of these Americans die, in many cases because a lifesaving defibrillator did not arrive at the scene of the emergency in time.

- B. The American Heart Association estimates that more than twenty thousand deaths may be prevented each year if defibrillators were more widely available to designated responders.
- C. Many communities throughout the state and nation have invested in 911 emergency response systems, emergency personnel, and ambulance vehicles. However, many of these communities do not have enough defibrillators in their community.
- D. It is therefore the intent of the legislature to encourage greater acquisition, deployment, and use of automated external defibrillators in communities throughout the state.

Acts 1999, No. 825, §1; Redesignated from R.S. 40:1236.11 by HCR 84 of 2015 R.S.

§1137.2. Definitions

As used in this Part "automated external defibrillator" and "AED" mean a medical device heart monitor and defibrillator that:

- (1) Has received approval of its pre-market notification filed pursuant to 21 U.S.C. 360(k) from the United States Food and Drug Administration.
- (2) Is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining whether defibrillation should be performed.
- (3) Upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.
- (4) Is capable of delivering the electrical impulse to an individual's heart.

Acts 1999, No. 825, §1; Redesignated from R.S. 40:1236.12 by HCR 84 of 2015 R.S.

§1137.3. Persons in possession of AEDs; training, testing, and notification requirements; manufacturer responsibility; possession required

A. In order to ensure public health and safety, any person or entity that possesses an AED shall ensure that:

- (1) The AED is maintained and tested according to the manufacturer's guidelines.
- (2) A licensed physician or advanced practice registered nurse who is authorized to prescribe is involved in the possessor's program to ensure compliance with the requirements for training, emergency medical service (EMS) notification, and maintenance.
- (3)
 - (a) Expected AED users regularly, on the premises of a particular entity, such as a work site or users who carry an AED in a private security patrol vehicle, receive appropriate training in cardiopulmonary resuscitation (CPR) and in the use of an AED from any nationally recognized course in CPR and AED use.
 - (b) For purposes of this Paragraph, "expected AED users" shall be any person designated by the possessor to render emergency care.
- (4) The emergency medical services system is activated as soon as possible when an individual renders emergency care to an individual in cardiac arrest by using an AED.
- (5) Any clinical use of the AED is reported to the licensed physician or advanced practice registered nurse involved in the possessor's program.

B. Any person or entity that possesses an AED shall notify a local provider of emergency medical services, such as a 911 service, local ambulance service, or fire department of the acquisition, location, and type of AED.

C. Any manufacturer, wholesale supplier, or retailer of an AED shall notify purchasers of AEDs intended for use in the state of the requirements of this Section.

D.

- (1) The owner of or the entity responsible for a physical fitness facility shall keep an AED on its premises.
- (2) As used in this Subsection:
 - (a) "Physical fitness facility" means a facility for profit or nonprofit with a membership of over fifty persons that offers physical fitness services. This term includes but is not limited to clubs, studios, health spas, weight control centers, clinics, figure salons, tanning centers, athletic or sport clubs, and YWCA and YMCA organizations.

- (b) "Physical fitness services" means services for the development of physical fitness through exercise or weight control. It shall not include a business limited solely to the practice of physical therapy, as defined in R.S. 37:2401, by a therapist licensed by the Louisiana State Board of Medical Examiners, nor shall it apply to medically related services performed by a physician licensed by the Louisiana State Board of Medical Examiners in a private office, clinic, or hospital.

E.

- (1) Any institution of higher education that competes in intercollegiate athletics shall have an AED on its premises in its athletic department.

NOTE: Effective until January 1, 2018. See Acts 2016, No. 425, §3.

(2)

- (a) Each high school that participates in interscholastic athletics shall have an AED on its premises, if funding is available.
- (b) Notwithstanding the provisions of Subparagraph (a) of this Paragraph, each high school in any parish with a population of more than two hundred thousand and less than two hundred twenty-five thousand according to the latest federal decennial census shall have an AED on its premises.

NOTE: Effective January 1, 2018, per Acts 2016, No. 425, §3.

- (2) Each high school shall have an AED on its premises, if funding is available, subject to appropriation. Each high school shall have the authority to accept donations of AEDs or funds to acquire AEDs.

F. The Louisiana Department of Health shall promulgate all necessary rules and regulations to implement the provisions of Subsections D and E of this Section. Such rules and regulations shall, at a minimum, provide for compliance, enforcement, and penalties.

Acts 1999, No. 825, §1; Acts 2004, No. 443, §1; Acts 2004, No. 885, §1, eff. Jan. 1, 2005; Acts 2012, No. 706, §1; Acts 2012, No. 789, §2, eff. June 13, 2012; Redesignated from R.S. 40:1236.13 by HCR 84 of 2015 R.S.; Acts 2016, No. 128, §1; Acts 2016, No. 425, §1.

§1137.4. Limitation of liability

In addition to the civil immunity provided to persons rendering emergency assistance as provided by law, including R.S. 9:2793, R.S. 37:1731, 1732, and 1735, and R.S. 40:1131.2, any prescribing advanced practice registered nurse or physician who authorizes the purchase of the AED, any physician or advanced practice registered nurse involved in the possessor's program, any individual or entity which provides training in cardiopulmonary resuscitation and in the use of an AED, any purchaser of an AED, any person or entity who owns or who is responsible for the site or the private security patrol vehicle where an AED is located, and any expected user regularly on the premises or in the vehicle shall not be liable for any civil damages arising from any act or omission of acts related to the operation of or failure to operate an AED that do not amount to willful or wanton misconduct or gross negligence.

Acts 1999, No. 825, §1; Acts 2004, No. 443, §1; Acts 2010, No. 459, §2; Redesignated from R.S. 40:1236.14 by HCR 84 of 2015 R.S.

PART V. FIRST RESPONDER FINANCIAL STABILIZATION AND ENHANCEMENT

§1139.1. Legislative findings

The legislature hereby finds and declares the following:

- (1) Emergency medical services constitute an invaluable part of the healthcare delivery system of Louisiana and are an essential element of Louisiana's emergency preparedness system.
- (2) Emergency medical services will be a key element in any healthcare reform initiative.
- (3) Emergency medical services are a key component of any economic development program as they are essential to recruiting and retaining industry.
- (4) The cost of funding the Medicaid program and healthcare for the poor and uninsured in the state must be carefully managed in a manner which recognizes the challenges associated with appropriate reimbursement for services under the program.

- (5) Emergency medical service providers want to assure that emergency medical services are available to all residents of Louisiana.
- (6) It is in the best interest of the state that there exist sufficient resources to assure the availability of emergency ambulance services to the citizens of Louisiana and the creation of a statewide ambulance service district will help to ensure this goal.
- (7) The Louisiana Ambulance Alliance and the Department of Health and Hospitals are interested in exploring the use of local revenues to enhance the delivery of emergency ambulance services through the use of certified public expenditures, intergovernmental transfers or other financing mechanisms that are in accordance with the applicable state and federal regulations.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.21 by HCR 84 of 2015 R.S.

§1139.2. Short title

This Part shall be known and may be cited as the "First Responder Financial Stabilization and Enhancement Act".

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.22. by HCR 84 of 2015 R.S.

§1139.3. Statewide ambulance service district; creation

In order to provide for sufficient resources to assure the availability of emergency ambulance services to the population of Louisiana, the legislature does hereby establish a statewide ambulance service district. The boundaries of the district shall be coterminous with the boundaries of the state. The ambulance service district thus created shall constitute a body corporate in law with all powers of a corporation, shall have perpetual existence, shall have the power and right to contract obligations, to sue and be sued, and to do and perform any and all acts in its corporate capacity and its corporate name necessary and proper for the carrying out of the objects and purposes for which the ambulance service district was created. It shall have the power and authority to acquire any and all necessary equipment and buildings for the purpose of performing the objects for which it is formed and shall own all sites and physical facilities which are acquired either by donation, purchase, exchange, and otherwise in full ownership.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.23 by HCR 84 of 2015 R.S.

§1139.4. Object and purpose of the district

The object and purpose of the ambulance service district and the governing body created under the provisions of this Part shall be to enhance reimbursement and financial stability of ambulance providers. The Department of Health and Hospitals, hereafter referred to as the "department", may submit waivers or state plan amendments to the Centers for Medicare and Medicaid Services in order to secure federal financial participation in relation to any such payments or reimbursement. Payments shall be made only in accordance with an approved waiver or state plan amendment. The department and the statewide ambulance district may enter into an agreement, in accordance with state and federal law, to develop funding methodologies in a way that is consistent with the legislative intent set forth herein. The methodology shall be created with the intent to maximize, to the fullest extent possible, the return to the providers located within the jurisdiction of the local governing body which subsidized the delivery of services. Any licensed provider of ambulance services shall be eligible to participate in the district. Participation is on a strictly voluntary basis.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.24 by HCR 84 of 2015 R.S.

§1139.5. Ambulance service district commission; qualifications, appointment, vacancies, removal and compensation of members

- A. The ambulance service district created pursuant to this Part shall be governed by the Ambulance Service District Commission, hereafter referred to as the "commission". The commission shall be composed of seven members, one member from each congressional district and the remaining member or members from the state at large, appointed by the governor, subject to confirmation by the Senate, from a list of names submitted by the Louisiana Ambulance Alliance. The nomination list submitted to the governor shall include at least three nominees from each congressional district and at least three nominees for each position to be appointed from the state at large. Members of the commission shall be citizens and qualified electors of this state. Initially, three members of the commission shall be appointed for a two-year term, and the remaining members for four-year terms. Thereafter, all

members shall be appointed for four years. Any vacancy on the board caused by death, resignation, removal, or disability of a member shall be filled for the unexpired term in the same manner as the original appointment.

- B. Any member of the commission whose term expires shall continue to serve on the commission until such time that a successor is appointed.
- C. Any member of the commission may be removed from office for cause and his appointment rescinded by a two-thirds vote of the membership of the governing authority.
- D. The commission annually shall elect one of its members chairman, and one vice-chairman. The meetings shall be held at the domicile of the district established by the commission. At least four regular meetings shall be held annually. Special meetings may be held at such times and places as shall be specified, by call of the chairman or by a simple majority of the commission.
- E. A majority of the members shall constitute a quorum of the board for all purposes and functions of the board.
- F. Each member of the board shall receive a certificate or commission from the governor and before beginning his term of office shall file with the secretary of state a written oath or affirmation of faithful discharge of his official duties.
- G. The members of the commission and all employees of the corporation shall be subject to the Code of Governmental Ethics. They shall be considered public employees as defined by R.S. 42:1102(18) and the corporation shall be considered an agency as defined by R.S. 42:1102(2) for purposes of the Code of Governmental Ethics only. All meetings of the board shall be open and subject to the provisions of R.S. 42:11 et seq. A record of all proceedings at regular and special meetings of the board shall be kept and shall be open to public inspection, except as otherwise provided by this Title or in R.S. 42:17.
- H. No member of the board shall receive a per diem or shall be reimbursed for expenses incurred when attending a meeting of the board or any of its committees or for the time spent on behalf of the board on official business.

Acts 2010, No. 887, §1, eff. July 2, 2010; Acts 2012, No. 803, §11; Redesignated from R.S. 40:1236.25 by HCR 84 of 2015 R.S.

§1139.6. Powers and duties of the commission

In addition to the duties defined elsewhere, the commission shall have the duty and authority:

- (1) To represent the public interest in facilitating ambulance care in the state.
- (2) To pursue grant funds to advance first responder services.
- (3) To enter into cooperative agreements with other public and private entities.
- (4) To assist ambulance providers in obtaining lowest possible cost for equipment and supplies through group purchasing.
- (5) To appoint a director of the ambulance service district and to perform such other duties as may now or hereafter be required by law.
- (6) To appoint the necessary standing and special committees which may be necessary to carry out the purposes of this Part.
- (7) To establish rates of pay for the use of facilities provided by the district.
- (8) To enter into contractual arrangements with recognized and duly constituted ambulance providers which are primarily engaged in the operation of ambulance related functions in order to enhance Medicaid funding and reimbursement, and for related matters.
- (9) To designate a bank to act as agent for depositing funds.
- (10) To designate rules and regulations for safekeeping of the funds acquired, collected, or loaned by or to the district, and to provide for regular audits of the accounts of the district.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.26 by HCR 84 of 2015 R.S.

§1139.7. Procedure for organizing the ambulance service district

- A. At the same time as the governor appoints the initial members of the commission, the governor shall designate a time and place for the first meeting of the commission. The first meeting shall take place within sixty days from the date of the initial appointments. At the first meeting of the commission, the commission shall proceed to organize by electing a chairman and a vice-chairman.

- B. It shall be the duty of the chairman to preside over the meetings of the commission and to perform such other duties as are usually required of the chairman of a corporate board. It shall be the duty of the vice-chairman to act in the absence of the chairman and in case of the disability of the chairman.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.27 by HCR 84 of 2015 R.S.

§1139.8. Domicile; service of process

- A. The domicile of the district shall be fixed by the commission and may be changed at the pleasure of the commission. All books and records of the district shall be kept at the domicile.
- B. Service of process shall be made upon the director, and in his absence, upon the chairman of the commission, and in his absence or their absence, then upon the vice-chairman of the commission.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.28 by HCR 84 of 2015 R.S.

§1139.9. District as a political subdivision; power to incur debt and issue general bonds

The ambulance service district is hereby declared to be a political subdivision of the state. For carrying out the purposes of the ambulance service district as provided in this Part, the district, pursuant to the provisions of the Louisiana Constitution of 1974, shall have the power to incur debt and issue general obligation bonds or revenue.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.29 by HCR 84 of 2015 R.S.

§1139.10. Federal and state aid

The ambulance service district created hereunder shall have full power to do such things and enter into any contracts and agreements with any state or federal agency or instrumentality as may be necessary to procure aids and grants to assist such districts in carrying out the purpose for which they are created.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.30 by HCR 84 of 2015 R.S.

§1139.11. Rules and regulations

The commission shall have the power, and it shall be its duty, to adopt rules and regulations, in accordance with the Administrative Procedure Act, for the proper disbursement of funds to participating providers. Such rules and regulations shall be submitted to the Senate and House committees on health and welfare and such committees shall have jurisdiction for purposes of the Administrative Procedure Act.

Acts 2010, No. 887, §1, eff. July 2, 2010; Redesignated from R.S. 40:1236.31 by HCR 84 of 2015 R.S.



CEA LDH-OPH/OFSM
July Monthly Report

July 1-7

- Request to open and request to pay documents completed to re-post the vacant position
- OTS meeting about connectivity issues in the office
- SR 161 Doodle calendar sent for inaugural meeting
- HCR 64 Doodle calendar sent for inaugural meeting

July 8-14

- Meet with DBSysgraph about new licensing portal
- High School EMR Refresher course attended by John Cavell
- Attended the NACCHO (National Association of City and County Health Officials) conference
- Met with Dr. Stefanski about PHU CPR Instructor Course
- Delta Community College Exam
- Gavin Istre starts at Exam Coordinator

July 15-21

- Super Summer High School Instructor course attended by John Cavell
- Initial HCR 64 meeting held on 7/18 at 9:00am
- Staff attended LSFA Conference in Shreveport
- Bossier Parish Community College Exam
- NEMSA Exam

July 22-28

- Task Force Meeting 7/24
- Attended LAA meeting and recognition luncheon on 7/25
- EMT Exam
- Advanced Exam

July 29-31

- Vacation

CEA LDH-OPH/OFSM
August Monthly Report

August 1-4

- Vacation

August 5-11

- NEMSA Exam Baton Rouge and Lafayette (2 days)
- PHU CPR Instructor meeting
- HCR 64 meeting
- Commission meeting

August 12-18

- NEMSA Exam (3 days)
- LSU FETI Exam
- First Data dump took place
- Rule Writing meeting about AED Rule

August 19-25

- PHU CPR Training
- Spoke at the Wyoming Trauma Conference
- Attended CAPCE Board of Directors meeting

August 26-31

- Stacy Barbay starts as Credentialing Coordinator
- SR 161 Meeting
- Submitted 2019 legislation request to correct language regarding duties and authority of EMS Certification Commission
- EMT Exam
- EMT Exam
- Advanced Exam
- Inventory due

New Portal Training

- The licensure portal will transfer to a new system after Thanksgiving 2018. Fifteen trainings have been scheduled throughout the state for EMS Instructors.
 - 9/17 – BEMS Office (9:00 AM)
 - 9/19 – St. Tammany Fire District 1 Academy (9:00 AM)
 - 9/20 – Jefferson Parish Fire Training Center (8:00 AM)
 - 9/21 – BEMS Office (9:00 AM)
 - 9/25 – Rapides Parish Schools Media Center (1:00 PM)
 - 10/3 – Ouachita Parish FD Training Center (2:00 PM)
 - 10/4 – Bossier Parish Community College (9:00 AM & 6:00 PM)
 - 10/5 – Natchitoches Parish Schools Media Center (9:00 AM)
 - 10/11 – Lafourche Parish Career Magnet Center (9:00 AM)
 - 10/12 – East Jeff Hospital Conference Center (1:00 PM)
 - 10/15 – NEMSA – Lafayette (1:00 PM)
 - 10/16 – Christus St. Patrick Hospital Auditorium (2:00 PM)
 - 10/17 – NEMSA – Lafayette (9:00 AM)
 - 10/25 – BEMS Office (9:00 AM)
- Once trained, instructors will operate the Beta version of the portal to identify any system errors before the full release.

Site Visits

- Since July 12, in order to ensure instructional integrity and program compliance, BEMS has performed six site visits and one scholastic audit of education programs.

EMS CERTIFICATION COMMISSION

Commissioner Status

Name	Agency	Expiration Date	Status
Ryan Brown	LMA, Paramedic	06/01/2019	
Tammy Gray	EMT	06/01/2019	Requested to be reappointed
Dr. Jeffrey Kuo	LSMA	06/01/2019	Requested to be reappointed
Christopher Mixon	Paramedic	06/01/2019	Requested to be reappointed
Travis Schulze	LSNA	06/01/2019	
Barbara Sellers	PFFA	06/01/2019	Requested to be reappointed
Jeff Watson	Public Administrator	06/01/2019	Requested to be reappointed
Dr. Jeffrey Elder	ACEP	06/01/2019	Has served two terms Requested to be reappointed
Mark Majors	Private Administrator	06/01/2018	Has served more than two terms
Dr. Lance Stuke	ACOS	06/01/2019	Has served two terms
Dr. Cristina Zerezke	AAP	06/01/2019	Requested to be reappointed Has not attended a meeting this year
Toby Henry	LFCA, Paramedic	04/01/2021	Replacement not required



State of Louisiana

Department of Health and Hospitals
Office of Public Health
Bureau of Emergency Medical Services

September 06, 2018

EMS Task Force

Report on licensing and EMS Certification Commission

EMS Certification Commission

Currently there are 44 pending cases for review and approval by the EMS Certification Commission.

The commission met on August 10, 2018 at 09:00 at the Bureau of EMS. At this meeting the commission was lacking the members necessary for a quorum. However, the members present cleared 154 pending cases. Of the cases cleared 11 were hearing scheduled for that date, these cases were handled as settlement conferences; and the commissioners then got to work and cleared 153 cases under the EMSCC deferred Decision Matrix. Currently there are only 39 cases pending in the EMS portal, they are all at varying stages in the process and will be handled as soon as possible.

The Commission has ratified the "EMSCC Deferred Decision Matrix" for use in performing quicker reviews and approvals for those individuals awaiting clearance and licensure.

The next EMS Certification Commission meeting is scheduled for October 12, 2018 at 09:00 at the Bureau of EMS.

Licensing Section

Currently there are 292 persons awaiting clearance for licensing in the portal, 44 of those cases are for legal issues, 80 are for training issues, and 185 have pending payment issues; of course, a few students are awaiting clearance for a couple of different issues.

JULY

First Time Psychomotor Exam Attempts

Scenario Exams	PA-Trauma	PA-Medical	CAM-AED	IOOHS	
7/26/2018	75%	75%	100%	0%	4 Candidates
	75%	75%	100%	0%	63%

Legacy Exam	PA-Trauma	PA-Medical	BVM Vent	Oxygen Adm	CAM	Spinal Supine	Random	
7/19/2018	92%	92%	83%	100%	83%	100%	83%	12 Candidates
7/26/2018	75%	83%	67%	100%	100%	92%	75%	13 Candidates
7/27/2018	50%	100%	83%	83%	100%	100%	83%	6 Candidates
	72%	92%	78%	94%	94%	97%	80%	87%

Paramedic	PA-Trauma	Dynamic Cardiology	Static Cardiology	Oral A	Oral B	IOOHS	
7/13/2018	73%	67%	60%	100%	87%	53%	15 Candidates
7/20/2018	94%	88%	24%	100%	100%	94%	17 Candidates
7/27/2018	100%	100%	100%	100%	100%	67%	3 Candidates
	89%	85%	61%	100%	96%	71%	84%

AUGUST
FIRST TIME PSYCHOMOTOR EXAM ATTEMPTS

Scenario Exams	PA-Trauma	PA-Medical	CAM-AED	IOOHS			
8/6/2018	96%	92%	96%	100%	24 Candidates		
8/6/2018	100%	82%	86%	86%	22 Candidates		
8/7/2018	83%	78%	100%	94%	18 Candidates		
8/7/2018	52%	90%	90%	86%	21 Candidates		
8/29/2018	0%	100%	0%	0%	1 Candidate		
8/31/2018	60%	100%	100%	80%	5 Candidate		
	65%	90%	79%	74%	77%		
Legacy Exam	PA-Trauma	PA-Medical	BVM Vent	CAM	Oxygen Adm	Spinal Supine	Random
8/29/2018	79%	53%	100%	53%	95%	100%	63%
8/30/2018	93%	79%	71%	64%	93%	79%	71%
8/31/2018	100%	86%	100%	100%	100%	43%	43%
	91%	73%	90%	72%	96%	74%	59%
							19 Candidates
							14 Candidates
							7 Candidates
							79%

Paramedic	PA-Trauma	Dynamic Cardiology	Static Cardiology	Oral A	Oral B	IOOHS	
8/13/2018	100%	90%	90%	100%	100%	100%	10 Candidates
8/14/2018	77%	77%	92%	77%	100%	31%	13 Candidates
8/15/2018	67%	42%	92%	100%	75%	83%	12 Candidates
8/31/2018	100%	0%	0%	100%	100%	100%	1 Candidate
	86%	52%	69%	94%	94%	79%	79%

Object Code Description	Object Code #	Budget Requested	Budget Allowed	Over/Under Request	Actual Expendit
Classified - Salary/Overtime	2100 & 2110	\$ 348,313.00	\$ 348,313.00	\$ -	\$ 295,85
Other Compensation/Wages/Overtime	2200 & 2250	\$ 45,344.00	\$ 45,344.00	\$ -	\$ 31,34
Related Benefits/State Retirement	2300	\$ 98,251.00	\$ 98,251.00	\$ -	\$ 88,62
Related Benefits/Medicare Tax	2360	\$ 5,708.00	\$ 5,708.00	\$ -	\$ 4,65
Related Benefits/Group Insurance	2380	\$ 12,727.00	\$ 12,727.00	\$ -	\$ 12,41
Salary and Benefits		\$ 510,343.00	\$ 510,343.00	\$ -	\$ 432,88
Hardward, Costing less than \$1,000 (not tagged)	4457	\$ 7,700.00	\$ 7,700.00	\$ -	
Equipment Sub-Total		\$ 7,700.00	\$ 7,700.00	\$ -	\$
IAT/Interagency Transfers	4940		\$ 150,000.00	\$ (150,000.00)	\$
IAT/Printing	4960	\$ 7,000.00	\$ 5,000.00	\$ 2,000.00	\$ 2,07
IAT/Rentals	5010	\$ 23,004.00	\$ 23,004.00	\$ -	\$ 21,38
IAT/Telephone and Telegraph	5040	\$ 10,000.00	\$ 10,000.00	\$ -	\$ 10,60
IAT/Operating Services (OTS)	5150	\$ 104,275.00	\$ 104,275.00	\$ -	\$ 153,75
Interagency Transfers Category Sub-Total		\$ 144,279.00	\$ 292,279.00	\$ (148,000.00)	\$ 187,80
Travel In-State/Conference & Conventions	2510	\$ 4,000.00	\$ 4,000.00	\$ -	\$ 65
Travel In-State/Field	2520	\$ 6,000.00	\$ 6,000.00	\$ -	\$ 1,37
Travel In-State/Commissioners	2530	\$ 2,000.00	\$ 500.00	\$ 1,500.00	\$ 60
Travel Out-State/Conference & Conventions	2610	\$ 17,500.00	\$ 12,500.00	\$ 5,000.00	\$ 5,18
Travel Sub-Total		\$ 29,500.00	\$ 23,000.00	\$ 6,500.00	\$ 7,91
Operating Service/Advertising	2700	\$ 300.00	\$ 300.00	\$ -	
Operating Service/Printing	2710	\$ 2,500.00	\$ 2,500.00	\$ -	\$ 18
Operating Service/Maintenance/Auto	2770	\$ 3,500.00	\$ 3,000.00	\$ 500.00	\$ 75
Maintenance-Property & Equipment - Other	2780			\$ -	\$ 73
Maintenance of Buildings	2790			\$ -	\$ 2,91
Operating Service/Maintenance/Equipment	2800	\$ 3,000.00	\$ 2,000.00	\$ 1,000.00	
Operating Service/Rental/Building	2830	\$ 97,500.00	\$ 97,500.00	\$ -	\$ 83,37
Operating Service/Rental/Equipment	2840	\$ 4,000.00	\$ 3,000.00	\$ 1,000.00	\$ 2,73
Operating Service/Dues & Subscriptions	2890	\$ 3,700.00	\$ 3,700.00	\$ -	\$ 3,00

[illegible]

MINUTES

HCR 64 EMS PROFESSIONAL WORKING GROUP

July 18, 2018

9:00am

In Attendance

Susan Bailey, Director of Bureau of EMS
Cecile Castello, LDH/Health Standards
Curry Landry, LAA
Emer. Physicans
Donna Newchurch, LAA
Traci Travis, OSFM

Call-in

Terry Blanchard, LANREMT
Chief Butch Browning, State Fire Marshal
Nancy Bourgeois, LA Chp. of American College of

Dr. Jeff Elder, EMS Certification Commission
Kirk Lacour, EMS Task Force
Chad Roberson, LA Fire Chief's Association

Approval of Minutes

This is the first meeting of this work group, therefore there are no minutes to review.

Introduction of Participants/Organization

All those in attendance introduced themselves and the represented organization.

Appointment of Chairperson & Recording Secretary

Terry Blanchard nominated Dr. Jeff Elder as the chairperson. Dr. Elder accepted the nomination and no one opposed.

Chief Butch Browning nominated Traci Travis (on his behalf) as the recording secretary and no one opposed.

Manner & Frequency of Meetings

Susan recommended that the group meet once per month for approximately seven months. After minimal discussion it was agreed that the meetings would be monthly, on the 2nd Thursday at 9:00am.

Susan volunteered to send a recurring calendar reminder for the meetings through February.

Purpose – Review, Discussion & Recommendations

The purpose of the work group is to make a recommendation as to the most appropriate location and statutory structure for the licensure of emergency medical personnel.

Dr. Elder asked Donna to share background information with the group. Donna mentioned that this idea originated in a report from 2012. Because of the large binder of information Donna indicated that she would send a link to the LAA site that has the history, including the summary notes of sub-committee and the recommendation.

Donna continued by stating that the biggest questions in the past (2012 – present) regarding the EMS Free Standing Board is the budge and representation on the board.

Dr. Elder agreed that one of the toughest things to determine will be the budget.

Cecile recommended that the work group take time to look at the summary documents and then make a recommendation at the next meeting. Once the recommendation is determined then the details can be decided. Susan agreed.

Cecile asked that in previous discussions were there funding source options recognized and moving forward how much funding would be needed?

Donna stated that previous reports have varied as to the budget amount. The previous committee reviewed alternative like the board of nursing by raising fees. According to Curry, the last time the licensure fees were increased was 2003. Cecile mentioned that statute must be changed to increase fees. Susan added that LERN had also been a model that was reviewed.

Dr. Elder asked if there were any groups that had not responded to this group. Susan stated that every group had been contacted and asked to provide representation. Additionally, she stated that Chad Major, representative for Professional Firefighters Association of LA, had indicated that he was unavailable for today's meeting due to him being on vacation.

Cecile asked who will bring the recommendation of funding forward to LDH and do they need to be included in this group? Chief Browning stated that this group is only to bring a report to LDH and this could be explained through a fiscal note. He continued by suggesting that we continue the discussions and see where this goes. Cecile agreed.

Nancy mentioned that she wanted to encourage those in the group to be available and provide an alternate if unable to attend the meetings.

With no other business to discuss the meeting was adjourned.

Next Meeting

Next meeting will be August 9, 2018 at 9:00am.

MINUTES

HCR 64 EMS PROFESSIONAL WORKING GROUP

August 9, 2018

9:00am

In Attendance

Susan Bailey, Director of Bureau of EMS
Chief Butch Browning, State Fire Marshal
Cecile Castello, LDH/Health Standards
Dr. Jeff Elder, EMS Certification Commission
Kirk Lacour, EMS Task Force
Traci Travis, OSFM

Call-in

Terry Blanchard, LANREMT
Donna Newchurch, LAA

Approval of Minutes

The meeting was called to order by Dr. Elder. The approval of the last meeting's minutes was not addressed and will be deferred to the next meeting.

Dr. Elder began by mentioning he had reviewed the historical documentation and believes the most questions refer to the budget. He asked that Susan provide what she can on the current costs.

Kirk mentioned that it would be helpful if the committee could get a line item budget to know what services and functions the bureau currently has, the "structure" the bureau needs to be better served, the budget that will be required and how the funds can be generated.

This would give an idea of what was needed in the structure; such as,

1. number of board members
2. number of staff, including position descriptions
3. legal costs
4. I.T. services and other support services

Dr. Elder stated that once the committee is provided a current breakdown of the BEMS budget then collectively as a group, bring forward possible funding sources. Since Donna had been involved with these committees he asked what her thoughts were. Donna stated that this was a great process and she's happy to be involved this time.

Dr. Elder urged Susan to provide the information of what the needs are for the bureau and what she needs to accomplish it.

Kirk suggested that as the committee works through this process he urged everyone to remain open-minded and to keep all options.

Purpose – Review, Discussion & Recommendations

With no other business to discuss the meeting was adjourned.

Next Meeting

Next meeting will be September 13, 2018 at 9:00am.

Primary Address Parish Name	Parish Count
Acadia	424
Allen	105
Ascension	1,373
Assumption	77
Avoyelles	137
Beauregard	114
Bienville	60
Bossier	492
Caddo	893
Calcasieu	836
Caldwell	125
Cameron	16
Catahoula	30
Claiborne	33
Concordia	88
De Soto	252
East Baton Rouge	1,290
East Carroll	14
East Feliciana	137
Evangeline	504
Franklin	102
Grant	196
Iberia	293
Iberville	348
Jackson	78
Jefferson	1,731
Jefferson Davis	109
La Salle	46
Lafayette	1,087
Lafourche	747
Lincoln	139
Livingston	1,611
Madison	9
Morehouse	59
Natchitoches	217
Orleans	693
Ouachita	627
Plaquemines	326
Pointe Coupee	99
Rapides	947
Red River	36
Richland	269
Sabine	81
St. Bernard	184
St. Charles	411
St. Helena	20
St. James	175
St. John the Baptist	214
St. Landry	411
St. Martin	346
St. Mary	356
St. Tammany	1,774
Tangipahoa	706
Tensas	13
Terrebonne	416
Union	102
Vermilion	341
Vernon	184
Washington	358
Webster	128
West Baton Rouge	369
West Carroll	37
West Feliciana	81
Winn	35
Total count	23511

Level	Count
Paramedic	90
Advanced	8
EMT	262
EMR	1477
Total last 90 days	1837

User Primary License Level	License Level	Percent
Advanced-EMT	149	0.56%
Paramedic	3,432	12.80%
Emergency Medical Technician	5,995	22.36%
Emergency Medical Responder	17,238	64.29%
	Total: 26,814	

These are the current statistics as of September 6, 2018:

1. Is a parish by parish breakdown, of everyone claiming a parish in the portal, and the total numbers of ems personnel living in that parish.
2. Is the number of individuals licensed in the past 90 days, broken down by level of licensure.
3. Is a breakdown of EMS Professionals licensed in the state, by level of license including a percentage factoring. This number is different because of out of state applicants, instructors, change in license level in the past year etc.

SENATE RESOLUTION 161
WORKING GROUP
AUGUST 27, 2018
MINUTES

I. Introductions of Participants/Organizations

Name/Organization	Present	Name/Organization	Present
Chris Hector LERN	X	Butch Browning OSFM	
Trevor J. Smith LSP	X	Ami Clouatre-Johnson GOHSEP	X
Chad Roberson LMA		Michael Ranatza LSA	
Ken Fontenot LSFA	X	Donna Newchurch LAA	X
Ronald Hoefeld NENA	X	Tracey Hilburn APCO	X
Christopher Guilbeaux LWIN	X	Ashley Hebert AHA	X
Tracy Wold Rural Amb. Providers	X	Jeff Watson Urban Amb. Providers	
Joshua Joachim ARC/Senate H&W Appt	X	Guy Cormier Police Jury Assn.	

Guests present:

Shawn Spaniel

Jack Varnado

Martha Carter

Rodney Hart

Tammy Armand

Fred McCann

II. Purpose: To study the delivery of 911 emergency medical services throughout the state and report findings and recommendations regarding 911 emergency call takers to the Senate Committee on Health and Welfare on or before February 1, 2019

A. Regulation of 911 emergency call takers in Louisiana

1. Organization

a. APCO - Association of Public-Safety Communications Officials

- i. An international leader committed to providing complete public safety communications expertise, professional development, technical assistance, advocacy and outreach to benefit our members and the public. (<https://www.apcointl.org/about-apco/>)

b. NENA - National Emergency Number Association

- i. The 9-1-1 Association improves 9-1-1 through research, standards development, training, education, outreach, and advocacy.
(<https://www.nena.org/page/mission2017>)
 - c. Calltaker – A public safety calltaker capable of receiving, assessing, prioritizing and classifying calls for service (police and/or fire and/or EMS) and operating public safety and/or PSAP communications equipment
(https://www.fema.gov/pdf/emergency/nims/njti_mrtd.pdf)
 - d. Dispatcher – A public safety dispatcher capable of receiving, prioritizing and distributing calls for service (police and/or fire and/or EMS) using a public safety radio system while coordinating, tracking and providing support to field units
(https://www.fema.gov/pdf/emergency/nims/njti_mrtd.pdf)
 - e. Telecommunicator – A public safety dispatcher capable of functioning as both a calltaker and a radio dispatcher as described above
(https://www.fema.gov/pdf/emergency/nims/njti_mrtd.pdf)
 - f. Parish legislation in each parish regulates the 911 system for that parish
2. Funding
 - a. 911 Grant Program
 - i. Requires 911 Coordinator appointed by the Governor
 - ii. Requires a 60/40 match
 - b. GIS Programs are very expensive and there is no funding for small parish to purchase the programs
 3. Structure
 - a. Barriers
 - i. Uniformity across 911 systems
 - ii. General call-taking standards
 - iii. Training of telecommunicators
 - iv. There is no statewide 911 umbrella and there is no interest to have one
 - v. There is no set of standards of statewide guidelines
 - b. Implementation of telephone CPR → Communication district versus Sheriff's office call takers
 - c. Implementation without proper funding will be very difficult
 4. Qualifications
 - a. There are no statewide minimum qualifications
 5. Other

- a. Liability issues – although there is a liability clause in Act 578, this does not prevent lawsuits and the expenses of being involved in a lawsuit
 - i. There is no accounting for the people who are unwilling or unable to perform CPR when providing telephone CPR instructions
- b. Maintenance of the accuracy of the CPR instructions when changes are made by AHA
- c. Job descriptions will be changed from telecommunicator to dispatcher or calltaker which will set the profession back 20 years
- d. Are there any other issues with 911 systems?
 - i. The only issue at this time is implementation of Telephone CPR
→ funding, personnel

III. Meeting dates

- A. Additional meeting dates have not been set.
- B. The Bureau of EMS will research
 - 1. The population of each parish and the correlating implementation date
 - 2. Communication districts that are impacted
 - 3. Sheriff's offices that are impacted
- C. Once information is obtained, a doodle calendar will be sent out to determine the next meeting date.



JOHN BEL EDWARDS
GOVERNOR



SUSAN FISHER BAILEY
DIRECTOR



Stacy Barbay Credentialing Coordinator

Ms. Barbay begins her career at BEMS after a 17-year employment with American Heart Association (AHA). During her early career with AHA, she worked with medical providers located in the Baton Rouge area as well as community volunteers and advocates to advance the AHA mission of saving more lives from cardiovascular

disease and stroke through various health initiative programs.

The next few years at AHA, she worked closely with government and statewide strategic collaborative partners to positively impact Stroke and STEMI systems of care throughout Louisiana, Mississippi and Alabama. In her most recent role, Ms. Barbay worked to promote the use of CPR in a five-state region as well as manage CPR Training Centers and Instructors, facilitated credentialing, quality assurance and course compliance.

After graduation from Southeastern Louisiana University with a Bachelor's of Science in Marketing with a minor in Management, Ms. Barbay began her career in the healthcare field working as the Business Manager for physician practices for over 15 years.

Stacy will graduate in September from the North Baton Rouge Leadership Course and previously served on the East Feliciana Long Range Planning Board.

Ms. Barbay believes her most important role and contribution in this lifetime is her only daughter, Ashton, son-in-law Austin, her 2-year-old grandson Kaiden and 9-month-old granddaughter Ava.

EMS TASK FORCE MEMBERS

NAME	EMAIL	ORGANIZATION	TERM EXPIRATION DATE
MEMBERS			
Jeffery Anderson	janderson@bpcc.edu	Louisiana Approved Education Program	12/31/2019
Justin Arnone	jarnone@brgov.com	Military Medic	12/31/2018
Terry Blanchard	Terryb102@yahoo.com	Louisiana Association of Nationally Registered EMTs	Appointee recommended by organization 12/31/2018
Nancy Bourgeois	laacep@bellsouth.net	American College of Emergency Physicians	Appointee recommended by organization 12/31/2018
Keith H. Carter	keith@medsouth1.com	Flight Medic	12/31/2019
Jacob Colbert	jcolbert3@tulane.edu	Licensed EMT	12/31/2018
Dr. Angela Cornelius	Angiepmd103@gmail.com	EMS Physician Medical Director	12/31/2019
Robert Daughdrill	rdaughdrill@suddenlink.net	Emergency Response and Preparedness	12/31/2019
Jeff Elder	jmelder@nola.gov	EMS Certification Commission	Ends with Certification Commission term
Carl Flores	cflores@nola.gov	Municipal Agency	12/31/2019
Maylyn Geissler	mgeissler@amednola.com	Private EMS Agency	12/31/2018
Aaron Johnson	jpasdemsdirector@aol.com	Ambulance Service District Administrator	12/31/2019
Kirk Lacour, Chair	klacour@accadian.com	CAAHEP EMS Education Program	12/31/2018
Brian Lindberg	Firemedic9440@yahoo.com	Fireman's Association	Appointee recommended by organization 12/31/2019
Chad Major	cffirewalker@aol.com	Professional Fire Fighters Association of Louisiana	Appointee recommended by organization 12/31/2018
Daniel McDonnell	Daniel.McDonnell@Shreveportla.gov	Fire EMS Agency	12/31/2018
Donna Newchurch	donna@newchurchassoc.com	Louisiana Ambulance Alliance	Appointee recommended by organization 12/31/2018
Brian Regan	brianregan@bellsouth.net	Industrial EMS Provider	12/31/2019
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Wendi Worsham	wendiworsham@gmail.com	High School Educator	12/31/2019

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Traci Travis	Traci.travis@la.gov	Office of the State Fire Marshal	
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John Cavell	John.Cavell@la.gov	Education Manager	
		Credentiaing Coordinator	
		Examination Coordinator	