

BILL ANALYSIS

S.B. 1899
By: Campbell
Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Interested parties contend that the law governing emergency medical services providers and licensees needs to be modified in order to better regulate the industry and improve consumer protections. These parties also contend that certain paramedics should be available as a resource for a health care facility and emergency room physician under certain circumstances. S.B. 1899 seeks to address these issues.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

Section 531.0055, Government Code, as amended by Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, expressly grants to the executive commissioner of the Health and Human Services Commission all rulemaking authority for the operation of and provision of services by the health and human services agencies. Similarly, Sections 1.16-1.29, Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, provide for the transfer of a power, duty, function, program, or activity from a health and human services agency abolished by that act to the corresponding legacy agency. To the extent practical, this bill analysis is written to reflect any transfer of rulemaking authority and to update references as necessary to an agency's authority with respect to a particular health and human services program.

S.B. 1899 amends the Health and Safety Code to authorize a person who is certified as an emergency medical technician-paramedic or a licensed paramedic, is acting under the delegation and direct supervision of a licensed physician, and is authorized to provide advanced life support by a health care facility to provide, in accordance with any necessary rules adopted as soon as practicable by the executive commissioner of the Health and Human Services Commission, advanced life support in the facility's emergency or urgent care clinical setting.

S.B. 1899 authorizes the Department of State Health Services (DSHS) to develop and administer, at least twice each calendar year, a jurisprudence examination to determine the knowledge that an applicant for an emergency medical services provider license or emergency medical services personnel certification has of the Emergency Health Care Act, executive commissioner rules, and any other applicable laws affecting the applicant's activities regulated under that act. The bill requires executive commissioner rules to specify who must take the examination on behalf of an entity applying for an emergency medical services provider license.

The bill includes among the requirements for an emergency medical services provider license that the applicant operates out of a physical location in compliance with the bill's provisions and that the applicant owns or has a long-term lease agreement for all equipment necessary for safe operation of an emergency medical services provider as provided by the bill's provisions.

S.B. 1899 requires an emergency medical services provider to have a permanent physical location as the provider's primary place of business and requires an applicant for an emergency medical services provider license to demonstrate proof of the location of the primary place of business in the manner required by DSHS. The bill authorizes the physical location to be owned or leased by the emergency medical services provider. The bill requires an emergency medical services provider to remain in the same physical location for the period of licensure, unless DSHS approves a change in location. The bill requires an emergency medical services provider to maintain all patient care records in the physical location that is the provider's primary place of business, unless DSHS approves an alternate location, and specifies that only one emergency medical services provider may operate out of a single physical location. The bill requires an emergency medical services provider to own or hold a long-term lease for all equipment necessary for the safe operation of an emergency medical services provider, including emergency medical services vehicles, heart rate monitors, defibrillators, stretchers, and any other equipment DSHS determines is required. The bill requires an applicant for an emergency medical services provider license to demonstrate proof of compliance with that necessary equipment requirement in the manner required by DSHS. The bill specifies that these provisions apply only to a person that applies for a license or renews a license as an emergency medical services provider on or after September 1, 2015.

S.B. 1899 requires DSHS to track and keep records of each complaint it received regarding emergency medical services providers and emergency medical services personnel and of each investigation and disciplinary action initiated by DSHS under the Emergency Health Care Act. The bill requires DSHS, as soon as practicable, to develop a formal process to refer complaints outside DSHS jurisdiction to the appropriate agency for disposition. The bill requires DSHS to track the types of complaints received outside of its jurisdiction and requires DSHS to separately track complaints outside of its jurisdiction relating to potential billing fraud and make information relating to those complaints available to the appropriate state agency. The bill requires DSHS to annually report statistical information regarding each complaint received, and each investigation or disciplinary action initiated, under the Emergency Health Care Act and prescribes the required contents of the report. The bill requires DSHS to make the report available to the public through publication on the DSHS website and on request.

S.B. 1899 authorizes DSHS to use an inspection of an emergency medical services vehicle or the premises of an emergency medical services provider's place of business performed by an entity to which DSHS has delegated inspection authority as a basis for disciplinary action and specifies that such an inspection may be used regardless of whether the inspection was performed before, on, or after the bill's effective date.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2015.