The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

	Prepare	d By: The	Professional Staff	of the Committee	on Community A	ffairs		
BILL:	SB 520							
NTRODUCER:	Senator Bradley							
SUBJECT:	Emergency	y Medical	Services					
DATE:	March 07, 2013 REVISED:							
ANALYST		STAFF DIRECTOR		REFERENCE		ACTION		
Looke		Stovall		HP	Favorable			
Anderson		Yeatman		CA	Favorable			
				AP				

I. Summary:

SB 520 amends various sections of law regarding the provision of emergency medical services (EMS) to:

- Remove emergency personnel certified under ch. 401, F.S., from the instruction requirements on human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) contained in s 381.0034, F.S.
- Strike the requirement that any curricula for training emergency medical technicians (EMT) and paramedics include 4 hours of HIV/AIDS instruction.
- Tie the definitions of advanced life support and basic life support to the EMT Paramedic National Standard and the EMT – Basic National Standard, respectively, as well as the National EMS Education Standards of the United States Department of Transportation (USDOT).
- Add those National EMS Education Standards approved by the Department of Health (DOH) to the allowed standards on which EMS trainers may base their curricula.
- Increase, from 1 year to 2 years, the period of time within which an EMT or a paramedic must pass their required certification exam after completing their training program.
- Increase, from 2 years to 5 years, the period of time within which the DOH must revise its comprehensive state plan for basic and advanced life support systems.

This bill substantially amends sections 381.0034, 401.23, 401.24, 401.27, and 401.2701, F.S.

II. Present Situation:

EMT and Paramedic Training and Examination

The EMT – Basic¹ and the EMT – Paramedic² National Standard Curricula, as well as the EMS Education Standards,³ lay out national standards for training emergency personnel. These curricula were developed by the USDOT and are the educational standards that must be met before an EMT or paramedic can be nationally certified by the National Registry of Emergency Medical Technicians (NREMT).⁴ By rule, the DOH requires all EMTs and paramedics to meet the training requirements of the 1994 EMT – Basic National Standard Curricula⁵ and the 1998 EMT – Paramedic National Standard Curricula,⁶ respectively. The USDOT updated those curricula most recently in 2010.⁷

The EMS Education Standards were completed in 2009 and define minimum entry level competencies for each level of EMS personnel. The Standards are meant to phase out the older National Standard Curricula and are less rigid in format than the National Standard Curricula. This less rigid format supports diverse implementation methods and more frequent content updates.⁸

Currently, Florida has reciprocity with the NREMT for the administration of the EMT certification exam and the DOH develops and administers the certification exam for paramedics. ^{9,10} Florida requires that EMTs and paramedics sit for their examination within 1 year of completing their training requirements. Nationally, EMTs and paramedics are allowed to sit for their exam within 2 years of completing their training. ¹¹

HIV/AIDS Training

Persons listed in s. 381.0034(1), F.S., including those certified under ch. 401, F.S., (EMTs, paramedics, and 911 public safety telecommunicators) are required to complete training on the transmission, infection control procedures, clinical management, and prevention of HIV and AIDS. To comply with s. 381.0034, F.S., and s. 401.2701, F.S., any public or private institution in Florida that conducts an approved program for the education of EMTs and paramedics must include in its curricula 4 hours of instruction on HIV/AIDS. According to the DOH, these HIV/AIDS training requirements for EMTs and paramedics are duplicative because EMTs and

¹ Found at: http://www.nhtsa.gov/people/injury/ems/pub/emtbnsc.pdf, last visited on Feb. 14, 2013.

² Found at: http://www.health.ny.gov/professionals/ems/original/intro/intro.pdf, last visited on Feb. 14, 2013.

³ Found at: http://www.ems.gov/pdf/811077a.pdf, last visited on Feb. 14, 2013.

⁴ Entry requirements for EMT – Basic found at: https://www.nremt.org/nremt/about/reg basic history.asp, last visited on Feb. 15, 2013.

⁵ Rule 64J-1.008(1)(a).

⁶ Rule 64J-1.009(1)(a).

⁷ Department of Health Bill Analysis of SB 520, Jan. 31, 2013, on file with the Senate Committee on Health Policy.

⁸ *Education*, National Highway Safety and Transportation Administration – Emergency Medical Services, *found at* http://www.ems.gov/EducationStandards.htm, last visited on Feb. 18, 2013.

⁹http://doh.state.fl.us/mqa/EMT-Paramedic/emt-lic-requirements.html#, last visited on Feb. 15, 2013.

¹⁰ http://doh.state.fl.us/mqa/Exam/schedule-pmd.htm, last visited on Feb. 15, 2013.

¹¹Supra 7.

paramedics are also required to complete separate training on blood borne pathogens which includes HIV/AIDS. 12

Florida's EMS Strategic Plan

Section 401.24, F.S., requires that the DOH develop a comprehensive state plan¹³ for basic and advanced life support services. This plan must be updated every 2 years and must include, at a minimum:

- Emergency medical systems planning, including the prehospital and hospital phases of
 patient care, injury control efforts, and the unification of such services into a total delivery
 system to include air, water, and land transport.
- Requirements for the operation, coordination and ongoing development of emergency medical services which include: basic life support or advanced life support vehicles, equipment, and supplies; communications; personnel; training; public education; state trauma system; injury control; and other medical care components; and
- The definition of areas of responsibility for regulating and planning the ongoing and developing delivery service requirements.

III. Effect of Proposed Changes:

Section 1 amends s. 381.0034, F.S., to remove persons certified under ch. 401, F.S., from those people who are required to complete a course on the modes of transmission, infection control procedures, clinical management, and prevention of HIV and AIDS.

Section 2 amends s. 401.23, F.S., to modify the definitions of "advanced life support" and "basic life support" to:

- Include assessment by qualified persons as part of the definitions in order to update the law to current practice standards.
- Tie the techniques used for advanced life support to those listed in the EMT Paramedic National Standard Curriculum and the National EMS Education Standards, pursuant to the DOH rules.
- Tie the techniques used for basic life support to the techniques listed in the EMT Basic National Standard Curriculum and the National EMS Education Standards which are approved by the DOH.

Section 3 amends s. 401.24, F.S., to increase the period of time within which the DOH must revise their EMS state plan from every 2 years to every 5 years.

Section 4 amends s. 401.27, F.S., to require training programs for EMTs and paramedics (including those programs taken by EMTs and paramedics trained outside of the state who wish to become certified in Florida) be programs approved by the DOH which are equivalent to the

¹² Id.

¹³ The state plan for 2012-2014 can be found at http://www.doh.state.fl.us/demo/ems/Stratplan/2012-2014EMS StratPlanFinalCopy.pdf, last visited on Feb. 15, 2013.

most recent EMT – Basic National Standard Curriculum (for EMTs), the most recent EMT – Paramedic National Standard Curriculum (for paramedics), or to the National EMS Education Standards (for both EMTs and paramedics). This section also increases, from 1 year to 2 years, the amount of time that EMTs and paramedics are allowed to pass their certification exam after completing their training.

Section 5 amends s. 401.2701, F.S., to allow EMS training programs to use those EMS Education Standards approved by the DOH in developing their curricula and course examinations. This section also strikes the requirement for EMS training programs to include 4 hours of HIV/AIDS training in their courses.

Section 6 provides an effective date of July 1, 2013.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

SB 520 will likely have an indeterminate positive fiscal effect on EMTs, paramedics, and trainers by removing duplicative HIV/AIDS training provisions.

C. Government Sector Impact:

The DOH places the total government sector costs for implementation of this bill at \$3,790, which will be used for the promulgation of new rules.

VI. Technical Deficiencies:

None.

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None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.