

SB 99 – Updating certain emergency medical services-related statutes.

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Proponent Testimony

Chairman Barker and members of the committee, thank you for the opportunity to provide testimony in support of SB 99.

SB 99 is a culmination of 4 items that appropriately reflect the ongoing development and associated changes within emergency medical services in Kansas.

- 1) Inactive status – EMS certified individuals have dedicated a significant amount of time, effort, education, and expense to serve their communities and take pride in being recognized as an EMS provider. These individuals desired a pathway to hold on to that certification when life happens as well as an expedited means to return to service when they desire or when life normalizes. SB 99 formally provides that continued recognition and allows the EMS board to create the pathway.
- 2) Criminal History Record Check – The 2016 Kansas Legislature enacted SB 225 creating K.S.A. 65-6158 that allowed Kansas to participate in the Interstate Compact for Recognition of Emergency Personnel Licensure – now termed the EMS Compact. Known at the time of enactment, a subsection of this bill and law requires Kansas to codify the completion of a criminal history record check through fingerprint or other biometric data checks of all applicants for initial licensure within five years of activation of the compact. The compact was activated in May 2017. SB 99 appropriately addresses this requirement.
- 3) Minimum meeting number – Current law requires the emergency medical services board to meet at least six times annually with at least one meeting each quarter. When the emergency medical services board was initially formed in 1988, this was no doubt necessary to keep items moving and adjustments time appropriate. Since 2014, we have seen a more focused approach to the meetings, a more focused approach to regulatory development, and greater public involvement outside of these six meetings. This combination of effects has reduced the duration of nearly all of our meetings as we appear to have reached the point of fine tuning. SB 99 does not mandate only meeting four times a year, but does allow the Board the ability to cancel a meeting if there is nothing to discuss, or inclement weather occurs, rather than to reschedule. The flexibility granted by SB 99 would be a beneficial tool in our toolbox.
- 4) Terminology changes – Our board reviews the EMS statutes regularly looking for items that are no longer applicable. We have completed the period of transitioning EMS providers to a newer scope of practice and that has rendered 5 levels of certification obsolete – training officer, emergency medical technician – intermediate, emergency medical technician – defibrillator, emergency medical technician – intermediate/defibrillator, and mobile intensive care technician. There were also some other terminology changes that had occurred and instances that were missed during those revisions in reference to “sponsoring organization” and “medical director”. The last change in terminology comes from EMS providers across the state and ultimately leads to reduced confusion. EMS statutes have referred to those that have attained any of the multiple levels of certification as “attendants”. In Kansas statutes, “attendant” has multiple

meanings across multiple industries – EMS, parking lots, fuel stations, adult care homes, and even hospitals. In an effort to clarify, SB 99 changes reference of “attendant” to “emergency medical service providers” throughout all Kansas statutes. SB 99 appropriately addresses all of these changes in terminology and scope to accurately reflect what is current within practice.

Every year in May, the Emergency Medical Services Board conducts an open constituent meeting in Salina to specifically discuss any items that may require further legislation or regulatory revision/addition/deletion. Each of these items has appeared in at least the last three meetings, some have been topics for a significantly longer time.

SB 99 appropriately addresses necessary changes in Kansas statute specifically for EMS providers.

These changes:

- recognize the value of EMS certification to a provider;
- meet EMS Compact requirements for continued participation;
- clear confusion and outdated terminology from Kansas statute; and,
- give the emergency medical services board some additional flexibility to continue to work more efficiently.

We urge your support of SB 99 and its favorable passage.

We appreciate your time and consideration. I am happy to stand for questions at the appropriate time.