

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 657

Session of
1979

INTRODUCED BY MESSRS. MILLER, SCHWEDER, NOYE, STUBAN, COLE,
ZORD, MRKONIC, REED AND MRS. ARTY, MARCH 13, 1979

SENATOR COPPERSMITH, PUBLIC HEALTH AND WELFARE, IN SENATE,
AS AMENDED, JUNE 27, 1979

AN ACT

1 Reenacting and amending the act of November 30, 1976 (P.L.1207,
2 No.265), entitled "An act to provide assistance and
3 encouragement for the development of comprehensive area
4 emergency medical services systems," redefining the word
5 "rural," further providing for applications for grants and
6 contracts, including rescue services and critical care units,
7 authorizing additional grants and contracts, reducing the
8 amount above which grants must be recommended, REGULATING THE <—
9 LICENSING, INSPECTION AND OPERATION OF AMBULANCE SERVICES,
10 AND AMBULANCE PERSONNEL, PROVIDING FOR RENEWAL AND REVOCATION
11 OF LICENSES, PROVIDING PENALTIES and extending the life of
12 the act.

13 The General Assembly of the Commonwealth of Pennsylvania
14 hereby enacts as follows:

15 Section 1. The act of November 30, 1976 (P.L.1207, No.265),
16 known as the "Emergency Medical Services Systems Act," is
17 reenacted and amended to read:

18 Section 1. Short Title.--This act may be known and cited as
19 the "Emergency Medical Services Systems Act."

20 Section 2. Definitions.--For the purposes of this act:

21 "ADVISORY BOARD" MEANS THE ADVISORY BOARD ON AMBULANCE <—
22 SERVICE.

1 "AMBULANCE" MEANS ANY MOTOR VEHICLE THAT IS SPECIALLY
2 DESIGNED, CONSTRUCTED, OR MODIFIED AND EQUIPPED, AND ANY
3 AIRCRAFT WHICH IS SPECIALLY DESIGNED, CONSTRUCTED, OR MODIFIED
4 AND EQUIPPED AND IS USED OR INTENDED TO BE USED, MAINTAINED OR
5 OPERATED FOR THE PURPOSE OF RENDERING EMERGENCY MEDICAL CARE TO,
6 AND TRANSPORTATION OF PATIENTS.

7 "AMBULANCE SERVICE" MEANS REGULARLY ENGAGING IN THE BUSINESS
8 OR SERVICE OF PROVIDING EMERGENCY MEDICAL CARE AND
9 TRANSPORTATION OF PATIENTS WITHIN THE COMMONWEALTH.

10 "AMBULANCE TECHNICIAN" MEANS AN INDIVIDUAL WHO IS CERTIFIED
11 BY THE DEPARTMENT OF HEALTH AS HAVING SUCCESSFULLY COMPLETED AN
12 APPROVED COURSE OF INSTRUCTION IN ADVANCED FIRST AID AND
13 CARDIOPULMONARY RESUSCITATION.

14 "DEPARTMENT" MEANS THE DEPARTMENT OF HEALTH OF THE
15 COMMONWEALTH OF PENNSYLVANIA.

16 "Emergency health services council" means an organization
17 not-for-profit which is recognized by the Department of Health
18 as representative of the health professions and major public and
19 voluntary agencies, organizations and institutions concerned
20 with providing emergency health care; and whose functions are to
21 develop and implement comprehensive emergency health services
22 programs within a defined area of the Commonwealth.

23 "Emergency medical services system" means a system which
24 provides for the arrangement of personnel, facilities and
25 equipment for the effective and coordinated delivery of
26 emergency health care services required in management of
27 incidents which occur either as a result of a patient's
28 condition or of natural disasters or similar situations.

29 "EMERGENCY MEDICAL TECHNICIAN" MEANS AN INDIVIDUAL WHO IS
30 CERTIFIED BY THE DEPARTMENT PURSUANT TO THE ACT OF NOVEMBER 30,

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1 1976 (P.L.1205, NO.264), ENTITLED "AN ACT DEFINING EMERGENCY
2 MEDICAL TECHNICIAN; AUTHORIZING SUCH PERSONNEL TO RENDER
3 EMERGENCY CARE; EXEMPTING SUCH PERSONNEL AND PHYSICIANS WORKING
4 IN CONJUNCTION WITH THEM FROM CIVIL LIABILITY WHEN RENDERING
5 SUCH CARE; AND MAKING REPEALS."

6 "INVALID COACH" MEANS ANY LAND OR AIR VEHICLE THAT IS
7 MAINTAINED, OPERATED, AND INTENDED TO BE USED PRIMARILY TO
8 TRANSPORT PERSONS ROUTINELY WHO ARE CONVALESCENT, OR OTHERWISE
9 NONAMBULATORY, AND DO NOT REQUIRE MEDICAL TREATMENT WHILE IN
10 TRANSIT.

11 "PATIENT" MEANS ANY INDIVIDUAL WHO IS SICK, INJURED, WOUNDED
12 OR OTHERWISE INCAPACITATED OR HELPLESS.

13 "RESCUE VEHICLE" MEANS ANY MOTOR VEHICLE WHICH IS DESIGNED
14 AND EQUIPPED FOR RESCUE OPERATIONS AND WHICH IS NOT USED FOR
15 EMERGENCY MEDICAL CARE AND TRANSPORT OF PATIENTS.

16 "Rural" means [an area outside the standard metropolitan
17 statistical area.] areas outside urbanized areas defined by the
18 United States Bureau of Census.

19 "Secretary" means the Secretary of Health.

20 Section 3. Grants and Contracts for Organization of
21 Emergency Health Services Councils.--(a) The secretary shall
22 make grants to and enter into contracts with eligible entities
23 as defined in section 7(a) for projects to organize emergency
24 health services councils.

25 (b) If any grants or contracts are entered into under this
26 section for organization of an emergency health services
27 council, no other grant or contract may be entered into under
28 this section for any other council for the same area or for an
29 area which includes, in whole or substantial part, such area.

30 (c) Reports of any studies assisted under this section shall

1 be submitted to the Department of Health at such intervals as
2 may be prescribed, and a comprehensive emergency health services
3 plan for the geographic area served by the council shall be
4 submitted not later than one year from the date the grant was
5 made or the contract entered into, as the case may be.

6 (d) An application for a grant or contract under this
7 section shall:

8 (1) demonstrate the need of the area for which the study and
9 planning will be done for an emergency medical services system;

10 (2) contain qualitative data that the applicant is qualified
11 to plan an emergency medical services system for such area; and

12 (3) contain pertinent information assuring that the planning
13 will be conducted in cooperation with each [areawide
14 comprehensive health planning agency] regional health systems
15 agency whose plan covers, in whole or in part, such area.

16 (e) Project funds under this section may be used only for
17 the following purposes:

18 (1) Salaries and related benefits and travel of council
19 staff.

20 (2) Leasing or rental of office space.

21 (3) Procurement of office furniture, equipment and supplies.

22 (4) Printing and duplicating costs.

23 (f) In the event that an established entity has received,
24 prior to the effective date of this act, from the Department of
25 Health, a declaration of recognition that agency shall become
26 the emergency health services council under this act.

27 Section 4. Training in Emergency Medical Services.--(a)
28 Grants may be made and contracts entered into with schools of
29 medicine, [osteopathy,] osteopathic medicine, nursing, training
30 centers for allied health professions, teaching hospitals and

1 other appropriate entities to assist in meeting the cost of
2 training programs in the techniques and methods of providing
3 emergency medical services, including the skills required in
4 connection with the provision of ambulance and rescue services.

5 (b) No grant or contract may be made or entered into under
6 this section unless an application has been submitted to the
7 Department of Health. Such application shall be in such format
8 as prescribed by regulation. Grantees and contractees under this
9 section shall make such reports at such intervals, and
10 containing such information, as required.

11 Section 5. Grants and Contracts for Establishing or
12 Expansion and Improvement of Emergency Health Services
13 Systems.--(a) The secretary shall make grants to and enter into
14 contacts with eligible entities, as defined in section 7(a) for
15 the establishment, initial operation or expansion and
16 improvement of emergency medical services systems which
17 coordinate with the Statewide emergency medical services plan.

18 (b) (1) Grants and contracts under this section may only be
19 used for costs associated with establishment, expansion and
20 improvement of emergency medical services systems through:

21 (i) Purchasing of ambulance and ambulance equipment.

22 (ii) Purchasing of communications equipment.

23 (iii) Purchasing of certain equipment for hospital emergency
24 departments.

25 (iv) Providing programs of public education and information
26 regarding the emergency medical services system.

27 (2) Project funds may not be used for the following:

28 (i) Construction of new facilities.

29 (ii) Acquisition of facilities.

30 (iii) Purchase of built-in hospital equipment which will be

1 used more than 25% of the time for nonemergency uses.

2 (iv) Establishment, expansion or improvement of services or
3 facilities involved in the care of patients in the normal
4 hospital environs or in any other care facility, except for
5 those customarily associated with the emergency department or
6 critical care units.

7 (v) Maintenance of equipment or replacement of supplies.

8 (vi) Costs normally borne by the patient.

9 (3) Each grant or contract under this section shall be made
10 for costs of establishment and operation in the year for which
11 the grant or contract is made. If a grant or contract is made
12 under this section for a system, [one] additional [grant or
13 contract] grants or contracts for that system shall be made
14 after a review of the first nine months' activities of the
15 applicant carried out under the [first] present grant or
16 contract, if it is determined that the applicant is
17 satisfactorily progressing in the establishment and operation of
18 the system in accordance with the plan contained in his
19 application, pursuant to section 7, for the [first] grant or
20 contract.

21 (4) Subject to section 7(e):

22 (i) The amount of the [first] 1979-1980 grant or contract
23 under this section for an emergency medical services system may
24 not exceed [50%] 40% of the eligible costs.

25 (ii) The amount of the [second] 1980-1981 grant or contract
26 under this section for a system may not exceed [25%] 30% of the
27 eligible costs.

28 (iii) The amount of the 1981-1982 grant or contract under
29 this section for a system may not exceed 25% of the eligible
30 costs.

1 Section 6. Grants and Contracts for Research.--(a) The
2 secretary may make grants to public or nonprofit entities and
3 enter into contracts with public entities and nonprofit
4 organizations for the support of research in emergency medical
5 techniques, methods, devices and delivery. Special consideration
6 shall be given to applications for grants or contracts for
7 research relating to the delivery of emergency medical services
8 in rural areas.

9 (b) No grant may be made or contract entered into under this
10 section for amounts in excess of [\$35,000] \$25,000 unless the
11 application has been recommended for approval by a peer review
12 panel designated or established by the secretary. Any
13 application for a grant or contract under this section shall be
14 submitted in such form and manner and contain such information
15 as prescribed in regulations.

16 (c) The recipient of a grant or contract under this section
17 shall make such reports as may be required by regulation.

18 Section 7. General Provisions Respecting Grants and
19 Contracts.--(a) For purposes of sections 3, 5 and 6, the term
20 "eligible entity" means:

- 21 (1) a unit of general local government;
- 22 (2) an emergency health services council;
- 23 (3) a public entity administering a compact or other
24 regional arrangement or consortium; or
- 25 (4) any other public entity and any nonprofit entity.

26 (b) (1) No grant or contract may be made under this act
27 unless an application has been submitted to, and approved by,
28 the Department of Health.

29 (2) No application for a grant or contract under sections 3,
30 5 or 6 may be approved unless:

1 (i) the application meets the application requirements of
2 such sections;

3 (ii) each areawide Health Service Agency, if any, whose plan
4 covers, in whole or in part, the service area of such system,
5 has had not less than 30 days, measured from the date a copy of
6 the application was submitted to the agency by the applicant, in
7 which to comment on the application;

8 (iii) the applicant agrees to maintain such records and make
9 such reports as necessary to carry out the provisions of this
10 section, including information pertaining to all other sources
11 of applicant income;

12 (iv) the application is submitted in such form and such
13 manner and contains such information, including specification of
14 applicable provisions of law or regulations which restrict the
15 full utilization of the training and skills of health
16 professions and allied and other health personnel in the
17 provision of health care services in such a system, as
18 prescribed in regulations; and

19 (v) an emergency medical services system shall:

20 (A) include an adequate number of health professionals,
21 allied health professionals, and other health personnel with
22 appropriate training and experience;

23 (B) provide for its personnel continuous training, including
24 clinical training and continuing education programs which are
25 coordinated with other programs in the system's service area
26 which provide similar training and education;

27 (C) join the personnel, facilities and equipment of the
28 system by a central communications system so that requests for
29 emergency health care services will be handled by [a]
30 communications [facility] facilities which (I) utilizes

1 emergency medical telephonic screening to determine the
2 appropriate emergency service response, (II) utilizes the
3 universal emergency telephone number 911, and (III) will have
4 direct communication network connections with the personnel,
5 facilities, and equipment of the system and with other
6 appropriate emergency medical services systems;

7 (D) include an adequate number of necessary ground, air, and
8 water vehicles and transportation means to meet the individual
9 characteristics of the system's service area which (I) vehicles
10 and facilities meet design criteria relating to location,
11 design, performance, and equipment, and (II) the operators and
12 other personnel of these said vehicles and facilities meet
13 appropriate training and experience requirements;

14 (E) include an adequate number of easily accessible
15 emergency medical services facilities which are collectively
16 capable of providing services on a continuous basis, which have
17 appropriate nonduplicative and categorized capabilities, which
18 meet appropriate standards relating to capacity, location,
19 personnel, and equipment and which are coordinated with other
20 health care facilities of the system;

21 (F) provide access, including appropriate transportation, to
22 specialized critical medical care units in the system's service
23 area, or, if there are no such units or an inadequate number of
24 them in such area, provide access to such units in neighboring
25 areas if access to such units is feasible in terms of time and
26 distance;

27 (G) provide for the effective utilization of the appropriate
28 personnel, facilities, and equipment of each agency providing
29 emergency services in the system's service area;

30 (H) be organized in a manner that provides persons who

1 reside in the system's service area and who have no professional
2 training or financial interest in the provision of health care
3 with an adequate opportunity to participate in the making of
4 policy for the system;

5 (I) provide, without prior inquiry as to ability to pay,
6 necessary emergency medical services to all patients requiring
7 such services;

8 (J) provide for transfer of patients to facilities and
9 programs which offer such followup care and rehabilitation as is
10 necessary to effect the maximum recovery of the patient;

11 (K) provide for a standardized patient data collection
12 system which data shall cover all phases of the system;

13 (L) provide programs of public education and information in
14 the system's service area, taking into account the needs of
15 visitors to, as well as residents of, that area to know or be
16 able to learn immediately the means of obtaining emergency
17 medical services, which programs stress the general
18 dissemination of information regarding appropriate methods of
19 first aid and cardiopulmonary resuscitation and regarding the
20 availability of first aid training programs in the area;

21 (M) provide for (I) periodic, comprehensive and independent
22 review and evaluation of the extent and quality of the emergency
23 health care services provided in the system's service area, and
24 (II) submission to the Department of Health of the reports of
25 each such review and evaluation;

26 (N) have a plan to assure that the system will be capable of
27 providing emergency medical services in the system's service
28 area during mass casualty situations, natural disasters, or
29 declared states of emergency, in consonance with 35 Pa.C.S. §
30 7101, et seq. (referring to emergency management services) and

1 in coordination with the Pennsylvania Emergency Management
2 Agency; and

3 (0) provide for the establishment of appropriate
4 arrangements with emergency medical services systems or similar
5 entities serving neighboring areas for the provision of
6 emergency medical services on a reciprocal basis where access to
7 such services would be more appropriate and effective in terms
8 of the services available, time and distance.

9 The secretary shall by regulations prescribe standards and
10 criteria for the requirements prescribed by this subsection. The
11 secretary may adjust the guidelines based on regional
12 variations. In prescribing such standards and criteria, the
13 secretary shall consider relevant standards and criteria
14 prescribed by other public agencies and by private
15 organizations.

16 (c) The Department of Health shall provide technical
17 assistance, as appropriate, to eligible entities as necessary
18 for the purpose of their preparing applications or otherwise
19 qualifying for or carrying out grants or contracts under
20 sections 3, 4, 5 or 6, with special consideration for applicants
21 in rural areas.

22 (d) Payments under grants and contracts under this act may
23 be made in advance or by way of reimbursement and in such
24 installments and on such conditions as the secretary determines
25 will most effectively carry out this act.

26 (e) In determining the amount of any grant or contract under
27 sections 3, 4, 5 or 6, the amount of funds available to the
28 applicant from Federal grant or contract programs pertaining to
29 emergency health services shall be taken into consideration.

30 (f) Non-State contributions shall be cash and may include

1 the outlay of money to the grantee by private, public or
2 governmental third parties, including the Federal Government.

3 (g) Anyone applying for and/or receiving funds under this
4 act shall not be precluded from applying for and/or receiving
5 funds under any other State or Federal program.

6 Section 8. Administration.--(a) The secretary shall
7 administer the program of grants and contracts authorized by
8 this act through an identifiable administrative unit within the
9 Department of Health. Such unit shall also be responsible for
10 collecting, analyzing, cataloging, and disseminating all data
11 useful in the development and operation of emergency medical
12 services systems, including data derived from reviews and
13 evaluations of emergency medical services systems assisted under
14 section 5.

15 (b) The secretary may waive compliance with regulations as
16 they pertain to certain specific eligible entities if he
17 determines that compliance is not necessary for a specific
18 eligible entity to set up and operate an emergency medical
19 services system provided that due notice is given of such
20 action.

21 Section 9. Annual Report.--The secretary shall prepare and
22 submit annually to the General Assembly a report on the
23 administration of this act. Each report shall include an
24 evaluation of the adequacy of the provision of emergency medical
25 services in the Commonwealth during the period covered by the
26 report, and evaluation of the extent to which the needs for such
27 services are being adequately met through assistance provided
28 under this act, and a full accounting of program expenditures,
29 the purpose for which each grant is awarded and the amount of
30 such grants, and his recommendations for such legislation as he

1 determines is required to provide emergency medical services at
2 a level adequate to meet such needs. Such report shall also
3 include accounting of any funds appropriated by governmental
4 sources which are used by the department or its grantees,
5 including the purposes for which such funds are used.

6 Section 10. Appropriations to Rural Areas.--Not less than
7 [20%] 30% of the appropriations FOR EMERGENCY MEDICAL SERVICES <—
8 made pursuant to this act shall be made available for grants and
9 contracts under this act for such fiscal year for emergency
10 medical services systems which service or will serve rural
11 areas.

12 SECTION 11. GENERAL PROVISIONS.--THE SECRETARY SHALL HAVE <—
13 THE POWER AND DUTY TO:

14 (1) ESTABLISH AND CERTIFY MINIMUM STANDARDS WITH THE
15 APPROVAL OF THE ADVISORY BOARD FOR TRAINING OF AMBULANCE
16 TECHNICIANS.

17 (2) ESTABLISH MINIMUM STANDARDS WITH THE APPROVAL OF THE
18 ADVISORY BOARD FOR THE LICENSURE OF AMBULANCE SERVICES.

19 (3) MAKE INSPECTIONS OF AMBULANCE SERVICES, THEIR
20 AMBULANCES, EQUIPMENT, AND PERSONNEL CERTIFICATES TO DETERMINE
21 COMPLIANCE WITH THIS ACT AND ANY REGULATIONS PROMULGATED
22 PURSUANT THERETO, IN THE ABSENCE OF AN INSPECTION BY AN
23 EMERGENCY HEALTH SERVICES COUNCIL OR A LOCAL HOSPITAL CERTIFIED
24 IN ACCORDANCE WITH RULES AND REGULATIONS PROMULGATED PURSUANT
25 HERETO.

26 (4) PROMULGATE RULES AND REGULATIONS IN ACCORDANCE WITH THE
27 PROVISIONS OF TITLE 45 PA.C.S. (RELATING TO LEGAL NOTICES) AND
28 PURSUANT TO THIS ACT.

29 SECTION 12. LICENSE REQUIRED TO OPERATE AN AMBULANCE
30 SERVICE.--(A) EXCEPT AS PROVIDED IN SUBSECTION (H), ONE YEAR

1 AFTER THE EFFECTIVE DATE OF THIS ACT, NO PERSON, EITHER AS AN
2 OWNER, AGENT OR OTHERWISE, SHALL FURNISH, OPERATE, CONDUCT,
3 MAINTAIN, ADVERTISE OR OTHERWISE ENGAGE IN OR PROFESS TO BE
4 ENGAGED IN PROVIDING AMBULANCE SERVICE UPON THE HIGHWAYS, OR ANY
5 PUBLIC PLACE IN THE COMMONWEALTH OF PENNSYLVANIA UNLESS THAT
6 PERSON HOLDS A CURRENTLY VALID LICENSE TO OPERATE AN AMBULANCE
7 SERVICE ISSUED BY THE SECRETARY PURSUANT TO THIS ACT.

8 (B) THE SECRETARY SHALL ISSUE A LICENSE TO ANY PERSON WHO
9 MAKES APPLICATION THERETO WITHIN ONE YEAR AFTER THE EFFECTIVE
10 DATE OF THIS ACT AND WHO WAS PROVIDING AMBULANCE SERVICE ON THE
11 EFFECTIVE DATE OF THIS ACT WHEN A DETERMINATION HAS BEEN MADE AS
12 PROVIDED HEREIN THAT THE SERVICE WILL BE IN COMPLIANCE WITH THE
13 REQUIREMENTS OF THIS ACT OR ANY REGULATIONS ADOPTED PURSUANT
14 THERETO.

15 (C) ADDITIONAL LICENSES SHALL BE ISSUED WHEN THE SECRETARY
16 FINDS UPON INVESTIGATION THAT THE SERVICE WILL BE IN COMPLIANCE
17 WITH THE REQUIREMENTS OF THIS ACT OR ANY REGULATIONS ADOPTED
18 PURSUANT THERETO.

19 (D) APPLICATIONS FOR AMBULANCE SERVICE LICENSES HEREUNDER
20 SHALL BE MADE UPON SUCH FORMS PREPARED OR PRESCRIBED BY THE
21 SECRETARY AND SHALL CONTAIN INFORMATION DEEMED REASONABLY
22 NECESSARY TO A FAIR DETERMINATION OF COMPLIANCE WITH THIS ACT.

23 (E) HOLDERS OF LICENSES TO OPERATE AN AMBULANCE SERVICE
24 SHALL NOT DISCONTINUE SERVICE UNTIL 90 DAYS AFTER THE HOLDER
25 NOTIFIES THE SECRETARY IN WRITING THAT THE SERVICE IS TO BE
26 DISCONTINUED. NOTICE TO THE SECRETARY SHALL INCLUDE A NOTARIZED
27 STATEMENT THAT THE LICENSEE HAS NOTIFIED THE CHIEF EXECUTIVE
28 OFFICER OF EACH POLITICAL SUBDIVISION IN THE LICENSEE'S
29 AMBULANCE SERVICE AREA OF HIS INTENT TO DISCONTINUE AMBULANCE
30 SERVICE, AND THAT THE INTENT TO DISCONTINUE AMBULANCE SERVICE

1 HAS BEEN ADVERTISED IN NEWSPAPERS OF GENERAL CIRCULATION IN THE
2 LICENSEE'S AMBULANCE SERVICE AREA.

3 (F) A LICENSE TO OPERATE AN AMBULANCE SERVICE IS NOT
4 TRANSFERABLE AND SHALL REMAIN VALID FOR A PERIOD OF ONE YEAR,
5 UNLESS REMOVED OR SUSPENDED BY THE SECRETARY; EXCEPT THAT,
6 DURING THE TWO-YEAR PERIOD SUBSEQUENT TO THE EFFECTIVE DATE OF
7 THIS ACT, THE SECRETARY MAY ISSUE LICENSES VALID FOR A PERIOD
8 NOT TO EXCEED TWO YEARS.

9 (G) THE SECRETARY SHALL ISSUE A TEMPORARY LICENSE FOR
10 OPERATION OF AN AMBULANCE SERVICE WHEN THE SECRETARY DEEMS IT IN
11 THE PUBLIC INTEREST TO DO SO. SUCH TEMPORARY LICENSE SHALL BE
12 VALID FOR A PERIOD NOT TO EXCEED 90 DAYS, AND SHALL BE RENEWABLE
13 WITH THE APPROVAL OF THE ADVISORY BOARD AND SECRETARY.

14 (H) THE PROVISIONS OF THIS SECTION SHALL NOT APPLY UNTIL
15 THREE YEARS AFTER THE EFFECTIVE DATE OF THIS ACT TO PERSONS WHO:

16 (1) PROVIDE AMBULANCE SERVICE BASED IN SEVENTH OR EIGHTH
17 CLASS COUNTIES; AND

18 (2) APPLY, ON A FORM FURNISHED BY THE DEPARTMENT, FOR AN
19 EXEMPTION.

20 SECTION 13. CERTIFICATION OF AMBULANCE TECHNICIANS.--(A)
21 THE SECRETARY WITH THE APPROVAL OF THE ADVISORY BOARD SHALL
22 PROMULGATE RULES AND REGULATIONS SETTING FORTH THE
23 QUALIFICATIONS FOR CERTIFICATION OF AN AMBULANCE TECHNICIAN. THE
24 SECRETARY WITH THE APPROVAL OF THE ADVISORY BOARD SHALL
25 PRESCRIBE A COURSE OF INSTRUCTION OF 40 HOURS OR THAT NUMBER OF
26 HOURS REQUIRED BY THE AMERICAN RED CROSS FOR ITS ADVANCED FIRST
27 AID AND EMERGENCY CARE COURSE, IF IT IS GREATER, OR ITS
28 EQUIVALENT, AND SHALL REQUIRE SUCCESSFUL COMPLETION OF THAT
29 COURSE AS A PREREQUISITE TO CERTIFICATION. HOWEVER, PERSONS WHO
30 THREE YEARS PRIOR TO THE EFFECTIVE DATE OF THIS ACT HAVE BEEN

1 CERTIFIED AS HAVING COMPLETED OR WHO HAVE BEEN RECERTIFIED IN A
2 COURSE OF INSTRUCTION OF 40 HOURS OR THAT NUMBER OF HOURS
3 REQUIRED BY THE AMERICAN RED CROSS FOR ITS ADVANCED FIRST AID
4 AND EMERGENCY CARE COURSE, IF IT IS GREATER, OR ITS EQUIVALENT,
5 SHALL BE CERTIFIED AS AMBULANCE TECHNICIANS. DURING THE TWO-YEAR
6 PERIOD SUBSEQUENT TO THE EFFECTIVE DATE OF THIS ACT, PERSONS WHO
7 HAVE NOT COMPLETED THE TRAINING REQUIREMENTS AS SET FORTH IN
8 THIS SUBSECTION SHALL BE CERTIFIED AS AMBULANCE TECHNICIANS IF
9 THEY TAKE AND SUCCESSFULLY PASS AN EXAMINATION ADMINISTERED BY
10 THE SECRETARY.

11 (B) APPLICANTS FOR CERTIFICATION AS AMBULANCE TECHNICIANS
12 SHALL APPLY TO THE SECRETARY ON FORMS PRESCRIBED BY THE
13 SECRETARY AND SHALL PROVIDE SUCH INFORMATION AS THE SECRETARY
14 SHALL DEEM NECESSARY FOR COMPLIANCE WITH THIS ACT.

15 (C) AMBULANCE TECHNICIAN CERTIFICATIONS SHALL NOT BE
16 TRANSFERABLE AND SHALL BE VALID FOR A PERIOD OF THREE YEARS
17 UNLESS SUSPENDED OR REVOKED BY THE SECRETARY.

18 (D) AMBULANCE TECHNICIAN CERTIFICATION MAY BE RENEWED AFTER
19 SUCCESSFUL COMPLETION OF A COURSE OF INSTRUCTION AS PRESCRIBED
20 BY THE SECRETARY, SUCH COURSE NOT TO EXCEED 20 HOURS.

21 (E) THE SECRETARY MAY ISSUE TEMPORARY AMBULANCE TECHNICIAN
22 CERTIFICATIONS VALID FOR A PERIOD NOT TO EXCEED 90 DAYS WHEN THE
23 SECRETARY FINDS THAT IT WILL BE IN THE PUBLIC INTEREST TO DO SO.
24 TEMPORARY AMBULANCE TECHNICIAN CERTIFICATIONS SHALL BE RENEWABLE
25 AT THE DISCRETION OF THE SECRETARY. THE ADVISORY BOARD SHALL
26 APPROVE ALL EXTENSIONS BEYOND 180 DAYS.

27 SECTION 14. AMBULANCE TECHNICIAN REQUIRED ON AMBULANCES.--

28 (A) EXCEPT AS PROVIDED IN SUBSECTIONS (B) AND (C), AFTER JULY
29 1, 1981, EACH LICENSED AMBULANCE SERVICE SHALL REQUIRE THAT AN
30 AMBULANCE WHEN OPERATED IN RESPONSE TO A CALL FOR ASSISTANCE,

1 EXCEPT FOR ROUTINE TRANSFER OF CONVALESCENT OR OTHER
2 NONEMERGENCY CASES, SHALL BE STAFFED BY AN AMBULANCE TECHNICIAN
3 OR AN EMERGENCY MEDICAL TECHNICIAN.

4 (B) AFTER JULY 1, 1981, UPON THE RECOMMENDATION OF AN
5 EMERGENCY HEALTH SERVICES COUNCIL AND THE APPROVAL OF THE
6 ADVISORY BOARD ON AMBULANCE SERVICE, THE DEPARTMENT SHALL
7 REQUIRE IN THE AREA IN WHICH THE COUNCIL PLANS AND COORDINATES
8 SERVICE THAT IS REFERRED TO IN SUBSECTION (A), ONE PERSON SHALL
9 BE AN EMERGENCY MEDICAL TECHNICIAN.

10 (C) THE PROVISIONS OF SUBSECTIONS (A) AND (B) SHALL NOT
11 APPLY UNTIL THREE YEARS AFTER THE EFFECTIVE DATE OF THIS ACT TO
12 LICENSED AMBULANCE SERVICES WHICH:

13 (1) PROVIDE AMBULANCE SERVICE BASED IN SEVENTH OR EIGHTH
14 CLASS COUNTIES; AND

15 (2) APPLY, ON A FORM FURNISHED BY THE DEPARTMENT, FOR AN
16 EXEMPTION.

17 (D) IF, HOWEVER, AFTER REASONABLE EFFORT TO SECURE THE
18 MINIMUM STAFF REQUIRED BY THIS SECTION, SUCH STAFF CANNOT BE
19 SECURED, A LICENSED AMBULANCE SERVICE MAY PERMIT AN AMBULANCE TO
20 RESPOND TO AN EMERGENCY CALL FOR ASSISTANCE.

21 SECTION 15. ADVISORY BOARD ON AMBULANCE SERVICE.--(A) FOR
22 THE PURPOSE OF ASSISTING THE SECRETARY IN DEVELOPING STANDARDS
23 FOR USE IN THE ADMINISTRATION OF THIS ACT, THE SECRETARY SHALL
24 APPOINT AN ADVISORY BOARD. SUCH BOARD SHALL CONSIST OF 15
25 MEMBERS. THE MEMBERS SHALL INCLUDE PHYSICIANS SKILLED IN
26 EMERGENCY CARE, A HOSPITAL ADMINISTRATOR, REPRESENTATIVES OF
27 VOLUNTEER AND PAID FIRE DEPARTMENT AMBULANCE SERVICES,
28 REPRESENTATIVES OF VOLUNTEER AMBULANCE SERVICES NOT AFFILIATED
29 WITH FIRE COMPANIES, AND A REPRESENTATIVE OF AMBULANCE SERVICES
30 PROVIDED BY FUNERAL DIRECTORS, COMMERCIAL ORGANIZATIONS,

1 HOSPITALS, OR GOVERNMENT.

2 (B) THE ADVISORY BOARD SHALL CHOOSE ITS OWN CHAIRMAN, AND
3 SHALL MEET AT THE CALL OF THE CHAIRMAN OR, IN HIS ABSENCE OR
4 INCAPACITY, AT THE CALL OF ANY MEMBER DESIGNATED BY THE ADVISORY
5 BOARD TO ACT AS CHAIRMAN: PROVIDED, HOWEVER, THAT THE ADVISORY
6 BOARD SHALL NOT MEET LESS THAN FOUR TIMES ANNUALLY.

7 (C) EIGHT MEMBERS OF THE ADVISORY BOARD SHALL CONSTITUTE A
8 QUORUM FOR TRANSACTING BUSINESS, AND A MAJORITY VOTE OF THOSE
9 PRESENT AT ANY MEETING SHALL BE SUFFICIENT FOR ANY OFFICIAL
10 ACTION TAKEN BY THE ADVISORY BOARD.

11 (D) STANDARDS RELATIVE TO AMBULANCE SERVICE SHALL BE
12 DEVELOPED BY THE SECRETARY WITH THE CONCURRENCE OF THE ADVISORY
13 BOARD. ADVISORY BOARD MEMBERS SHALL SERVE WITHOUT COMPENSATION,
14 SAVE FOR MILEAGE AND EXPENSES, FOR WHICH THEY SHALL BE
15 REIMBURSED.

16 (E) UPON PASSAGE OF THIS ACT, ONE-THIRD OF THE MEMBERSHIP OF
17 THE ADVISORY BOARD SHALL BE APPOINTED TO A ONE-YEAR TERM, ONE-
18 THIRD OF THE MEMBERSHIP SHALL BE APPOINTED TO A TWO-YEAR TERM
19 AND ONE-THIRD SHALL BE APPOINTED TO A THREE-YEAR TERM.
20 THEREAFTER, MEMBERS SHALL BE APPOINTED TO A THREE-YEAR TERM IN
21 THE SAME MANNER AS PROVIDED HEREIN INITIALLY. MEMBERS MAY NOT BE
22 REAPPOINTED FOR MORE THAN ONE SUCCEEDING TERM. THE ADVISORY
23 BOARD SHALL PROVIDE FOR REMOVAL OF MEMBERS NOT ATTENDING
24 MEETINGS.

25 SECTION 16. REVOCATION OF LICENSES AND CERTIFICATES.--(A)
26 THE SECRETARY MAY AND IS HEREBY AUTHORIZED TO SUSPEND OR REVOKE
27 A LICENSE OR CERTIFICATE ISSUED HEREUNDER. UPON DETERMINING THAT
28 A VIOLATION OF THIS ACT OR RULES AND REGULATIONS PROMULGATED
29 THEREUNDER EXISTS, THE SECRETARY SHALL ISSUE A NOTICE OF
30 VIOLATION. SUCH NOTICE SHALL SPECIFY THE NATURE OF THE

VIOLATION, ORDER THE VIOLATION ABATED AND SHALL SPECIFY A
REASONABLE TIME FOR COMPLIANCE. IF, AFTER SUCH REASONABLE TIME
FOR COMPLIANCE THE SECRETARY DETERMINES THAT SUCH VIOLATION
PERSISTS, THE SECRETARY SHALL AFFORD THE HOLDER OF THE LICENSE
OR CERTIFICATE AN OPPORTUNITY FOR AN ADMINISTRATIVE HEARING TO
BE CONDUCTED BY THE DEPARTMENT. IF, AFTER THE DEPARTMENTAL
HEARING THE SECRETARY RULES THAT THE LICENSE OR CERTIFICATE
SHALL BE SUSPENDED OR REVOKED, APPEALS MAY BE TAKEN AS PROVIDED
BY LAW.

(B) UPON SUSPENSION, REVOCATION OR TERMINATION OF A LICENSE,
THE AMBULANCE SERVICE SHALL CEASE OPERATIONS AND NO PERSON SHALL
PERMIT OR CAUSE SUCH AMBULANCE SERVICE TO CONTINUE.

(C) UPON SUSPENSION, REVOCATION OR TERMINATION OF AN
AMBULANCE TECHNICIAN CERTIFICATION, THAT PERSON SHALL CEASE
PROVIDING SERVICE AS SUCH.

SECTION 17. RECORDS AND REPORTS.--(A) THE LICENSEE OF AN
AMBULANCE SERVICE SHALL COMPLETE A WRITTEN REPORT OF TRIPS UPON
SUCH FORM AND IN SUCH MANNER AS THE SECRETARY WITH THE APPROVAL
OF THE ADVISORY BOARD SHALL PRESCRIBE AND PROVIDE WITHOUT FEES,
SUCH REPORTS TO BE SUBMITTED TO THE SECRETARY EVERY THREE
MONTHS.

(B) THE PROVISIONS OF THIS SECTION SHALL APPLY WITH EQUAL
FORCE IN CASE SUCH PATIENT SHALL DIE BEFORE BEING TRANSPORTED IN
SUCH AMBULANCE OR DIES WHILE BEING TRANSPORTED THEREIN OR AT ANY
TIME PRIOR TO THE ACCEPTANCE OF THE PATIENT INTO THE
RESPONSIBILITY OF THE HOSPITAL OR MEDICAL OR OTHER AUTHORITY IF
THE PATIENT IS STILL UNDER THE CARE OR RESPONSIBILITY OF THE
AMBULANCE SERVICE.

(C) THE LICENSEE OF EACH AMBULANCE SERVICE SHALL FORWARD A
COMPLETE REPORT OF ACCIDENTS INVOLVING AN AMBULANCE TO THE

1 SECRETARY WITHIN TEN DAYS AFTER SUCH ACCIDENT. ACCIDENTS
2 RESULTING IN BODILY INJURY OR DEATH TO ANY PERSON OR DAMAGE TO
3 THE PROPERTY OF ANY ONE PERSON IN EXCESS OF \$250 SHALL BE
4 REPORTED UPON SUCH FORMS AS THE SECRETARY WITH THE APPROVAL OF
5 THE ADVISORY BOARD MAY PRESCRIBE. THIS REPORT SHALL NOT RELIEVE
6 THE LICENSEE FROM COMPLYING WITH REPORTING OF ACCIDENTS AS
7 PRESCRIBED IN TITLE 75 OF THE PENNSYLVANIA CONSOLIDATED STATUTES
8 (RELATING TO VEHICLES).

9 (D) THE PROVISIONS OF THIS SECTION SHALL TAKE EFFECT JANUARY
10 1, 1981.

11 SECTION 18. INSPECTIONS.--(A) EACH AMBULANCE SERVICE, ITS
12 AMBULANCES, EQUIPMENT AND PERSONNEL CERTIFICATIONS SHALL BE
13 INSPECTED BY AN AUTHORIZED INSPECTION AGENCY AS HEREINAFTER
14 PROVIDED, OR BY THE SECRETARY; SUCH INSPECTIONS TO BE CONDUCTED
15 FROM TIME TO TIME AS DEEMED APPROPRIATE AND NECESSARY BY THE
16 AUTHORIZED INSPECTION AGENCY OR BY THE SECRETARY, BUT NOT LESS
17 THAN ONCE EACH YEAR.

18 (B) ANY EMERGENCY HEALTH SERVICES COUNCIL MAY CONDUCT AN
19 INSPECTION REQUIRED IN THIS ACT, AS PROVIDED IN ACCORDANCE WITH
20 RULES AND REGULATIONS PROMULGATED PURSUANT HERETO. A COUNCIL
21 WHICH ELECTS TO DO SO AND WHICH IS CERTIFIED IN ACCORDANCE WITH
22 RULES AND REGULATIONS PROMULGATED PURSUANT HERETO, SHALL BE
23 DESIGNATED BY THE SECRETARY AS AN AUTHORIZED INSPECTION AGENCY
24 IN THE AREA OF ITS SERVICE.

25 (C) ANY LOCAL HOSPITAL WHICH IS CERTIFIED IN ACCORDANCE WITH
26 RULES AND REGULATIONS PROMULGATED PURSUANT HERETO, MAY ALSO
27 CONDUCT SUCH INSPECTIONS. A HOSPITAL WHICH ELECTS TO DO SO SHALL
28 BE DESIGNATED BY THE SECRETARY AS AN AUTHORIZED INSPECTION
29 AGENCY.

30 (D) INSPECTIONS MADE BY AN AUTHORIZED INSPECTION AGENCY

1 SHALL BE MADE IN A MANNER PRESCRIBED BY AND ON FORMS PROVIDED BY
2 THE SECRETARY.

3 (E) UPON COMPLETION OF AN INSPECTION, THE AUTHORIZED
4 INSPECTION AGENCY SHALL TRANSMIT A COPY OF THE INSPECTION REPORT
5 TO THE SECRETARY. WHEN AN INSPECTION REPORT SHOWS THAT AN
6 AMBULANCE SERVICE IS IN COMPLIANCE WITH THE REQUIREMENTS OF THIS
7 ACT AND RULES AND REGULATIONS PROMULGATED PURSUANT HERETO, THE
8 SECRETARY SHALL ISSUE OR RENEW A LICENSE OR CERTIFICATES AS
9 PROVIDED FOR IN THIS ACT. WHEN THE INSPECTION REPORT SHOWS THAT
10 AN AMBULANCE SERVICE IS NOT IN COMPLIANCE WITH THIS ACT AND
11 RULES AND REGULATIONS PROMULGATED PURSUANT HERETO, THE SECRETARY
12 SHALL NOTIFY BOTH THE AMBULANCE SERVICE AND THE AUTHORIZED
13 INSPECTION AGENCY OF SUCH NONCOMPLIANCE, AND SHALL ORDER THE
14 AUTHORIZED INSPECTION AGENCY TO REINSPECT THAT AMBULANCE SERVICE
15 WITHIN 30 DAYS OF ITS RECEIPT OF SUCH ORDER. THE AUTHORIZED
16 INSPECTION AGENCY SHALL THEN TRANSMIT A COPY OF THE REINSPECTION
17 REPORT TO THE SECRETARY. WHEN A REINSPECTION REPORT SHOWS THAT
18 THE AMBULANCE SERVICE IS IN COMPLIANCE WITH THIS ACT AND RULES
19 AND REGULATIONS PROMULGATED PURSUANT HERETO, THE SECRETARY SHALL
20 ISSUE OR RENEW A LICENSE OR CERTIFICATES AS PROVIDED FOR IN THIS
21 ACT. WHEN A REINSPECTION REPORT SHOWS CONTINUED NONCOMPLIANCE,
22 THE SECRETARY SHALL ISSUE A NOTICE OF VIOLATION AS PROVIDED FOR
23 IN SECTION 16.

24 (F) WHERE THERE IS NO AUTHORIZED INSPECTION AGENCY, THE
25 SECRETARY SHALL CONDUCT THE INSPECTIONS REQUIRED BY THIS ACT.
26 THE SECRETARY MAY ALSO TERMINATE THE AUTHORIZATION OF ANY
27 AUTHORIZED INSPECTION AGENCY TO CONDUCT AN INSPECTION IF IT
28 FAILS TO COMPLY WITH THE PROVISIONS OF THIS ACT OR RULES AND
29 REGULATIONS PROMULGATED PURSUANT HERETO.

30 (G) SUCH INSPECTIONS SHALL NOT RELIEVE THE LICENSEE OF

1 COMPLYING WITH MOTOR VEHICLE INSPECTIONS AS REQUIRED BY TITLE 75
2 OF THE PENNSYLVANIA CONSOLIDATED STATUTES (RELATING TO
3 VEHICLES).

4 SECTION 19. EXEMPTIONS.--THE FOLLOWING VEHICLES ARE EXEMPTED
5 FROM THE PROVISIONS OF THIS ACT:

6 (1) PRIVATELY OWNED VEHICLES NOT ORDINARILY USED IN THE
7 BUSINESS OF TRANSPORTING PATIENTS.

8 (2) A VEHICLE RENDERING SERVICE AS AN AMBULANCE IN CASE OF
9 AN EMERGENCY WHEN AMBULANCES BASED IN THE LOCALITY OF THE
10 EMERGENCY ARE INSUFFICIENT TO RENDER SERVICES REQUIRED.

11 (3) AMBULANCES LOCATED OR HEADQUARTERED OUTSIDE THE
12 COMMONWEALTH TRANSPORTING PATIENTS FROM LOCATIONS BEYOND THE
13 LIMITS OF THE COMMONWEALTH TO LOCATIONS WITHIN THE COMMONWEALTH.

14 (4) AMBULANCES AND AMBULANCE SERVICES OWNED AND OPERATED BY
15 AN AGENCY OF THE UNITED STATES.

16 (5) INVALID COACHES.

17 (6) RESCUE VEHICLES.

18 SECTION 20. PENALTIES.--(A) ANY PERSON CONVICTED OF
19 OPERATING ANY AMBULANCE SERVICE WHICH DOES NOT HAVE A CURRENTLY
20 VALID LICENSE OR HAS A LICENSE WHICH IS UNDER SUSPENSION OR
21 REVOCATION SHALL, UPON CONVICTION THEREOF IN A SUMMARY
22 PROCEEDING, BE SENTENCED TO PAY A FINE OF NOT MORE THAN \$50 AND
23 COSTS OF PROSECUTION AND, IN DEFAULT OF SUCH FINE AND COSTS, THE
24 PERSON SHALL UNDERGO IMPRISONMENT OF NOT MORE THAN TEN DAYS.
25 VIOLATIONS ON SEPARATE DAYS ARE CONSIDERED SEPARATE AND DISTINCT
26 OFFENSES. ALL FINES RECOVERED UNDER THE PROVISIONS OF THIS ACT
27 SHALL BE PAID TO THE STATE TREASURER OF THE COMMONWEALTH.

28 (B) ANY PERSON CONVICTED OF OPERATING ANY AMBULANCE SERVICE
29 WITHOUT CERTIFICATION SHALL BE SENTENCED TO PAY A FINE OF NOT
30 MORE THAN \$50 AND COSTS OF PROSECUTION AND, IN DEFAULT OF SUCH

1 FINE AND COSTS, THE PERSON SHALL UNDERGO IMPRISONMENT OF NOT
2 MORE THAN TEN DAYS. VIOLATIONS ON SEPARATE DAYS ARE CONSIDERED
3 SEPARATE AND DISTINCT OFFENSES. ALL FINES RECOVERED UNDER THE
4 PROVISIONS OF THIS ACT SHALL BE PAID TO THE STATE TREASURER OF
5 THE COMMONWEALTH.

6 SECTION 21. MAKING FALSE AMBULANCE REQUESTS.--IT SHALL BE
7 UNLAWFUL FOR ANY PERSON TO WILLFULLY SUMMON AN AMBULANCE OR
8 WILLFULLY REPORT THAT AN AMBULANCE IS NEEDED WHEN SUCH PERSON
9 DOES NOT HAVE GOOD CAUSE TO BELIEVE THAT THE SERVICES OF AN
10 AMBULANCE ARE NEEDED. EVERY PERSON CONVICTED OF WILLFULLY
11 VIOLATING THIS SECTION SHALL, UPON CONVICTION IN A SUMMARY
12 PROCEEDING, BE SENTENCED TO PAY A FINE NOT EXCEEDING \$500 OR
13 IMPRISONMENT NOT EXCEEDING TWO YEARS, OR BOTH.

14 SECTION 22. FEES.--THERE SHALL BE NO FEE FOR LICENSES OR
15 PERSONNEL CERTIFICATION.

16 Section [11.] 23. Legislative Intent; Legislative <—
17 Oversight.--[(a) This act shall not authorize the secretary to <—
18 effect mandatory licensure, certification or training of
19 ambulance services and personnel.] <—

20 [(b)] (A) This act shall expire if not reenacted by the <—
21 General Assembly prior to the end of the fiscal year ending June
22 30, [1979] 1982 and every third fiscal year thereafter.

23 ~~(c) Rules and regulations promulgated pursuant to this act~~ <—
24 ~~shall not take effect until 30 calendar days after they are~~
25 ~~submitted to the Health and Welfare Committees of the Senate and~~
26 ~~the House of Representatives for their consideration and shall~~
27 ~~not take effect if they are rejected by either committee within~~
28 ~~the 30 day period.~~

29 (B) THE REGULATIONS AUTHORIZED UNDER THIS ACT SHALL BE <—
30 SUBMITTED TO THE GENERAL ASSEMBLY FOR APPROVAL OR DISAPPROVAL

1 AND SHALL BE CONSIDERED BY THE GENERAL ASSEMBLY UNDER THE
2 PROCEDURES CREATED FOR CONSIDERATION OF REORGANIZATION PLANS
3 PROVIDED IN THE ACT OF APRIL 7, 1955 (P.L.23, NO.8), KNOWN AS
4 THE "REORGANIZATION ACT OF 1955."

5 Section ~~12.~~ 24. Effective Date.--This act shall take
6 effect July 1, 1976.

<—

7 Section 2. This act shall take effect June 30, 1979.