



Rep. Deb Conroy

Filed: 5/26/2021

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LRB102 04346 CPF 27071 a

1 AMENDMENT TO SENATE BILL 693

2 AMENDMENT NO. _____. Amend Senate Bill 693, AS AMENDED,
3 by replacing everything after the enacting clause with the
4 following:

5 "Section 5. The Emergency Medical Services (EMS) Systems
6 Act is amended by changing Sections 3.10, 3.50, 3.85, and
7 3.155 as follows:

8 (210 ILCS 50/3.10)
9 Sec. 3.10. Scope of services.

10 (a) "Advanced Life Support (ALS) Services" means an
11 advanced level of pre-hospital and inter-hospital emergency
12 care and non-emergency medical services that includes basic
13 life support care, cardiac monitoring, cardiac defibrillation,
14 electrocardiography, intravenous therapy, administration of
15 medications, drugs and solutions, use of adjunctive medical
16 devices, trauma care, and other authorized techniques and

1 procedures, as outlined in the provisions of the National EMS
2 Education Standards relating to Advanced Life Support and any
3 modifications to that curriculum specified in rules adopted by
4 the Department pursuant to this Act.

5 That care shall be initiated as authorized by the EMS
6 Medical Director in a Department approved advanced life
7 support EMS System, under the written or verbal direction of a
8 physician licensed to practice medicine in all of its branches
9 or under the verbal direction of an Emergency Communications
10 Registered Nurse.

11 (b) "Intermediate Life Support (ILS) Services" means an
12 intermediate level of pre-hospital and inter-hospital
13 emergency care and non-emergency medical services that
14 includes basic life support care plus intravenous cannulation
15 and fluid therapy, invasive airway management, trauma care,
16 and other authorized techniques and procedures, as outlined in
17 the Intermediate Life Support national curriculum of the
18 United States Department of Transportation and any
19 modifications to that curriculum specified in rules adopted by
20 the Department pursuant to this Act.

21 That care shall be initiated as authorized by the EMS
22 Medical Director in a Department approved intermediate or
23 advanced life support EMS System, under the written or verbal
24 direction of a physician licensed to practice medicine in all
25 of its branches or under the verbal direction of an Emergency
26 Communications Registered Nurse.

1 (c) "Basic Life Support (BLS) Services" means a basic
2 level of pre-hospital and inter-hospital emergency care and
3 non-emergency medical services that includes medical
4 monitoring, clinical observation, airway management,
5 cardiopulmonary resuscitation (CPR), control of shock and
6 bleeding and splinting of fractures, as outlined in the
7 provisions of the National EMS Education Standards relating to
8 Basic Life Support and any modifications to that curriculum
9 specified in rules adopted by the Department pursuant to this
10 Act.

11 That care shall be initiated, where authorized by the EMS
12 Medical Director in a Department approved EMS System, under
13 the written or verbal direction of a physician licensed to
14 practice medicine in all of its branches or under the verbal
15 direction of an Emergency Communications Registered Nurse.

16 (d) "Emergency Medical Responder Services" means a
17 preliminary level of pre-hospital emergency care that includes
18 cardiopulmonary resuscitation (CPR), monitoring vital signs
19 and control of bleeding, as outlined in the Emergency Medical
20 Responder (EMR) curriculum of the National EMS Education
21 Standards and any modifications to that curriculum specified
22 in rules adopted by the Department pursuant to this Act.

23 (e) "Pre-hospital care" means those medical services
24 rendered to patients for analytic, resuscitative, stabilizing,
25 or preventive purposes, precedent to and during transportation
26 of such patients to health care facilities.

1 (f) "Inter-hospital care" means those medical services
2 rendered to patients for analytic, resuscitative, stabilizing,
3 or preventive purposes, during transportation of such patients
4 from one hospital to another hospital.

5 (f-5) "Critical care transport" means the pre-hospital or
6 inter-hospital transportation of a critically injured or ill
7 patient by a vehicle service provider, including the provision
8 of medically necessary supplies and services, at a level of
9 service beyond the scope of the Paramedic. When medically
10 indicated for a patient, as determined by a physician licensed
11 to practice medicine in all of its branches, an advanced
12 practice registered nurse, or a physician's assistant, in
13 compliance with subsections (b) and (c) of Section 3.155 of
14 this Act, critical care transport may be provided by:

15 (1) Department-approved critical care transport
16 providers, not owned or operated by a hospital, utilizing
17 Paramedics with additional training, nurses, or other
18 qualified health professionals; or

19 (2) Hospitals, when utilizing any vehicle service
20 provider or any hospital-owned or operated vehicle service
21 provider. Nothing in Public Act 96-1469 requires a
22 hospital to use, or to be, a Department-approved critical
23 care transport provider when transporting patients,
24 including those critically injured or ill. Nothing in this
25 Act shall restrict or prohibit a hospital from providing,
26 or arranging for, the medically appropriate transport of

1 any patient, as determined by a physician licensed to
2 practice in all of its branches, an advanced practice
3 registered nurse, or a physician's assistant.

4 (g) "Non-emergency medical services" means the provision
5 of, and all actions necessary before and after the provision
6 of, Basic Life Support (BLS) Services, Advanced Life Support
7 (ALS) Services, and critical care transport ~~medical care,~~
8 ~~clinical observation, or medical monitoring rendered~~ to
9 patients whose conditions do not meet this Act's definition of
10 emergency, before, after, or during transportation of such
11 patients to or from health care facilities visited for the
12 purpose of obtaining medical or health care services which are
13 not emergency in nature, using a vehicle regulated by this Act
14 and personnel licensed under this Act.

15 (g-5) The Department shall have the authority to
16 promulgate minimum standards for critical care transport
17 providers through rules adopted pursuant to this Act. All
18 critical care transport providers must function within a
19 Department-approved EMS System. Nothing in Department rules
20 shall restrict a hospital's ability to furnish personnel,
21 equipment, and medical supplies to any vehicle service
22 provider, including a critical care transport provider.
23 Minimum critical care transport provider standards shall
24 include, but are not limited to:

25 (1) Personnel staffing and licensure.

26 (2) Education, certification, and experience.

1 (3) Medical equipment and supplies.

2 (4) Vehicular standards.

3 (5) Treatment and transport protocols.

4 (6) Quality assurance and data collection.

5 (h) The provisions of this Act shall not apply to the use
6 of an ambulance or SEMSV, unless and until emergency or
7 non-emergency medical services are needed during the use of
8 the ambulance or SEMSV.

9 (Source: P.A. 99-661, eff. 1-1-17; 100-513, eff. 1-1-18.)

10 (210 ILCS 50/3.50)

11 Sec. 3.50. Emergency Medical Services personnel licensure
12 levels.

13 (a) "Emergency Medical Technician" or "EMT" means a person
14 who has successfully completed a course in basic life support
15 as approved by the Department, is currently licensed by the
16 Department in accordance with standards prescribed by this Act
17 and rules adopted by the Department pursuant to this Act, and
18 practices within an EMS System. A valid Emergency Medical
19 Technician-Basic (EMT-B) license issued under this Act shall
20 continue to be valid and shall be recognized as an Emergency
21 Medical Technician (EMT) license until the Emergency Medical
22 Technician-Basic (EMT-B) license expires.

23 (b) "Emergency Medical Technician-Intermediate" or "EMT-I"
24 means a person who has successfully completed a course in
25 intermediate life support as approved by the Department, is

1 currently licensed by the Department in accordance with
2 standards prescribed by this Act and rules adopted by the
3 Department pursuant to this Act, and practices within an
4 Intermediate or Advanced Life Support EMS System.

5 (b-5) "Advanced Emergency Medical Technician" or "A-EMT"
6 means a person who has successfully completed a course in
7 basic and limited advanced emergency medical care as approved
8 by the Department, is currently licensed by the Department in
9 accordance with standards prescribed by this Act and rules
10 adopted by the Department pursuant to this Act, and practices
11 within an Intermediate or Advanced Life Support EMS System.

12 (c) "Paramedic (EMT-P)" means a person who has
13 successfully completed a course in advanced life support care
14 as approved by the Department, is licensed by the Department
15 in accordance with standards prescribed by this Act and rules
16 adopted by the Department pursuant to this Act, and practices
17 within an Advanced Life Support EMS System. A valid Emergency
18 Medical Technician-Paramedic (EMT-P) license issued under this
19 Act shall continue to be valid and shall be recognized as a
20 Paramedic license until the Emergency Medical
21 Technician-Paramedic (EMT-P) license expires.

22 (c-5) "Emergency Medical Responder" or "EMR (First
23 Responder)" means a person who has successfully completed a
24 course in emergency medical response as approved by the
25 Department and provides emergency medical response services
26 ~~prior to the arrival of an ambulance or specialized emergency~~

1 ~~medical services vehicle,~~ in accordance with the level of care
2 established by the National EMS Educational Standards
3 Emergency Medical Responder course as modified by the
4 Department, or who. ~~An Emergency Medical Responder who~~
5 provides services as part of an EMS System response plan ~~shall~~
6 ~~comply with the applicable sections of the Program Plan,~~ as
7 approved by the Department, of that EMS System. The Department
8 shall have the authority to adopt rules governing the
9 curriculum, practice, and necessary equipment applicable to
10 Emergency Medical Responders.

11 On August 15, 2014 (the effective date of Public Act
12 98-973), a person who is licensed by the Department as a First
13 Responder and has completed a Department-approved course in
14 first responder defibrillator training based on, or equivalent
15 to, the National EMS Educational Standards or other standards
16 previously recognized by the Department shall be eligible for
17 licensure as an Emergency Medical Responder upon meeting the
18 licensure requirements and submitting an application to the
19 Department. A valid First Responder license issued under this
20 Act shall continue to be valid and shall be recognized as an
21 Emergency Medical Responder license until the First Responder
22 license expires.

23 (c-10) All EMS Systems and licensees shall be fully
24 compliant with the National EMS Education Standards, as
25 modified by the Department in administrative rules, within 24
26 months after the adoption of the administrative rules.

1 (d) The Department shall have the authority and
2 responsibility to:

3 (1) Prescribe education and training requirements,
4 which includes training in the use of epinephrine, for all
5 levels of EMS personnel except for EMRs, based on the
6 National EMS Educational Standards and any modifications
7 to those curricula specified by the Department through
8 rules adopted pursuant to this Act.

9 (2) Prescribe licensure testing requirements for all
10 levels of EMS personnel, which shall include a requirement
11 that all phases of instruction, training, and field
12 experience be completed before taking the appropriate
13 licensure examination. Candidates may elect to take the
14 appropriate National Registry examination in lieu of the
15 Department's examination, but are responsible for making
16 their own arrangements for taking the National Registry
17 examination. In prescribing licensure testing requirements
18 for honorably discharged members of the armed forces of
19 the United States under this paragraph (2), the Department
20 shall ensure that a candidate's military emergency medical
21 training, emergency medical curriculum completed, and
22 clinical experience, as described in paragraph (2.5), are
23 recognized.

24 (2.5) Review applications for EMS personnel licensure
25 from honorably discharged members of the armed forces of
26 the United States with military emergency medical

1 training. Applications shall be filed with the Department
2 within one year after military discharge and shall
3 contain: (i) proof of successful completion of military
4 emergency medical training; (ii) a detailed description of
5 the emergency medical curriculum completed; and (iii) a
6 detailed description of the applicant's clinical
7 experience. The Department may request additional and
8 clarifying information. The Department shall evaluate the
9 application, including the applicant's training and
10 experience, consistent with the standards set forth under
11 subsections (a), (b), (c), and (d) of Section 3.10. If the
12 application clearly demonstrates that the training and
13 experience meet such standards, the Department shall offer
14 the applicant the opportunity to successfully complete a
15 Department-approved EMS personnel examination for the
16 level of license for which the applicant is qualified.
17 Upon passage of an examination, the Department shall issue
18 a license, which shall be subject to all provisions of
19 this Act that are otherwise applicable to the level of EMS
20 personnel license issued.

21 (3) License individuals as an EMR, EMT, EMT-I, A-EMT,
22 or Paramedic who have met the Department's education,
23 training and examination requirements.

24 (4) Prescribe annual continuing education and
25 relicensure requirements for all EMS personnel licensure
26 levels.

1 (5) Relicense individuals as an EMD, EMR, EMT, EMT-I,
2 A-EMT, PHRN, PHAPRN, PHPA, or Paramedic every 4 years,
3 based on their compliance with continuing education and
4 relicensure requirements as required by the Department
5 pursuant to this Act. Every 4 years, a Paramedic shall
6 have 100 hours of approved continuing education, an EMT-I
7 and an advanced EMT shall have 80 hours of approved
8 continuing education, and an EMT shall have 60 hours of
9 approved continuing education. An Illinois licensed EMR,
10 EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHPA, PHAPRN, or
11 PHRN whose license has been expired for less than 36
12 months may apply for reinstatement by the Department.
13 Reinstatement shall require that the applicant (i) submit
14 satisfactory proof of completion of continuing medical
15 education and clinical requirements to be prescribed by
16 the Department in an administrative rule; (ii) submit a
17 positive recommendation from an Illinois EMS Medical
18 Director attesting to the applicant's qualifications for
19 retesting; and (iii) pass a Department approved test for
20 the level of EMS personnel license sought to be
21 reinstated.

22 (6) Grant inactive status to any EMR, EMD, EMT, EMT-I,
23 A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who
24 qualifies, based on standards and procedures established
25 by the Department in rules adopted pursuant to this Act.

26 (7) Charge a fee for EMS personnel examination,

1 licensure, and license renewal.

2 (8) Suspend, revoke, or refuse to issue or renew the
3 license of any licensee, after an opportunity for an
4 impartial hearing before a neutral administrative law
5 judge appointed by the Director, where the preponderance
6 of the evidence shows one or more of the following:

7 (A) The licensee has not met continuing education
8 or relicensure requirements as prescribed by the
9 Department;

10 (B) The licensee has failed to maintain
11 proficiency in the level of skills for which he or she
12 is licensed;

13 (C) The licensee, during the provision of medical
14 services, engaged in dishonorable, unethical, or
15 unprofessional conduct of a character likely to
16 deceive, defraud, or harm the public;

17 (D) The licensee has failed to maintain or has
18 violated standards of performance and conduct as
19 prescribed by the Department in rules adopted pursuant
20 to this Act or his or her EMS System's Program Plan;

21 (E) The licensee is physically impaired to the
22 extent that he or she cannot physically perform the
23 skills and functions for which he or she is licensed,
24 as verified by a physician, unless the person is on
25 inactive status pursuant to Department regulations;

26 (F) The licensee is mentally impaired to the

1 extent that he or she cannot exercise the appropriate
2 judgment, skill and safety for performing the
3 functions for which he or she is licensed, as verified
4 by a physician, unless the person is on inactive
5 status pursuant to Department regulations;

6 (G) The licensee has violated this Act or any rule
7 adopted by the Department pursuant to this Act; or

8 (H) The licensee has been convicted (or entered a
9 plea of guilty or nolo contendere ~~nolo contendere~~) by
10 a court of competent jurisdiction of a Class X, Class
11 1, or Class 2 felony in this State or an out-of-state
12 equivalent offense.

13 (9) Prescribe education and training requirements in
14 the administration and use of opioid antagonists for all
15 levels of EMS personnel based on the National EMS
16 Educational Standards and any modifications to those
17 curricula specified by the Department through rules
18 adopted pursuant to this Act.

19 (d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN,
20 PHAPRN, PHPA, or PHRN who is a member of the Illinois National
21 Guard or an Illinois State Trooper or who exclusively serves
22 as a volunteer for units of local government with a population
23 base of less than 5,000 or as a volunteer for a not-for-profit
24 organization that serves a service area with a population base
25 of less than 5,000 may submit an application to the Department
26 for a waiver of the fees described under paragraph (7) of

1 subsection (d) of this Section on a form prescribed by the
2 Department.

3 The education requirements prescribed by the Department
4 under this Section must allow for the suspension of those
5 requirements in the case of a member of the armed services or
6 reserve forces of the United States or a member of the Illinois
7 National Guard who is on active duty pursuant to an executive
8 order of the President of the United States, an act of the
9 Congress of the United States, or an order of the Governor at
10 the time that the member would otherwise be required to
11 fulfill a particular education requirement. Such a person must
12 fulfill the education requirement within 6 months after his or
13 her release from active duty.

14 (e) In the event that any rule of the Department or an EMS
15 Medical Director that requires testing for drug use as a
16 condition of the applicable EMS personnel license conflicts
17 with or duplicates a provision of a collective bargaining
18 agreement that requires testing for drug use, that rule shall
19 not apply to any person covered by the collective bargaining
20 agreement.

21 (f) At the time of applying for or renewing his or her
22 license, an applicant for a license or license renewal may
23 submit an email address to the Department. The Department
24 shall keep the email address on file as a form of contact for
25 the individual. The Department shall send license renewal
26 notices electronically and by mail to a licensee ~~all licensees~~

1 who provides ~~provide~~ the Department with his or her email
2 address. The notices shall be sent at least 60 days prior to
3 the expiration date of the license.

4 (Source: P.A. 100-1082, eff. 8-24-19; 101-81, eff. 7-12-19;
5 101-153, eff. 1-1-20; revised 12-3-19.)

6 (210 ILCS 50/3.85)

7 Sec. 3.85. Vehicle Service Providers.

8 (a) "Vehicle Service Provider" means an entity licensed by
9 the Department to provide emergency or non-emergency medical
10 services in compliance with this Act, the rules promulgated by
11 the Department pursuant to this Act, and an operational plan
12 approved by its EMS System(s), utilizing at least ambulances
13 or specialized emergency medical service vehicles (SEMSV).

14 (1) "Ambulance" means any publicly or privately owned
15 on-road vehicle that is specifically designed, constructed
16 or modified and equipped, and is intended to be used for,
17 and is maintained or operated for the emergency
18 transportation of persons who are sick, injured, wounded
19 or otherwise incapacitated or helpless, or the
20 non-emergency medical transportation of persons who
21 require the presence of medical personnel to monitor the
22 individual's condition or medical apparatus being used on
23 such individuals.

24 (2) "Specialized Emergency Medical Services Vehicle"
25 or "SEMSV" means a vehicle or conveyance, other than those

1 owned or operated by the federal government, that is
2 primarily intended for use in transporting the sick or
3 injured by means of air, water, or ground transportation,
4 that is not an ambulance as defined in this Act. The term
5 includes watercraft, aircraft and special purpose ground
6 transport vehicles or conveyances not intended for use on
7 public roads.

8 (3) An ambulance or SEMSV may also be designated as a
9 Limited Operation Vehicle or Special-Use Vehicle:

10 (A) "Limited Operation Vehicle" means a vehicle
11 which is licensed by the Department to provide basic,
12 intermediate or advanced life support emergency or
13 non-emergency medical services that are exclusively
14 limited to specific events or locales.

15 (B) "Special-Use Vehicle" means any publicly or
16 privately owned vehicle that is specifically designed,
17 constructed or modified and equipped, and is intended
18 to be used for, and is maintained or operated solely
19 for the emergency or non-emergency transportation of a
20 specific medical class or category of persons who are
21 sick, injured, wounded or otherwise incapacitated or
22 helpless (e.g. high-risk obstetrical patients,
23 neonatal patients).

24 (C) "Reserve Ambulance" means a vehicle that meets
25 all criteria set forth in this Section and all
26 Department rules, except for the required inventory of

1 medical supplies and durable medical equipment, which
2 may be rapidly transferred from a fully functional
3 ambulance to a reserve ambulance without the use of
4 tools or special mechanical expertise.

5 (b) The Department shall have the authority and
6 responsibility to:

7 (1) Require all Vehicle Service Providers, both
8 publicly and privately owned, to function within an EMS
9 System.

10 (2) Require a Vehicle Service Provider utilizing
11 ambulances to have a primary affiliation with an EMS
12 System within the EMS Region in which its Primary Service
13 Area is located, which is the geographic areas in which
14 the provider renders the majority of its emergency
15 responses. This requirement shall not apply to Vehicle
16 Service Providers which exclusively utilize Limited
17 Operation Vehicles.

18 (3) Establish licensing standards and requirements for
19 Vehicle Service Providers, through rules adopted pursuant
20 to this Act, including but not limited to:

21 (A) Vehicle design, specification, operation and
22 maintenance standards, including standards for the use
23 of reserve ambulances;

24 (B) Equipment requirements;

25 (C) Staffing requirements; and

26 (D) License renewal at intervals determined by the

1 Department, which shall be not less than every 4
2 years.

3 The Department's standards and requirements with
4 respect to vehicle staffing for private, nonpublic local
5 government employers must allow for ~~an~~ alternative ~~rural~~
6 staffing models that include an EMR who drives an
7 ambulance with a licensed EMT, EMT-I, A-EMT, Paramedic, or
8 PHRN, as appropriate, in the patient compartment providing
9 care to the patient pursuant to the approval of the EMS
10 System Program Plan developed and approved by the EMS
11 Medical Director for an EMS System. The Department shall
12 monitor the implementation and performance of alternative
13 staffing models and may issue a notice of termination of
14 an alternative staffing model only upon evidence that an
15 EMS System Program Plan is not being adhered to.

16 An EMS System Program Plan for a Basic Life Support
17 transport utilizing an EMR and an EMT shall include the
18 following:

19 (A) Alternative staffing models for a Basic Life
20 Support transport utilizing an EMR and an EMT shall
21 only be utilized for interfacility Basic Life Support
22 transports and medical appointments, excluding any
23 transport to or from a dialysis center.

24 (B) Protocols that shall include dispatch
25 procedures to properly screen and assess patients for
26 EMR-staffed and EMT-staffed Basic Life Support

1 transport.

2 (C) A requirement that a provider shall implement
3 a quality assurance plan with mechanisms outlined to
4 audit dispatch screening and the outcome of transports
5 performed.

6 (D) The EMT shall have at least one year of
7 experience in performance of pre-hospital emergency
8 care.

9 (E) The licensed EMR must complete a defensive
10 driving course prior to participation in the
11 Department's alternative staffing model.

12 (F) The length of the EMS System Program Plan for a
13 Basic Life Support transport utilizing an EMR and an
14 EMT shall be for one year, and must be renewed annually
15 if proof of the criteria being met is submitted,
16 validated, and approved by the EMS Medical Director
17 for the EMS System and the Department.

18 The Department must allow for an alternative rural
19 staffing model for those vehicle service providers that
20 serve a rural or semi-rural population of 10,000 or fewer
21 inhabitants and exclusively uses volunteers, paid-on-call,
22 or a combination thereof.

23 (4) License all Vehicle Service Providers that have
24 met the Department's requirements for licensure, unless
25 such Provider is owned or licensed by the federal
26 government. All Provider licenses issued by the Department

1 shall specify the level and type of each vehicle covered
2 by the license (BLS, ILS, ALS, ambulance, SEMSV, limited
3 operation vehicle, special use vehicle, reserve
4 ambulance).

5 (5) Annually inspect all licensed vehicles operated by
6 Vehicle Service Providers.

7 (6) Suspend, revoke, refuse to issue or refuse to
8 renew the license of any Vehicle Service Provider, or that
9 portion of a license pertaining to a specific vehicle
10 operated by the Provider, after an opportunity for a
11 hearing, when findings show that the Provider or one or
12 more of its vehicles has failed to comply with the
13 standards and requirements of this Act or rules adopted by
14 the Department pursuant to this Act.

15 (7) Issue an Emergency Suspension Order for any
16 Provider or vehicle licensed under this Act, when the
17 Director or his designee has determined that an immediate
18 and serious danger to the public health, safety and
19 welfare exists. Suspension or revocation proceedings which
20 offer an opportunity for hearing shall be promptly
21 initiated after the Emergency Suspension Order has been
22 issued.

23 (8) Exempt any licensed vehicle from subsequent
24 vehicle design standards or specifications required by the
25 Department, as long as said vehicle is continuously in
26 compliance with the vehicle design standards and

1 specifications originally applicable to that vehicle, or
2 until said vehicle's title of ownership is transferred.

3 (9) Exempt any vehicle (except an SEMSV) which was
4 being used as an ambulance on or before December 15, 1980,
5 from vehicle design standards and specifications required
6 by the Department, until said vehicle's title of ownership
7 is transferred. Such vehicles shall not be exempt from all
8 other licensing standards and requirements prescribed by
9 the Department.

10 (10) Prohibit any Vehicle Service Provider from
11 advertising, identifying its vehicles, or disseminating
12 information in a false or misleading manner concerning the
13 Provider's type and level of vehicles, location, primary
14 service area, response times, level of personnel,
15 licensure status or System participation.

16 (10.5) Prohibit any Vehicle Service Provider, whether
17 municipal, private, or hospital-owned, from advertising
18 itself as a critical care transport provider unless it
19 participates in a Department-approved EMS System critical
20 care transport plan.

21 (11) Charge each Vehicle Service Provider a fee per
22 transport vehicle, due annually at time of inspection. The
23 fee per transport vehicle shall be set by administrative
24 rule by the Department and shall not exceed 100 vehicles
25 per provider.

26 (Source: P.A. 97-333, eff. 8-12-11; 97-1014, eff. 1-1-13;

1 98-452, eff. 1-1-14.)

2 (210 ILCS 50/3.155)

3 Sec. 3.155. General Provisions.

4 (a) Authority and responsibility for the EMS System shall
5 be vested in the EMS Resource Hospital, through the EMS
6 Medical Director or his designee.

7 (b) For an inter-hospital emergency or non-emergency
8 medical transport, in which the physician from the sending
9 hospital provides the EMS personnel with written medical
10 orders, such written medical orders cannot exceed the scope of
11 care which the EMS personnel are authorized to render pursuant
12 to this Act.

13 (c) For an inter-hospital emergency or non-emergency
14 medical transport of a patient who requires medical care
15 beyond the scope of care which the EMS personnel are
16 authorized to render pursuant to this Act, a qualified
17 physician, nurse, perfusionist, or respiratory therapist
18 familiar with the scope of care needed must accompany the
19 patient and the transferring hospital and physician shall
20 assume medical responsibility for that portion of the medical
21 care.

22 (d) No emergency medical services vehicles or personnel
23 from another State or nation may be utilized on a regular basis
24 to pick up and transport patients within this State without
25 first complying with this Act and all rules adopted by the

1 Department pursuant to this Act.

2 (e) This Act shall not prevent emergency medical services
3 vehicles or personnel from another State or nation from
4 rendering requested assistance in this State in a disaster
5 situation, or operating from a location outside the State and
6 occasionally transporting patients into this State for needed
7 medical care. Except as provided in Section 31 of this Act,
8 this Act shall not provide immunity from liability for such
9 activities.

10 (f) Except as provided in subsection (e) of this Section,
11 no person or entity shall transport emergency or non-emergency
12 patients by ambulance, SEMSV, or medical carrier without first
13 complying with the provisions of this Act and all rules
14 adopted pursuant to this Act.

15 (g) Nothing in this Act or the rules adopted by the
16 Department under this Act shall be construed to authorize any
17 medical treatment to or transportation of any person who
18 objects on religious grounds.

19 (h) Patients, individuals who accompany a patient, and
20 emergency medical services personnel may not smoke while
21 inside an ambulance or SEMSV. The Department of Public Health
22 may impose a civil penalty on an individual who violates this
23 subsection in the amount of \$100.

24 (i) When a patient has been determined by EMS personnel to
25 (1) have no immediate life-threatening injuries or illness,
26 (2) not be under the influence of drugs or alcohol, (3) have no

1 immediate or obvious need for transport to an emergency
2 department, and (4) have an immediate need for transport to an
3 EMS System-approved mental health facility, the EMS personnel
4 may contact Online Medical Control or his or her EMS Medical
5 Director or Emergency Communications Registered Nurse to
6 request bypass or diversion of the closest emergency
7 department, as outlined in paragraph (5) of subsection (c) of
8 Section 3.20, and request transport to the closest or
9 appropriate EMS System-approved mental health facility. In
10 addition, EMS personnel may transport a patient to an EMS
11 System-approved urgent care or immediate care facility that
12 meets the proper criteria and is approved by Online Medical
13 Control or his or her EMS Medical Director or Emergency
14 Communications Registered Nurse.

15 (Source: P.A. 92-376, eff. 8-15-01.)

16 Section 99. Effective date. This Act takes effect upon
17 becoming law."