



Sen. Chapin Rose

Filed: 4/7/2016

09900SB2704sam001

LRB099 16933 MJP 47092 a

1 AMENDMENT TO SENATE BILL 2704

2 AMENDMENT NO. _____. Amend Senate Bill 2704 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Emergency Medical Services (EMS) Systems
5 Act is amended by changing Sections 3.5 and 3.10 as follows:

6 (210 ILCS 50/3.5)

7 Sec. 3.5. Definitions. As used in this Act:

8 "Clinical observation" means the on-going observation of a
9 patient's condition by a licensed health care professional
10 utilizing a medical skill set while continuing assessment and
11 care.

12 "Department" means the Illinois Department of Public
13 Health.

14 "Director" means the Director of the Illinois Department of
15 Public Health.

16 "Emergency" means a medical condition of recent onset and

1 severity that would lead a prudent layperson, possessing an
2 average knowledge of medicine and health, to believe that
3 urgent or unscheduled medical care is required.

4 "Emergency Medical Services personnel" or "EMS personnel"
5 means persons licensed as an Emergency Medical Responder (EMR)
6 (First Responder), Emergency Medical Dispatcher (EMD),
7 Emergency Medical Technician (EMT), Emergency Medical
8 Technician-Intermediate (EMT-I), Advanced Emergency Medical
9 Technician (A-EMT), Paramedic (EMT-P), Emergency
10 Communications Registered Nurse (ECRN), or Pre-Hospital
11 Registered Nurse (PHRN).

12 "Health care facility" means a hospital, nursing home,
13 physician's office or other fixed location at which medical and
14 health care services are performed. It does not include
15 "pre-hospital emergency care settings" which utilize EMS
16 personnel to render pre-hospital emergency care prior to the
17 arrival of a transport vehicle, as defined in this Act.

18 "Hospital" has the meaning ascribed to that term in the
19 Hospital Licensing Act.

20 "Medical monitoring" means the performance of medical
21 tests and physical exams to evaluate an individual's on-going
22 exposure to a factor that could negatively impact that person's
23 health. "Medical monitoring" includes close surveillance or
24 supervision of patients liable to suffer deterioration in
25 physical or mental health and checks of various parameters such
26 as pulse rate, temperature, respiration rate, the condition of

1 the pupils, the level of consciousness and awareness, the
2 degree of appreciation of pain, and blood gas concentrations
3 such as oxygen and carbon dioxide.

4 "Trauma" means any significant injury which involves
5 single or multiple organ systems.

6 (Source: P.A. 98-973, eff. 8-15-14.)

7 (210 ILCS 50/3.10)

8 Sec. 3.10. Scope of Services.

9 (a) "Advanced Life Support (ALS) Services" means an
10 advanced level of pre-hospital and inter-hospital emergency
11 care and non-emergency medical services that includes basic
12 life support care, cardiac monitoring, cardiac defibrillation,
13 electrocardiography, intravenous therapy, administration of
14 medications, drugs and solutions, use of adjunctive medical
15 devices, trauma care, and other authorized techniques and
16 procedures, as outlined in the provisions of the National EMS
17 Education Standards relating to Advanced Life Support and any
18 modifications to that curriculum specified in rules adopted by
19 the Department pursuant to this Act.

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

1 (b) "Intermediate Life Support (ILS) Services" means an
2 intermediate level of pre-hospital and inter-hospital
3 emergency care and non-emergency medical services that
4 includes basic life support care plus intravenous cannulation
5 and fluid therapy, invasive airway management, trauma care, and
6 other authorized techniques and procedures, as outlined in the
7 Intermediate Life Support national curriculum of the United
8 States Department of Transportation and any modifications to
9 that curriculum specified in rules adopted by the Department
10 pursuant to this Act.

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

17 (c) "Basic Life Support (BLS) Services" means a basic level
18 of pre-hospital and inter-hospital emergency care and
19 non-emergency medical services that includes medical
20 monitoring, clinical observation, airway management,
21 cardiopulmonary resuscitation (CPR), control of shock and
22 bleeding and splinting of fractures, as outlined in the
23 provisions of the National EMS Education Standards relating to
24 Basic Life Support and any modifications to that curriculum
25 specified in rules adopted by the Department pursuant to this
26 Act.

1 That care shall be initiated, where authorized by the EMS
2 Medical Director in a Department approved EMS System, under the
3 written or verbal direction of a physician licensed to practice
4 medicine in all of its branches or under the verbal direction
5 of an Emergency Communications Registered Nurse.

6 (d) "Emergency Medical Responder Services" means a
7 preliminary level of pre-hospital emergency care that includes
8 cardiopulmonary resuscitation (CPR), monitoring vital signs
9 and control of bleeding, as outlined in the Emergency Medical
10 Responder (EMR) curriculum of the National EMS Education
11 Standards and any modifications to that curriculum specified in
12 rules adopted by the Department pursuant to this Act.

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

17 (f) "Inter-hospital care" means those medical services
18 rendered to patients for analytic, resuscitative, stabilizing,
19 or preventive purposes, during transportation of such patients
20 from one hospital to another hospital.

21 (f-5) "Critical care transport" means the pre-hospital or
22 inter-hospital transportation of a critically injured or ill
23 patient by a vehicle service provider, including the provision
24 of medically necessary supplies and services, at a level of
25 service beyond the scope of the Paramedic. When medically
26 indicated for a patient, as determined by a physician licensed

1 to practice medicine in all of its branches, an advanced
2 practice nurse, or a physician's assistant, in compliance with
3 subsections (b) and (c) of Section 3.155 of this Act, critical
4 care transport may be provided by:

5 (1) Department-approved critical care transport
6 providers, not owned or operated by a hospital, utilizing
7 Paramedics with additional training, nurses, or other
8 qualified health professionals; or

9 (2) Hospitals, when utilizing any vehicle service
10 provider or any hospital-owned or operated vehicle service
11 provider. Nothing in Public Act 96-1469 requires a hospital
12 to use, or to be, a Department-approved critical care
13 transport provider when transporting patients, including
14 those critically injured or ill. Nothing in this Act shall
15 restrict or prohibit a hospital from providing, or
16 arranging for, the medically appropriate transport of any
17 patient, as determined by a physician licensed to practice
18 in all of its branches, an advanced practice nurse, or a
19 physician's assistant.

20 (g) "Non-emergency medical services" means medical care,
21 clinical observation, or medical monitoring rendered to
22 patients whose conditions do not meet this Act's definition of
23 emergency, before or during transportation of such patients to
24 or from health care facilities visited for the purpose of
25 obtaining medical or health care services which are not
26 emergency in nature, using a vehicle regulated by this Act.

1 (g-5) The Department shall have the authority to promulgate
2 minimum standards for critical care transport providers
3 through rules adopted pursuant to this Act. All critical care
4 transport providers must function within a Department-approved
5 EMS System. Nothing in Department rules shall restrict a
6 hospital's ability to furnish personnel, equipment, and
7 medical supplies to any vehicle service provider, including a
8 critical care transport provider. Minimum critical care
9 transport provider standards shall include, but are not limited
10 to:

- 11 (1) Personnel staffing and licensure.
- 12 (2) Education, certification, and experience.
- 13 (3) Medical equipment and supplies.
- 14 (4) Vehicular standards.
- 15 (5) Treatment and transport protocols.
- 16 (6) Quality assurance and data collection.

17 (h) The provisions of this Act shall not apply to the use
18 of an ambulance or SEMSV, unless and until emergency or
19 non-emergency medical services are needed during the use of the
20 ambulance or SEMSV.

21 (Source: P.A. 98-973, eff. 8-15-14.)".