H-1098.1

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**HOUSE BILL 1721**

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**State of Washington 64th Legislature 2015 Regular Session**

**By** Representatives Robinson, Schmick, Cody, Harris, Riccelli, and Van De Wege

AN ACT Relating to the transport of patients by ambulance to facilities other than hospitals; amending RCW 70.168.100 and 18.71.210; adding a new section to chapter 70.168 RCW; adding a new section to chapter 18.73 RCW; and adding a new section to chapter 74.09 RCW.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  A new section is added to chapter 70.168 RCW to read as follows:

(1) The department, in consultation with the department of social and health services, shall convene a work group comprised of members of the steering committee and representatives of ambulance services, mental health providers, and chemical dependency treatment programs. The work group shall establish alternative facility guidelines for the development of protocols and procedures for the appropriate transport of patients in need of immediate mental health or chemical dependency services.

(2) The alternative facility guidelines shall consider when transport to a mental health facility or chemical dependency treatment program is necessary as determined by:

(a) The presence of a medical emergency that requires immediate medical care;

(b) The severity of the mental health or substance use disorder needs of the patient;

(c) The training of emergency medical service personnel to respond to a patient experiencing emergency mental health or substance use disorders; and

(d) The risk the patient presents to the patient's self, the public, and the emergency medical service personnel.

(3) By July 1, 2016, the department shall make the guidelines available to all regional emergency medical services and trauma care councils for incorporation into regional emergency medical services and trauma care plans under RCW 70.168.100.

**Sec.**  RCW 70.168.100 and 1990 c 269 s 13 are each amended to read as follows:

Regional emergency medical services and trauma care councils are established. The councils ((~~shall~~)):

(1) By June 1990, shall begin the development of regional emergency medical services and trauma care plans to:

(a) Assess and analyze regional emergency medical services and trauma care needs;

(b) Identify personnel, agencies, facilities, equipment, training, and education to meet regional and local needs;

(c) Identify specific activities necessary to meet statewide standards and patient care outcomes and develop a plan of implementation for regional compliance;

(d) Establish and review agreements with regional providers necessary to meet state standards;

(e) Establish agreements with providers outside the region to facilitate patient transfer;

(f) Include a regional budget;

(g) Establish the number and level of facilities to be designated which are consistent with state standards and based upon availability of resources and the distribution of trauma within the region;

(h) Identify the need for and recommend distribution and level of care of prehospital services to assure adequate availability and avoid inefficient duplication and lack of coordination of prehospital services within the region; ((~~and~~))

(i) Identify procedures to allow for the appropriate transport of patients to mental health facilities or chemical dependency programs, as informed by the alternative facility guidelines adopted under section 1 of this act; and

(j) Include other specific elements defined by the department;

(2) By June 1991, shall begin the submission of the regional emergency medical services and trauma care plan to the department;

(3) Shall advise the department on matters relating to the delivery of emergency medical services and trauma care within the region;

(4) Shall provide data required by the department to assess the effectiveness of the emergency medical services and trauma care system;

(5) May apply for, receive, and accept gifts and other payments, including property and service, from any governmental or other public or private entity or person, and may make arrangements as to the use of these receipts, including any activities related to the design, maintenance, or enhancements of the emergency medical services and trauma care system in the region. The councils shall report in the regional budget the amount, source, and purpose of all gifts and payments.

NEW SECTION. **Sec.**  A new section is added to chapter 18.73 RCW to read as follows:

An ambulance service may transport patients to a nonmedical facility, such as a mental health facility or chemical dependency program as authorized in regional emergency medical services and trauma care plans under RCW 70.168.100.

**Sec.**  RCW 18.71.210 and 1997 c 275 s 1 are each amended to read as follows:

(1) No act or omission of any physician's trained emergency medical service intermediate life support technician and paramedic, as defined in RCW 18.71.200, or any emergency medical technician or first responder, as defined in RCW 18.73.030, done or omitted in good faith while rendering emergency medical service under the responsible supervision and control of a licensed physician or an approved medical program director or delegate(s) to a person who has suffered illness or bodily injury shall impose any liability upon:

((~~(1)~~))(a) The physician's trained emergency medical service intermediate life support technician and paramedic, emergency medical technician, or first responder;

((~~(2)~~))(b) The medical program director;

((~~(3)~~))(c) The supervising physician(s);

((~~(4)~~))(d) Any hospital, the officers, members of the staff, nurses, or other employees of a hospital;

((~~(5)~~))(e) Any training agency or training physician(s);

((~~(6)~~))(f) Any licensed ambulance service; or

((~~(7)~~))(g) Any federal, state, county, city or other local governmental unit or employees of such a governmental unit.

(2) This section shall apply to an act or omission committed or omitted in the performance of the actual emergency medical procedures and not in the commission or omission of an act which is not within the field of medical expertise of the physician's trained emergency medical service intermediate life support technician and paramedic, emergency medical technician, or first responder, as the case may be.

(3) This section shall apply also, as to the entities and personnel described in subsection((~~s~~)) (1) ((~~through (7)~~)) of this section, to any act or omission committed or omitted in good faith by such entities or personnel in rendering services at the request of an approved medical program director in the training of emergency medical service personnel for certification or recertification pursuant to this chapter.

(4) This section shall apply also, as to the entities and personnel described in subsection (1) of this section, to any act or omission committed or omitted in good faith by such entities or personnel involved in the transport of patients to mental health facilities or chemical dependency programs, in accordance with applicable alternative facility procedures adopted under RCW 70.168.100.

(5) This section shall not apply to any act or omission which constitutes either gross negligence or willful or wanton misconduct.

NEW SECTION. **Sec.**  A new section is added to chapter 74.09 RCW to read as follows:

The authority shall develop a reimbursement methodology for ambulance services when transporting a medical assistance enrollee to a mental health facility or chemical dependency program in accordance with the applicable alternative facility procedures adopted under RCW 70.168.100.

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