

2001 DRAFTING REQUEST

Bill

Received: **09/13/2000**

Received By: **isagerro**

Wanted: **As time permits**

Identical to LRB:

For: **Administration-Budget**

By/Representing: **Jablonsky**

This file may be shown to any legislator: **NO**

Drafter: **isagerro**

May Contact:

Alt. Drafters:

Subject: **Health - emergency med services**

Extra Copies: **DAK**

Pre Topic:

DOA:.....Jablonsky -

Topic:

State director of emergency medical services funding

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/P1	isagerro 09/19/2000	hhagen 09/20/2000	rschluet 09/21/2000	_____	lrb_docadmin 09/21/2000		State
	isagerro 10/02/2000	hhagen 10/02/2000		_____			
/1			pgreensl 10/03/2000	_____	lrb_docadmin 10/03/2000		State

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/2	isagerro 01/22/2001	jdyer 01/23/2001	rschluet 01/23/2001	_____	lrb_docadmin 01/23/2001		State

FE Sent For:

<END>

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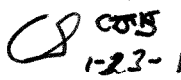
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			 1-23-1	 1-23-1			

2001 DRAFTING REQUEST

Bill

Received: 09/13/2000

Received By: isagerro

Wanted: As time permits

Identical to LRB:

For: Administration-Budget

By/Representing: Sue Jablonsky

This file may be shown to any legislator: NO

Drafter: isagerro

May Contact:

Alt. Drafters:

Subject: **Health - emergency med services**

Extra Copies: **DAK**

Pre Topic:

DOA:.....Jablonsky -

Topic:

Eliminate requirement that DHFS hire state director of emergency medical services

funding
Fit

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/P1	isagerro 09/19/2000	hhagen 09/20/2000 <i>hwh (1)</i> <i>10/2/00</i>	rschluet 09/21/2000 <i>10/3/2000</i>	<i>pg</i> <i>10/3</i>	lrb_docadmin 09/21/2000		State
FE Sent For:		<i>1 jld 10/2</i>	<i>pg</i>	<END>			

2001 DRAFTING REQUEST

Bill

Received: **09/13/2000**

Received By: **isagerro**

Wanted: **As time permits**

Identical to LRB:

For: **Administration-Budget**

By/Representing: **Sue Jablonsky**

This file may be shown to any legislator: **NO**

Drafter: **isagerro**

May Contact:

Alt. Drafters:

Subject: **Health - emergency med services**

Extra Copies: **DAK, DHFS**

Pre Topic:

DOA:.....Jablonsky -

Topic:

Eliminate requirement that DHFS hire state director of emergency medical services

Instructions:

See Attached

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<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/P1	isagerro 09/19/2000	hhagen 09/20/2000	rschluet 09/21/2000	_____	lrb_docadmin 09/21/2000		State

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<END>

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DOA:.....~~Sue~~ Jablonsky -

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Eliminate requirement that DHFS hire state director of emergency medical services

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/?	isagerro	1/1 hmk 9/19/00 1/1 JLD 9/20	9-21-00	CS/km	9-21-00		State

FE Sent For:

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ST
01-0299

DHFS

Department of Health and Family Services
2001-2001 Biennial Budget Statutory Language Request
August 25, 2000

Emergency Medical Services

Current Language

1. The statutes currently classify the appropriation, s. 20.435 (5) (ch) Emergency Medical Services; Aids, as an annual appropriation.
2. Wisconsin Stats. 146.55(2m) states that from the federal prevention block grant, DHFS "shall expend \$25,000 in each fiscal year to contract for the services of one physician to direct the state emergency medical services program."

Proposed Language

1. Change the classification of the appropriation s. 20.435 (5) (ch) to a continuing appropriation.
2. Change WI Stats. 146.55(2m) to read: from the federal prevention block grant, DHFS "may expend \$25,000 in each fiscal year to contract for the services of one physician to direct the state emergency medical services program."

Rationale and Effect of Change

Emergency Medical Services Funding Assistance Program

1. The Emergency Medical Services (EMS) section of the Division of Public Health is responsible for personnel licensure functions, the EMS communications program, complaint investigation staff, technical assistance, grant administration, training oversight and prevention activities to over 450 ambulance providers and 16,000 Emergency Medical Technicians (EMTs). This section also oversees the EMS Funding Assistance Program, which annually allocates \$2.2 million General Program Revenue (GPR) funds to supplement the budgets of EMS providers and to support training of EMTs.
2. The \$2.2 million for the EMS Funding Assistance Program is allocated as follows:
 - ✓ At the beginning of the fiscal year, approximately \$1.4 million is distributed by formula to approximately 400 different EMS providers.

- ✓ Approximately \$500,000 to \$700,000 is paid to certified training centers for required initial and refresher training courses for EMTs who are affiliated with an EMS provider. The training centers bill the Department for any eligible student who is still enrolled in the course at the drop deadline, which occurs after a specified number of class hours have been completed. However, if a student subsequently does not complete the course, the Department proceeds to bill the EMS provider and recoups the provided training fee.
 - ✓ After the distribution of the initial provider funds and payment of the training fees, any remaining funds, including recoupment of paid training fees, are then distributed to all eligible providers. The total amount available for the second distribution has been approximately \$100,000 to \$300,000.
3. The \$2.2 million funding for the EMS Funding Assistance Program is provided in the annual appropriation s. 20.435 (5) (ch). The structure of this appropriation is too restrictive to efficiently administer the program. The current system results in ineffective fiscal practices and also deprives EMS providers of available funds in the program.
 4. For example, some courses are held in the spring. Due to submission of training invoices after June 30 and the time necessary to identify students who do not fully complete the training course, the Department is not able to recoup payments for many students by the June 30 deadline imposed for an annual appropriation. Because the program operates under a GPR annual appropriation all refunds due to prior state-fiscal year expenditures, generally for classes finishing in the April - June period, must be deposited as GPR-earned. The Department is not able to distribute these funds to providers. The amount lost to the program has been approximately \$40,000 to \$70,000 annually.
 5. When established in 1990, funding for the program came from the Department of Transportation (DOT) Segregated Highway Fund. The 1997-1999 Biennial Budget Act changed the funding to GPR. Before this change in funding, the Department was able to allocate the entire \$2.2 million to program expenditures because recoupment for students who did not complete training in a fiscal year were collected and distributed even if the fiscal year deadline had passed. The current appropriation structure does not permit this practice and results in a loss of funds for the program.
 6. The requested change would allow the Department to apply any recoupments to the appropriate fiscal year and to allocate the entire level of appropriated funding to the EMS providers as intended in the original legislation.

Funding for the EMS Medical Director

1. The contracted state EMS medical director position was created in 1993 legislation to assist with medical oversight of delivery of emergency care. The original legislation listed two sources of funding; prevention block grant and DOT segregated funds. The segregated funds language was specific for that biennium and is no longer required. However, the prevention funding language was permanent.
2. Federal prevention block grant funds were decreased in the last federal fiscal year and have been earmarked for stable or reduced funding in the next federal budget cycle. All Division programs funded with prevention dollars will have to reduce their budgets proportionally. The continued requirement to use \$25,000 for the EMS medical director contract will require a disproportionate cut from another program area.
3. The original intent of the legislation was to make \$50,000 available to contract for a medical director. That intent has been met and will continue to be met by DHFS, but the highly prescriptive language does not allow flexibility for the Division to manage its limited financial resources. This change will permit the Division to be more flexible in the funding for the medical director contract by using any appropriate funding source to pay for the contracted services.

*Get rid of phys? or just get rid of \$25,000 alloc. lang?
or get rid of req. that funding be from that approp?

* Rich T. Chao - 9/13

- get rid of req. that DHFS
1. allocate/expend \$
AND

2. contract for services of phys to direct
EMS program.



State of Wisconsin
2001 - 2002 LEGISLATURE

LRB-0299/P1

ISR:.....
lmh
&
jld

LPS: Fix Request Sheet
check spacing

DOA:.....~~Sue~~ Jablonsky - Eliminate requirement that DHFS hire state director of emergency medical services

FOR 2001-03 BUDGET — NOT READY FOR INTRODUCTION

NOTE

Do Not Gen.

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

HEALTH

Currently, DHFS administers an emergency medical services (EMS) program. Under this program, DHFS licenses EMS personnel, including emergency medical technicians (EMTs), provides support and technical assistance to local EMS programs, coordinates training for the delivery of emergency medical services, assists with the training of EMTs, approves local EMS programs, and assists hospitals in planning for handling of the critically ill and injured. Current law requires DHFS to expend under the federal preventive health services grant program \$25,000 in each fiscal year for a state medical director for ~~emergency~~ ~~medical services~~. The state director directs the state EMS program, advises DHFS in promulgating rules for the use of automatic and semiautomatic defibrillators, and for the duties of local EMS medical directors, assists DHFS in investigating complaints regarding EMS personnel, and serves as a nonvoting member of the EMS board. The EMS board advises DHFS on the EMS program.

This bill ~~eliminates the requirement that~~ DHFS ~~expend~~ \$25,000 ~~to~~ hire a state director for emergency medical services.

medical

EMS

No COMMA

in each fiscal year

medical

authorizes rather than requires

NO #
The bill also changes the appropriation that funds EMS training and examination and EMS supplies and equipment from an annual appropriation to a continuing appropriation

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 15.195 (8) of the statutes is amended to read:

2 15.195 (8) EMERGENCY MEDICAL SERVICES BOARD. There is created an emergency
3 medical services board, which is attached to the department of health and family
4 services under s. 15.03. The board shall consist of 11 voting members, appointed for
5 3-year terms, who have an interest and expertise in emergency medical services
6 issues, who represent the various geographical areas of the state and who include
7 representatives of the various types of emergency medical services providers. In
8 addition to the 11 voting members, the secretary of health and family services, the
9 secretary of transportation, the director of the technical college system board and,
10 if contracted with under s. 146.55 (2m), the state medical director for emergency
11 medical services or their designees shall serve as nonvoting members of the board.

History: 1971 c. 219; 1977 c. 29 s. 1650m (2); 1977 c. 273; 1983 a. 27; 1983 a. 109 ss. 1, 3; 1985 a. 56; 1987 a. 399; 1989 a. 102, 107; 1991 a. 250; 1993 a. 16, 168, 184, 233; 1995 a. 27 ss. 138, 139, 9126 (19); 1995 a. 225, 205; 1997 a. 27 ss. 60e to 61, 93; 1997 a. 231; 1999 a. 9.

12 **SECTION 2.** 20.435 (5) (ch) of the statutes is amended to read:

13 20.435 (5) (ch) *Emergency medical services; aids.* The As a continuing
14 appropriation, the amounts in the schedule to pay the costs for emergency medical
15 technician — basic training and examination aid under s. 146.55 (5) and for
16 ambulance service vehicles or vehicle equipment, emergency medical services
17 supplies or equipment or emergency medical training for personnel under s. 146.55
18 (4).

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293, 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 183, 186.

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

1 **SECTION 3.** 146.50^X (8) (e) of the statutes is amended to read:

2 146.50 (8) (e) A certified first responder is authorized to use an automatic or
3 semiautomatic defibrillator, as prescribed for first responders in rules promulgated
4 by the department. The rules shall set forth authorization for the use of an automatic
5 defibrillator, a semiautomatic defibrillator or, for a defibrillator that may be operated
6 in more than one mode, use in the automatic or semiautomatic mode only. A certified
7 first responder is also authorized to employ other techniques, including the
8 administration of nonvisualized advanced airways, and the administration of
9 medications that are specified by the department by rule. In promulgating the rules
10 under this paragraph, the department shall consult with the state medical director
11 for emergency medical services, if contracted with under s. 146.55[✓] (2m), and the
12 emergency medical services board. The rule shall include those techniques that are
13 specified in the most current guidelines issued by the National Highway Traffic
14 Safety Administration under 23 CFR 1205.3 (a) (5).

History: 1973 c. 321; 1975 c. 39 ss. 645 to 647d, 782 (2); 1975 c. 224; 1977 c. 29, 167; 1979 c. 321; 1981 c. 73, 380; 1981 c. 391 s. 211; 1983 a. 189; 1985 a. 120, 135; 1987 a. 70, 399; 1989 a. 31; 1989 a. 102 ss. 20, 21, 36 to 59; 1991 a. 39, 238; 1993 a. 27, 29, 105, 183, 251, 399; 1997 a. 79, 191, 237; 1999 a. 7, 56.

15 **SECTION 4.** 146.53 (5) (h) of the statutes is amended to read:

16 146.53 (5) (h) Investigate complaints received regarding ambulance service
17 providers, first responders, emergency medical technicians and medical directors
18 and take appropriate actions after first consulting with the board and, if contracted
19 with under s. 146.55^X (2m), the state medical director for emergency medical services.

History: 1993 a. 251, 491; 1995 a. 247.

20 **SECTION 5.** 146.53^X (5) (k) of the statutes is amended to read:

1 146.53 (5) (k) Promulgate rules that set forth the authority and duties of
2 medical directors and, if contracted with under s. 146.55 (2m),[✓] the state medical
3 director for emergency medical services.

4 History: 1993 a. 251, 491; 1995 a. 247.

4 **SECTION 6.** 146.55 (2m)[✓] (a) of the statutes is amended to read:

5 146.55 (2m) (a) From the funding under the preventive health services project
6 grant program under 42 USC 2476 under the appropriation under s. 20.435 (1) (mc),
7 the department shall may[✓] expend \$25,000 in each fiscal year to contract for the
8 services of one physician to direct the state emergency medical services program.

9 History: 1989 a. 102 ss. 15 to 17, 23, 25, 26, 60; 1991 a. 39, 269; 1993 a. 16, 251, 399, 491; 1997 a. 27, 79.

9 **SECTION 7.** 146.55 (2m) (b) of the statutes is amended to read:

10 146.55 (2m) (b) The If a physician is contracted with[✓] under par. (a), the
11 physician shall be called the state medical director for the emergency medical
12 services program, shall have at least 3 years of experience in the conduct and delivery
13 of prehospital emergency medical services as a physician practicing emergency or
14 prehospital medicine in a hospital or agency and shall have actively participated in
15 and had major responsibility for the development, management, execution and
16 coordination of programs, policies and procedures in the delivery of emergency
17 medical services.

18 History: 1989 a. 102 ss. 15 to 17, 23, 25, 26, 60; 1991 a. 39, 269; 1993 a. 16, 251, 399, 491; 1997 a. 27, 79.

18 **SECTION 8.** 146.58 (1) of the statutes is amended to read:

19 146.58 (1) Appoint an advisory committee of physicians with expertise in the
20 emergency medical services area to advise the department on the criteria for
21 selection of the state medical director for emergency medical services and, if a[✓]
22 physician is contracted with under s. 146.55 (2m)[✓] to be the state medical director for[✓]

1 emergency medical services, on the performance of the director and to advise the
2 director on appropriate medical issues.

3 **History:** 1993 a. 16 ss. 2578f, 2578g, 2578p; 1995 a. 225; 1997 a. 27.

(END)

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0299/P1dn

ISR:mi...

hmt
+
jld

September 18, 2000
20

* Sue Jablonsky and Richard Chao:

Because this draft makes hiring a state medical director of emergency medical services optional, I had to amend additional sections of the statutes to reflect the change.

Please review this draft carefully to ensure that it is consistent with your intent. If you have any questions or concerns, please do not hesitate to contact me.

Ivy G. Sager-Rosenthal
Legislative Attorney
Phone: (608) 261-4455
E-mail: ivy.sager-rosenthal@legis.state.wi.us

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-0299/P1dn
ISR:hmh&jld:rs

September 21, 2000

Sue Jablonsky and Richard Chao:

Because this draft makes hiring a state medical director of emergency medical services optional, I had to amend additional sections of the statutes to reflect the change.

Please review this draft carefully to ensure that it is consistent with your intent. If you have any questions or concerns, please do not hesitate to contact me.

Ivy G. Sager-Rosenthal
Legislative Attorney
Phone: (608) 261-4455
E-mail: ivy.sager-rosenthal@legis.state.wi.us

Sager-Rosenthal, Ivy

From: Jablonsky, Sue
Sent: Thursday, September 28, 2000 1:42 PM
To: Sager-Rosenthal, Ivy
Subject: FW: FW: LRB-0299 EMS request.

-----Original Message-----

From: Chao, Richard
Sent: Thursday, September 28, 2000 11:09 AM
To: Jablonsky, Sue
Subject: Re: FW: LRB-0299 EMS request.

Yes, that is correct. We want a physician as the state medical director of EMS.

>>> Jablonsky, Sue 09/28/00 10:25AM >>>

-----Original Message-----

From: Sager-Rosenthal, Ivy
Sent: Thursday, September 28, 2000 10:24 AM
To: Jablonsky, Sue
Subject: RE: LRB-0299 EMS request.

If I understand correctly, the draft should make funding the director from s. 20.435 (1) (mc) optional but still require DHFS to contract with a physician to serve as the director. Am I correct?
Ivy

-----Original Message-----

From: Jablonsky, Sue
Sent: Thursday, September 28, 2000 9:43 AM
To: Sager-Rosenthal, Ivy
Subject: FW: LRB-0299 EMS request.

Comments from Rich. Let me know if this is a problem. I told him that you were making technical changes since you made the funding permissive rather than required.

-----Original Message-----

From: Chao, Richard
Sent: Wednesday, September 27, 2000 5:18 PM
To: Jablonsky, Sue
Subject: LRB-0299 EMS request.

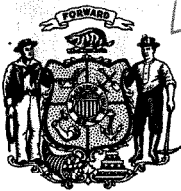
Sue:

I just got word that we should sent all comment through you.

When Ivy called me last week, I was spaced and goofed in giving her verbal instructions. We have do not a problem with being required to have a physician as the state medical director for EMS services. We just want the funding from the PBG to be written as may instead of shall, which will give us flexibility in funding the position. As a result, please remove any of the changes that state, "if a physician is contracted with under s. 146.55

(2m)....."

Richard T. Chao
Budget Section
Department of Health and Family Services
(608) 267-0356



LPS: ~~DOA~~ Please fix request sheet

State of Wisconsin
2001 - 2002 LEGISLATURE

LRB-0299/P1
ISR:hmh&jld:rs

soon

RMastrun

DOA:.....Jablonsky - ~~Eliminate requirement that DHFS hire~~ state director of emergency medical services *funding*

FOR 2001-03 BUDGET — NOT READY FOR INTRODUCTION

NO # the state emergency medical services program, under which

MOVE

Do Not Gen.

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

HEALTH

Currently, DHFS administers an emergency medical services (EMS) program. Under this program, DHFS licenses EMS personnel, including emergency medical technicians (EMTs), provides support and technical assistance to local EMS programs, coordinates training for the delivery of emergency medical services, assists with the training of EMTs, approves local EMS programs, and assists hospitals in planning for handling of the critically ill and injured. Current law requires DHFS to expend under the federal preventive health services grant program \$25,000 in each fiscal year for a state medical director for EMS. The state medical director directs the state EMS program, advises DHFS in promulgating rules for the use of automatic and semiautomatic defibrillators and for the duties of local EMS medical directors, assists DHFS in investigating complaints regarding EMS personnel, and serves as a nonvoting member of the EMS board. The EMS board advises DHFS on the EMS program.

This bill authorizes, rather than requires, DHFS to expend \$25,000 in each fiscal year to hire a state medical director for emergency medical services. The bill also changes the appropriation that funds EMS personnel training and examination

under the federal preventive health services grant program

and EMS supplies and equipment from an annual appropriation to a continuing appropriation.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.195 (8) of the statutes is amended to read:

15.195 (8) EMERGENCY MEDICAL SERVICES BOARD. There is created an emergency medical services board, which is attached to the department of health and family services under s. 15.03. The board shall consist of 11 voting members, appointed for 3-year terms, who have an interest and expertise in emergency medical services issues, who represent the various geographical areas of the state and who include representatives of the various types of emergency medical services providers. In addition to the 11 voting members, the secretary of health and family services, the secretary of transportation, the director of the technical college system board and, if contracted with under s. 146.55 (2m), the state medical director for emergency medical services or their designees shall serve as nonvoting members of the board.

SECTION 2. 20.435 (5) (ch) of the statutes is amended to read:

20.435 (5) (ch) *Emergency medical services; aids.* The As a continuing appropriation, the amounts in the schedule to pay the costs for emergency medical technician — basic training and examination aid under s. 146.55 (5) and for ambulance service vehicles or vehicle equipment, emergency medical services supplies or equipment or emergency medical training for personnel under s. 146.55 (4).

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

SECTION 3. 146.50 (8) (e) of the statutes is amended to read:

1 146.50 (8) (e) A certified first responder is authorized to use an automatic or
 2 semiautomatic defibrillator, as prescribed for first responders in rules promulgated
 3 by the department. The rules shall set forth authorization for the use of an automatic
 4 defibrillator, a semiautomatic defibrillator or, for a defibrillator that may be operated
 5 in more than one mode, use in the automatic or semiautomatic mode only. A certified
 6 first responder is also authorized to employ other techniques, including the
 7 administration of nonvisualized advanced airways, and the administration of
 8 medications that are specified by the department by rule. In promulgating the rules
 9 under this paragraph, the department shall consult with the state medical director
 10 for emergency medical services, if contracted with under s. 146.55 (2m), and the
 11 emergency medical services board. The rule shall include those techniques that are
 12 specified in the most current guidelines issued by the National Highway Traffic
 13 Safety Administration under 23 CFR 1205.3 (a) (5).

14 SECTION 4. 146.53 (5) (h) of the statutes is amended to read:

15 146.53 (5) (h) Investigate complaints received regarding ambulance service
 16 providers, first responders, emergency medical technicians and medical directors
 17 and take appropriate actions after first consulting with the board and, if contracted
 18 with under s. 146.55 (2m), the state medical director for emergency medical services.

19 SECTION 5. 146.53 (5) (k) of the statutes is amended to read:

20 146.53 (5) (k) Promulgate rules that set forth the authority and duties of
 21 medical directors and, if contracted with under s. 146.55 (2m), the state medical
 22 director for emergency medical services.

23 ^{Fix component} SECTION 6. 146.55 (2m) (a) of the statutes is ~~amended~~ to read:

24 146.55 (2m) (a) ^{Federal} From the funding under the preventive health services project

25 grant program under 42 USC 2476 under the appropriation under s. 20.435 (1) (mc),

The department shall contact with a physician to direct the state emergency medical services program. The department may expend

repealed and recreated

SECTION 6

for this purpose

1 ~~the department shall may expend \$25,000 in each fiscal year to contract for the~~
2 ~~services of one physician to direct the state emergency medical services program.~~

SECTION 7. 146.55 (2m) (b) of the statutes is amended to read:

4 146.55 (2m) (b) ~~The~~ If a physician is contracted with under par. (a), ~~the~~
5 physician shall be called the state medical director for the emergency medical
6 services program, shall have at least 3 years of experience in the conduct and delivery
7 of prehospital emergency medical services as a physician practicing emergency or
8 prehospital medicine in a hospital or agency and shall have actively participated in
9 and had major responsibility for the development, management, execution and
10 coordination of programs, policies and procedures in the delivery of emergency
11 medical services.

SECTION 8. 146.58 (1) of the statutes is amended to read:

13 146.58 (1) Appoint an advisory committee of physicians with expertise in the
14 emergency medical services area to advise the department on the criteria for
15 selection of the state medical director for emergency medical services and, if a
16 physician is contracted with under s. 146.55 (2m) to be the state medical director for
17 emergency medical services, on the performance of the director and to advise the
18 director on appropriate medical issues.

(END)

Sue Jablonsky 1:45 1/22/01

-Keep appropriation as annual

delete sec 2 of bill



State of Wisconsin
2001 - 2002 LEGISLATURE

2
LRB-0299/r

ISR:hmh&jld:pg

RMR

DOA:.....Jablonsky - State director of emergency medical services funding

FOR 2001-03 BUDGET - NOT READY FOR INTRODUCTION

soon

1 AN ACT ...; relating to: the budget.

Do not get

(EMS)

the state EMS emergency medical services program,

**Analysis by the Legislative Reference Bureau
HEALTH AND HUMAN SERVICES**

HEALTH

Current law requires DHFS to expend under the federal preventive health services project grant program \$25,000 in each fiscal year for a state medical director for the state emergency medical services program ~~under which~~ DHFS licenses EMS personnel, including emergency medical technicians (EMTs), provides support and technical assistance to local EMS programs, coordinates training for the delivery of emergency medical services, assists with the training of EMTs, approves local EMS programs, and assists hospitals in planning for handling of the critically ill and injured. The state medical director directs the state EMS program, advises DHFS in promulgating rules for the use of automatic and semiautomatic defibrillators and for the duties of local EMS medical directors, assists DHFS in investigating complaints regarding EMS personnel, and serves as a nonvoting member of the EMS board. The EMS board advises DHFS on the EMS program.

EMS

EMS

This bill authorizes, rather than requires, DHFS to expend \$25,000 under the federal preventive health services project grant program in each fiscal year to hire a state medical director for emergency medical services. The bill also changes the appropriation that funds EMS personnel training and examination and EMS supplies and equipment from an annual appropriation to a continuing appropriation.

For further information see the **state** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 20.435 (5) (ch) of the statutes is amended to read:

2 20.435 (5) (ch) *Emergency medical services; aids.* ~~The As a continuing~~
3 ~~appropriation, the amounts in the schedule to pay the costs for emergency medical~~
4 ~~technician — basic training and examination aid under s. 146.55 (5) and for~~
5 ~~ambulance service vehicles or vehicle equipment, emergency medical services~~
6 ~~supplies or equipment or emergency medical training for personnel under s. 146.55~~
7 (4).

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

8 **SECTION 2.** 146.55 (2m) (a) of the statutes is repealed and recreated to read:

9 146.55 (2m) (a) The department shall contract with a physician to direct the
10 state emergency medical services program. The department may expend from the
11 funding under the federal preventive health services project grant program under
12 42 USC 2476 under the appropriation under s. 20.435 (1) (mc), \$25,000 in each fiscal
13 year for this purpose.

14 (ENB)



State of Wisconsin
2001 - 2002 LEGISLATURE

LRB-0299/2
ISR:hmh&jld:rs

DOA:.....Jablonsky – State director of emergency medical services funding
FOR 2001-03 BUDGET — NOT READY FOR INTRODUCTION

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

HEALTH

Current law requires DHFS to expend under the federal preventive health services project grant program \$25,000 in each fiscal year for a state medical director for the state emergency medical services (EMS) program. Under the state EMS program, DHFS licenses EMS personnel, including emergency medical technicians (EMTs), provides support and technical assistance to local EMS programs, coordinates training for the delivery of EMS, assists with the training of EMTs, approves local EMS programs, and assists hospitals in planning for handling of the critically ill and injured. The state medical director directs the state EMS program, advises DHFS in promulgating rules for the use of automatic and semiautomatic defibrillators and for the duties of local EMS medical directors, assists DHFS in investigating complaints regarding EMS personnel, and serves as a nonvoting member of the EMS board. The EMS board advises DHFS on the EMS program.

This bill authorizes, rather than requires, DHFS to expend \$25,000 under the federal preventive health services project grant program in each fiscal year to hire a state medical director for EMS.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 146.55 (2m) (a) of the statutes is repealed and recreated to read:

2 146.55 (**2m**) (a) The department shall contract with a physician to direct the
3 state emergency medical services program. The department may expend from the
4 funding under the federal preventive health services project grant program under
5 42 USC 2476 under the appropriation under s. 20.435 (1) (mc), \$25,000 in each fiscal
6 year for this purpose.

7 **(END)**