AN ACT to amend 256.01 (3), 256.04 (10), 256.12 (2) (a), 256.15 (6p), 256.205 (2) (a) and (b) and (5) (b), 256.21 (title), (1), (2) (intro.), (a) and (b), (3), (4), (5) (a) and (b) and (6) and 256.215 (1) (b) and (d) and (2) (intro.), (b) and (c); to repeal and recreate 256.12 (2) (a); and to create 256.04 (10), 256.15 (6p), 256.205, 256.21 and 256.215 of the statutes; relating to: community paramedics, community emergency medical technicians, community emergency medical services providers, and services provided by emergency medical technicians.

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

SECTION 1. 256.01 (3) of the statutes is amended to read:

256.01 (3) "Ambulance service provider” means a person engaged primarily in the business of transporting sick, disabled, or injured individuals by ambulance to or from facilities or institutions providing health services.

SECTION 2. 256.04 (10) of the statutes is created to read:

256.04 (10) Prepare recommendations on training and approval qualifications for community paramedics and community emergency medical technicians.

SECTION 2m. 256.04 (10) of the statutes, as created by 2017 Wisconsin Act .... (this act), is amended to read:

256.04 (10) Prepare recommendations on training and approval qualifications for community paramedics and community emergency medical technicians for services practitioners.

SECTION 3. 256.12 (2) (a) of the statutes is amended to read:

256.12 (2) (a) Any county, city, town, village, hospital, ambulance service provider, or combination thereof may, after submission of a plan approved by the department, conduct an emergency medical services program using emergency medical technicians — paramedics for the delivery of emergency medical care to sick, disabled, or injured individuals at the scene of an emergency and during transport to a hospital, while in the hospital emergency department until responsibility for care is assumed by the regular hospital staff, and during transfer of a patient between health care facilities. An ambulance service provider may, after submission of a plan approved by the department, conduct an emergency medical services program using emergency medical technicians — paramedics for the delivery of emergency medical care to sick, disabled, or injured individuals during transfer of the individuals between health care facilities. Nothing in this section prohibits an emergency medical services program from using community paramedics and community emergency medical technicians for services described in ss. 256.205 (6) and 256.21 (6) or from providing nonemergency services in accordance with s. 256.15 (6p). Nothing in this section shall be construed to prohibit the operation of fire department, police department, for-profit ambulance service provider, or other emergency vehicles using the services of emergency medical technicians — paramedics in conjunction with a program approved by the department. Hospitals that offer

* Section 991.11, Wisconsin Statutes: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor’s partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication.”
approved training courses for emergency medical techni-
cians — paramedics should, if feasible, serve as the base
of operation for approved programs using emergency
medical technicians — paramedics.

SECTION 3m. 256.12 (2) (a) of the statutes, as
affected by 2017 Wisconsin Act .... (this act), is repealed
and recreated to read:

256.12 (2) (a) Any county, city, town, village, hospi-
tal, ambulance service provider, or combination thereof
may, after submission of a plan approved by the depart-
ment, conduct an emergency medical services program
using emergency medical services practitioners for the
delivery of emergency medical care to sick, disabled, or
injured individuals at the scene of an emergency and dur-
ing transport to a hospital, while in the hospital emer-
gency department until responsibility for care is assumed
by the regular hospital staff, and during transfer of a
patient between health care facilities. An ambulance ser-
vice provider may, after submission of a plan approved
by the department, conduct an emergency medical serv-
ces program using emergency medical services practi-
tioners for the delivery of emergency medical care to
sick, disabled, or injured individuals during transfer of
the individuals between health care facilities. Nothing in
this section prohibits an emergency medical services pro-
gram from using community paramedics and community
emergency medical services practitioners for services
described in ss. 256.205 (6) and 256.21 (6) or from pro-
viding nonemergency services in accordance with s.
256.15 (6p). Nothing in this section shall be construed to
prohibit the operation of fire department, police depart-
ment, for-profit ambulance service provider, or other
emergency vehicles using the services of emergency
medical services practitioners in conjunction with a pro-
gram approved by the department. Hospitals that offer
approved training courses for emergency medical serv-
cices practitioners should, if feasible, serve as the base
of operation for approved programs using emergency med-
cal services practitioners.

SECTION 4. 256.15 (6p) of the statutes is created to
read:

256.15 (6p) Delegation from a health care
provider. An emergency medical technician who is act-
ing upon a delegation by a health care provider does not
violate the actions authorized for emergency services
under sub. (6n) for actions taken in accordance with that
delegation.

SECTION 4m. 256.15 (6p) of the statutes, as created
by 2017 Wisconsin Act .... (this act), is amended to read:

256.15 (6p) Delegation from a health care
provider. An emergency medical technician services
practitioner who is acting upon a delegation by a health
care provider does not violate the actions authorized for
emergency services under sub. (6n) for actions taken in
accordance with that delegation.

SECTION 5. 256.205 of the statutes is created to read:

256.205 Community paramedics. (1) Definition.
In this section, “community paramedic” means an indi-
vidual who has obtained an approval issued under sub.
(2).

(2) Departmental approval. No person may use the
title “community paramedic” unless he or she obtains an
approval from the department issued under this section to
provide services as a community paramedic. To be eligi-
ble for an approval by the department as a community
paramedic, an individual shall meet all of the following
criteria:

(a) The individual is licensed as an emergency med-
cal technician — paramedic, that license is not suspended
or revoked, and the individual is not the subject of an
action under s. 256.15 (11).

(b) The individual has the equivalent of 2 years of
service as an emergency medical technician — para-
medic.

(c) The individual successfully completes a training
program that has been approved by the department under
sub. (3).

(d) The individual submits an application for the
approval on a form specified by the department.

(e) The individual satisfies any other requirements
established by the department.

(3) Training program. The department shall, after
consulting the board, approve training programs for com-

munity paramedics that include clinical experience, that
provide flexibility in addressing local service needs, and
that meet any other criteria established by the depart-
ment.

(4) Affiliation. A community paramedic may pro-

vide services under sub. (6) only if he or she is a volunteer
for or an employee of a community emergency medical
services provider, as defined in s. 256.215 (1) (a), or if he
or she is an employee of or under contract with a hospital,
clinic, or physician.

(5) Requirements. (a) A community paramedic shall
follow any protocols and supervisory standards
established by the department or by a medical director.

(b) A community paramedic is subject to certifica-
tion, disciplinary, complaint, and other regulatory
requirements that apply to emergency medical techni-
cians under s. 256.15.

(6) Services provided. Notwithstanding the actions
authorized for emergency services under s. 256.15 (6n),
a community paramedic may provide services for which
he or she is trained under a training program approved by
the department under sub. (3), that are not duplicative of
services already being provided to a patient, and that are
approved by the hospital, clinic, or physician for which
the community paramedic is an employee or contractor
or are incorporated in the patient care protocols under s.
256.215 (2) (b).
SECTION 5m. 256.205 (2) (a) and (b) and (5) (b) of the statutes, as created by 2017 Wisconsin Act ..., (this act), are amended to read:

256.205 (2) (a) The individual is licensed as an emergency medical technician—paramedic a paramedic, that license is not suspended or revoked, and the individual is not the subject of an action under s. 256.15 (11).

(b) The individual has the equivalent of 2 years of service as an emergency medical technician—paramedic a paramedic.

(5) (b) A community paramedic is subject to certification, disciplinary, complaint, and other regulatory requirements that apply to emergency medical technicians that include clinical experience, that provide flexibility in addressing local service needs, and that meet any other criteria established by the department.

SECTION 6. 256.21 of the statutes is created to read:

256.21 Community emergency medical technicians. (1) DEFINITION. In this section, “community emergency medical technician” means an individual who has obtained an approval issued under sub. (2).

(2) DEPARTMENTAL APPROVAL. No person may use the title “community emergency medical technician” unless he or she obtains an approval from the department issued under this section to provide services as a community emergency medical technician. To be eligible for an approval by the department as a community emergency medical technician, an individual shall meet all of the following criteria:

(a) The individual is licensed as an emergency medical technician at any level, that license is not suspended or revoked, and the individual is not the subject of an action under s. 256.15 (11).

(b) The individual has the equivalent of 2 years of service as an emergency medical technician at any level.

(c) The individual successfully completes a training program that has been approved by the department under sub. (3).

(d) The individual submits an application for the approval on a form specified by the department.

(e) The individual satisfies any other requirements established by the department.

(3) TRAINING PROGRAM. The department shall, after consulting the board, approve training programs for community emergency medical technicians that include clinical experience, that provide flexibility in addressing local service needs, and that meet any other criteria established by the department.

(4) AFFILIATION. A community emergency medical technician may provide services under sub. (6) only if he or she is a volunteer for or an employee of a community emergency medical services provider, as defined in s. 256.215 (1) (a), or if he or she is an employee of or under contract with a hospital, clinic, or physician.

(5) REQUIREMENTS. (a) A community emergency medical technician shall follow any protocols and supervisory standards established by the department or by a medical director.

(b) A community emergency medical technician is subject to certification, disciplinary, complaint, and other regulatory requirements that apply to emergency medical technicians under s. 256.15.

(6) SERVICES PROVIDED. Notwithstanding the actions authorized for emergency services under s. 256.15 (6n), a community emergency medical technician may provide services for which he or she is trained under a training program approved by the department under sub. (3), that are not duplicative of services already being provided to a patient, and that are approved by the hospital, clinic, or physician for which the community emergency medical technician is an employee or contractor or are incorporated in the patient care protocols under s. 256.215 (2) (b).

SECTION 6m. 256.21 (title), (1), (2) (intro.), (a) and (b), (3), (4), (5) (a) and (b) and (6) of the statutes, as created by 2017 Wisconsin Act ..., (this act), are amended to read:

256.21 (title) Community emergency medical technicians services practitioners. (1) DEFINITION. In this section, “community emergency medical technician services practitioner” means an individual who has obtained an approval issued under sub. (2).

(2) DEPARTMENTAL APPROVAL. (intro.) No person may use the title “community emergency medical technician services practitioner” unless he or she obtains an approval from the department issued under this section to provide services as a community emergency medical technician services practitioner. To be eligible for an approval by the department as a community emergency medical technician services practitioner, an individual shall meet all of the following criteria:

(a) The individual is licensed as an emergency medical technician services practitioner of any level, that license is not suspended or revoked, and the individual is not the subject of an action under s. 256.15 (11).

(b) The individual has the equivalent of 2 years of service as an emergency medical technician services practitioner at any level.

(3) TRAINING PROGRAM. The department shall, after consulting the board, approve training programs for community emergency medical technician services practitioners that include clinical experience, that provide flexibility in addressing local service needs, and that meet any other criteria established by the department.

(4) AFFILIATION. A community emergency medical technician services practitioner may provide services under sub. (6) only if he or she is a volunteer for or an employee of a community emergency medical services provider, as defined in s. 256.215 (1) (a), or if he or she is an employee of or under contract with a hospital, clinic, or physician.

(5) REQUIREMENTS. (a) A community emergency medical technician services practitioner shall follow any protocols and
supervisory standards established by the department or by a medical director.

(b) A community emergency medical technician services practitioner is subject to certification, disciplinary, complaint, and other regulatory requirements that apply to emergency medical technicians services practitioners under s. 256.15.

(6) SERVICES PROVIDED. Notwithstanding the actions authorized for emergency services under s. 256.15 (6n), a community emergency medical technician services practitioner may provide services for which he or she is trained under a training program approved by the department under sub. (3), that are not duplicative of services already being provided to a patient, and that are approved by the hospital, clinic, or physician for which the community emergency medical technician services practitioner is an employee or contractor or are incorporated in the patient care protocols under s. 256.215 (2) (b).

SECTION 7. 256.215 of the statutes is created to read: 256.215 Providers of community emergency medical services. (1) DEFINITIONS. In this section:

(a) “Community emergency medical services provider” means an emergency medical services provider that has approval from the department for its personnel to provide community emergency medical services under sub. (2).

(b) “Community emergency technician” has the meaning given under s. 256.21 (1).

(c) “Community paramedic” has the meaning given under s. 256.205 (1).

(d) “Emergency medical services provider” means an emergency medical services program under s. 256.12 that provides services as a nontransporting emergency medical technician provider or an ambulance service provider licensed under s. 256.15 (5).

(2) APPROVAL. No emergency medical services provider may advertise as providing community emergency medical services or may advertise having community paramedics or community emergency medical technicians services practitioners unless the community emergency medical services provider has approval from the department under this subsection. To be eligible for approval to provide community emergency medical services, an emergency medical services provider shall satisfy all of the following criteria:

(a) The emergency medical services provider is licensed by the department at any emergency medical services level.

(b) The emergency medical services provider establishes, submits to the department, and maintains patient care protocols corresponding to the appropriate service level to be used by a community paramedic or a community emergency medical technician. The emergency medical services provider may include in a patient care protocol only those services that do not require a license, certificate, or other credential under subch. II, III, IV, or VII of ch. 448 or ch. 441, 446, 447, 449, 450, 451, 455, 457, or 459 to provide.

(c) The emergency medical services provider agrees to provide to the department a list identifying each community paramedic and community emergency medical technician providing community emergency medical services as a volunteer or employee of that emergency medical services provider. If the emergency medical services provider is approved under this subsection as a community emergency medical services provider, the emergency medical services provider shall provide and update its list of community paramedics and community emergency medical technicians.

(d) The emergency medical services provider meets other requirements as specified by the department.

SECTION 7m. 256.215 (1) (b) and (d) and (2) (intro.), (b) and (c) of the statutes, as created by 2017 Wisconsin Act ..., (this act), are amended to read: 256.215 (1) (b) “Community emergency medical technician services practitioner” has the meaning given under s. 256.21 (1).

(d) “Emergency medical services provider” means an emergency medical services program under s. 256.12 that provides services as a nontransporting emergency medical technician services practitioner provider or an ambulance service provider licensed under s. 256.15 (5).

(2) APPROVAL. (intro.) No emergency medical services provider may advertise as providing community emergency medical services or may advertise having community paramedics or community emergency medical technician services practitioners unless the emergency medical services provider has approval from the department under this subsection. To be eligible for approval to provide community emergency medical services, an emergency medical services provider shall satisfy all of the following criteria:

(b) The emergency medical services provider establishes, submits to the department, and maintains patient care protocols corresponding to the appropriate service level to be used by a community paramedic or a community emergency medical technician services practitioner. The emergency medical services provider may include in a patient care protocol only those services that do not require a license, certificate, or other credential under subch. II, III, IV, or VII of ch. 448 or ch. 441, 446, 447, 449, 450, 451, 455, 457, or 459 to provide.

(c) The emergency medical services provider agrees to provide to the department a list identifying each community paramedic and community emergency medical technician services practitioner providing community emergency medical services as a volunteer or employee of that emergency medical services provider. If the emergency medical services provider is approved under this subsection as a community emergency medical services provider, the emergency medical services provider shall
provide and update its list of community paramedics and community emergency medical technicians services practitioners.

SECTION 8m. Effective dates. This act takes effect on the day after publication, except as follows:

1. TERMINOLOGY CHANGE RECONCILIATION. If either 2017 Assembly Bill 59 or 2017 Senate Bill 24 is enacted into law, the treatment of sections 256.04 (10) (by SECTION 2m), 256.15 (6p) (by SECTION 4m), 256.205 (2) (a) and (b) and (5) (b) (by SECTION 5m), 256.21 (title), (1), (2) (intro.), (a), and (b), (3), (4), (5) (a) and (b), and (6) (by SECTION 6m), and 256.215 (1) (b) and (d) and (2) (intro.), (b), and (c) (by SECTION 7m) of the statutes and the repeal and recreation of section 256.12 (2) (a) of the statutes take effect on the effective date of 2017 Wisconsin Act ... (Assembly Bill 59) or 2017 Wisconsin Act .... (Senate Bill 24) or on the effective date of 2017 Wisconsin Act .... (Assembly Bill 151), whichever is later. If either 2017 Assembly Bill 59 or 2017 Senate Bill 24 is not enacted into law in the 2017–18 legislative session, the treatment of sections 256.04 (10) (by SECTION 2m), 256.15 (6p) (by SECTION 4m), 256.205 (2) (a) and (b) and (5) (b) (by SECTION 5m), 256.21 (title), (1), (2) (intro.), (a), and (b), (3), (4), (5) (a) and (b), and (6) (by SECTION 6m), and 256.215 (1) (b) and (d) and (2) (intro.), (b), and (c) (by SECTION 7m) of the statutes and the repeal and recreation of section 256.12 (2) (a) of the statutes are void.