

2019 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-AB427)

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By: Secondary Drafters:

Date: 9/17/2019 May Contact:

Same as LRB:

Submit via email: YES
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Pre Topic:

No specific pre topic given

Topic:

Clarification of delegation

Instructions:

See attached

Drafting History:

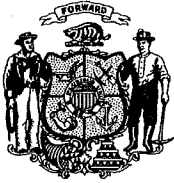
Table with 6 columns: Vers., Drafted, Reviewed, Submitted, Jacketed, Required. It contains two rows of drafting history data.

FE Sent For: <END>



9/17

Per meeting w/ Rep Linderbeck
eliminate Section 1 as language is
already broad enough



9/17

NOW

State of Wisconsin
2019 - 2020 LEGISLATURE

50098/1

LRB-4284/1

TJD:ahc

gs

2019 ASSEMBLY BILL 427

September 12, 2019 - Introduced by Representatives LOUDENBECK, SANFELIPPO and KUGLITSCH, cosponsored by Senators KOOYENGA and CRAIG. Referred to Committee on Health.

1 **AN ACT to renumber and amend** 256.12 (2) (a) and 256.15 (6p); and **to create**
2 256.12 (2) (a) 4. and 256.15 (6p) (a) and (b) of the statutes; **relating to:**
3 emergency medical services programs.

Analysis by the Legislative Reference Bureau

This bill allows an approved emergency medical services program to provide emergency medical care in circumstances other than at the scene of an emergency, during transport to a hospital, while in the hospital emergency department until regular hospital staff assume responsibility for care, and during transfer of a patient between health care facilities. The bill allows the emergency medical services program to provide emergency medical care during transport to another facility or institution in which health care is provided and under a delegation from a health care provider. Under current law, an emergency medical services practitioner may act upon a delegation by a health care provider without violating the scope of the emergency medical services practitioner's license. The bill adds conditions that the actions delegated to the emergency medical services practitioner must be all of the following: 1) within the scope of the health care provider's license and competency and 2) delegated to an emergency medical services practitioner whom the health care provider ensures is adequately knowledgeable and trained to perform the delegated action.

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

Current law does not prohibit an emergency medical services program from providing non-emergency services under a delegation.

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SECTION 1

1 SECTION 1. 256.12 (2) (a) of the statutes is renumbered 256.12 (2) (a) (intro.)
2 and amended to read:

3 256.12 (2) (a) (intro.) Any county, city, town, village, hospital, ambulance
4 service provider, or combination thereof may, after submission of a plan approved by
5 the department, conduct an emergency medical services program using emergency
6 medical services practitioners for the delivery of emergency medical care to sick,
7 disabled, or injured individuals at the scene of an emergency and during under any
8 of the following circumstances:

9 1. During transport to a hospital, while or facility or institution in which health
10 care is provided.

11 2. While in the hospital emergency department until responsibility for care is
12 assumed by the regular hospital staff, and during.

13 3. During transfer of a patient between health care facilities.

14 (ad) An ambulance service provider may, after submission of a plan approved
15 by the department under par. (a), conduct an emergency medical services program
16 using emergency medical services practitioners for the delivery of emergency
17 medical care to sick, disabled, or injured individuals during transfer of the
18 individuals between health care facilities.

19 (ah) Nothing in this section prohibits an emergency medical services program
20 from using community paramedics and community emergency medical services
21 practitioners for services described in ss. 256.205 (6) and 256.21 (6) or from providing
22 nonemergency services in accordance with s. 256.15 (6p).

23 (am) Nothing in this section shall be construed to prohibit the operation of fire
24 department, police department, for-profit ambulance service provider, or other

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1 emergency vehicles using the services of emergency medical services practitioners
2 in conjunction with a program approved by the department.

3 (ar) Hospitals that offer approved training courses for emergency medical
4 services practitioners should, if feasible, serve as the base of operation for approved
5 programs under this section using emergency medical services practitioners.

6 SECTION 2. 256.12 (2) (a) 4. of the statutes is created to read:

7 256.12 (2) (a) 4. Under a delegation from a health care provider in accordance
8 with s. 256.15 (6p).

9 SECTION 3. 256.15 (6p) of the statutes is renumbered 256.15 (6p) (intro.) and
10 amended to read:

11 256.15 (6p) DELEGATION FROM A HEALTH CARE PROVIDER. (intro.) An emergency
12 medical services practitioner who is acting upon a delegation by a health care
13 provider does not violate the actions authorized for emergency services under sub.
14 (6n) for actions taken in accordance with that ~~delegation.~~ delegation if all of the
15 following criteria are satisfied:

16 SECTION 4. 256.15 (6p) (a) and (b) of the statutes are created to read:

17 256.15 (6p) (a) The health care provider delegates to the emergency medical
18 services practitioner only actions that are within the scope of the health care
19 provider's credential and competency.

20 (b) The health care provider ensures that the action is delegated to an
21 emergency medical services practitioner who is adequately knowledgeable and
22 trained to perform the delegated action.

23

(END)