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## State of Minnesota

## HOUSE OF REPRESENTATIVES

A bill for an act

relating to emergency medical services; modifying certain reporting

requirements; amending Minnesota Statutes 2012, section 144E.123.

EIGHTY-EIGHTH SESSION

H. F. No. 47

02/11/2013 Authored by Runbeck, Simonson, Abeler, Persell, Johnson, B., and others
The bill was read for the first time and referred to the Committee on Health and Human Services Policy

1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. Minnesota Statutes 2012, section 144E.123, is amended to read:
1.6	144E.123 UNSCHEDULED PREHOSPITAL CARE DATA.
1.7	Subdivision 1. Collection and maintenance. A licensee shall collect and provide
1.8	prehospital care data to the board in a manner prescribed by the board on a quarterly
1.9	<u>basis</u> . At a minimum, the data must include items identified by the board that are part of
1.10	the National Uniform Emergency Medical Services Data Set. A licensee shall maintain
1.11	prehospital care data for every response.
1.12	Subd. 1a. Unscheduled prehospital care data. (a) For purposes of this section,
1.13	"prehospital care" means emergency services provided by a licensee in response to 911
1.14	calls or other emergency communications.
1.15	(b) Prehospital care data includes, but is not limited to, the following information:
1.16	(1) the area served by the licensee;
1.17	(2) response times;
1.18	(3) number of persons served; and
1.19	(4) costs of services provided, including amounts billed to patients.
1.20	Subd. 2. Copy to receiving hospital. If a patient is transported to a hospital, a copy
1.21	of the ambulance report delineating prehospital medical care given shall be provided
1.22	to the receiving hospital.
1.23	Subd. 3. Review. Prehospital care data may be reviewed by the board or its
1.24	designees. The data shall be classified as private data on individuals under chapter 13, the

Section 1.

01/23/13 REVISOR SGS/PP 13-1063

Minnesota Government Data Practices Act. The board must make summary data from each licensee available to the public upon request pursuant to chapter 13.

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Subd. 5. Working group. By October 1, 2011, the board must convene a working group composed of six members, three of which must be appointed by the board and three of which must be appointed by the Minnesota Ambulance Association, to redesign the board's policies related to collection of data from licenses. The issues to be considered include, but are not limited to, the following: user-friendly reporting requirements; data sets; improved accuracy of reported information; appropriate use of information gathered through the reporting system; and methods for minimizing the financial impact of data reporting on licenses, particularly for rural volunteer services. The working group must report its findings and recommendations to the board no later than July 1, 2012.

Section 1. 2