

Sec. 4. **STAFFING.** The joint legislative committee staff shall be comprised of existing house of representatives and senate staff as determined by the joint legislative committee.

Sec. 5. **EFFECTIVE DATE.** This act is effective the day following final enactment.

Approved June 1, 1979.

CHAPTER 316—S.F.No.202

An act relating to health; providing for several types of life support transportation service; providing for health systems agencies to be involved in the licensing process; providing factors to be used in making licensing recommendations; providing for standards for services; forbidding inquiry as to ability to pay before provision of life support transportation services; requiring rules for nonemergency transportation reimbursement under medical assistance; exempting certain providers; amending Minnesota Statutes 1978, Sections 144.801; 144.802; 144.803; 144.804; 144.805; 144.807, Subdivision 1; 144.808; 144.809 and 144.8091, Subdivision 1 and 256B.04, Subdivision 12.

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

Section 1. Minnesota Statutes 1978, Section 144.801, is amended to read:

144.801 **DEFINITIONS.** Subdivision 1. For the purposes of sections 144.801 to ~~144.808~~ 144.8091, the terms defined in this section have the meaning given them.

Subd. 2. "~~Land~~ Ambulance" means any vehicle designed or intended for and actually used in providing ~~land transportation of wounded; injured; sick; invalid; or incapacitated~~ life support transportation service to ill or injured persons, or expectant mothers.

Subd. 3. "~~Air ambulance~~" means any vehicle which is designed or intended for and actually used in providing ~~air transportation of wounded; injured; sick; invalid; or incapacitated~~ persons; or expectant mothers.

Subd. 3. "Commissioner" means the commissioner of health of the state of Minnesota.

Subd. 4. "~~Emergency ambulance~~ Life support transportation service" means transportation and treatment which is rendered or offered to be rendered preliminary to or during transportation to, from, or between health care facilities for ~~wounded; injured; sick; invalid; or incapacitated~~ ill or injured persons, or expectant mothers; ~~provided by any operator.~~

Subd. 5. "~~Nonemergency ambulance service~~" means transportation to or from a health care facility for examination, diagnosis, treatment, therapy, or consultation for ~~Changes or additions indicated by~~ underline ~~deletions by~~ strikeout

wounded, injured, sick, invalid, or incapacitated persons, or expectant mothers, provided by any operator. This service is transportation which is regularly provided, or offered to be provided, but which does not regularly necessitate treatment of the person while being transported. Nonemergency ambulance service does not include the provision of transportation services to persons for whom the need for oxygen, resuscitation or aspiration is not reasonably foreseeable during transportation.

Subd. 6 5. "License" means authority granted by the state commissioner of health for the operation of a land emergency ambulance service, land nonemergency ambulance service, air emergency ambulance a life support transportation service, or air nonemergency ambulance service in the state of Minnesota.

Subd. 7. "Operator" means a person, firm, partnership, corporation, service club, volunteer fire department, volunteer ambulance service, political subdivision or other organization which provides land emergency ambulance service, land nonemergency ambulance service, air emergency ambulance service, or air nonemergency ambulance service.

Subd. 6. "Licensee" means a natural person, partnership, association, corporation, or unit of government which possesses a life support transportation service license.

Subd. 8 7. "Base of operation" means the political subdivision in address at which the physical plant housing ambulances, related equipment and personnel is located.

Subd. 9. "Newly established ambulance service" means an emergency ambulance service or nonemergency ambulance service which does not possess a current license to provide the specific type of ambulance service as set forth in subdivision 6 and intended to be offered from a base of operation.

Subd. 8. "Health systems agency" means an agency established under section 145.74 to meet the requirements of the national health planning and resources development act, P.L. 93-641, 42 U.S.C. Section 300k et seq.

Subd. 9. "Primary service area" means the geographic area that can reasonably be served by a life support transportation service.

Subd. 10. "Municipality" means any city of any class, however organized, and any town.

Sec. 2. Minnesota Statutes 1978, Section 144.802, is amended to read:

144.802 LICENSING. Subdivision 1. No operator shall natural person, partnership, association, corporation or unit of government may operate a land emergency ambulance service, land nonemergency ambulance service, air emergency ambulance life support transportation service or air nonemergency ambulance service within this state unless it possesses a valid license to do so issued by the state commissioner of health. The license shall specify the location of the base of operations, primary service area, and the type or types of ambulance life support transportation service for which the operator licensee is

Changes or additions indicated by underline deletions by strikeout

licensed. The operator licensee shall obtain a new license if it wishes to establish a new base of operation, or to expand its primary service area, or to provide a new type or types of service. Licenses shall not be transferable. If ownership of a service is transferred, a new license shall be issued upon the approval of the state commissioner of health and a finding of conformance with all the requirements of sections 144.801 to 144.806 and 144.808. A public hearing shall not be required when there is a transfer of ownership. A license, or the ownership of a licensed life support transportation service, may be transferred only after the approval of the commissioner, based upon a finding that the proposed licensee or proposed new owner of a licensed life support transportation service meets or will meet the requirements of section 144.804. If the proposed transfer would result in a change in or addition of a new base of operations, expansion of the service's primary service area, or provision of a new type or types of life support transportation service, the commissioner shall require the prospective licensee or owner to comply with subdivision 3. The commissioner may approve the license or ownership transfer prior to completion of the application process described in subdivision 3 upon obtaining written assurances from the proposed licensee or proposed new owner that no change in the service's base of operations, expansion of the service's primary service area, or provision of a new type or types of life support transportation service will occur during the processing of the application. The cost of licenses shall be in an amount prescribed by the commissioner pursuant to section 144.122. Licenses shall expire and be renewed as prescribed by the commissioner pursuant to section 144.122.

Subd. 2. The state commissioner of health shall not issue a license for authorizing the operation of a newly established ambulance new life support transportation service, provision of a new type or types of ambulance life support transportation service or by an existing service, or establishment of a new base of operation or an expanded primary service area for an existing ambulance service in the state unless the service meets the standards required by requirements of sections 144.801 to 144.806 144.807 and the applicant has demonstrated to the satisfaction of the state commissioner of health pursuant to the provisions of subdivision 3, that the public convenience and necessity require the proposed ambulance service are met.

Subd. 3. Upon receiving an application for a license to operate an ambulance service, a notice of the filing of the application shall be published in the state register and once in the form prescribed by the commissioner of health, at the expense of the applicant, in a newspaper published in the municipality in which the proposed ambulance service is to be provided; or, if there is none in the municipality or if the service is to be provided in more than one municipality, in a newspaper published at the county seat of the county in which the ambulance service is to be provided. The commissioner may grant or deny the license 30 days after notice of the filing has been fully published. If the commissioner receives a written objection to the application from any person within 20 days of the notice having been fully published, the license shall be granted or denied only after a contested case hearing has been conducted on the application. The commissioner may elect to hold a contested case hearing if no objections to the application are received. If a timely objection is not received, the commissioner may grant or deny the requested license based upon the information contained in the license application. If licensure is denied without hearing, the applicant, within 30 days after receiving notice of denial, may request and shall be granted a contested case hearing upon the application, at which

Changes or additions indicated by underline deletions by ~~strikeout~~

hearing all issues will be heard de novo.

Subd. 3. (a) Each prospective licensee and each present licensee wishing to offer a new type or types of life support transportation service, to establish a new base of operation, or to expand a primary service area, shall make written application for a license to the commissioner on a form provided by the commissioner. The commissioner shall promptly send notice of the completed application to the health systems agency or agencies, the community health service agency or agencies, and each municipality and county in the area in which life support transportation service would be provided by the applicant. The commissioner shall publish the notice, at the applicant's expense, in the state register and in a newspaper in the municipality in which the service would be provided, or if no newspaper is published in the municipality or if the service would be provided in more than one municipality, in a newspaper published at the county-seat of the county or counties in which the service would be provided.

(b) Each municipality, county, community health service, and other person wishing to make recommendations concerning the disposition of the application shall make written recommendations to the health systems agency in its area within 30 days of the publication of notice of the application.

(c) The health systems agency or agencies shall:

(1) hold a public hearing in the municipality in which the service's base of operations is or will be located;

(2) provide notice of the public hearing in the newspaper or newspapers in which notice was published under part (a) for two successive weeks at least ten days before the date of the hearing;

(3) allow any interested person the opportunity to be heard, to be represented by counsel, and to present oral and written evidence at the public hearing;

(4) provide a transcript of the hearing at the expense of any individual requesting it; and

(5) follow any further procedure not inconsistent with Minnesota Statutes, Chapter 15, which it deems appropriate.

(d) The health systems agency or agencies shall review and comment upon the application and shall make written recommendations as to its disposition to the commissioner within 90 days of receiving notice of the application. In making the recommendations, the health systems agency or agencies shall consider and make written comments as to whether the proposed service, change in base of operations, or expansion in primary service area is needed, based on consideration of the following factors:

(1) the relationship of the proposed service, change in base of operations or expansion in primary service area to current health systems and annual implementation plans;

Changes or additions indicated by underline deletions by ~~strikeout~~

(2) the recommendations or comments of the governing bodies of the counties and municipalities in which the service would be provided;

(3) the duplication, if any, of life support transportation services that would result from granting the license;

(4) the estimated effect of the proposed service, change in base of operation or expansion in primary service area on the public health;

(5) whether any benefit accruing to the public health would outweigh the costs associated with the proposed service, change in base of operations, or expansion in primary service area.

The health systems agency or agencies shall recommend that the commissioner either grant or deny a license or recommend that a modified license be granted. The reasons for the recommendation shall be set forth in detail. The health systems agency or agencies shall make the recommendations and reasons available to any individual requesting them.

Subd. 4. Within 30 days after receiving the health systems agency recommendations, the commissioner shall grant or deny a license to the applicant. In granting or denying a license, the commissioner shall consider the health systems agency recommendations, evidence contained in the application, any hearing record and other applicable evidence, and whether any benefit accruing to the public health would outweigh the costs associated with the proposed service, change in base of operations, or expansion in primary service area. If the commissioner's decision is different from the health systems agency recommendations, the commissioner shall set forth in detail the reasons for differing from the recommendations.

Subd. 5. The commissioner's decision made under subdivision 4 shall be the final administrative decision. Any person aggrieved by the commissioner's decision shall be entitled to judicial review in the manner provided in sections 15.0424 to 15.0426.

Sec. 3. Minnesota Statutes 1978, Section 144.803, is amended to read:

144.803 **LICENSING; SUSPENSION AND REVOCATION.** The state commissioner of health may, after conducting a contested case hearing upon reasonable notice, suspend or revoke, or refuse to renew the license of an operator a licensee upon finding that the licensee has violated sections 144.801 to ~~144.806~~ or 144.808 or has ceased to provide the service for which it is licensed. Proceedings by the state commissioner of health pursuant to this section and review thereof shall be subject to the provisions of chapter 15.

Sec. 4. Minnesota Statutes 1978, Section 144.804, is amended to read:

144.804 **STANDARDS.** Subdivision 1. No publicly or privately owned ambulance basic life support transportation service shall be operated in the state unless the its drivers and attendants possess a current advanced American Red Cross first aid certificate or

Changes or additions indicated by underline deletions by strikeout

other first aid or emergency care certificate authorized by rules adopted by the state commissioner of health pursuant to chapter 15 or issued by the commissioner pursuant to section 214.13.

Subd. 2. Every ambulance offering emergency life support transportation service shall be equipped with a stretcher and after August 1, 1979, a two-way radio communications system which is in accordance with the state commissioner of health commissioner's statewide radio communications plan as promulgated in rule and carry the minimal equipment recommended by the American College of Surgeons or the equivalent necessary for the type of service to be provided as determined by standards adopted by the state commissioner of health pursuant to subdivision 3 of this section and chapter 15. Each life support transportation service shall offer service 24 hours per day every day of the year, unless otherwise authorized by the commissioner, and each vehicle while in operation shall be staffed by a driver and an attendant. Drivers and attendants are authorized to use only equipment for which they are qualified by training. A life support transportation service may substitute a physician, osteopath or registered nurse for the attendant in an ambulance. Whenever a life support transportation service finds it impossible to arrange for an attendant to accompany the driver, the driver may proceed to answer an emergency call without an accompanying attendant, provided that the service shall make all reasonable efforts to arrange for an attendant to be present at the site of the emergency and enroute to a health care facility. An operator shall not deny life support transportation services to a person needing life support care because of ability to pay or source of payment for services if this need develops in the licensee's primary service area.

Subd. 3. All land ambulances offering emergency service, whether publicly or privately owned; shall offer ambulance service 24 hours per day every day of the year and shall be staffed by a driver and an attendant. An ambulance operated by a nonprofit entity and limiting its operation exclusively to providing emergency ambulance service by contract for specific events and meetings need not offer emergency service 24 hours per day every day of the year but shall meet all other legal standards for ambulance services offering emergency service. Air ambulances shall be staffed by a pilot and an attendant. Whenever a land emergency ambulance service shall find it impossible to arrange for an attendant to accompany the driver, the driver may proceed to answer an emergency call without an accompanying attendant, provided that the ambulance service shall make all reasonable efforts to arrange for an attendant to be present at the site of the emergency and enroute to a health care facility. Drivers and attendants are authorized to use only such equipment for which they are qualified by training. An ambulance service may substitute a physician, osteopath or registered nurse for the attendant in an ambulance.

All ambulances offering nonemergency service shall be equipped with oxygen and resuscitation and aspiration equipment. After July 1, 1978 the oxygen, resuscitation and aspiration equipment must meet standards as specified by rules adopted by the state commissioner of health pursuant to chapter 15. No ambulance offering only nonemergency services shall be equipped with emergency warning lights or siren. Before April 1, 1980, the commissioner, in consultation with the appropriate standing committees of the legislature, shall promulgate as rules standards for the operation of the following types of life support transportation service:

Changes or additions indicated by underline deletions by strikeout

(a) basic life support service, which shall have appropriate personnel, vehicles and equipment, and be maintained in a sanitary condition so as to ensure that life-threatening situations and potentially serious injuries can be recognized, patients will be protected from additional hazards, basic treatment to reduce the seriousness of emergency situations will be administered and patients will be transported to an appropriate medical facility for treatment;

(b) advanced life support service which shall have appropriate personnel, vehicles and equipment, and be maintained in a sanitary condition so as to provide medical care beyond the basic life support level, including, but not limited to, intubation, defibrillation and administration of intravenous fluids and certain pharmaceuticals;

(c) scheduled life support transportation service;

(d) life support transportation service provided by an employer for the benefit of its employees;

(e) life support transportation service operated by a nonprofit entity and limited exclusively to providing service by contract for specific events and meetings.

An advanced life support ambulance may be used as a basic life support ambulance provided that its operation fulfills the standards promulgated pursuant to clause (a).

The standards promulgated under this subdivision shall take effect on June 1, 1980.

Subd. 4. Nothing in sections 144.801 to 144.806 shall prevent operation of a police emergency vehicle by one person nor affect any statute or regulatory authority vested in the department of public safety concerning automotive equipment and safety requirements.

Subd. 5. Local units of government may, with the approval of the commissioner, establish standards for life support transportation services which impose additional requirements upon such services. Local units of government intending to impose additional requirements shall consider whether any benefit accruing to the public health would outweigh the costs associated with the additional requirements. Local units of government which desire to impose such additional requirements shall, prior to promulgation of relevant ordinances, rules or regulations, furnish the commissioner with a copy of such proposed ordinances, rules or regulations, along with information which affirmatively substantiates that the proposed ordinances, rules or regulations: will in no way conflict with the relevant rules of the department of health; will establish additional requirements tending to protect the public health; will not diminish public access to life support transportation services of acceptable quality; and will not interfere with the orderly development of regional systems of emergency medical care. The commissioner shall base any decision to approve or disapprove such standards upon whether or not the local unit of government in question has affirmatively substantiated that the proposed ordinances, rules or regulations meet these criteria.

Changes or additions indicated by underline deletions by ~~strikeout~~

Subd. 6. The commissioner shall promulgate as rules standards particularizing the definition of primary service area under section 1, subdivision 9, under which the commissioner shall designate each licensed life support transportation service as serving a primary service area or areas.

Sec. 5. Minnesota Statutes 1978, Section 144.805, is amended to read:

144.805 CLASS C DRIVER'S LICENSE. Any person driving an ambulance providing land transportation shall have a valid class C Minnesota driver's license.

Sec. 6. Minnesota Statutes 1978, Section 144.807, Subdivision 1, is amended to read:

144.807 REPORTS. Subdivision 1. **REPORTING OF INFORMATION.** Operators of ambulance life support transportation services licensed pursuant to sections 144.801 to 144.806 shall report information about emergency life support transportation service to the state commissioner of health as the commissioner may require, excluding data relative to patient identification; ~~cost of the service rendered; or charges for the service provided.~~ No reports shall be required for non-emergency service. All information shall be reported on forms prescribed by the commissioner for that purpose. ~~In determining the nature; scope; use; and form of the information to be reported; the commissioner shall consult with his designated ambulance service subcommittee.~~

Sec. 7. Minnesota Statutes 1978, Section 144.808, is amended to read:

144.808 INSPECTIONS. The state commissioner of health may inspect ambulance life support transportation services as frequently as deemed necessary. These inspections shall be for the purpose of determining ~~that~~ whether the ambulance and equipment is clean and in proper working order and if whether the operator is in compliance with sections 144.801, to 144.804 and any rules that the state commissioner of health adopts related to sections 144.801 to 144.804.

Sec. 8. Minnesota Statutes 1978, Section 144.809, is amended to read:

144.809 RENEWAL OF EMERGENCY MEDICAL TECHNICIAN'S CERTIFICATE, FEE. No fee set by the state commissioner of health for biennial renewal of an emergency medical technician's certificate by a member of a volunteer ambulance life support transportation service or volunteer fire department shall exceed \$2.

Sec. 9. Minnesota Statutes 1978, Section 144.8091, Subdivision 1, is amended to read:

144.8091 REIMBURSEMENT TO NONPROFIT AMBULANCE SERVICES. Subdivision 1. Any political subdivision, or nonprofit hospital or nonprofit corporation operating a licensed ambulance life support transportation service shall be reimbursed by the state commissioner of health for the necessary expense of the initial training of a volunteer ambulance attendant upon successful completion by the attendant of ~~an~~ a basic emergency care course, or a continuing education course for basic emergency care, or
 Changes or additions indicated by underline deletions by strikeout

both, which has been approved by the state commissioner of health, pursuant to section 144.804. Reimbursable expense may include tuition, transportation, food, lodging, hourly payment for time spent in the training course, and other necessary expenditures, except that in no instance shall a volunteer ambulance attendant be reimbursed more than \$210 for successful completion of a basic course, and \$70 for successful completion of a continuing education course.

Sec. 10. [144.8092] REDESIGNATION OF EMERGENCY AMBULANCE SERVICES; TEMPORARY CONTINUATION OF EXISTING STANDARDS. Each entity licensed as an emergency ambulance service on the effective date of sections 1 to 10 is hereby redesignated as a life support transportation service. Until the commissioner promulgates standards pursuant to section 4, the standards promulgated under Laws 1977, Chapter 37, Section 4, for emergency ambulance services shall apply to all life support transportation services.

Sec. 11. Minnesota Statutes 1978, Section 256B.04, Subdivision 12, is amended to read:

Subd. 12. Place limits on the types of services covered by medical assistance, the frequency with which the same or similar services may be covered by medical assistance for an individual recipient, and the amount paid for each covered service. The state agency shall promulgate rules, including temporary rules, establishing maximum reimbursement rates for emergency and non-emergency ambulance life support transportation services.

The rules shall provide:

(a) An opportunity for all life support transportation services, designated by the state agency, to be reimbursed for non-emergency transportation consistent with the maximum rates established by the agency;

(b) Reimbursement of providers owned and operated by a public agency or a nursing home at reasonable maximum rates that reflect the cost of providing the service regardless of the fare that might be charged by the provider for similar services to individuals other than those receiving medical assistance or medical care under this chapter; and

(c) Reimbursement for each additional passenger carried on a single trip at a substantially lower rate than the first passenger carried on that trip.

The commissioner shall encourage providers reimbursed under this chapter to coordinate their operation with similar services that are operating in the same community. To the extent practicable, the commissioner shall encourage eligible individuals to utilize less expensive providers capable of serving their needs.

Approved June 5, 1979.

Changes or additions indicated by underline deletions by strikeout