S08432 Summary:

BILL NO	S08432A
SAME AS	No Same As
SPONSOR	MAYER
COSPNSR	HINCHEY, PERSAUD, REICHLIN-MELNICK, SKOUFIS
MLTSPNSR	
Amd §122-b, Ge	n Muni L; amd §163, Civ Serv L; amd §40, R & SS L; amd §§3000 - 3003 & 3008, add §§3004, 3018 & 3019, Pub Health L

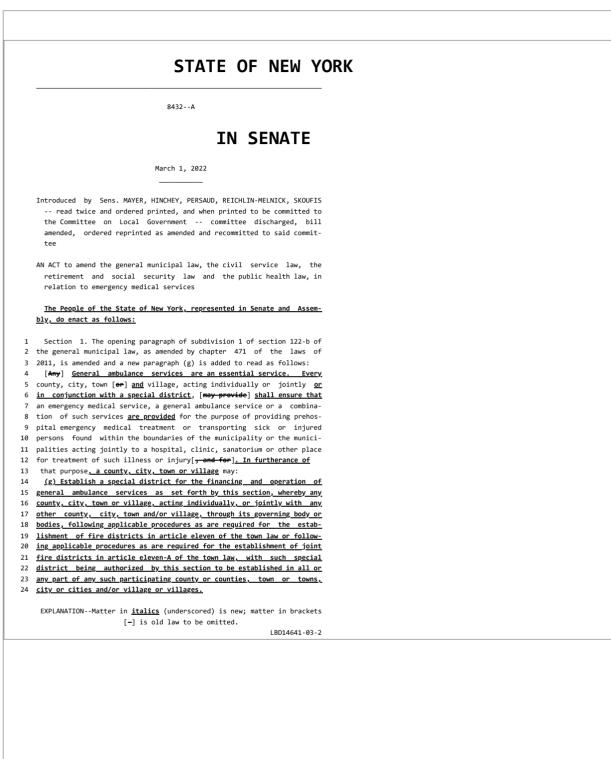
Relates to emergency medical services; includes the establishment of an emergency medical services quality and sustainability assurance program, a statewide comprehensive emergency medical system plan and an emergency medical systems training program.

S08432 Actions:

BILL NO S08432A

03/01/2022 REFERRED TO LOCAL GOVERNMENT 04/29/2022 AMEND AND RECOMMIT TO LOCAL GOVERNMENT 04/29/2022 PRINT NUMBER 8432A

S08432 Text:



S 8432--4 2 § 2. Subdivision 2 of section 163 of the civil service law, as amended by section 4 of part T of chapter 56 of the laws of 2010, is amended to 2 read as follows: з 2. The contract or contracts shall provide for health benefits for 5 retired employees of the state and of the state colleges of agriculture, home economics, industrial labor relations and veterinary medicine, the state agricultural experiment station at Geneva, and any other institution or agency under the management and control of Cornell university as 8 the representative of the board of trustees of the state university of 10 New York, and the state college of ceramics under the management and 11 control of Alfred university as the representative of the board of trus-12 tees of the state university of New York, and their spouses and depend-13 ent children as defined by the regulations of the president, on such 14 terms as the president may deem appropriate, and the president may 15 authorize the inclusion in the plan of the employees and retired employ-16 ees of public authorities, public benefit corporations, school 17 districts, special districts, district corporations, municipal corpo-18 rations excluding active employees and retired employees of cities 19 having a population of one million or more inhabitants whose compen-20 sation is or was before retirement paid out of the city treasury, or 21 other appropriate agencies, subdivisions or quasi-public organizations 22 of the state, including active members of volunteer fire and volunteer 23 ambulance companies serving one or more municipal corporations pursuant 24 to subdivision seven of section ninety-two-a of the general municipal 25 law, and their spouses and dependent children as defined by the regu-26 lations of the president. Notwithstanding any law or regulation to the 27 contrary, active members of volunteer ambulance companies serving one or 28 more municipal corporations pursuant to subdivision seven of section 29 ninety-two-a of the general municipal law shall be eligible for health 30 benefits regardless of the amount of funds derived from public sources. 31 Any such corporation, district, agency or organization electing to 32 participate in the plan shall be required to pay its proportionate share 33 of the expenses of administration of the plan in such amounts and at 34 such times as determined and fixed by the president. All amounts payable 35 for such expenses of administration shall be paid to the commissioner of taxation and finance and shall be applied to the reimbursement of funds 36 37 previously advanced for such purposes. Neither the state nor any other participant in the plan shall be charged with the particular experience 38 39 attributable to the employees of the participant, and all dividends or 40 retroactive rate credits shall be distributed pro-rata based upon the 41 number of employees of such participant covered by the plan. 42 § 3. Paragraph 9 of subdivision c of section 40 of the retirement and 43 social security law, as amended by chapter 525 of the laws of 1963, is 44 amended to read as follows: 45 9. Active members of volunteer ambulance companies serving one or more 46 municipal corporations pursuant to subdivision seven of section ninety-47 two-a of the general municipal law. 10. Notwithstanding any inconsistent provision of subdivision e of 48 49 this section, or of this chapter or of any other law, an officer or employee in the service of the state or of a participating employer who, 50 51 at the time of entering such service, was or is entitled to benefits by 52 any other pension or retirement system maintained by the state or a 53 political subdivision thereof, provided such benefits, exclusive of any 54 annuity based solely on his own contributions and interest thereon. are

55 suspended during his active membership in the retirement system. He

56 shall contribute to the retirement system as a new member.

S 8432--4 3 § 4. Section 3000 of the public health law, as amended by chapter 804 1 2 of the laws of 1992, is amended to read as follows: § 3000. Declaration of policy and statement of purpose. The furnishing 4 of medical assistance in an emergency is a matter of vital concern 5 affecting the public health, safety and welfare. Emergency medical services and ambulance services are essential services that must be available to everyone in New York in a reliable manner. Prehospital 8 emergency medical care, other emergency medical services, the provision 9 of prompt and effective communication among ambulances and hospitals and 10 safe and effective care and transportation of the sick and injured are 11 essential public health services that must be available to everyone in 12 New York in a reliable manner. 13 It is the purpose of this article to promote the public health, safety 14 and welfare by providing for certification of all advanced life support 15 first response services and ambulance services; the creation of regional 16 emergency medical services councils; and a New York state emergency 17 medical services council to develop minimum training standards for 18 certified first responders, emergency medical technicians and advanced emergency medical technicians and minimum equipment and communication 19 20 standards for advanced life support first response services and ambu-21 lance services. § 5. Subdivision 1 of section 3001 of the public health law, as 22 23 amended by chapter 804 of the laws of 1992, is amended to read as 24 follows: 1. "Emergency medical service" means [initial 25 omorgoncy 26 assistance including, but not limited to, the treatment of trauma, 27 burns, respiratory, circulatory and obstetrical emergencies] care of a 28 person to, from, at, in, or between the person's home, scene of injury, by 29 hospitals, health care facilities, public events or other locations, emergency medical services practitioners as a patient care team member, 30 31 for emergency, non-emergency, specialty, low acuity, preventative, interfacility care; emergency and non-emergency medical dispatch; coor-32 33 dination of emergency medical system equipment and personnel; assess-34 ment; treatment, transportation, routing, referrals and communications 35 with treatment facilities and medical personnel; public education, inju-36 ry prevention and wellness initiatives; administration of immunizations 37 as approved by the state emergency medical services council; and 38 follow-up and restorative care. § 6. Section 3002 of the public health law is amended by adding a new 39 40 subdivision 9 to read as follows: 41 9. The state council shall advise the commissioner on such issues as 42 the commissioner may require related to the provision of emergency 43 medical service, specialty care, designated facility care, and disaster 44 medical care, and assist in the coordination of such service and care. 45 This shall include, but is not limited to, the recommendation, periodic 46 revision, and application of rules and regulations, appropriateness 47 review standards, treatment protocols, and quality improvement stand-48 ards. Such rules, regulations, standards and protocols shall be region-49 alized, as necessary. The state council shall meet as frequently as 50 determined necessary by the commissioner. § 7. Section 3003 of the public health law is amended by adding two 51 52 new subdivisions 11 and 12 to read as follows: 53 11. Each regional council shall advise the state emergency medical 54 services council, the commissioner and the department on such issues as 55 the state emergency medical services council, the commissioner and the 56 department may require related to the provision of emergency medical

S 8432--4 Λ 1 service, specialty care, designated facility care, and disaster medical care, and assist in the regional coordination of such service and care. 12. Each regional council shall advise the state emergency medical 4 services council, the commissioner and the department on the appropriate regional standards required for the provision of emergency medical 6 services. § 8. The public health law is amended by adding a new section 3004 to 8 read as follows: § 3004. Emergency medical services quality and sustainability assur-10 ance program. The commissioner, with the advice of the state emergency 11 medical advisory committee, may create an emergency medical services 12 quality and sustainability assurance program. Standards and requirements 13 of the quality and sustainability assurance program may include but not 14 be limited to, clinical standards, quality metrics, safety standards, 15 emergency vehicle operator standards, clinical competencies, sustaina-16 bility metrics and minimum requirements for quality assurance and 17 sustainability assurance programs to be followed by emergency medical 18 services agencies, to promote positive patient outcomes, safety, and 19 emergency medical services system sustainability throughout the state. 20 Standards and requirements of the quality and sustainability assurance 21 program may be regionalized. The commissioner is hereby authorized to 22 promulgate regulations related to the standards and requirements of the 23 quality and sustainability assurance program. Quality and sustainability 24 assurance programs shall require each emergency medical services agency 25 to perform regular and periodic review of quality and sustainability 26 assurance program metrics, identification of agency deficiencies and 27 strengths, development of programs to improve agency metrics, strengthen 28 system sustainability, and continuous monitoring of care provided. The 29 department may contract for services with subject matter experts to assist in the oversight of these metrics statewide. The department may 30 31 delegate authority to oversee these metrics and regulations to counties 32 or other contractors as determined by the commissioner. Emergency medical services agencies that do not meet the standards and require-33 34 ments set forth in the quality assurance program set by the commissioner 35 may be subject to enforcement actions, including but not limited to 36 revocation, suspension, performance improvement plans, or restriction 37 from specific types of responses including, but not limited to, suspen-38 sion of the ability to respond to requests for emergency medical assist-39 ance or to perform emergency medical services. 40 § 9. The public health law is amended by adding a new section 3018 to 41 read as follows: The 42 § 3018. Statewide comprehensive emergency medical system plan. 1. 43 department, in consultation with the state emergency medical advisory 44 committee, shall develop and maintain a statewide comprehensive emergen-45 cy medical system plan that shall provide for a coordinated emergency 46 medical system within the state, which shall include but not be limited 47 to: 48 (a) establishing a comprehensive statewide emergency medical system, 49 incorporating facilities, transportation, workforce, communications, and other ways to improve the delivery of emergency medical service and 51 thereby decrease morbidity, hospitalization, disability, and mortality; (b) improving the accessibility of high-quality emergency medical 52 53 service; (c) coordinating with professional medical organizations, hospitals, 54

55 and other public and private agencies to develop approaches for persons

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1 who are presently using emergency departments for routine, nonurgent and

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- primary medical care to be served appropriately and economically; and (d) conducting, promoting, and encouraging programs of education and
- 4 training designed to upgrade the knowledge and skills of emergency
- medical service practitioners throughout the state with emphasis on
- regions underserved by emergency medical services. 6
- 2. The statewide comprehensive emergency medical system plan shall be
- 8 reviewed, updated if necessary, and published every five years on the
- department's website, or at such earlier times as may be necessary to 10 improve the effectiveness and efficiency of the state's emergency
- 11 medical service system.
- 12 3. Each regional emergency medical advisory committee shall develop
- 13 and maintain a comprehensive regional emergency medical system plan that
- 14 shall provide for a coordinated emergency medical system within the
- 15 region. Such plans shall be subject to review by the state emergency
- 16 medical advisory committee and approval by the department.
- 17 4. Each county shall develop and maintain a comprehensive county emer-
- 18 gency medical system plan that shall provide for a coordinated emergency
- 19 medical system within the county. The county office of emergency medical
- 20 services shall be responsible for the development and maintenance of the
- 21 comprehensive county emergency medical system plan. Such plans shall be
- 22 subject to review by the regional emergency medical advisory committee, 23
- the state advisory council and approval by the department. The depart-
- 24 ment shall be responsible for oversight of each county's compliance with 25 its plan.
- 26 5. The commissioner may promulgate regulations to ensure compliance 27 with this section.
- 28 § 10. Section 3008 of the public health law is amended by adding a new 29 subdivision 8 to read as follows:
- 8. (a) Notwithstanding any provision of law other than paragraph (b) 30
- 31 of this subdivision to the contrary, all determinations of need shall be
- 32 consistent with the state emergency medical system plan established in
- 33 section three thousand eighteen of this article. The commissioner may
- 34 promulgate regulations to provide for standards on the determination of
- 35 need. The department shall issue a new emergency medical system agency
- 36 certificate only upon a determination that a public need for the
- 37 proposed service has been established pursuant to regulation. If the
- 38 department determines that a public need exists for only a portion of a 39 proposed service, a certificate may be issued for that portion. Prior to
- 40 reaching a final determination of need, the department shall forward a
- 41 summary of the proposed service including any documentation received or
- 42 subsequent reports created thereto, to the state emergency medical
- 43 services advisory council for review and recommendation to the depart-
- 44 ment on the approval of the application. An applicant or other concerned
- 45 party may appeal any determination made by the department pursuant to
- 46 this section within fourteen days. Appeals shall be heard pursuant to
- 47 the provisions of section twelve-a of this chapter, and a final determi-
- 48 nation as to need shall be made by the commissioner upon review of the
- 49 report and recommendation by the presiding administrative law judge.
- 50 (b) Notwithstanding the provisions of paragraph (a) of this subdivi-
- 51 sion, the commissioner may promulgate regulations to provide for the
- 52 issuance of an emergency medical system agency certificate without а
- 53 determination of public need.
- § 11. The public health law is amended by adding a new section 3019 to 54 55 read as follows:

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§ 3019. Emergency medical systems training program. 1. There is hereby 1 established a training program for emergency medical systems that 2 includes students, emergency medical service practitioners, agencies, 3 4 facilities, and personnel, and the commissioner may provide funding 5 within the amount appropriated to conduct such training programs. Until such time as the department announces the training program established 6 pursuant to this section is in effect, all current standards, curricula, 8 and requirements for students, emergency medical service practitioners. 9 agencies, facilities, and personnel shall remain in effect. 10 2. The department, in consultation with the state emergency medical 11 advisory council, shall establish minimum education standards, curric-12 ula, and requirements for all emergency medical system training 13 programs. No person shall profess to provide emergency medical system 14 training without the approval of the department. 15 3. The department is authorized to provide, either directly or through 16 contract, emergency medical system training for emergency medical 17 service practitioners and emergency medical system agency personnel, 18 develop and distribute training materials for use by instructors, and to 19 recruit additional instructors to provide training. 20 4. The department may visit and inspect any emergency medical system 21 training program or training center operating under this article and the 22 regulations adopted therefore to ensure compliance. 23 5. The commissioner shall, within amounts appropriated, establish a 24 public service campaign to recruit additional personnel into the emer-25 gency medical system fields. 26 6. The commissioner shall, within amounts appropriated, establish an 27 emergency medical system mental health and wellness program that 28 provides resources to emergency medical service practitioners to reduce 29 burnout; prevent depression, suicide and other negative mental health 30 outcomes; and increase safety. 31 7. The department may create or adopt with the approval of the commis-32 sioner additional standards, training and criteria to become a credent-

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33 ialled emergency medical service practitioner to provide specialized, 34 advanced, or other services that further support or advance the emergen-

35 <u>cy medical system.</u>

- 36 § 12. This act shall take effect immediately.