

S04020 Summary:

BILL NO	S04020
SAME AS	SAME AS A03392
SPONSOR	MAYER
COSPNSR	HINCHEY, PERSAUD, SKOUFIS
MLTSPNSR	
Amd §122-b, Gen 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.	

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S04020 Actions:

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02/02/2023 REFERRED TO LOCAL GOVERNMENT

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S04020 Text:

STATE OF NEW YORK

4020

2023-2024 Regular Sessions

IN SENATE

February 2, 2023

Introduced by Sens. MAYER, HINCHEY, PERSAUD,
SKOUFIS -- read twice and
ordered printed, and when printed to be
committed to the Committee on
Local Government

AN ACT to amend the general municipal law, the
civil service law, the
retirement and social security law and the
public health law, in
relation to emergency medical services

The People of the State of New York,
represented in Senate and Assem-

bly, do enact as follows:

1 Section 1. The opening paragraph of subdivision
1 of section 122-b of

2 the general municipal law, as amended by
chapter 471 of the laws of

3 2011, is amended and a new paragraph (g) is added
to read as follows:

4 ~~[Any]~~ General ambulance services are an
essential service. Every

5 county, city, town ~~[or]~~ and village, acting
individually or jointly or

6 in conjunction with a special district, ~~[may~~
~~provide]~~ shall ensure that

7 an emergency medical service, a general
ambulance service or a combina-

8 tion of such services are provided for the
purpose of providing prehos-

9 pital emergency medical treatment or
transporting sick or injured

10 persons found within the boundaries of the
municipality or the munici-

11 palities acting jointly to a hospital, clinic,
sanatorium or other place

12 for treatment of such illness or injury~~[, and~~
~~for]~~. In furtherance of

13 that purpose, a county, city, town or village
may:

14 (g) Establish a special district for the
financing and operation of

15 general ambulance services as set forth by this
section, whereby any

16 county, city, town or village, acting
individually, or jointly with any

17 other county, city, town and/or village, through
its governing body or

18 bodies, following applicable procedures as are
required for the estab-

19 lishment of fire districts in article eleven of
the town law or follow-

20 ing applicable procedures as are required for the
establishment of joint

21 fire districts in article eleven-A of the town
law, with such special
22 district being authorized by this section to be
established in all or

EXPLANATION--Matter in italics (underscored) is
new; matter in brackets

[~~-~~] is old law to be
omitted.

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1 any part of any such participating county or
counties, town or towns,
2 city or cities and/or village or villages.

3 § 2. Subdivision 2 of section 163 of the civil
service law, as amended

4 by section 4 of part T of chapter 56 of the laws
of 2010, is amended to

5 read as follows:

6 2. The contract or contracts shall provide for
health benefits for

7 retired employees of the state and of the state
colleges of agriculture,

8 home economics, industrial labor relations and
veterinary medicine, the

9 state agricultural experiment station at Geneva,
and any other institu-

10 tion or agency under the management and control
of Cornell university as

11 the representative of the board of trustees of
the state university of

12 New York, and the state college of ceramics
under the management and

13 control of Alfred university as the
representative of the board of trus-

14 tees of the state university of New York, and
their spouses and depend-

15 ent children as defined by the regulations of
the president, on such

16 terms as the president may deem
appropriate, and the president may
17 authorize the inclusion in the plan of the
employees and retired employ-
18 ees of public authorities, public benefit
corporations, school
19 districts, special districts, district
corporations, municipal corpo-
20 rations excluding active employees and retired
employees of cities
21 having a population of one million or more
inhabitants whose compen-
22 sation is or was before retirement paid out of
the city treasury, or
23 other appropriate agencies, subdivisions or
quasi-public organizations
24 of the state, including active members of
volunteer fire and volunteer
25 ambulance companies serving one or more
municipal corporations pursuant
26 to subdivision seven of section ninety-two-a of
the general municipal
27 law, and their spouses and dependent children
as defined by the regu-
28 lations of the president. Notwithstanding any
law or regulation to the
29 contrary, active members of volunteer ambulance
companies serving one or
30 more municipal corporations pursuant to
subdivision seven of section
31 ninety-two-a of the general municipal law shall
be eligible for health
32 benefits regardless of the amount of funds
derived from public sources.
33 Any such corporation, district, agency or
organization electing to
34 participate in the plan shall be required to pay
its proportionate share
35 of the expenses of administration of the plan
in such amounts and at
36 such times as determined and fixed by the
president. All amounts payable

37 for such expenses of administration shall be paid
to the commissioner of

38 taxation and finance and shall be applied to the
reimbursement of funds

39 previously advanced for such purposes. Neither
the state nor any other

40 participant in the plan shall be charged with the
particular experience

41 attributable to the employees of the
participant, and all dividends or

42 retroactive rate credits shall be distributed
pro-rata based upon the

43 number of employees of such participant covered
by the plan.

44 § 3. Paragraph 9 of subdivision c of section
40 of the retirement and

45 social security law, as amended by chapter 525 of
the laws of 1963, is

46 amended to read as follows:

47 9. Active members of volunteer ambulance
companies serving one or more

48 municipal corporations pursuant to subdivision
seven of section ninety-

49 two-a of the general municipal law.

50 10. Notwithstanding any inconsistent provision
of subdivision e of

51 this section, or of this chapter or of any
other law, an officer or

52 employee in the service of the state or of a
participating employer who,

53 at the time of entering such service, was or is
entitled to benefits by

54 any other pension or retirement system
maintained by the state or a

55 political subdivision thereof, provided such
benefits, exclusive of any

56 annuity based solely on his own contributions
and interest thereon, are

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

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

3 § 4. Section 3000 of the public health law, as amended by chapter 804

4 of the laws of 1992, is amended to read as follows:

5 § 3000. Declaration of policy and statement of purpose. The furnishing

6 of medical assistance in an emergency is a matter of vital concern

7 affecting the public health, safety and welfare. Emergency medical

8 services and ambulance services are essential services that must be

9 available to everyone in New York in a reliable manner. Prehospital

10 emergency medical care, other emergency medical services, the provision

11 of prompt and effective communication among ambulances and hospitals and

12 safe and effective care and transportation of the sick and injured are

13 essential public health services that must be available to everyone in

14 New York in a reliable manner.

15 It is the purpose of this article to promote the public health, safety

16 and welfare by providing for certification of all advanced life support

17 first response services and ambulance services; the creation of regional

18 emergency medical services councils; and a New York state emergency

19 medical services council to develop minimum training standards for

20 certified first responders, emergency medical technicians and advanced

21 emergency medical technicians and minimum equipment and communication

22 standards for advanced life support first response services and ambu-

23 lance services.

24 § 5. Subdivision 1 of section 3001 of
the public health law, as
25 amended by chapter 804 of the laws of 1992, is
amended to read as

26 follows:

27 1. "Emergency medical service" means
[~~initial emergency medical~~
28 ~~assistance including, but not limited to, the~~
~~treatment of trauma,~~
29 ~~burns, respiratory, circulatory and obstetrical~~
~~emergencies~~] care of a
30 person to, from, at, in, or between the person's
home, scene of injury,
31 hospitals, health care facilities, public events
or other locations, by
32 emergency medical services practitioners as a
patient care team member,
33 for emergency, non-emergency, specialty, low
acuity, preventative, or
34 interfacility care; emergency and non-emergency
medical dispatch; coor-
35 dination of emergency medical system equipment
and personnel; assess-
36 ment; treatment, transportation, routing,
referrals and communications
37 with treatment facilities and medical personnel;
public education, inju-
38 ry prevention and wellness initiatives;
administration of immunizations
39 as approved by the state emergency medical
services council; and
40 follow-up and restorative care.

41 § 6. Section 3002 of the public health law is
amended by adding a new
42 subdivision 9 to read as follows:

43 9. The state council shall advise the
commissioner on such issues as
44 the commissioner may require related to the
provision of emergency
45 medical service, specialty care, designated
facility care, and disaster

46 medical care, and assist in the coordination of
such service and care.

47 This shall include, but is not limited to, the
recommendation, periodic

48 revision, and application of rules and
regulations, appropriateness

49 review standards, treatment protocols, and
quality improvement stand-

50 ards. Such rules, regulations, standards and
protocols shall be region-

51 alized, as necessary. The state council shall
meet as frequently as

52 determined necessary by the commissioner.

53 § 7. Section 3003 of the public health law
is amended by adding two

54 new subdivisions 11 and 12 to read as follows:

55 11. Each regional council shall advise the
state emergency medical

56 services council, the commissioner and the
department on such issues as

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1 the state emergency medical services council, the
commissioner and the

2 department may require related to the
provision of emergency medical

3 service, specialty care, designated facility
care, and disaster medical

4 care, and assist in the regional coordination of
such service and care.

5 12. Each regional council shall advise the
state emergency medical

6 services council, the commissioner and the
department on the appropriate

7 regional standards required for the provision
of emergency medical

8 services.

9 § 8. The public health law is amended by
adding a new section 3004 to

10 read as follows:

11 § 3004. Emergency medical services quality and
sustainability assur-

12 ance program. The commissioner, with the advice
13 of the state emergency
14 medical advisory committee, may create an
15 emergency medical services
16 quality and sustainability assurance program.
17 Standards and requirements
18 of the quality and sustainability assurance
19 program may include but not
20 be limited to, clinical standards, quality
21 metrics, safety standards,
22 emergency vehicle operator standards, clinical
23 competencies, sustaina-
24 bility metrics and minimum requirements for
25 quality assurance and
26 sustainability assurance programs to be
27 followed by emergency medical
28 services agencies, to promote positive patient
29 outcomes, safety, and
30 emergency medical services system
31 sustainability throughout the state.
32 Standards and requirements of the quality and
33 sustainability assurance
34 program may be regionalized. The commissioner
35 is hereby authorized to
36 promulgate regulations related to the standards
37 and requirements of the
38 quality and sustainability assurance program.
39 Quality and sustainability
40 assurance programs shall require each emergency
41 medical services agency
42 to perform regular and periodic review of
43 quality and sustainability
44 assurance program metrics, identification of
45 agency deficiencies and
46 strengths, development of programs to improve
47 agency metrics, strengthen
48 system sustainability, and continuous monitoring
49 of care provided. The
50 department may contract for services with
51 subject matter experts to
52 assist in the oversight of these metrics
53 statewide. The department may

33 delegate authority to oversee these metrics and
34 regulations to counties
35 or other contractors as determined by the
36 commissioner. Emergency
37 medical services agencies that do not meet the
38 standards and require-
39 ments set forth in the quality assurance program
40 set by the commissioner
41 may be subject to enforcement actions, including
42 but not limited to
43 revocation, suspension, performance
44 improvement plans, or restriction
45 from specific types of responses including, but
46 not limited to, suspen-
47 sion of the ability to respond to requests for
48 emergency medical assist-
49 ance or to perform emergency medical services.

42 § 9. The public health law is amended by
adding a new section 3018 to

43 read as follows:

44 § 3018. Statewide comprehensive emergency
45 medical system plan. 1. The
46 department, in consultation with the state
47 emergency medical advisory
48 committee, shall develop and maintain a statewide
49 comprehensive emergen-
50 cy medical system plan that shall provide for a
51 coordinated emergency
52 medical system within the state, which shall
53 include but not be limited
54 to:
55 (a) establishing a comprehensive statewide
56 emergency medical system,
57 incorporating facilities, transportation,
58 workforce, communications, and
59 other ways to improve the delivery of
60 emergency medical service and
61 thereby decrease morbidity, hospitalization,
62 disability, and mortality;
63 (b) improving the accessibility of high-
64 quality emergency medical
65 service;

1 (c) coordinating with professional medical
2 organizations, hospitals,
3 and other public and private agencies to develop
4 approaches for persons
5 who are presently using emergency departments for
6 routine, nonurgent and
7 primary medical care to be served appropriately
8 and economically; and
9 (d) conducting, promoting, and encouraging
10 programs of education and
11 training designed to upgrade the knowledge and
12 skills of emergency
13 medical service practitioners throughout the
14 state with emphasis on
15 regions underserved by emergency medical
16 services.

17 2. The statewide comprehensive emergency
18 medical system plan shall be
19 reviewed, updated if necessary, and published
20 every five years on the
21 department's website, or at such earlier times as
22 may be necessary to
23 improve the effectiveness and efficiency of
24 the state's emergency
25 medical service system.

26 3. Each regional emergency medical advisory
27 committee shall develop
28 and maintain a comprehensive regional emergency
29 medical system plan that
30 shall provide for a coordinated emergency
31 medical system within the
32 region. Such plans shall be subject to review by
33 the state emergency
34 medical advisory committee and approval by the
35 department.

36 4. Each county shall develop and maintain a
37 comprehensive county emer-
38 gency medical system plan that shall provide for
39 a coordinated emergency

21 medical system within the county. The county
22 office of emergency medical
23 services shall be responsible for the development
24 and maintenance of the
25 comprehensive county emergency medical system
26 plan. Such plans shall be
27 subject to review by the regional emergency
28 medical advisory committee,
29 the state advisory council and approval by the
30 department. The depart-
31 ment shall be responsible for oversight of each
32 county's compliance with
33 its plan.

34 5. The commissioner may promulgate regulations
35 to ensure compliance
36 with this section.

37 § 10. Section 3008 of the public health law is
38 amended by adding a new

39 subdivision 8 to read as follows:

40 8. (a) Notwithstanding any provision of law
41 other than paragraph (b)

42 of this subdivision to the contrary, all
43 determinations of need shall be

44 consistent with the state emergency medical
45 system plan established in

46 section three thousand eighteen of this
47 article. The commissioner may

48 promulgate regulations to provide for standards
49 on the determination of

50 need. The department shall issue a new
51 emergency medical system agency

52 certificate only upon a determination that a
53 public need for the

54 proposed service has been established
55 pursuant to regulation. If the

56 department determines that a public need exists
57 for only a portion of a

58 proposed service, a certificate may be issued for
59 that portion. Prior to

60 reaching a final determination of need, the
61 department shall forward a

43 summary of the proposed service including any
44 documentation received or
45 subsequent reports created thereto, to the
46 state emergency medical
47 services advisory council for review and
48 recommendation to the depart-
49 ment on the approval of the application. An
50 applicant or other concerned
51 party may appeal any determination made by the
52 department pursuant to
53 this section within fourteen days. Appeals shall
54 be heard pursuant to
55 the provisions of section twelve-a of this
chapter, and a final determi-
nation as to need shall be made by the
commissioner upon review of the
report and recommendation by the presiding
administrative law judge.

52 (b) Notwithstanding the provisions of paragraph
(a) of this subdivi-
sion, the commissioner may promulgate
regulations to provide for the
issuance of an emergency medical system agency
certificate without a
determination of public need.

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1 § 11. The public health law is amended by
adding a new section 3019 to
2 read as follows:
3 § 3019. Emergency medical systems training
4 program. 1. There is hereby
5 established a training program for emergency
6 medical systems that
7 includes students, emergency medical service
8 practitioners, agencies,
9 facilities, and personnel, and the
10 commissioner may provide funding
11 within the amount appropriated to conduct such
12 training programs. Until
13 such time as the department announces the
14 training program established

9 pursuant to this section is in effect, all
10 current standards, curricula,
11 and requirements for students, emergency medical
12 service practitioners,
13 agencies, facilities, and personnel shall remain
14 in effect.

15 2. The department, in consultation with the
16 state emergency medical
17 advisory council, shall establish minimum
18 education standards, curric-
19 ula, and requirements for all emergency
20 medical system training
21 programs. No person shall profess to provide
22 emergency medical system
23 training without the approval of the department.

24 3. The department is authorized to provide,
25 either directly or through
26 contract, emergency medical system training
27 for emergency medical
28 service practitioners and emergency medical
29 system agency personnel,
30 develop and distribute training materials for use
by instructors, and to
21 recruit additional instructors to provide
22 training.

23 4. The department may visit and inspect any
24 emergency medical system
25 training program or training center operating
26 under this article and the
27 regulations adopted therefore to ensure
28 compliance.

29 5. The commissioner shall, within amounts
30 appropriated, establish a
public service campaign to recruit additional
personnel into the emer-
gency medical system fields.

6. The commissioner shall, within amounts
appropriated, establish an
emergency medical system mental health and
wellness program that
provides resources to emergency medical service
practitioners to reduce

31 burnout; prevent depression, suicide and other
negative mental health

32 outcomes; and increase safety.

33 7. The department may create or adopt with the
approval of the commis-

34 sioner additional standards, training and
criteria to become a credent-

35 ialled emergency medical service practitioner
to provide specialized,

36 advanced, or other services that further support
or advance the emergen-

37 cy medical system.

38 § 12. This act shall take effect immediately.