

MINUTES OF THE HOUSE APPROPRIATIONS COMMITTEE

The meeting was called to order by Chairman Melvin Neufeld at 2:00 P.M. on March 30, 2006 in Room 514-S of the Capitol.

All members were present except:

Representative Huy - excused  
Representative Lane - excused  
Representative Pilcher-Cook - excused  
Representative Pottorff - excused  
Representative Sawyer - excused  
Representative Sharp - excused  
Representative Yoder - excused

Committee staff present:

J. G. Scott, Legislative Research Department  
Becky Krahl, Legislative Research Department  
Matt Spurgin, Legislative Research Department  
Amy VanHouse, Legislative Research Department  
Jim Wilson, Revisor of Statutes  
Nikki Feuerborn, Administrative Assistant  
Shirley Jepson, Committee Secretary

Conferees appearing before the committee:

Robert Waller, Administrator, Board of Emergency Medical Services (EMS)  
Carmen Alldritt, Department of Revenue

Others attending:

- Attachment 1 Testimony on **SB 546** by Robert Waller

**Hearing on SB 546 - Emergency medical services data collection system.**

Amy VanHouse, Legislative Research Department, explained that **SB 546** would direct the Board of Emergency Medical Services (EMS), within the limits of appropriations, to develop and maintain a statewide data collection system to collect and analyze emergency medical services information to assist the Board in improving the quality of emergency medical services. Operators and ambulance services would be required to collect and report specific information. The legislation authorizes the adoption of rules and regulations for the collection of the data. Several amendments were added by the Senate.

Chairman Neufeld recognized Robert Waller, Administrator, Board of Emergency Medical Services (EMS), who presented testimony in support of **SB 546** (Attachment 1). Mr. Waller stated that currently there is no uniform data collection system in the State. This legislation would provide for a data collection system to link the Department of Transportation (KDOT) travel records and the Department of Health and Environment (KDHE) trauma records. Mr. Waller noted that there are federal funds available to assist rural EMS departments with software for the collection of the data to connect to the system. Mr. Waller indicated that the cost to the counties would be minimal. Mr. Waller stated that all six EMS regions support the legislation; however, they do not support the amendment added by the Senate regarding the addition of a provision to require the Department of Revenue to collect additional data on driver licenses concerning certain health conditions of the driver. Mr. Waller indicated that funding is currently available for the complete system.

The Chair recognized Carmen Alldritt, Director of Vehicles, Department of Revenue, who stated that the Department of Revenue does not support the Senate amendment concerning the additional information required on driver licenses. Ms. Alldritt noted that the Driver Privacy Protection Act might not allow the collection of this specific data. The Department feels the collection of the data will be a tremendous undertaking and should be researched to determine if the collection of this specific data could cause significant problems in the future.

CONTINUATION SHEET

MINUTES OF THE House Appropriations Committee at 2:00 P.M. on March 30, 2006 in Room 514-S of the Capitol.

**The hearing on SB 546 was closed.**

Representative Henry moved to strike the language in **SB 546** pertaining to the floor amendment added by the Senate on Page 2, Section 5, Line 31 thru Page 3, Line 3 regarding the collection of additional information on driver licenses. The motion was seconded by Representative Bethell. Motion carried.

Representative Henry moved to recommend **SB 546** favorable for passage as amended. The motion was seconded by Representative Bethell. Motion carried.

Representative Feuerborn moved to approve the minutes as written of March 13, March 14, March 15, March 16, March 17, March 20, March 21, March 22 and March 23. The motion was seconded by Representative Landwehr. Motion carried.

The meeting was adjourned at 2:30 p.m. The next meeting will be "on call of the Chair".



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Melvin Neufeld, Chairman



# KANSAS

DENNIS ALLIN, M.D., CHAIR  
ROBERT WALLER, ADMINISTRATOR

KATHLEEN SEBELIUS, GOVERNOR

## BOARD OF EMERGENCY MEDICAL SERVICES

March 30, 2006

House Committee on Appropriations  
Room 514-S, Statehouse  
300 SW 10<sup>th</sup> Street  
Topeka, Kansas 66612

RE: Testimony for Senate Bill 546

The Board of Emergency Medical Services (BEMS) has been attempting to develop a data collection system since 1991. The purpose is to collect and analyze emergency medical services response information from ambulance services on patients being transported in Kansas in a central repository and in an electronic format.

K. A. R. 109-2-5 currently gives the Board the authority to collect information as stated below:

- \* (v) Each publicly subsidized operator shall provide the following statistical information to the board before March 1<sup>st</sup> of each calendar year;
- \* (1) the number of emergency and non-emergency ambulance responses and the number of patients transported for the previous calendar year;
- \* (2) the operating budget and tax subsidy;
- \* (3) the charge for emergency and non-emergency patient transports, including mileage fees; and
- \* (4) the number of full-time, part-time, and volunteer staff.

This proposed legislation would expand the authorization of the board to collect additional pertinent information. It is the goal of this agency to have all of the 174 Ambulance Services in Kansas collecting the same information as standardized by the National Emergency Medical Services Information System (NEMSIS), which was developed by a grant from the National Highway Traffic Safety Administration (NHTSA), with state specific datasets as determined by representatives across the state. This information would be forwarded electronically to the Board for analysis and reporting. The system would be compliant with Health Information Portability and Accountability Act (HIPAA).

Ambulance Services collecting and reporting this data would have the benefit of new organizational ideas, improved quality of emergency care and procedures, would draw public attention to community issues, provide justification for an existing program or illustrate a need for a new program, provide initial and continuing education, allocate state/agency resources effectively, and help those in the emergency medical services community to see the value of their work.

It is the Board's intention to have a web based reporting system accessible to all parts of Kansas.

HOUSE APPROPRIATIONS

DATE 3-30-2006  
ATTACHMENT 1



Supplemental Note for SB 546, as amended by Senate Committee of the Whole, would direct the Department of Revenue and the Emergency Medical Services Board, in consultation with any other interested parties, to develop a recommendation for changes in the law, in rules and regulations, in policy or any combination thereof in order that data could be routinely provided to first responders through the process of a driver's license check that would indicate whether a person has medical conditions that might adversely affect such person's ability to operate a motor vehicle. Any such information could only be made at the option of the license holder. The recommendation that would be required by the new statute is to: include a method to offer each driver's license holder an opportunity to make information available; and be reported in writing to the Speaker of the House and the President of the Senate on or before January 1, 2007.

While the BEMS Board foresees issues with this legislation, it believes the onus of this legislation would be on the Department of Revenue to develop this process, but would be willing to work towards this recommendation if it would allow this bill, in its entirety, to pass into law. The importance of the Data Collection portion of this legislation, originally introduced by Senator Emler at the Board's request, as outlined below, far outweighs the developing of a recommended driver's license check proposal for the 2007 Legislative Session.

#### TECHNICAL

The data collection system that we are proposing is based upon the National Emergency Medical Services Information System (NEMSIS). NEMSIS is a cooperative project of the National Association of State EMS Directors (NASEMSD), the National Highway Traffic Safety Administration (NHTSA) and the Trauma/EMS Systems program of the Health Resources and Services Administration (HRSA) whose goal is to develop a national EMS database.

To date over 52 states and territories have accepted NEMSIS and the standardized dataset (NHTSA 2.2 dataset.). This standard is non-proprietary and no one company owns the data format (unlike how Adobe owns the PDF standard). In addition, the standard uses Extensible Mark-up Language (XML) to transport data. This means that all emergency medical services, state offices and vendors would be using the same data elements and would be capable of communicating with each other.

NEMSIS Components:

<b>Incident Data</b>	<b>Patient Data</b>
Dispatch data	Demographics
Incident data	Medical history
Injury/trauma data	Assessment
Financial data	Treatment
Cardiac arrest data	Medications

Incident Data	Patient Data
EMS system demographic data	Procedures
EMS personnel demographic data	Disposition
Quality management indicators	
Outcome indicators	
Domestic terrorism data	
Linkage data	

The NEMSIS goals are:

- \* identify national trends,
- \* drive education,
- \* prioritize needs and funding,
- \* benchmarking,
- \* solidify EMS in the health care family, improve reliability and efficiency,
- \* reduce errors,
- \* determine effectiveness of systems and patient care; and
- \* promote research.

Currently 27 of the 56 states and territories have an electronic statewide EMS data collection system. Most are in the process of moving to the new NEMSIS standard while a smaller number actually have systems in place which use the new format.

BEMS would purchase a web based state license. This would entitle the local EMS to access a secure website and enter the data elements from each EMS response. This concept is currently being utilized by other states (Minnesota, Delaware, and North Carolina, to name a few). Services could also run both predetermined and ad-hoc reports on their own data.

Local ambulance services could choose to use any NEMSIS compliant software according to their needs. Most of the country's software vendors are currently making, or have already made, such a product. The service would be responsible for exporting the data elements the state requires and coding them appropriately.

The Request for Proposal (RFP) would mandate HIPAA compliance for patient privacy and security, and the local EMS services would have to provide system security protection and safeguards.

Local EMS agencies would collect all of the appropriate data elements. A smaller subset would be uploaded to the BEMS database and part of that would then be uploaded to the national EMS database.

With the national standardization, other public safety software applications can be tied into either the local or BEMS EMS database. For instance, computer aided dispatch (CAD) systems or from medical devices (i.e. EKG monitors) can directly patch into the patient care software. The direct data collection from these sources reduces data entry errors, improves the completeness of the medical record, frees personnel to provide patient care and reduces the time to complete a report. Additionally, the system can be utilized for improving disaster management, bioterrorism surveillance, support and assistance resources and an annual report for policy makers.

BEMS is participating with Kansas Department of Transportation (KDOT) and other agencies with the Traffic Records Coordinating Committee. Relevant data would be shared with the appropriate agencies including the state trauma registry.

As you can determine from the information provided, the essence of Kansas emergency medical services would be improved tremendously by the passage of this legislation. Emergency medical services across the state would benefit by reporting and receiving data, some of which would be national, to further the operation and quality improvement of their individual ambulance services.

The Board would ask that you pass this legislation favorably. I would stand for any questions that you may have.

Sincerely,



Robert Waller, Executive Director  
Kansas Board of Emergency Medical Services

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**EMS  
Data Collection System  
SB 546**

**2006 Supplemental Note for  
SB 546**

**KANSAS**

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**\* Section 1**

- Data collection information submitted "TO" the Board

**\* Section 1(b)**

- Rules and Regulation adoption to collect EMS information
  - A Committee process including (the Board, Regions (2) each, KDHE, KDOT, American Heart Association, Kansas Hospital Association, others
    - Run report information
    - Data Collected
    - Review of computer access per ambulance service (similar to Educational Incentive Grants)

**2006 Supplemental Note for** **KANSAS**  
**SB 546**

**E**  
**M**  
**S**

**\*Section 2**

(a) Information provided to Board would be confidential and would not be disclosed or made public, except:

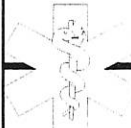
▪(1) No person can be identified and disclosure is for statistical purposes

▪(2) All identifiable persons would be disclosed by written consent

▪(3) Disclosure would be necessary only to protect public health and would not identify specific operators or ambulance services

(b) Reports generated "BY" the Board would be subject to KORA

(c) HIPAA



**2006 Supplemental Note for** **KANSAS**  
**SB 546**

**E**  
**M**  
**S**

**\*Section 3**

Operator reporting information in good faith would be immune from liability



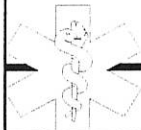


**2006 Supplemental Note for** **KANSAS**  
**SB 546**

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**\*Section 4**

Section 1 through 3 and amendments will be part of KSAs.



**2006 Supplemental Note for** **KANSAS**  
**SB 546**

**E**  
**M**  
**S**

**\*Section 5**

**As Amended by the Senate Committee of the Whole.**

The Senate Committee of the Whole inserted the following language:

"A new statute would be created directing the Department of Revenue and the Emergency Medical Services Board, in consultation with any other interested parties, to develop a recommendation for changes in the law, in rules and regulations, in policy, or any combination thereof in order that data could be routinely provided to first responders through the process of a driver's license check that would indicate whether a person has medical conditions that might adversely affect such person's ability to operate a motor vehicle. Any such information could only be made available at the option of the license holder.

The recommendation that would be required by the new statute is to: include a method to offer each driver's license holder an opportunity to make information available; and be reported in writing to the Speaker of the House and the President of the Senate on or before January 1, 2007."

