Session of 2025

HOUSE BILL No. 2280

By Committee on Federal and State Affairs

Requested by Sean Gatewood on behalf of Sunflower Consulting

2-5

AN ACT concerning health and healthcare; relating to emergency medical services; establishing that the authorized activities of paramedics, advanced emergency medical technicians, emergency medical technicians and emergency medical responders may be authorized upon the order of a healthcare professional; permitting nonemergency ambulance services to offer service for less than 24 hours per day, every day of the year; *permitting ambulance services in rural counties to operate with one emergency medical services provider;* requiring entities placing automated external defibrillators for use within the state to register with the emergency medical services board; amending K.S.A. 65-6121 and 65-6149a and K.S.A. 2024 Supp. 65-6112, 65-6119, 65-6120, 65-6129a, 65-6135 and 65-6144 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2024 Supp. 65-6112 is hereby amended to read as follows: 65-6112. As used in article 61 of chapter 65 of the Kansas Statutes Annotated, and amendments thereto:

- (a) "Administrator" means the executive director of the emergency medical services board.
- (b) "Advanced emergency medical technician" means a person who holds an advanced emergency medical technician certificate issued pursuant to this act.
- (c) "Advanced practice registered nurse" means an advanced practice registered nurse as defined in K.S.A. 65-1113 issued a license pursuant to K.S.A. 65-1130, and amendments thereto, who has authority to prescribe drugs as provided by K.S.A. 65-1130, and amendments thereto.
- (d) "Ambulance" means any privately or publicly owned motor vehicle, airplane or helicopter designed, constructed, prepared, staffed and equipped for use in transporting and providing emergency care for individuals who are ill or injured.
- (e) "Ambulance service" means any organization operated for the purpose of transporting sick or injured persons to or from a place where medical care is furnished, whether or not such persons may be in need of emergency or medical care in transit.

- (f) "Board" means the emergency medical services board established pursuant to K.S.A. 65-6102, and amendments thereto.
- (g) "Emergency medical service" means the effective and coordinated delivery of such care as may be required by an emergency that includes the care and transportation of individuals by ambulance services and the performance of authorized emergency care by a physician, advanced practice registered nurse, professional nurse, a licensed-physician assistant or emergency medical service provider.
- (h) "Emergency medical service provider" means an emergency medical responder, advanced emergency medical technician, emergency medical technician or paramedic certified by the emergency medical services board.
- (i) "Emergency medical responder" means a person who holds an emergency medical responder certificate issued pursuant to this act.
- *(j)* "Emergency medical technician" means a person who holds an emergency medical technician certificate issued pursuant to this act.
- (j) "Emergency medical responder" means a person who holds an emergency medical responder certificate issued pursuant to this act.
- (k) "Hospital" means a hospital as defined by K.S.A. 65-425, and amendments thereto.
 - (l) "Medical director" means a physician.
- (m) "Medical oversight" means to review, approve and implement medical protocols and to approve and monitor the activities, competency and education of emergency medical service providers.
- (n) "Medical protocols" means written guidelines that authorize emergency medical service providers to perform certain medical procedures prior to contacting a physician, physician assistant authorized by a physician, advanced practice registered nurse—authorized by a physician or professional nurse authorized by a physician.
- (o) "Municipality" means any city, county, township, fire district or ambulance service district.
- (p) "Nonemergency transportation" means the care and transport of a sick or injured person under a foreseen combination of circumstances calling for continuing care of such person. As used in this subsection, "transportation" includes performance of the authorized level of services of the emergency medical service provider whether within or outside the vehicle as part of such transportation services.
- (q) "Operator" means a person or municipality—who that has a permit to operate an ambulance service in the state of Kansas.
- (r) "Paramedic" means a person who holds a paramedic certificate issued pursuant to this act.
- (s) "Person" means an individual, a partnership, an association, a joint-stock company or a corporation.

- (t) "Physician" means a person licensed by the state board of healing arts to practice medicine and surgery.
- (u) "Physician assistant" means a physician assistant as defined in K.S.A. 65-28a02, and amendments thereto.
- (v) "Professional nurse" means a—lieensed professional nurse as defined by K.S.A. 65-1113, and amendments thereto.
- (w) "Public place" means the same as defined in K.S.A. 21-6109, and amendments thereto.
- (x) "Qualified healthcare provider" means a physician, a physician assistant when authorized by a physician, an advanced practice registered nurse or a professional nurse when authorized by a physician.
- (x) (y) "Sponsoring organization" means any professional association, accredited postsecondary educational institution, ambulance service that holds a permit to operate in this state, fire department, other officially organized public safety agency, hospital, corporation, governmental entity or emergency medical services regional council, as approved by the executive director, to offer initial courses of instruction or continuing education programs.
- Sec. 2. K.S.A. 2024 Supp. 65-6119 is hereby amended to read as follows: 65-6119. Notwithstanding any other provision of law to the contrary, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols or upon the order of a qualified healthcare provider, a paramedic may:
- (a) Perform all the authorized activities identified in K.S.A. 65-6120, 65-6121, 65-6144, and amendments thereto; *and*
- (b) when voice contact or a telemetered electrocardiogram is monitored by a physician, physician assistant where authorized by a physician or an advanced practice registered nurse where authorized by a physician or licensed professional nurse where authorized by a physician and direct communication is maintained, and upon order of such person, may administer such medications or procedures as may be deemed necessary by a person identified in this subsection;
- (c) perform, during an emergency, those activities specified in subsection (b) before contacting a person identified in subsection (b) when specifically authorized to perform such activities by medical protocols; and
- (d) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols qualified healthcare provider.
- Sec. 3. K.S.A. 2024 Supp. 65-6120 is hereby amended to read as follows: 65-6120. Notwithstanding any other provision of law to the contrary, after successfully completing an approved course of instruction,

local specialized device training and competency validation and when authorized by medical protocols or upon the order of a qualified healthcare provider, an advanced emergency medical technician may:

- (a) Perform any of the activities identified by K.S.A. 65-6121 *and* 65-6144, and amendments thereto; and
- (b) perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, as specifically identified in rules and regulations, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference with a physician, physician assistant where authorized by a physician, an advanced practice registered nurse where authorized by a physician, or professional nurse where authorized by a physician upon order of such a person:
 - (1) Advanced airway management;
- (2) referral of patient of alternate medical care site based on assessment; (3) transportation of a patient with a capped arterial line; (4) veni-puncture for obtaining blood sample;
- (5)(3) initiation and maintenance of intravenous infusion or saline lock;
- $\frac{(6)}{(4)}$ initiation and maintenance of intraosseous infusion;
- (7) nebulized therapy;
- (8)(5) manual defibrillation;
 - (9)(6) cardiac monitoring:
- 26 (10)(7) electrocardiogram interpretation;
 - (11) monitoring of a nasogastric tube; and
 - (12)(8) administration of medications by methods as specified by rules and regulations of , as approved by the board by appropriate routes.
 - Sec. 4. K.S.A. 65-6121 is hereby amended to read as follows: 65-6121. (a) Notwithstanding any other provision of law to the contrary, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols or upon the order of a qualified healthcare provider, an emergency medical technician may:
 - (a) Perform any of the activities identified in K.S.A. 65-6144, and amendments thereto; and
 - (b) perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference is monitored by a physician,

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physician assistant when authorized by a physician, an advanced practice registered nurse when authorized by a physician or a professional nurse when authorized by a physician, upon order of such person:

- (1) Airway maintenance, including use of:
- (A) Single lumen airways as approved by the board;
- (B) multilumen airways;
 - (C) ventilator devices;
- 8 (D) non-invasive positive pressure ventilation;
 - (E) forceps removal of airway obstruction;
- 10 (F) CO2 monitoring; and
 - (G) airway suctioning;
 - (2) monitoring a urinary catheter;
 - (3) capillary blood sampling for purposes other than blood glucose monitoring;
 - (4) administration of patient assisted medications as approved by the board;
 - (5) administration of medications, as approved by the board by appropriate routes;
 - (6) monitoring a saline lock;
 - (7) monitor, maintain or discontinue flow of IV line—if a physician approves transfer by an emergency medical technician;
 - (8) monitoring of a nasogastric tube; and
 - (7)(9) application of a traction splint.
 - Sec. 5. K.S.A. 2024 Supp. 65-6129a is hereby amended to read as follows: 65-6129a. (a) While engaged in a course of training or continuing education approved by the board-within a medical care facility, a student or emergency medical service provider engaged in such training or continuing education shall be under the supervision of a physician, a physician assistant, an advanced practice registered nurse, a respiratory therapist, or—a professional nurse or an emergency medical services provider who is, at a minimum, certified to provide the level of care for which the student is seeking certification. While engaged in training or continuing education in emergency or nonemergency transportationoutside a medical care facility, a student or emergency medical serviceprovider shall be under the direct supervision of an emergency medicalservice provider who is at the minimum certified to provide the level of eare for which the student is seeking certification or the emergencymedical service provider receiving the training is certified or shall beunder the direct supervision of a physician or a professional nurse.
 - (b) Nothing in the provisions of article 61 of chapter 65 of the Kansas Statutes Annotated, and amendments thereto, shall be construed to preclude the provision of authorized activities by students enrolled in a training program while engaged in such program.

- Sec. 6. K.S.A. 2024 Supp. 65-6135 is hereby amended to read as follows: 65-6135. (a) *Except as provided in subsection (b)*, all ambulance services providing emergency care as defined by the rules and regulations adopted by the board shall offer service *for* 24 hours per day, every day of the year.
- (b) Ambulance services providing only nonemergency transportation may offer service for less than 24 hours per day, every day of the year.
- (c) Whenever an operator is required to have a permit, at least one person on each vehicle providing emergency medical service shall be an emergency medical service provider certified or authorized pursuant to K.S.A. 65-6119, 65-6120—or, 65-6121, or 65-6158, and amendments thereto, a physician, an individual licensed by the state board of healing arts to practice medicine and surgery pursuant to K.S.A. 65-28,133, and amendments thereto, a physician assistant, an advanced practice registered nurse—or, a professional nurse or a registered nurse—holding a multistate license pursuant to K.S.A. 65-1166, and amendments thereto.
- (e)(d) The board shall not require any ground vehicle providing interfacility transfers from ambulance services in any county with a population of 30,000 or less to operate with more than one person who satisfies the requirements of subsection (b)(c) if the driver of such vehicle is certified in cardiopulmonary resuscitation.
- Sec. 7. K.S.A. 2024 Supp. 65-6144 is hereby amended to read as follows: 65-6144. (a) Notwithstanding any other provision of law to the contraryan emergency medical responder may perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon the order when direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse when authorized by a physician or a professional nurse when authorized by a physician, upon order of such person of a qualified healthcare provider, an emergency medical responder may perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof:
 - (1)(a) Emergency vehicle operations;
 - (2)(b) initial scene management;
 - $\frac{(3)}{(c)}$ patient assessment and stabilization;
- $\frac{(4)}{(d)}$ cardiac arrest management through the use of cardiopulmonary resuscitation and the use of an automated external defibrillator;
- (5)(e) airway management and oxygen therapy;
 - (6)(f) utilization of equipment for the purposes of acquiring-an and

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     transmitting EKG rhythm-strip strips;
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         (7)(g) control of bleeding;
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         \frac{(8)}{(h)}
                 extremity splinting;
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         (9)(i) spinal immobilization;
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         (10) nebulizer therapy;
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         (11) intramuscular injections with auto-injector;
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                  administration of medications, as approved by the board by
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     appropriate routes;
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         \frac{(13)}{(k)}
                  recognize and comply with advanced directives;
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         (14)(l)
                  use of blood glucose monitoring;
                   assistance with childbirth:
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         (15)(m)
                  non-invasive monitoring of hemoglobin derivatives;
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         (16)(n)
                  distribution of non prescription, over-the-counter medications
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- as approved by the service medical director, except *that* an emergency medical responder shall not distribute *any compound, mixture or preparation that contains any detectable quantity of*:

 (A)(1) Any compound, mixture, or preparation that contains any detectable quantity of Ephedrine, its calts or optical isomers, or salts of
- detectable quantity of Ephedrine, its salts or optical isomers, or salts of optical isomers and is exempt from being reported to the statewide electronic logging system for the sale of methamphetamine precursors; or (B)(2) any compound, mixture, or preparation that contains any
- detectable quantity of pseudoephedrine, its salts or optical isomers, or salts of optical isomers and is exempt from being reported to the statewide electronic logging system for the sale of methamphetamine precursors; and (18)(p) other techniques and devices of preliminary care an emergency medical responder is trained to provide as approved by the
- Sec. 8. K.S.A. 65-6149a is hereby amended to read as follows: 65-6149a. (a) (1) Any person who in good faith renders emergency care or treatment by the use of or provision of an automated external defibrillator shall not be held liable for any civil damages as a result of such care or treatment or as a result of any act or failure to act in providing or arranging further medical treatment where the person acts as an ordinary reasonably prudent person would have acted under the same or similar circumstances.
- (2) No person or entity—which that owns, leases, possesses or otherwise controls—an <u>a registered</u> an automated external defibrillator and provides such automated external defibrillator to others for use shall be held liable for any civil damages as a result of such use where the person or entity—which that owns, leases, possesses or otherwise controls the <u>registered</u> automated external defibrillator has developed, implemented and follows guidelines to ensure proper maintenance and operation of the device.
 - (3) No-person licensed to practice medicine and surgery physician

who, pursuant to a prescription order, authorizes the acquisition of an automated external defibrillator or participates in the development of usual and customary protocols for an automated external defibrillator by a person or entity—which that owns, leases, possesses or otherwise controls such automated external defibrillator and provides such automated external defibrillator for use by others shall be held liable for any civil damages as a result of such use.

- (4) No person or entity—which that teaches or provides a training program for cardiopulmonary resuscitation that includes training in the use of automated external defibrillators shall be held liable for any civil damages as a result of such training or use if such person or entity has provided such training in a manner consistent with the usual and customary standards for the providing of such training.
- (b) Pursuant to the provisions of this subsection, persons or entities which that purchase, lease, possess or otherwise control or acquire an automated external defibrillator to be placed in a public place within the state shall notify the emergency medical service which operates in the geographic area of the location of register the automated external defibrillator with the emergency medical services board. Persons or entities acquiring an automatic electronic defibrillator shall notify the emergency medical service providing local service on forms developed and provided by the emergency medical services board.
- (c) The secretary of administration, in conjunction with the Kansas highway patrol, shall develop guidelines for the placement of automated external defibrillators in state owned or occupied facilities. The guidelines shall include, but not be limited to:
- (1) Which state owned or occupied facilities should have automated external defibrillators readily available for use;
- (2) recommendations for appropriate training courses in cardiopulmonary resuscitation and automated external defibrillators use;
 - (3) integration with existing emergency response plans;
 - (4) proper maintenance and testing of the devices;
- (5) coordination with appropriate professionals in the oversight of training; and
- (6) coordination with local emergency medical services regarding placement and conditions of use.
- (d) Nothing in this subsection section shall be construed to require the state to purchase automated external defibrillators.
- 39 Sec. 9. K.S.A. 65-6121 and 65-6149a and K.S.A. 2024 Supp. 65-40 6112, 65-6119, 65-6120, 65-6129a, 65-6135 and 65-6144 are hereby repealed.
- Sec. 10. This act shall take effect and be in force from and after its publication in the statute book.