BY GOVERNOR

PUBLIC LAW

CHAPTER

STATE OF MAINE

IN THE YEAR OF OUR LORD TWO THOUSAND NINETEEN

S.P. 573 - L.D. 1724

An Act To Amend the Maine Emergency Medical Services Act of 1982 and **Related Provisions**

Be it enacted by the People of the State of Maine as follows:

- Sec. 1. 5 MRSA §18312, sub-§1, as enacted by PL 2013, c. 602, Pt. B, §1, is amended to read:
- 1. Contribution rate. Except as provided in subsections 2 and 3, an emergency medical services person as defined in Title 32, section 83, subsection 12, including but not limited to a first responder, basic emergency medical technician, services person or an advanced emergency medical technician and paramedic, person, employed by a participating local district that provides a special retirement benefit under section 18453, subsection 4 or 5 shall contribute to the Participating Local District Retirement Program or must have pick-up contributions made by the employer at a rate of 8% of earnable compensation as long as the person is employed as an emergency medical services person.
- Sec. 2. 5 MRSA §18453, sub-§2, as amended by PL 2013, c. 602, Pt. B, §2, is further amended to read:
- 2. Employee Special Plan #2. A retirement benefit to police officers, firefighters, sheriffs, full-time deputy sheriffs, county corrections employees, emergency medical services persons as defined in Title 32, section 83, subsection 12, including but not limited to first responders, basic emergency medical technicians, services persons and advanced emergency medical technicians and paramedics, persons, or any other participating local district employees who have completed 20 to 25 years of creditable service, the number of years to be selected by the participating local district. For the purposes of this subsection, "county corrections employees" means employees of the county who are employed at a county jail and whose duties include contact with prisoners or juvenile detainees. The benefits must be computed as follows:
 - A. Except as provided in paragraph B, 1/2 of the member's average final compensation; or

- B. If the member's benefit would be greater, the part of the service retirement benefit based upon membership service before July 1, 1977, is determined, on a pro rata basis, on the member's current annual salary on the date of retirement or current final compensation, whichever is greater, and the part of the service retirement benefit based upon membership service after June 30, 1977, is determined in accordance with paragraph A.
- **Sec. 3. 5 MRSA §18453, sub-§3,** as amended by PL 2013, c. 602, Pt. B, §3, is further amended to read:
- **3.** Firefighter and Emergency Medical Services Person Special Plan #1. A retirement benefit equal to 1/2 of the member's average final compensation to a firefighter, including the chief of a fire department, and an emergency medical services person as defined in Title 32, section 83, subsection 12, including but not limited to a first responder, basic emergency medical technician, services person or an advanced emergency medical technician and paramedic person, who has completed at least 25 years of creditable service in that capacity and who retires upon or after reaching age 55 years of age.
- **Sec. 4. 5 MRSA §18453, sub-§4,** as amended by PL 2013, c. 602, Pt. B, §4, is further amended to read:
- **4. Firefighter and Emergency Medical Services Person Special Plan #2.** A retirement benefit to a firefighter, including the chief of a fire department, and an emergency medical services person as defined in Title 32, section 83, subsection 12, including but not limited to a first responder, basic emergency medical technician, services person or an advanced emergency medical technician and paramedic, person, who has completed at least 25 years of creditable service in that capacity and who retires upon or after reaching age 55 years of age. The benefits shall must be computed as follows:
 - A. Except as provided in paragraph B, 2/3 of the member's average final compensation; or
 - B. If the member's benefit would be greater, the part of the service retirement benefit based upon membership service before July 1, 1977, is determined, on a pro rata basis, on the member's current final compensation and the part of the service retirement benefit based upon membership service after June 30, 1977, is determined in accordance with paragraph A.
- **Sec. 5. 5 MRSA §18453, sub-§5,** as amended by PL 2013, c. 602, Pt. B, §5, is further amended to read:
- 5. Firefighter and Emergency Medical Services Person Special Plan #3. A retirement benefit to a firefighter, including the chief of a fire department, and an emergency medical services person as defined in Title 32, section 83, subsection 12, including but not limited to a first responder, basic emergency medical technician, services person or an advanced emergency medical technician and paramedic person, who has completed 20 to 25 years of creditable service in that capacity, the number of

years to be selected by the participating local district and who retires at any age. The benefits shall must be computed as follows:

- A. Except as provided under paragraph B, 2/3 of the member's average final compensation; or
- B. If the member's benefit would be greater, the part of the service retirement benefit based upon membership service before July 1, 1977, is determined, on a pro rata basis, on the member's current final compensation and the part of the service retirement benefit based upon membership service after June 30, 1977, is determined in accordance with paragraph A.
- **Sec. 6. 7 MRSA §4019, sub-§1,** as amended by PL 2011, c. 288, §1, is further amended to read:
- 1. Removal authorized. A law enforcement officer, humane agent, animal control officer, firefighter as defined in Title 26, section 2101, first responder as defined in Title 32, section 83, subsection 13-A or security guard licensed under Title 32, chapter 93, referred to in this section as "authorized persons," may take all steps that are reasonably necessary to remove an animal from a motor vehicle if the animal's safety, health or well-being appears to be in immediate danger from heat, cold or lack of adequate ventilation and the conditions could reasonably be expected to cause extreme suffering or death.
- **Sec. 7. 24 MRSA §2904, sub-§3, ¶E,** as corrected by RR 2005, c. 2, §20, is amended to read:
 - E. "Emergency medical services person" includes a first responder, as defined in Title 32, section 83, subsection 13-A; means a basic emergency medical technician services person, as defined in Title 32, section 83, subsection 7; 6, and an advanced emergency medical technician person, as defined in Title 32, section 83, subsection 1.
- **Sec. 8. 32 MRSA §83, sub-§1,** as enacted by PL 1981, c. 661, §2, is amended to read:
- **1.** Advanced emergency medical person. "Advanced emergency medical technician person" means an emergency medical services' services person licensed to perform advanced emergency medical treatment.
- Sec. 9. 32 MRSA §83, sub-§6, as amended by PL 2015, c. 82, §1, is further amended to read:
- **6. Basic emergency medical services person.** "Basic emergency medical services person" means a person licensed to perform basic emergency medical treatment. Licensed emergency medical responders and basic emergency medical technicians are basic emergency medical services persons.
 - **Sec. 10. 32 MRSA §83, sub-§7,** as amended by PL 1999, c. 182, §5, is repealed.

- **Sec. 11. 32 MRSA §83, sub-§13-A,** as amended by PL 2015, c. 82, §2, is repealed.
- **Sec. 12. 32 MRSA §83, sub-§16-B,** as amended by PL 2015, c. 82, §3, is further amended to read:
- **16-B. Medical Direction and Practices Board.** "Medical Direction and Practices Board" means the board consisting of each regional medical director, an emergency physician representing the Maine Chapter of the American College of Emergency Medicine Physicians, an at-large member, a toxicologist or licensed pharmacist, a person licensed under section 85 to provide basic emergency medical treatment, a person licensed under section 85 to provide advanced emergency medical treatment, a pediatric physician, the statewide assistant associate emergency medical services medical director and the statewide emergency medical services medical director. The Medical Direction and Practices Board is responsible for creation, adoption and maintenance of Maine Emergency Medical Services protocols.

Sec. 13. 32 MRSA §83, sub-§21-B is enacted to read:

- 21-B. Statewide associate emergency medical services medical director. "Statewide associate emergency medical services medical director" means a licensed physician appointed by the board pursuant to section 84, subsection 1, paragraph C.
- **Sec. 14. 32 MRSA §84, sub-§1, ¶C,** as amended by PL 2011, c. 271, §6, is further amended to read:
 - C. The board shall appoint a licensed physician as statewide emergency medical services medical director and may appoint a licensed physician as statewide assistant associate emergency medical services medical director. These physicians shall advise Maine Emergency Medical Services and shall carry out the duties assigned to the medical director pursuant to this chapter, or as specified by contract. A person appointed and serving as the statewide emergency medical services medical director or statewide assistant associate emergency medical services medical director is immune from any civil liability, as are employees of governmental entities under the Maine Tort Claims Act, for acts performed within the scope of the medical director's duties.
- **Sec. 15. 32 MRSA §85, sub-§2,** as amended by PL 2001, c. 229, §3, is further amended to read:
- 2. Advanced emergency medical treatment. With the advice and consultation noted in subsection 1, the board may provide, by rule, which advanced skills, techniques and judgments may be supervised by a physician by means of standing orders, by voice radio and by other means. In every case, advanced emergency medical treatment must be given in accordance with protocols adopted by the Medical Direction and Practices Board.

The board may establish by rule appropriate licensure levels for advanced emergency medical technicians persons and fix the qualifications for persons to hold those licenses.

- **Sec. 16. 32 MRSA §88, sub-§1, ¶A,** as amended by PL 2013, c. 62, §1, is further amended to read:
 - The board has one member representing each region and 44 12 persons in Of the additional persons, one is an emergency physician, one a representative of emergency medical dispatch providers, one a representative of the public, one a representative of for-profit ambulance services, one an emergency professional nurse, one a representative of nontransporting emergency medical services, one a representative of hospitals, one a fire chief, one a representative of a statewide association of fire chiefs, one a municipal emergency medical services provider and, one a representative of not-for-profit ambulance services and one a representative in the field of pediatrics. The members that represent for-profit ambulance services, nontransporting emergency medical services and not-for-profit ambulance services must be licensed emergency medical services persons. One of the nonpublic members must be a volunteer emergency medical services provider. Appointments are for 3-year terms. Members are appointed by the Governor. The state statewide emergency medical services medical director is an and statewide associate emergency medical services medical director are ex officio nonvoting member members of the board.
- **Sec. 17. 32 MRSA §88, sub-§3, ¶A,** as enacted by PL 2001, c. 229, §4, is amended to read:
 - A. Issue warnings, censures or reprimands to a licensee, deny or refuse to renew a license and suspend or revoke a license. Each warning, censure of reprimand and revocation issued must be based upon violations of different applicable laws, rules or conditions of licensure or must be based upon separate instances of actionable conduct or activity;
- **Sec. 18. 32 MRSA §93-A, sub-§1,** as amended by PL 1991, c. 588, §25, is further amended to read:
- 1. Emergency medical treatment supervision. No A physician functioning within the medical control system established by the regional medical director and practicing in a hospital to or from which patients are transported under section 86 or health care practitioner under such a physician's supervision who gives oral or written instructions to a basic emergency medical services person or an advanced emergency medical technician person for the provision of emergency medical treatment outside the hospital may be is not civilly liable for negligence as a result of issuing the instructions, if the instructions were in accordance with the protocol for the patient's reported condition. For the purpose of aiding in establishing the use of a protocol that permits the immunity provided in this subsection, the following provisions apply:
 - A. The basic emergency medical services person or advanced emergency medical technician person to whom the instructions are given shall document those instructions on the state ambulance run record; and
 - B. The physician or health care practitioner giving the instructions shall maintain a medical control log documenting those instructions at the time they were given and shall sign the log.

The immunity provided in this subsection extends to the hospital in which the physician described in this subsection is practicing or the health care practitioner described in this subsection is being supervised.