

LEGISLATURE OF NEBRASKA
ONE HUNDRED FIFTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 894

Introduced by Crawford, 45.

Read first time January 08, 2018

Committee:

1 A BILL FOR AN ACT relating to emergency medical services personnel; to
2 amend sections 38-131, 38-1201, 38-1221, 38-1224, 38-1232, 38-1237,
3 69-2429, and 71-507, Reissue Revised Statutes of Nebraska, and
4 sections 28-470 and 38-1217, Revised Statutes Supplement, 2017; to
5 adopt the EMS Personnel Licensure Interstate Compact; to redefine
6 terms; to require criminal background checks; to authorize practice
7 pursuant to the compact; to provide for temporary licensure; to
8 harmonize provisions; and to repeal the original sections.
9 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 28-470, Revised Statutes Supplement, 2017, is
2 amended to read:

3 28-470 (1) A health professional who is authorized to prescribe or
4 dispense naloxone, if acting with reasonable care, may prescribe,
5 administer, or dispense naloxone to any of the following persons without
6 being subject to administrative action or criminal prosecution:

7 (a) A person who is apparently experiencing or who is likely to
8 experience an opioid-related overdose; or

9 (b) A family member, friend, or other person in a position to assist
10 a person who is apparently experiencing or who is likely to experience an
11 opioid-related overdose.

12 (2) A family member, friend, or other person who is in a position to
13 assist a person who is apparently experiencing or who is likely to
14 experience an opioid-related overdose, other than an emergency responder
15 or peace officer, is not subject to actions under the Uniform
16 Credentialing Act, administrative action, or criminal prosecution if the
17 person, acting in good faith, obtains naloxone from a health professional
18 or a prescription for naloxone from a health professional and administers
19 the naloxone obtained from the health professional or acquired pursuant
20 to the prescription to a person who is apparently experiencing an opioid-
21 related overdose.

22 (3) An emergency responder who, acting in good faith, obtains
23 naloxone from the emergency responder's emergency medical service
24 organization and administers the naloxone to a person who is apparently
25 experiencing an opioid-related overdose shall not be:

26 (a) Subject to administrative action or criminal prosecution; or

27 (b) Personally liable in any civil action to respond in damages as a
28 result of his or her acts of commission or omission arising out of and in
29 the course of his or her rendering such care or services or arising out
30 of his or her failure to act to provide or arrange for further medical
31 treatment or care for the person who is apparently experiencing an

1 opioid-related overdose, unless the emergency responder caused damage or
2 injury by his or her willful, wanton, or grossly negligent act of
3 commission or omission. This subdivision shall not affect the liability
4 of such emergency medical service organization for the emergency
5 responder's acts of commission or omission.

6 (4) A peace officer who, acting in good faith, obtains naloxone from
7 the peace officer's law enforcement agency and administers the naloxone
8 to a person who is apparently experiencing an opioid-related overdose
9 shall not be:

10 (a) Subject to administrative action or criminal prosecution; or

11 (b) Personally liable in any civil action to respond in damages as a
12 result of his or her acts of commission or omission arising out of and in
13 the course of his or her rendering such care or services or arising out
14 of his or her failure to act to provide or arrange for further medical
15 treatment or care for the person who is apparently experiencing an
16 opioid-related overdose, unless the peace officer caused damage or injury
17 by his or her willful, wanton, or grossly negligent act of commission or
18 omission. This subdivision shall not affect the liability of such law
19 enforcement agency for the peace officer's acts of commission or
20 omission.

21 (5) For purposes of this section:

22 (a) Administer has the same meaning as in section 38-2806;

23 (b) Dispense has the same meaning as in section 38-2817;

24 (c) Emergency responder means an emergency medical responder, an
25 emergency medical technician, an advanced emergency medical technician,
26 or a paramedic licensed under the Emergency Medical Services Practice Act
27 or practicing pursuant to the EMS Personnel Licensure Interstate Compact;

28 (d) Health professional means a physician, physician assistant,
29 nurse practitioner, or pharmacist licensed under the Uniform
30 Credentialing Act;

31 (e) Law enforcement agency means a police department, a town

1 marshal, the office of sheriff, or the Nebraska State Patrol;

2 (f) Naloxone means naloxone hydrochloride; and

3 (g) Peace officer has the same meaning as in section 49-801.

4 Sec. 2. Section 38-131, Reissue Revised Statutes of Nebraska, is
5 amended to read:

6 38-131 (1) An applicant for an initial license to practice as a
7 registered nurse, ~~or a licensed practical nurse, an advanced emergency~~
8 medical technician, an emergency medical technician, or a paramedic or to
9 practice a profession which is authorized to prescribe controlled
10 substances shall be subject to a criminal background check. Except as
11 provided in subsection (3) of this section, the applicant shall submit
12 with the application a full set of fingerprints which shall be forwarded
13 to the Nebraska State Patrol to be submitted to the Federal Bureau of
14 Investigation for a national criminal history record information check.
15 The applicant shall authorize release of the results of the national
16 criminal history record information check to the department. The
17 applicant shall pay the actual cost of the fingerprinting and criminal
18 background check.

19 (2) This section shall not apply to a dentist who is an applicant
20 for a dental locum tenens under section 38-1122, to a physician or
21 osteopathic physician who is an applicant for a physician locum tenens
22 under section 38-2036, or to a veterinarian who is an applicant for a
23 veterinarian locum tenens under section 38-3335.

24 (3) An applicant for a temporary educational permit as defined in
25 section 38-2019 shall have ninety days from the issuance of the permit to
26 comply with subsection (1) of this section and shall have his or her
27 permit suspended after such ninety-day period if the criminal background
28 check is not complete or revoked if the criminal background check reveals
29 that the applicant was not qualified for the permit.

30 Sec. 3. Section 38-1201, Reissue Revised Statutes of Nebraska, is
31 amended to read:

1 38-1201 Sections 38-1201 to 38-1237 and section 5 of this act shall
2 be known and may be cited as the Emergency Medical Services Practice Act.

3 Sec. 4. Section 38-1217, Revised Statutes Supplement, 2017, is
4 amended to read:

5 38-1217 The board shall adopt rules and regulations necessary to:

6 (1)(a) For licenses issued prior to September 1, 2010, create the
7 following licensure classifications of out-of-hospital emergency care
8 providers: (i) First responder; (ii) emergency medical technician; (iii)
9 emergency medical technician-intermediate; and (iv) emergency medical
10 technician-paramedic; and (b) for licenses issued on or after September
11 1, 2010, create the following licensure classifications of out-of-
12 hospital emergency care providers: (i) Emergency medical responder; (ii)
13 emergency medical technician; (iii) advanced emergency medical
14 technician; and (iv) paramedic. The rules and regulations creating the
15 classifications shall include the practices and procedures authorized for
16 each classification, training and testing requirements, renewal and
17 reinstatement requirements, and other criteria and qualifications for
18 each classification determined to be necessary for protection of public
19 health and safety. A person holding a license issued prior to September
20 1, 2010, shall be authorized to practice in accordance with the laws,
21 rules, and regulations governing the license for the term of the license;

22 (2) Provide for temporary licensure of an out-of-hospital emergency
23 care provider who has completed the educational requirements for a
24 licensure classification enumerated in subdivision (1)(b) of this section
25 but has not completed the testing requirements for licensure under such
26 subdivision. Such temporary licensure shall be valid for one year or
27 until a license is issued under such subdivision and shall not be subject
28 to renewal. The rules and regulations shall include qualifications and
29 training necessary for issuance of such temporary license, the practices
30 and procedures authorized for a temporary licensee under this
31 subdivision, and supervision required for a temporary licensee under this

1 subdivision. The requirements of this subdivision and the rules and
2 regulations adopted and promulgated pursuant to this subdivision do not
3 apply to a temporary license issued as provided in section 38-129.01;

4 (3) Provide for temporary licensure of an out-of-hospital emergency
5 care provider relocating to Nebraska, if such out-of-hospital emergency
6 care provider is lawfully authorized to practice in another state that
7 has adopted the licensing standards of the EMS Personnel Licensure
8 Interstate Compact. Such temporary licensure shall be valid for one year
9 or until a license is issued and shall not be subject to renewal. The
10 requirements of this subdivision do not apply to a temporary license
11 issued as provided in section 38-129.01;

12 (4) (3) Set standards for the licensure of basic life support
13 services and advanced life support services. The rules and regulations
14 providing for licensure shall include standards and requirements for:
15 Vehicles, equipment, maintenance, sanitation, inspections, personnel,
16 training, medical direction, records maintenance, practices and
17 procedures to be provided by employees or members of each classification
18 of service, and other criteria for licensure established by the board;

19 (5) (4) Authorize emergency medical services to provide differing
20 practices and procedures depending upon the qualifications of out-of-
21 hospital emergency care providers available at the time of service
22 delivery. No emergency medical service shall be licensed to provide
23 practices or procedures without the use of personnel licensed to provide
24 the practices or procedures;

25 (6) (5) Authorize out-of-hospital emergency care providers to
26 perform any practice or procedure which they are authorized to perform
27 with an emergency medical service other than the service with which they
28 are affiliated when requested by the other service and when the patient
29 for whom they are to render services is in danger of loss of life;

30 (7) (6) Provide for the approval of training agencies and establish
31 minimum standards for services provided by training agencies;

1 (8) ~~(7)~~ Provide for the minimum qualifications of a physician
2 medical director in addition to the licensure required by section
3 38-1212;

4 (9) ~~(8)~~ Provide for the use of physician medical directors,
5 qualified physician surrogates, model protocols, standing orders,
6 operating procedures, and guidelines which may be necessary or
7 appropriate to carry out the purposes of the Emergency Medical Services
8 Practice Act. The model protocols, standing orders, operating procedures,
9 and guidelines may be modified by the physician medical director for use
10 by any out-of-hospital emergency care provider or emergency medical
11 service before or after adoption;

12 (10) ~~(9)~~ Establish criteria for approval of organizations issuing
13 cardiopulmonary resuscitation certification which shall include criteria
14 for instructors, establishment of certification periods and minimum
15 curricula, and other aspects of training and certification;

16 (11) ~~(10)~~ Establish renewal and reinstatement requirements for out-
17 of-hospital emergency care providers and emergency medical services and
18 establish continuing competency requirements. Continuing education is
19 sufficient to meet continuing competency requirements. The requirements
20 may also include, but not be limited to, one or more of the continuing
21 competency activities listed in section 38-145 which a licensed person
22 may select as an alternative to continuing education. The reinstatement
23 requirements for out-of-hospital emergency care providers shall allow
24 reinstatement at the same or any lower level of licensure for which the
25 out-of-hospital emergency care provider is determined to be qualified;

26 (12) ~~(11)~~ Establish criteria for deployment and use of automated
27 external defibrillators as necessary for the protection of the public
28 health and safety;

29 (13) ~~(12)~~ Create licensure, renewal, and reinstatement requirements
30 for emergency medical service instructors. The rules and regulations
31 shall include the practices and procedures for licensure, renewal, and

1 reinstatement;

2 (14) ~~(13)~~ Establish criteria for emergency medical technicians-
3 intermediate, advanced emergency medical technicians, emergency medical
4 technicians-paramedic, or paramedics performing activities within their
5 scope of practice at a hospital or health clinic under subsection (3) of
6 section 38-1224. Such criteria shall include, but not be limited to: (a)
7 Requirements for the orientation of registered nurses, physician
8 assistants, and physicians involved in the supervision of such personnel;
9 (b) supervisory and training requirements for the physician medical
10 director or other person in charge of the medical staff at such hospital
11 or health clinic; and (c) a requirement that such activities shall only
12 be performed at the discretion of, and with the approval of, the
13 governing authority of such hospital or health clinic. For purposes of
14 this subdivision, health clinic has the definition found in section
15 71-416 and hospital has the definition found in section 71-419;

16 (15) ~~(14)~~ Establish model protocols for compliance with the Stroke
17 System of Care Act by an emergency medical service and an out-of-hospital
18 emergency care provider; and

19 (16) ~~(15)~~ Establish criteria and requirements for emergency medical
20 technicians-intermediate to renew licenses issued prior to September 1,
21 2010, and continue to practice after such classification has otherwise
22 terminated under subdivision (1) of this section. The rules and
23 regulations shall include the qualifications necessary to renew emergency
24 medical technicians-intermediate licenses after September 1, 2010, the
25 practices and procedures authorized for persons holding and renewing such
26 licenses, and the renewal and reinstatement requirements for holders of
27 such licenses.

28 Sec. 5. The board shall review decisions of the Interstate
29 Commission for Emergency Medical Services Personnel Practice established
30 pursuant to the EMS Personnel Licensure Interstate Compact. Upon approval
31 by the commission of any action that will have the result of increasing

1 the cost to the state for membership in the compact, the board may
2 recommend to the Legislature that Nebraska withdraw from the compact.

3 Sec. 6. Section 38-1221, Reissue Revised Statutes of Nebraska, is
4 amended to read:

5 38-1221 (1) To be eligible for a license under the Emergency Medical
6 Services Practice Act, an individual shall have attained the age of
7 eighteen years and met the requirements established in accordance with
8 subdivision (1), (2), ~~(3), or (16)~~ ~~(15)~~ of section 38-1217.

9 (2) All licenses issued under the act other than temporary licenses
10 shall expire the second year after issuance.

11 (3) An individual holding a certificate under the Emergency Medical
12 Services Act on December 1, 2008, shall be deemed to be holding a license
13 under the Uniform Credentialing Act and the Emergency Medical Services
14 Practice Act on such date. The certificate holder may continue to
15 practice under such certificate as a license in accordance with the
16 Uniform Credentialing Act until the certificate would have expired under
17 its terms.

18 Sec. 7. Section 38-1224, Reissue Revised Statutes of Nebraska, is
19 amended to read:

20 38-1224 (1) An out-of-hospital emergency care provider other than a
21 first responder or an emergency medical responder as classified under
22 section 38-1217 may not assume the duties incident to the title or
23 practice the skills of an out-of-hospital emergency care provider unless
24 he or she is employed by or serving as a volunteer member of an emergency
25 medical service licensed by the department.

26 (2) An out-of-hospital emergency care provider may only practice the
27 skills he or she is authorized to employ and which are covered by the
28 license issued to such provider pursuant to the Emergency Medical
29 Services Practice Act or as authorized pursuant to the EMS Personnel
30 Licensure Interstate Compact.

31 (3) An emergency medical technician-intermediate, an emergency

1 medical technician-paramedic, an advanced emergency medical technician,
2 or a paramedic may volunteer or be employed at a hospital as defined in
3 section 71-419 or a health clinic as defined in section 71-416 to perform
4 activities within his or her scope of practice within such hospital or
5 health clinic under the supervision of a registered nurse, a physician
6 assistant, or a physician. Such activities shall be performed in a manner
7 established in rules and regulations adopted and promulgated by the
8 department, with the recommendation of the board.

9 Sec. 8. Section 38-1232, Reissue Revised Statutes of Nebraska, is
10 amended to read:

11 38-1232 (1) No out-of-hospital emergency care provider, physician
12 assistant, registered nurse, or licensed practical nurse who provides
13 public emergency care shall be liable in any civil action to respond in
14 damages as a result of his or her acts of commission or omission arising
15 out of and in the course of his or her rendering in good faith any such
16 care. Nothing in this subsection shall be deemed to grant any such
17 immunity for liability arising out of the operation of any motor vehicle,
18 aircraft, or boat or while such person was impaired by alcoholic liquor
19 or any controlled substance enumerated in section 28-405 in connection
20 with such care, nor shall immunity apply to any person causing damage or
21 injury by his or her willful, wanton, or grossly negligent act of
22 commission or omission.

23 (2) No qualified physician or qualified physician surrogate who
24 gives orders, either orally or by communication equipment, to any out-of-
25 hospital emergency care provider at the scene of an emergency, no out-of-
26 hospital emergency care provider following such orders within the limits
27 of his or her licensure, and no out-of-hospital emergency care provider
28 trainee in an approved training program following such orders, shall be
29 liable civilly or criminally by reason of having issued or followed such
30 orders but shall be subject to the rules of law applicable to negligence.

31 (3) No physician medical director shall incur any liability by

1 reason of his or her use of any unmodified protocol, standing order,
2 operating procedure, or guideline provided by the board pursuant to
3 subdivision (9) ~~(8)~~ of section 38-1217.

4 Sec. 9. Section 38-1237, Reissue Revised Statutes of Nebraska, is
5 amended to read:

6 38-1237 It shall be unlawful for any person who has not been
7 licensed pursuant to the Emergency Medical Services Practice Act or
8 authorized pursuant to the EMS Personnel Licensure Interstate Compact to
9 hold himself or herself out as an out-of-hospital emergency care
10 provider, to use any other term to indicate or imply that he or she is an
11 out-of-hospital emergency care provider, or to act as such a provider
12 without a license therefor. It shall be unlawful for any person to
13 operate a training agency for the initial training or renewal or
14 reinstatement of licensure of out-of-hospital emergency care providers
15 unless the training agency is approved pursuant to rules and regulations
16 of the board. It shall be unlawful for any person to operate an emergency
17 medical service unless such service is licensed.

18 Sec. 10. Section 69-2429, Reissue Revised Statutes of Nebraska, is
19 amended to read:

20 69-2429 For purposes of the Concealed Handgun Permit Act:

21 (1) Concealed handgun means the handgun is totally hidden from view.
22 If any part of the handgun is capable of being seen, it is not a
23 concealed handgun;

24 (2) Emergency services personnel means a volunteer or paid
25 firefighter or rescue squad member or a person licensed to provide
26 emergency medical services pursuant to the Emergency Medical Services
27 Practice Act or authorized to provide emergency medical services pursuant
28 to the EMS Personnel Licensure Interstate Compact;

29 (3) Handgun means any firearm with a barrel less than sixteen inches
30 in length or any firearm designed to be held and fired by the use of a
31 single hand;

1 (4) Peace officer means any town marshal, chief of police or local
2 police officer, sheriff or deputy sheriff, the Superintendent of Law
3 Enforcement and Public Safety, any officer of the Nebraska State Patrol,
4 any member of the National Guard on active service by direction of the
5 Governor during periods of emergency or civil disorder, any Game and
6 Parks Commission conservation officer, and all other persons with similar
7 authority to make arrests;

8 (5) Permitholder means an individual holding a current and valid
9 permit to carry a concealed handgun issued pursuant to the Concealed
10 Handgun Permit Act; and

11 (6) Proof of training means an original document or certified copy
12 of a document, supplied by an applicant, that certifies that he or she
13 either:

14 (a) Within the previous three years, has successfully completed a
15 handgun training and safety course approved by the Nebraska State Patrol
16 pursuant to section 69-2432; or

17 (b) Is a member of the active or reserve armed forces of the United
18 States or a member of the National Guard and has had handgun training
19 within the previous three years which meets the minimum safety and
20 training requirements of section 69-2432.

21 Sec. 11. Section 71-507, Reissue Revised Statutes of Nebraska, is
22 amended to read:

23 71-507 For purposes of sections 71-507 to 71-513:

24 (1) Alternate facility means a facility other than a health care
25 facility that receives a patient transported to the facility by an
26 emergency services provider;

27 (2) Department means the Department of Health and Human Services;

28 (3) Designated physician means the physician representing the
29 emergency services provider as identified by name, address, and telephone
30 number on the significant exposure report form. The designated physician
31 shall serve as the contact for notification in the event an emergency

1 services provider believes he or she has had significant exposure to an
2 infectious disease or condition. Each emergency services provider shall
3 designate a physician as provided in subsection (2) of section 71-509;

4 (4) Emergency services provider means an out-of-hospital emergency
5 care provider licensed pursuant to the Emergency Medical Services
6 Practice Act or authorized pursuant to the EMS Personnel Licensure
7 Interstate Compact, a sheriff, a deputy sheriff, a police officer, a
8 state highway patrol officer, a funeral director, a paid or volunteer
9 firefighter, a school district employee, and a person rendering emergency
10 care gratuitously as described in section 25-21,186;

11 (5) Funeral director means a person licensed under section 38-1414
12 or an employee of such a person with responsibility for transport or
13 handling of a deceased human;

14 (6) Funeral establishment means a business licensed under section
15 38-1419;

16 (7) Health care facility has the meaning found in sections 71-419,
17 71-420, 71-424, and 71-429 or any facility that receives patients of
18 emergencies who are transported to the facility by emergency services
19 providers;

20 (8) Infectious disease or condition means hepatitis B, hepatitis C,
21 meningococcal meningitis, active pulmonary tuberculosis, human
22 immunodeficiency virus, diphtheria, plague, hemorrhagic fevers, rabies,
23 and such other diseases as the department may by rule and regulation
24 specify;

25 (9) Patient means an individual who is sick, injured, wounded,
26 deceased, or otherwise helpless or incapacitated;

27 (10) Patient's attending physician means the physician having the
28 primary responsibility for the patient as indicated on the records of a
29 health care facility;

30 (11) Provider agency means any law enforcement agency, fire
31 department, emergency medical service, funeral establishment, or other

1 entity which employs or directs emergency services providers or public
2 safety officials;

3 (12) Public safety official means a sheriff, a deputy sheriff, a
4 police officer, a state highway patrol officer, a paid or volunteer
5 firefighter, a school district employee, and any civilian law enforcement
6 employee or volunteer performing his or her duties, other than those as
7 an emergency services provider;

8 (13) Responsible person means an individual who has been designated
9 by an alternate facility to carry out the facility's responsibilities
10 under sections 71-507 to 71-513. A responsible person may be designated
11 on a case-by-case basis;

12 (14) Significant exposure means a situation in which the body
13 fluids, including blood, saliva, urine, respiratory secretions, or feces,
14 of a patient or individual have entered the body of an emergency services
15 provider or public safety official through a body opening including the
16 mouth or nose, a mucous membrane, or a break in skin from cuts or
17 abrasions, from a contaminated needlestick or scalpel, from intimate
18 respiratory contact, or through any other situation when the patient's or
19 individual's body fluids may have entered the emergency services
20 provider's or public safety official's body or when an airborne pathogen
21 may have been transmitted from the patient or individual to the emergency
22 services provider or public safety official; and

23 (15) Significant exposure report form means the form used by the
24 emergency services provider to document information necessary for
25 notification of significant exposure to an infectious disease or
26 condition.

27 Sec. 12. The State of Nebraska adopts the EMS Personnel Licensure
28 Interstate Compact in the form substantially as follows:

29 ARTICLE 1. PURPOSE

30 In order to protect the public through verification of competency
31 and ensure accountability for patient-care-related activities, all states

1 license emergency medical services personnel, such as emergency medical
2 technicians, advanced emergency medical technicians, and paramedics. The
3 EMS Personnel Licensure Interstate Compact is intended to facilitate the
4 day-to-day movement of emergency medical services personnel across state
5 boundaries in the performance of their emergency medical services duties
6 as assigned by an appropriate authority and authorize state emergency
7 medical services offices to afford immediate legal recognition to
8 emergency medical services personnel licensed in a member state. This
9 compact recognizes that states have a vested interest in protecting the
10 public's health and safety through their licensing and regulation of
11 emergency medical services personnel and that such state regulation
12 shared among the member states will best protect public health and
13 safety. This compact is designed to achieve the following purposes and
14 objectives:

- 15 1. Increase public access to emergency medical services personnel;
- 16 2. Enhance the states' ability to protect the public's health and
17 safety, especially patient safety;
- 18 3. Encourage the cooperation of member states in the areas of
19 emergency medical services personnel licensure and regulation;
- 20 4. Support licensing of military members who are separating from an
21 active duty tour and their spouses;
- 22 5. Facilitate the exchange of information between member states
23 regarding emergency medical services personnel licensure, adverse action,
24 and significant investigatory information;
- 25 6. Promote compliance with the laws governing emergency medical
26 services personnel practice in each member state; and
- 27 7. Invest all member states with the authority to hold emergency
28 medical services personnel accountable through the mutual recognition of
29 member state licenses.

30 ARTICLE 2. DEFINITIONS

31 In the EMS Personnel Licensure Interstate Compact:

1 A. Advanced emergency medical technician (AEMT) means an individual
2 licensed with cognitive knowledge and a scope of practice that
3 corresponds to that level in the National EMS Education Standards and
4 National EMS Scope of Practice Model.

5 B. Adverse action means any administrative, civil, equitable, or
6 criminal action permitted by a state's laws which may be imposed against
7 licensed EMS personnel by a state EMS authority or state court,
8 including, but not limited to, actions against an individual's license
9 such as revocation, suspension, probation, consent agreement, monitoring,
10 or other limitation or encumbrance on the individual's practice, letters
11 of reprimand or admonition, fines, criminal convictions, and state court
12 judgments enforcing adverse actions by the state EMS authority.

13 C. Alternative program means a voluntary, nondisciplinary substance
14 abuse recovery program approved by a state EMS authority.

15 D. Certification means the successful verification of entry-level
16 cognitive and psychomotor competency using a reliable, validated, and
17 legally defensible examination.

18 E. Commission means the national administrative body of which all
19 states that have enacted the compact are members.

20 F. Emergency medical services (EMS) means services provided by
21 emergency medical services personnel.

22 G. Emergency medical services (EMS) personnel includes emergency
23 medical technicians, advanced emergency medical technicians, and
24 paramedics.

25 H. Emergency medical technician (EMT) means an individual licensed
26 with cognitive knowledge and a scope of practice that corresponds to that
27 level in the National EMS Education Standards and National EMS Scope of
28 Practice Model.

29 I. Home state means a member state where an individual is licensed
30 to practice emergency medical services.

31 J. License means the authorization by a state for an individual to

1 practice as an EMT, an AEMT, or a paramedic.

2 K. Medical director means a physician licensed in a member state who
3 is accountable for the care delivered by EMS personnel.

4 L. Member state means a state that has enacted the EMS Personnel
5 Licensure Interstate Compact.

6 M. Privilege to practice means an individual's authority to deliver
7 emergency medical services in remote states as authorized under this
8 compact.

9 N. Paramedic means an individual licensed with cognitive knowledge
10 and a scope of practice that corresponds to that level in the National
11 EMS Education Standards and National EMS Scope of Practice Model.

12 O. Remote state means a member state in which an individual is not
13 licensed.

14 P. Restricted means the outcome of an adverse action that limits a
15 license or the privilege to practice.

16 Q. Rule means a written statement by the commission promulgated
17 pursuant to Article 12 of this compact that is of general applicability;
18 implements, interprets, or prescribes a policy or provision of this
19 compact; or is an organizational, procedural, or practice requirement of
20 the commission and has the force and effect of statutory law in a member
21 state and includes the amendment, repeal, or suspension of an existing
22 rule.

23 R. Scope of practice means defined parameters of various duties or
24 services that may be provided by an individual with specific credentials.
25 Whether regulated by rule, statute, or court decision, it tends to
26 represent the limits of services an individual may perform.

27 S. Significant investigatory information means:

28 1. Investigative information that a state EMS authority, after a
29 preliminary inquiry that includes notification and an opportunity to
30 respond if required by state law, has reason to believe, if proved true,
31 would result in the imposition of an adverse action on a license or

1 privilege to practice; or

2 2. Investigative information that indicates that the individual
3 represents an immediate threat to public health and safety regardless of
4 whether the individual has been notified and had an opportunity to
5 respond.

6 T. State means any state, commonwealth, district, or territory of
7 the United States.

8 U. State EMS authority means the board, office, or other agency with
9 the legislative mandate to license EMS personnel.

10 ARTICLE 3. HOME STATE LICENSURE

11 A. Any member state in which an individual holds a current license
12 shall be deemed a home state for purposes of the EMS Personnel Licensure
13 Interstate Compact.

14 B. Any member state may require an individual to obtain and retain a
15 license to be authorized to practice in the member state under
16 circumstances not authorized by the privilege to practice under the terms
17 of this compact.

18 C. A home state's license authorizes an individual to practice in a
19 remote state under the privilege to practice only if the home state:

20 1. Currently requires the use of the National Registry of Emergency
21 Medical Technicians examination as a condition of issuing initial
22 licenses at the EMT and paramedic levels;

23 2. Has a mechanism in place for receiving and investigating
24 complaints about individuals;

25 3. Notifies the commission, in compliance with the terms of this
26 compact, of any adverse action or significant investigatory information
27 regarding an individual;

28 4. No later than five years after activation of this compact,
29 requires a criminal background check of all applicants for initial
30 licensure, including the use of the results of fingerprint or other
31 biometric data checks compliant with the requirements of the Federal

1 Bureau of Investigation with the exception of federal employees who have
2 suitability determination in accordance with 5 C.F.R. 731.202 and submit
3 documentation of such as promulgated in the rules of the commission; and
4 5. Complies with the rules of the commission.

5 ARTICLE 4. COMPACT PRIVILEGE TO PRACTICE

6 A. Member states shall recognize the privilege to practice of an
7 individual license in another member state that is in conformance with
8 Article 3 of the EMS Personnel Licensure Interstate Compact.

9 B. To exercise the privilege to practice under the terms and
10 provisions of this compact, an individual must:

11 1. Be at least eighteen years of age;

12 2. Possess a current unrestricted license in a member state as an
13 EMT, AEMT, paramedic, or state recognized and licensed level with a scope
14 of practice and authority between EMT and paramedic; and

15 3. Practice under the supervision of a medical director.

16 C. An individual providing patient care in a remote state under the
17 privilege to practice shall function within the scope of practice
18 authorized by the home state unless and until modified by an appropriate
19 authority in the remote state as may be defined in the rules of the
20 commission.

21 D. Except as provided in section C of this Article, an individual
22 practicing in a remote state will be subject to the remote state's
23 authority and laws. A remote state may, in accordance with due process
24 and that state's laws, restrict, suspend, or revoke an individual's
25 privilege to practice in the remote state and may take any other
26 necessary actions to protect the health and safety of its citizens. If a
27 remote state takes action, it shall promptly notify the home state and
28 the commission.

29 E. If an individual's license in any home state is restricted or
30 suspended, the individual shall not be eligible to practice in a remote
31 state under the privilege to practice until the individual's home state

1 license is restored.

2 F. If an individual's privilege to practice in any remote state is
3 restricted, suspended, or revoked, the individual shall not be eligible
4 to practice in any remote state until the individual's privilege to
5 practice is restored.

6 ARTICLE 5. CONDITIONS OF PRACTICE IN A REMOTE STATE

7 An individual may practice in a remote state under a privilege to
8 practice only in the performance of the individual's EMS duties as
9 assigned by an appropriate authority, as defined in the rules of the
10 commission, and under the following circumstances:

11 1. The individual originates a patient transport in a home state and
12 transports the patient to a remote state;

13 2. The individual originates in the home state and enters a remote
14 state to pick up a patient and provide care and transport of the patient
15 to the home state;

16 3. The individual enters a remote state to provide patient care or
17 transport within that remote state;

18 4. The individual enters a remote state to pick up a patient and
19 provide care and transport to a third member state;

20 5. Other conditions as determined by rules promulgated by the
21 commission.

22 ARTICLE 6. RELATIONSHIP TO EMERGENCY MANAGEMENT ASSISTANCE COMPACT

23 Upon a member state's governor's declaration of a state of emergency
24 or disaster that activates the Emergency Management Assistance Compact,
25 all relevant terms and provisions of the compact shall apply and to the
26 extent any terms or provisions of the EMS Personnel Licensure Interstate
27 Compact conflict with the Emergency Management Assistance Compact, the
28 terms of the Emergency Management Assistance Compact shall prevail with
29 respect to any individual practicing in the remote state in response to
30 such declaration.

31 ARTICLE 7. VETERANS, SERVICE MEMBERS SEPARATING FROM ACTIVE DUTY

1 MILITARY, AND THEIR SPOUSES

2 A. Member states shall consider a veteran, an active military
3 service member, and a member of the National Guard and Reserves
4 separating from an active duty tour, and a spouse thereof, who holds a
5 current valid and unrestricted National Registry of Emergency Medical
6 Technicians certification at or above the level of the state license
7 being sought as satisfying the minimum training and examination
8 requirements for such licensure.

9 B. Member states shall expedite the processing of licensure
10 applications submitted by veterans, active military service members, and
11 members of the National Guard and Reserves separating from an active duty
12 tour and their spouses.

13 C. All individuals functioning with a privilege to practice under
14 this Article remain subject to the adverse actions provisions of Article
15 8 of the EMS Personnel Licensure Interstate Compact.

16 ARTICLE 8. ADVERSE ACTIONS

17 A. A home state shall have exclusive power to impose adverse action
18 against an individual's license issued by the home state.

19 B. If an individual's license in any home state is restricted or
20 suspended, the individual shall not be eligible to practice in a remote
21 state under the privilege to practice until the individual's home state
22 license is restored.

23 1. All home state adverse action orders shall include a statement
24 that the individual's compact privileges are inactive. The order may
25 allow the individual to practice in remote states with prior written
26 authorization from the state EMS authority of both the home state and the
27 remote state.

28 2. An individual currently subject to adverse action in the home
29 state shall not practice in any remote state without prior written
30 authorization from the state EMS authority of both the home state and the
31 remote state.

1 C. A member state shall report adverse actions and any occurrences
2 that the individual's compact privileges are restricted, suspended, or
3 revoked to the commission in accordance with the rules of the commission.

4 D. A remote state may take adverse action on an individual's
5 privilege to practice within that state.

6 E. Any member state may take adverse action against an individual's
7 privilege to practice in that state based on the factual findings of
8 another member state, so long as each state follows its own procedures
9 for imposing such adverse action.

10 F. A home state's state EMS authority shall investigate and take
11 appropriate action with respect to reported conduct in a remote state as
12 it would if such conduct had occurred within the home state. In such
13 cases, the home state's law shall control in determining the appropriate
14 adverse action.

15 G. Nothing in the EMS Personnel Licensure Interstate Compact shall
16 override a member state's decision that participation in an alternative
17 program may be used in lieu of adverse action and that such participation
18 shall remain nonpublic if required by the member state's laws. Member
19 states must require individuals who enter any alternative programs to
20 agree not to practice in any other member state during the term of the
21 alternative program without prior authorization from such other member
22 state.

23 ARTICLE 9. ADDITIONAL POWERS INVESTED IN A MEMBER STATE'S STATE EMS
24 AUTHORITY

25 A member state's state EMS authority, in addition to any other
26 powers granted under state law, is authorized under the EMS Personnel
27 Licensure Interstate Compact to:

28 1. Issue subpoenas for both hearings and investigations that require
29 the attendance and testimony of witnesses and the production of evidence.
30 Subpoenas issued by a member state's state EMS authority for the
31 attendance and testimony of witnesses, or the production of evidence from

1 another member state, shall be enforced in the remote state by any court
2 of competent jurisdiction, according to that court's practice and
3 procedure in considering subpoenas issued in its own proceedings. The
4 issuing state EMS authority shall pay any witness fees, travel expenses,
5 mileage, and other fees required by the service statutes of the state
6 where the witnesses or evidence is located; and

7 2. Issue cease and desist orders to restrict, suspend, or revoke an
8 individual's privilege to practice in the state.

9 ARTICLE 10. ESTABLISHMENT OF THE INTERSTATE COMMISSION FOR EMS
10 PERSONNEL PRACTICE

11 A. The member states hereby create and establish a joint public
12 agency known as the Interstate Commission for EMS Personnel Practice.

13 1. The commission is a body politic and an instrumentality of the
14 member states.

15 2. Venue is proper and judicial proceedings by or against the
16 commission shall be brought solely and exclusively in a court of
17 competent jurisdiction where the principal office of the commission is
18 located. The commission may waive venue and jurisdictional defenses to
19 the extent it adopts or consents to participate in alternative dispute
20 resolution proceedings.

21 3. Nothing in the EMS Personnel Licensure Interstate Compact shall
22 be construed to be a waiver of sovereign immunity.

23 B. Membership, Voting, and Meetings

24 1. Each member state shall have and be limited to one delegate. The
25 responsible official of the state EMS authority or his or her designee
26 shall be the delegate to this compact for each member state. Any delegate
27 may be removed or suspended from office as provided by the law of the
28 state from which the delegate is appointed. Any vacancy occurring in the
29 commission shall be filled in accordance with the laws of the member
30 state in which the vacancy exists. In the event that more than one board,
31 office, or other agency with the legislative mandate to license EMS

1 personnel at and above the level of EMT exists, the Governor of the
2 member state will determine which entity will be responsible for
3 assigning the delegate.

4 2. Each delegate shall be entitled to one vote with regard to the
5 promulgation of rules and creation of bylaws and shall otherwise have an
6 opportunity to participate in the business and affairs of the commission.
7 A delegate shall vote in person or by such other means as provided in the
8 bylaws. The bylaws may provide for delegates' participation in meetings
9 by telephone or other means of communication.

10 3. The commission shall meet at least once during each calendar
11 year. Additional meetings shall be held as set forth in the bylaws.

12 4. All meetings shall be open to the public, and public notice of
13 meetings shall be given in the same manner as required under the
14 rulemaking provisions in Article 12 of this compact.

15 5. The commission may convene in a closed, nonpublic meeting if the
16 commission must discuss:

17 a. Noncompliance of a member state with its obligations under this
18 compact;

19 b. The employment, compensation, discipline, or other personnel
20 matters, practices, or procedures related to specific employees or other
21 matters related to the commission's internal personnel practices and
22 procedures;

23 c. Current, threatened, or reasonably anticipated litigation;

24 d. Negotiation of contracts for the purchase or sale of goods,
25 services, or real estate;

26 e. Accusing any person of a crime or formally censuring any person;

27 f. Disclosure of trade secrets or commercial or financial
28 information that is privileged or confidential;

29 g. Disclosure of information of a personal nature where disclosure
30 would constitute a clearly unwarranted invasion of personal privacy;

31 h. Disclosure of investigatory records compiled for law enforcement

1 purposes;

2 i. Disclosure of information related to any investigatory reports
3 prepared by or on behalf of or for use of the commission or other
4 committee charged with responsibility of investigation or determination
5 of compliance issues pursuant to the compact; or

6 j. Matters specifically exempted from disclosure by federal or
7 member state statute.

8 6. If a meeting, or portion of a meeting, is closed pursuant to this
9 Article, the commission's legal counsel or designee shall certify that
10 the meeting may be closed and shall reference each relevant exempting
11 provision. The commission shall keep minutes that fully and clearly
12 describe all matters discussed in a meeting and shall provide a full and
13 accurate summary of actions taken, and the reasons for the actions,
14 including a description of the views expressed. All documents considered
15 in connection with an action shall be identified in such minutes. All
16 minutes and documents of a closed meeting shall remain under seal,
17 subject to release by a majority vote of the commission or order of a
18 court of competent jurisdiction.

19 C. The commission shall, by a majority vote of the delegates,
20 prescribe bylaws or rules to govern its conduct as may be necessary or
21 appropriate to carry out the purposes and exercise the powers of this
22 compact, including, but not limited to:

23 1. Establishing the fiscal year of the commission;

24 2. Providing reasonable standards and procedures:

25 a. For the establishment and meetings of other committees; and

26 b. Governing any general or specific delegation of any authority or
27 function of the commission;

28 3. Providing reasonable procedures for calling and conducting
29 meetings of the commission, ensuring reasonable advance notice of all
30 meetings, and providing an opportunity for attendance of such meetings by
31 interested parties, with enumerated exceptions designed to protect the

1 public's interest, the privacy of individuals, and proprietary
2 information, including trade secrets. The commission may meet in closed
3 session only after a majority of the membership votes to close a meeting
4 in whole or in part. As soon as practicable, the commission must make
5 public a copy of the vote to close the meeting revealing the vote of each
6 member with no proxy votes allowed;

7 4. Establishing the titles, duties and authority and reasonable
8 procedures for the election of the officers of the commission;

9 5. Providing reasonable standards and procedures for the
10 establishment of the personnel policies and programs of the commission.
11 Notwithstanding any civil service or other similar laws of any member
12 state, the bylaws shall exclusively govern the personnel policies and
13 programs of the commission;

14 6. Promulgating a code of ethics to address permissible and
15 prohibited activities of commission members and employees;

16 7. Providing a mechanism for winding up the operations of the
17 commission and the equitable disposition of any surplus funds that may
18 exist after the termination of this compact after the payment or
19 reserving of all of its debts and obligations;

20 8. The commission shall publish its bylaws and file a copy thereof,
21 and a copy of any amendment thereto, with the appropriate agency or
22 officer in each of the member states, if any.

23 9. The commission shall maintain its financial records in accordance
24 with the bylaws.

25 10. The commission shall meet and take such actions as are
26 consistent with this compact and the bylaws.

27 D. The commission shall have the following powers:

28 1. The authority to promulgate uniform rules to facilitate and
29 coordinate implementation and administration of this compact. The rules
30 shall have the force and effect of law and shall be binding in all member
31 states;

1 2. To bring and prosecute legal proceedings or actions in the name
2 of the commission. The standing of any state EMS authority or other
3 regulatory body responsible for EMS personnel licensure to sue or be sued
4 under applicable law shall not be affected;

5 3. To purchase and maintain insurance and bonds;

6 4. To borrow, accept, or contract for services of personnel,
7 including, but not limited to, employees of a member state;

8 5. To hire employees, elect or appoint officers, fix compensation,
9 define duties, grant such individuals appropriate authority to carry out
10 the purposes of this compact, and establish the commission's personnel
11 policies and programs relating to conflicts of interest, qualifications
12 of personnel, and other related personnel matters;

13 6. To accept any and all appropriate donations and grants of money,
14 equipment, supplies, materials, and services, and to receive, utilize,
15 and dispose of the same. At all times the commission shall strive to
16 avoid any appearance of impropriety or conflict of interest;

17 7. To lease, purchase, accept appropriate gifts or donations of, or
18 otherwise to own, hold, improve, or use, any property, real, personal, or
19 mixed. At all times the commission shall strive to avoid any appearance
20 of impropriety;

21 8. To sell, convey, mortgage, pledge, lease, exchange, abandon, or
22 otherwise dispose of any property real, personal, or mixed;

23 9. To establish a budget and make expenditures;

24 10. To borrow money;

25 11. To appoint committees, including advisory committees comprised
26 of members, state regulators, state legislators or their representatives,
27 and consumer representatives, and such other interested persons as may be
28 designated in this compact and the bylaws;

29 12. To provide and receive information from, and to cooperate with,
30 law enforcement agencies;

31 13. To adopt and use an official seal; and

1 14. To perform such other functions as may be necessary or
2 appropriate to achieve the purposes of this compact consistent with the
3 state regulation of EMS personnel licensure and practice.

4 E. Financing of the Commission

5 1. The commission shall pay, or provide for the payment of, the
6 reasonable expenses of its establishment, organization, and ongoing
7 activities.

8 2. The commission may accept any and all appropriate revenue
9 sources, donations, and grants of money, equipment, supplies, materials,
10 and services.

11 3. The commission may levy on and collect an annual assessment from
12 each member state or impose fees on other parties to cover the cost of
13 the operations and activities of the commission and its staff, which must
14 be in a total amount sufficient to cover its annual budget as approved
15 each year for which revenue is not provided by other sources. The
16 aggregate annual assessment amount shall be allocated based upon a
17 formula to be determined by the commission, which shall promulgate a rule
18 binding upon all member states.

19 4. The commission shall not incur obligations of any kind prior to
20 securing the funds adequate to meet the same; nor shall the commission
21 pledge the credit of any of the member states, except by and with the
22 authority of the member state.

23 5. The commission shall keep accurate accounts of all receipts and
24 disbursements. The receipts and disbursements of the commission shall be
25 subject to the audit and accounting procedures established under its
26 bylaws. However, all receipts and disbursements of funds handled by the
27 commission shall be audited yearly by a certified or licensed public
28 accountant, and the report of the audit shall be included in and become
29 part of the annual report of the commission.

30 F. Qualified Immunity, Defense, and Indemnification

31 1. The members, officers, executive director, employees, and

1 representatives of the commission shall be immune from suit and
2 liability, either personally or in their official capacity, for any claim
3 for damage to or loss of property or personal injury or other civil
4 liability caused by or arising out of any actual or alleged act, error,
5 or omission that occurred, or that the person against whom the claim is
6 made had a reasonable basis for believing occurred, within the scope of
7 commission employment, duties, or responsibilities. Nothing in this
8 paragraph shall be construed to protect any such person from suit or
9 liability for any damage, loss, injury, or liability caused by the
10 intentional or willful or wanton misconduct of that person.

11 2. The commission shall defend any member, officer, executive
12 director, employee, or representative of the commission in any civil
13 action seeking to impose liability arising out of any actual or alleged
14 act, error, or omission that occurred within the scope of commission
15 employment, duties, or responsibilities, or that the person against whom
16 the claim is made had a reasonable basis for believing occurred within
17 the scope of commission employment, duties, or responsibilities. Nothing
18 in this paragraph shall be construed to prohibit that person from
19 retaining his or her own counsel. The commission shall provide such
20 defense if the actual or alleged act, error, or omission did not result
21 from that person's intentional or willful or wanton misconduct.

22 3. The commission shall indemnify and hold harmless any member,
23 officer, executive director, employee, or representative of the
24 commission for the amount of any settlement or judgment obtained against
25 that person arising out of any actual or alleged act, error, or omission
26 that occurred within the scope of commission employment, duties, or
27 responsibilities, or that such person had a reasonable basis for
28 believing occurred within the scope of commission employment, duties, or
29 responsibilities, if the actual or alleged act, error, or omission did
30 not result from the intentional or willful or wanton misconduct of that
31 person.

1 ARTICLE 11. COORDINATED DATA BASE

2 A. The commission shall provide for the development and maintenance
3 of a coordinated data base and reporting system containing licensure,
4 adverse action, and significant investigatory information on all licensed
5 individuals in member states.

6 B. A member state shall submit a uniform data set to the coordinated
7 data base on all individuals to whom the EMS Personnel Licensure
8 Interstate Compact is applicable as required by the rules of the
9 commission, including:

10 1. Identifying information;

11 2. Licensure data;

12 3. Significant investigatory information;

13 4. Adverse actions against an individual's license;

14 5. An indicator that an individual's privilege to practice is
15 restricted, suspended, or revoked;

16 6. Nonconfidential information related to alternative program
17 participation;

18 7. Any denial of application for licensure, and the reason for such
19 denial; and

20 8. Other information that may facilitate the administration of this
21 compact, as determined by the rules of the commission.

22 C. The coordinated data base administrator shall promptly notify all
23 member states of any adverse action taken against, or significant
24 investigative information on, any individual in a member state.

25 D. Member states contributing information to the coordinated data
26 base may designate information that may not be shared with the public
27 without the express permission of the contributing state.

28 E. Any information submitted to the coordinated data base that is
29 subsequently required to be expunged by the laws of the member state
30 contributing the information shall be removed from the coordinated data
31 base.

1 ARTICLE 12. RULEMAKING

2 A. The commission shall exercise its rulemaking powers pursuant to
3 the criteria set forth in this Article and the rules adopted thereunder.
4 Rules and amendments shall become binding as of the date specified in
5 each rule or amendment.

6 B. If a majority of the legislatures of the member states rejects a
7 rule, by enactment of a statute or resolution in the same manner used to
8 adopt the EMS Personnel Licensure Interstate Compact, then such rule
9 shall have no further force and effect in any member state.

10 C. Rules or amendments to the rules shall be adopted at a regular or
11 special meeting of the commission.

12 D. Prior to promulgation and adoption of a final rule or rules by
13 the commission, and at least sixty days in advance of the meeting at
14 which the rule will be considered and voted upon, the commission shall
15 file a notice of proposed rulemaking:

- 16 1. On the web site of the commission; and
17 2. On the web site of each member state's state EMS authority or the
18 publication in which each state would otherwise publish proposed rules.

19 E. The notice of proposed rulemaking shall include:

- 20 1. The proposed time, date, and location of the meeting in which the
21 rule will be considered and voted upon;
22 2. The text of the proposed rule or amendment and the reason for the
23 proposed rule;
24 3. A request for comments on the proposed rule from any interested
25 person; and
26 4. The manner in which interested persons may submit notice to the
27 commission of their intention to attend the public hearing and any
28 written comments.

29 F. Prior to adoption of a proposed rule, the commission shall allow
30 persons to submit written data, facts, opinions, and arguments, which
31 shall be made available to the public.

1 G. The commission shall grant an opportunity for a public hearing
2 before it adopts a rule or amendment if a hearing is requested by:

3 1. At least twenty-five persons;

4 2. A governmental subdivision or agency; or

5 3. An association having at least twenty-five members.

6 H. If a hearing is held on the proposed rule or amendment, the
7 commission shall publish the place, time, and date of the scheduled
8 public hearing.

9 1. All persons wishing to be heard at the hearing shall notify the
10 executive director of the commission or other designated member in
11 writing of their desire to appear and testify at the hearing not less
12 than five business days before the scheduled date of the hearing.

13 2. Hearings shall be conducted in a manner providing each person who
14 wishes to comment a fair and reasonable opportunity to comment orally or
15 in writing.

16 3. No transcript of the hearing is required, unless a written
17 request for a transcript is made, in which case the person requesting the
18 transcript shall bear the cost of producing the transcript. A recording
19 may be made in lieu of a transcript under the same terms and conditions
20 as a transcript. This subsection shall not preclude the commission from
21 making a transcript or recording of the hearing if it so chooses.

22 4. Nothing in this Article shall be construed as requiring a
23 separate hearing on each rule. Rules may be grouped for the convenience
24 of the commission at hearings required by this Article.

25 I. Following the scheduled hearing date, or by the close of business
26 on the scheduled hearing date if the hearing was not held, the commission
27 shall consider all written and oral comments received.

28 J. The commission shall, by majority vote of all members, take final
29 action on the proposed rule and shall determine the effective date of the
30 rule, if any, based on the rulemaking record and the full text of the
31 rule.

1 K. If no written notice of intent to attend the public hearing by
2 interested parties is received, the commission may proceed with
3 promulgation of the proposed rule without a public hearing.

4 L. Upon determination that an emergency exists, the commission may
5 consider and adopt an emergency rule without prior notice, opportunity
6 for comment, or hearing. The usual rulemaking procedures provided in this
7 compact and in this Article shall be retroactively applied to the rule as
8 soon as reasonably possible, in no event later than ninety days after the
9 effective date of the rule. For purposes of this paragraph, an emergency
10 rule is one that must be adopted immediately in order to:

- 11 1. Meet an imminent threat to public health, safety, or welfare;
12 2. Prevent a loss of commission or member state funds;
13 3. Meet a deadline for the promulgation of an administrative rule
14 that is established by federal law or rule; or
15 4. Protect public health and safety.

16 M. The commission or an authorized committee of the commission may
17 direct revisions to a previously adopted rule or amendment for purposes
18 of correcting typographical errors, errors in format, errors in
19 consistency, or grammatical errors. Public notice of any revisions shall
20 be posted on the web site of the commission. The revision shall be
21 subject to challenge by any person for a period of thirty days after
22 posting. The revision may be challenged only on grounds that the revision
23 results in a material change to a rule. A challenge shall be made in
24 writing and delivered to the chair of the commission prior to the end of
25 the notice period. If no challenge is made, the revision will take effect
26 without further action. If the revision is challenged, the revision may
27 not take effect without the approval of the commission.

28 ARTICLE 13. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

29 A. Oversight

30 1. The executive, legislative, and judicial branches of state
31 government in each member state shall enforce the EMS Personnel Licensure

1 Interstate Compact and take all actions necessary and appropriate to
2 effectuate this compact's purposes and intent. This compact and the rules
3 promulgated under this compact shall have standing as statutory law.

4 2. All courts shall take judicial notice of this compact and the
5 rules in any judicial or administrative proceeding in a member state
6 pertaining to the subject matter of this compact which may affect the
7 powers, responsibilities, or actions of the commission.

8 3. The commission shall be entitled to receive service of process in
9 any such proceeding and shall have standing to intervene in such a
10 proceeding for all purposes. Failure to provide service of process to the
11 commission shall render a judgment or order void as to the commission,
12 this compact, or promulgated rules.

13 B. Default, Technical Assistance, and Termination

14 1. If the commission determines that a member state has defaulted in
15 the performance of its obligations or responsibilities under this compact
16 or the promulgated rules, the commission shall:

17 a. Provide written notice to the defaulting state and other member
18 states of the nature of the default, the proposed means of curing the
19 default, or any other action to be taken by the commission; and

20 b. Provide remedial training and specific technical assistance
21 regarding the default.

22 2. If a state in default fails to cure the default, the defaulting
23 state may be terminated from this compact upon an affirmative vote of a
24 majority of the member states, and all rights, privileges, and benefits
25 conferred by this compact may be terminated on the effective date of
26 termination. A cure of the default does not relieve the offending state
27 of obligations or liabilities incurred during the period of default.

28 3. Termination of membership in this compact shall be imposed only
29 after all other means of securing compliance have been exhausted. Notice
30 of intent to suspend or terminate shall be given by the commission to the
31 governor, the majority and minority leaders of the defaulting state's

1 legislature or the speaker if no such leaders exist, and each of the
2 member states.

3 4. A state that has been terminated is responsible for all
4 assessments, obligations, and liabilities incurred through the effective
5 date of termination, including obligations that extend beyond the
6 effective date of termination.

7 5. The commission shall not bear any costs related to a state that
8 is found to be in default or that has been terminated from this compact,
9 unless agreed upon in writing between the commission and the defaulting
10 state.

11 6. The defaulting state may appeal the action of the commission by
12 petitioning the United States District Court for the District of Columbia
13 or the federal district where the commission has its principal offices.
14 The prevailing member shall be awarded all costs of such litigation,
15 including reasonable attorney's fees.

16 C. Dispute Resolution

17 1. Upon request by a member state, the commission shall attempt to
18 resolve disputes related to this compact that arise among member states
19 and between member and nonmember states.

20 2. The commission shall promulgate a rule providing for both
21 mediation and binding dispute resolution for disputes as appropriate.

22 D. Enforcement

23 1. The commission, in the reasonable exercise of its discretion,
24 shall enforce the provisions and rules of this compact.

25 2. By majority vote, the commission may initiate legal action in the
26 United States District Court for the District of Columbia or the federal
27 district where the commission has its principal offices against a member
28 state in default to enforce compliance with this compact and its
29 promulgated rules and bylaws. The relief sought may include both
30 injunctive relief and damages. In the event judicial enforcement is
31 necessary, the prevailing member shall be awarded all costs of such

1 litigation, including reasonable attorney's fees.

2 3. The remedies in this Article shall not be the exclusive remedies
3 of the commission. The commission may pursue any other remedies available
4 under federal or state law.

5 ARTICLE 14. DATE OF IMPLEMENTATION OF THE INTERSTATE COMMISSION FOR
6 EMS PERSONNEL PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT

7 A. The EMS Personnel Licensure Interstate Compact shall come into
8 effect on the date on which the compact statute is enacted into law in
9 the tenth member state. The provisions, which become effective at that
10 time, shall be limited to the powers granted to the commission relating
11 to assembly and the promulgation of rules. Thereafter, the commission
12 shall meet and exercise rulemaking powers necessary to the implementation
13 and administration of this compact.

14 B. Any state that joins the compact subsequent to the commission's
15 initial adoption of the rules shall be subject to the rules as they exist
16 on the date on which the compact becomes law in that state. Any rule that
17 has been previously adopted by the commission shall have the full force
18 and effect of law on the day the compact becomes law in that state.

19 C. Any member state may withdraw from this compact by enacting a
20 statute repealing the same.

21 1. A member state's withdrawal shall not take effect until six
22 months after enactment of the repealing statute.

23 2. Withdrawal shall not affect the continuing requirement of the
24 withdrawing state's state EMS authority to comply with the investigative
25 and adverse action reporting requirements of this compact prior to the
26 effective date of withdrawal.

27 D. Nothing contained in this compact shall be construed to
28 invalidate or prevent any EMS personnel licensure agreement or other
29 cooperative arrangement between a member state and a nonmember state that
30 does not conflict with this compact.

31 E. This compact may be amended by the member states. No amendment to

1 this compact shall become effective and binding upon any member state
2 until it is enacted into the laws of all member states.

3 ARTICLE 15. CONSTUCTION AND SEVERABILITY

4 The EMS Personnel Licensure Interstate Compact shall be liberally
5 construed so as to effectuate the purposes thereof. If this compact shall
6 be held contrary to the constitution of any member state, the compact
7 shall remain in full force and effect as to the remaining member states.
8 Nothing in this compact supersedes state law or rules related to
9 licensure of EMS agencies.

10 Sec. 13. Original sections 38-131, 38-1201, 38-1221, 38-1224,
11 38-1232, 38-1237, 69-2429, and 71-507, Reissue Revised Statutes of
12 Nebraska, and sections 28-470 and 38-1217, Revised Statutes Supplement,
13 2017, are repealed.