MAY 19, 2015

PUBLIC LAW

STATE OF MAINE

IN THE YEAR OF OUR LORD TWO THOUSAND AND FIFTEEN

S.P. 222 - L.D. 629

An Act Regarding Community Paramedicine Pilot Projects

Emergency preamble. Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, current law provides that a community paramedicine pilot project may not exceed 3 years in duration; and

Whereas, approval granted by the Emergency Medical Services' Board for the first community paramedicine pilot project may expire prior to enactment of this law unless it is enacted on an emergency basis; and

Whereas, community paramedicine pilot projects have proven to be of value to their communities, and continuation is in the public interest; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

- **Sec. 1. 32 MRSA §84, sub-§4,** as enacted by PL 2011, c. 562, §1, is amended to read:
- **4. Establishment of community paramedicine pilot projects.** Using the same process established by the board in rule for using pilot projects to evaluate the workability and appropriateness of incorporating a particular emergency medical treatment technique or a type of equipment into any licensure level, the board may establish up to 12 pilot projects for the purpose of developing and evaluating a community paramedicine program. A pilot project established pursuant to this subsection may not exceed 3 years in duration.

As used in this subsection, "community paramedicine" means the practice by an emergency medical services provider primarily in an out-of-hospital setting of providing

episodic patient evaluation, advice and treatment directed at preventing or improving a particular medical condition, within the scope of practice of the emergency medical services provider as specifically requested or directed by a physician.

The board shall establish the requirements and application and approval process of pilot projects established pursuant to this subsection. At a minimum, an emergency medical services provider, including, but not limited to, an ambulance service or nontransporting emergency medical service, that conducts a pilot project shall work with an identified primary care medical director, have an emergency medical services medical director and collect and submit data and written reports to the board, in accordance with requirements established by the board.

On or before January 30th of each year, the board shall submit a written report to the joint standing committees of the Legislature having jurisdiction over criminal justice and public safety matters and labor, commerce, research and economic development matters that summarizes the work and progress during the previous calendar year of each pilot project authorized pursuant to this subsection.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.