1	INTERIM STUDY PROPOSA	AL 2019-172
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3	92nd General Assembly A Bill	JMB/JMB
4	Second Extraordinary Session, 2020	HOUSE BILL
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6	By: Representative L. Johnson	
7	Filed with: House Com	mittee on Public Health, Welfare, and Labor
8		pursuant to A.C.A. §10-3-217.
9	For An Act To Be E	ntitled
10	AN ACT TO AUTHORIZE EMERGENCY MED	ICAL SERVICES
11	PERSONNEL TO ADMINISTER CERTAIN EN	1ERGENCY
12	PRESCRIPTION MEDICATIONS TO A PAT	LENT WHO HAS A
13	SPECIFIC HEALTH CONDITION; TO REQU	JIRE PARTICIPATION
14	IN CARE COORDINATION BY EMERGENCY	MEDICAL SERVICES;
15	TO ENSURE APPROPRIATE TRANSPORT O	F A PATIENT WHO HAS
16	A SPECIFIC HEALTH CONDITION; AND	FOR OTHER PURPOSES.
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19	Subtitle	
20	TO AUTHORIZE EMERGENCY MEDIC	AL SERVICES
21	PERSONNEL TO ADMINISTER CERT	AIN EMERGENCY
22	PRESCRIPTION MEDICATIONS TO	A PATIENT WHO
23	HAS A SPECIFIC HEALTH CONDIT	ION.
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26	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE	STATE OF ARKANSAS:
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28	SECTION 1. Arkansas Code § 20-13-202,	concerning the definitions under
29	the Emergency Medical Services Act, is amended	d to add additional subdivisions
30	to read as follows:	
31	(11)(A) "Care coordination" means	s the coordination of healthcare
32	services by healthcare professional teams to a	assist a patient in the
33	management of his or her health care and to in	nprove the efficiency and
34	effectiveness of the healthcare sector.	
35	<u>(B) "Care coordination" inc</u>	cludes without limitation:
36	(i) Developing potential treatment plans;	

1	(ii) Determining the optimal treatment for a patient
2	before considering hospitalization; and
3	(iii) Establishing alternative approaches and
4	treatment for a patient; and
5	(12)(A) "Specific health condition" means a health condition
6	that requires specialized healthcare treatment.
7	(B) "Specific health condition" includes without
8	limitation:
9	(i) A health condition that is listed as rare by the
10	National Institutes of Health; and
11	(ii) A health condition that could be fatal for
12	which a patient seeks specialized health care.
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14	SECTION 2. Arkansas Code Title 20, Chapter 13, Subchapter 2, is
15	amended to add an additional section to read as follows:
16	20-13-216. Specific health condition.
17	(a) Emergency medical services personnel may administer prescription
18	medications that are:
19	(1) Carried by a patient;
20	(2) Administered via routes of delivery that are:
21	(A) Within the scope of training for emergency medical
22	services personnel; and
23	(B) Approved by the Emergency Medical Services Advisory
24	Council and the State Board of Health;
25	(3) Intended to treat a specific health condition; and
26	(4) Not listed on the drug formulary set out by the Department
27	<u>of Health.</u>
28	(b) A patient who is diagnosed with a specific health condition may
29	request to be transported to an alternative destination facility that is
30	farther away than the nearest facility if:
31	(1) The alternative destination facility better meets the needs
32	of the patient because:
33	(A) The patient's physician and medical records are at the
34	alternative destination facility;
35	(B) The patient has recently been discharged from the
36	<u>alternative destination facility;</u>

1	(C) The patient has had previous hospitalizations at the	
2	alternative destination facility; and	
3	(D) The patient's complex medical history is followed at	
4	the alternative destination facility; and	
5	(2) The request is approved by the regional emergency medical	
6	services entity, including an emergency medical services board established	
7	<u>under § 14-266-105(a)(3).</u>	
8	(c) The Emergency Medical Services Advisory Council shall establish	
9	standards for:	
10	(1) Emergency medical services personnel to communicate with	
11	patients and caregivers of patients who are diagnosed with a specific health	
12	condition about:	
13	(A) The patient's specific health condition;	
14	(B) The likelihood that the patient will need emergency	
15	medical services; and	
16	(C) The collaborative development of emergency medical	
17	service care plans to meet the patient's needs; and	
18	(2) Regional emergency medical services entities, including	
19	emergency medical services boards established under § 14-266-105(a)(3), to	
20	participate in care coordination for patients who are diagnosed with a	
21	specific health condition.	
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24	Referred by Representative L. Johnson	
25	Prepared by: JMB/JMB	
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