

101ST GENERAL ASSEMBLY
State of Illinois
2019 and 2020
HB0365

Introduced , by Rep. Thaddeus Jones

SYNOPSIS AS INTRODUCED:

30 ILCS 105/5.891 new
210 ILCS 50/3.50
210 ILCS 50/3.89 new
210 ILCS 50/3.220
305 ILCS 5/5-4.2 from Ch. 23, par. 5-4.2

Amends the Emergency Medical Services (EMS) Systems Act. Provides that the Department of Public Health shall perform annual background checks of all licensees and notify licensees and related EMS System administrators of any convictions by a court of competent jurisdiction of (or entry of a plea of guilty or nolo contendere to) a Class X, Class 1, or Class 2 felony, or an out-of-State equivalent offense. Provides that the Department shall require all medical assisted transport providers to be licensed by the Department and establish staffing, licensing, safety, and training standards. Amends the Illinois Public Aid Code. Includes medical assisted transportation in the definition of "ambulance service". Provides rates of reimbursement and assistance for medical transport services. Amends the State Finance Act. Adds the Medical Assisted Transport Licensure Fund as a special fund. Makes other changes.

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FISCAL NOTE ACT MAY
APPLY

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The State Finance Act is amended by adding
5 Section 5.891 as follows:

6 (30 ILCS 105/5.891 new)

7 Sec. 5.891. The Medical Assisted Transport Licensure Fund.

8 Section 10. The Emergency Medical Services (EMS) Systems
9 Act is amended by changing Sections 3.50 and 3.220 and by
10 adding Section 3.89 as follows:

11 (210 ILCS 50/3.50)

12 (Text of Section before amendment by P.A. 100-1082)

13 Sec. 3.50. Emergency Medical Services personnel licensure
14 levels.

15 (a) "Emergency Medical Technician" or "EMT" means a person
16 who has successfully completed a course in basic life support
17 as approved by the Department, is currently licensed by the
18 Department in accordance with standards prescribed by this Act
19 and rules adopted by the Department pursuant to this Act, and
20 practices within an EMS System. A valid Emergency Medical
21 Technician-Basic (EMT-B) license issued under this Act shall

1 continue to be valid and shall be recognized as an Emergency
2 Medical Technician (EMT) license until the Emergency Medical
3 Technician-Basic (EMT-B) license expires.

4 (b) "Emergency Medical Technician-Intermediate" or "EMT-I"
5 means a person who has successfully completed a course in
6 intermediate life support as approved by the Department, is
7 currently licensed by the Department in accordance with
8

standards prescribed by this Act and rules adopted by the
9 Department pursuant to this Act, and practices within an
10 Intermediate or Advanced Life Support EMS System.

11 (b-5) "Advanced Emergency Medical Technician" or "A-EMT"
12 means a person who has successfully completed a course in basic
13 and limited advanced emergency medical care as approved by the
14 Department, is currently licensed by the Department in
15 accordance with standards prescribed by this Act and rules
16 adopted by the Department pursuant to this Act, and practices
17 within an Intermediate or Advanced Life Support EMS System.

18 (c) "Paramedic (EMT-P)" means a person who has successfully
19 completed a course in advanced life support care as approved by
20 the Department, is licensed by the Department in accordance
21 with standards prescribed by this Act and rules adopted by the
22 Department pursuant to this Act, and practices within an
23 Advanced Life Support EMS System. A valid Emergency Medical
24 Technician-Paramedic (EMT-P) license issued under this Act
25 shall continue to be valid and shall be recognized as a
26 Paramedic license until the Emergency Medical

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1 Technician-Paramedic (EMT-P) license expires.

2 (c-5) "Emergency Medical Responder" or "EMR (First
3 Responder)" means a person who has successfully completed a
4 course in emergency medical response as approved by the
5 Department and provides emergency medical response services
6 prior to the arrival of an ambulance or specialized emergency
7 medical services vehicle, in accordance with the level of care
8 established by the National EMS Educational Standards
9 Emergency Medical Responder course as modified by the
10 Department. An Emergency Medical Responder who provides
11 services as part of an EMS System response plan shall comply
12 with the applicable sections of the Program Plan, as approved
13 by the Department, of that EMS System. The Department shall
14 have the authority to adopt rules governing the curriculum,
15 practice, and necessary equipment applicable to Emergency
16 Medical Responders.
17

On August 15, 2014 (the effective date of Public Act 98-973) ~~this amendatory Act of the 98th General Assembly~~, a person who is licensed by the Department as a First Responder and has completed a Department-approved course in first responder defibrillator training based on, or equivalent to, the National EMS Educational Standards or other standards previously recognized by the Department shall be eligible for licensure as an Emergency Medical Responder upon meeting the licensure requirements and submitting an application to the Department. A valid First Responder license issued under this

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Act shall continue to be valid and shall be recognized as an Emergency Medical Responder license until the First Responder license expires.

(c-10) All EMS Systems and licensees shall be fully compliant with the National EMS Education Standards, as modified by the Department in administrative rules, within 24 months after the adoption of the administrative rules.

(d) The Department shall have the authority and responsibility to:

(1) Prescribe education and training requirements, which includes training in the use of epinephrine, for all levels of EMS personnel except for EMRs, based on the National EMS Educational Standards and any modifications to those curricula specified by the Department through rules adopted pursuant to this Act.

(2) Prescribe licensure testing requirements for all levels of EMS personnel, which shall include a requirement that all phases of instruction, training, and field experience be completed before taking the appropriate licensure examination. Candidates may elect to take the appropriate National Registry examination in lieu of the Department's examination, but are responsible for making their own arrangements for taking the National Registry examination. In prescribing licensure testing requirements for honorably discharged members of the armed forces of the

1 shall ensure that a candidate's military emergency medical
2 training, emergency medical curriculum completed, and
3 clinical experience, as described in paragraph (2.5), are
4 recognized.

5 (2.5) Review applications for EMS personnel licensure
6 from honorably discharged members of the armed forces of
7 the United States with military emergency medical
8 training. Applications shall be filed with the Department
9 within one year after military discharge and shall contain:
10 (i) proof of successful completion of military emergency
11 medical training; (ii) a detailed description of the
12 emergency medical curriculum completed; and (iii) a
13 detailed description of the applicant's clinical
14 experience. The Department may request additional and
15 clarifying information. The Department shall evaluate the
16 application, including the applicant's training and
17 experience, consistent with the standards set forth under
18 subsections (a), (b), (c), and (d) of Section 3.10. If the
19 application clearly demonstrates that the training and
20 experience meets such standards, the Department shall
21 offer the applicant the opportunity to successfully
22 complete a Department-approved EMS personnel examination
23 for the level of license for which the applicant is
24 qualified. Upon passage of an examination, the Department
25 shall issue a license, which shall be subject to all
26 provisions of this Act that are otherwise applicable to the

1 level of EMS personnel license issued.

2 (3) License individuals as an EMR, EMT, EMT-I, A-EMT,
3 or Paramedic who have met the Department's education,

4 training and examination requirements.

5 (4) Prescribe annual continuing education and
6 relicensure requirements for all EMS personnel licensure
7 levels.

8 (5) Relicense individuals as an EMD, EMR, EMT, EMT-I,
9 A-EMT, or Paramedic every 4 years, based on their
10 compliance with continuing education and relicensure
11 requirements as required by the Department pursuant to this
12 Act. Every 4 years, a Paramedic shall have 100 hours of
13 approved continuing education, an EMT-I and an advanced EMT
14 shall have 80 hours of approved continuing education, and
15 an EMT shall have 60 hours of approved continuing
16 education. An Illinois licensed EMR, EMD, EMT, EMT-I,
17 A-EMT, Paramedic, ECRN, or PHRN whose license has been
18 expired for less than 36 months may apply for reinstatement
19 by the Department. Reinstatement shall require that the
20 applicant (i) submit satisfactory proof of completion of
21 continuing medical education and clinical requirements to
22 be prescribed by the Department in an administrative rule;
23 (ii) submit a positive recommendation from an Illinois EMS
24 Medical Director attesting to the applicant's
25 qualifications for retesting; and (iii) pass a Department
26 approved test for the level of EMS personnel license sought

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1 to be reinstated.

2 (6) Grant inactive status to any EMR, EMD, EMT, EMT-I,
3 A-EMT, Paramedic, ECRN, or PHRN who qualifies, based on
4 standards and procedures established by the Department in
5 rules adopted pursuant to this Act.

6 (7) Charge a fee for EMS personnel examination,
7 licensure, and license renewal.

8 (7.5) Perform annual background checks of all
9 licensees and notify licensees and related EMS System
10 administrators of a conviction by a court of competent
11 jurisdiction of (or entry of a plea of guilty or nolo

12 contendere to) a Class X, Class 1, or Class 2 felony in
13 this State or an out-of-state equivalent offense.

14 (8) Suspend, revoke, or refuse to issue or renew the
15 license of any licensee, after an opportunity for an
16 impartial hearing before a neutral administrative law
17 judge appointed by the Director, where the preponderance of
18 the evidence shows one or more of the following:

19 (A) The licensee has not met continuing education
20 or relicensure requirements as prescribed by the
21 Department;

22 (B) The licensee has failed to maintain
23 proficiency in the level of skills for which he or she
24 is licensed;

25 (C) The licensee, during the provision of medical
26 services, engaged in dishonorable, unethical, or

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1 unprofessional conduct of a character likely to
2 deceive, defraud, or harm the public;

3 (D) The licensee has failed to maintain or has
4 violated standards of performance and conduct as
5 prescribed by the Department in rules adopted pursuant
6 to this Act or his or her EMS System's Program Plan;

7 (E) The licensee is physically impaired to the
8 extent that he or she cannot physically perform the
9 skills and functions for which he or she is licensed,
10 as verified by a physician, unless the person is on
11 inactive status pursuant to Department regulations;

12 (F) The licensee is mentally impaired to the extent
13 that he or she cannot exercise the appropriate
14 judgment, skill and safety for performing the
15 functions for which he or she is licensed, as verified
16 by a physician, unless the person is on inactive status
17 pursuant to Department regulations;

18 (G) The licensee has violated this Act or any rule
19 adopted by the Department pursuant to this Act; or

20 (H) The licensee has been convicted (or entered a
21 plea of guilty or nolo contendere ~~nolo contendere~~) by a
22 court of competent jurisdiction of a Class X, Class 1,
23 or Class 2 felony in this State or an out-of-state
24 equivalent offense.

25 (9) Prescribe education and training requirements in
26 the administration and use of opioid antagonists for all

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1 levels of EMS personnel based on the National EMS
2 Educational Standards and any modifications to those
3 curricula specified by the Department through rules
4 adopted pursuant to this Act.

5 (d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, or
6 PHRN who is a member of the Illinois National Guard or an
7 Illinois State Trooper or who exclusively serves as a volunteer
8 for units of local government with a population base of less
9 than 5,000 or as a volunteer for a not-for-profit organization
10 that serves a service area with a population base of less than
11 5,000 may submit an application to the Department for a waiver
12 of the fees described under paragraph (7) of subsection (d) of
13 this Section on a form prescribed by the Department.

14 The education requirements prescribed by the Department
15 under this Section must allow for the suspension of those
16 requirements in the case of a member of the armed services or
17 reserve forces of the United States or a member of the Illinois
18 National Guard who is on active duty pursuant to an executive
19 order of the President of the United States, an act of the
20 Congress of the United States, or an order of the Governor at
21 the time that the member would otherwise be required to fulfill
22 a particular education requirement. Such a person must fulfill
23 the education requirement within 6 months after his or her
24 release from active duty.

25 (e) In the event that any rule of the Department or an EMS
26 Medical Director that requires testing for drug use as a

1 condition of the applicable EMS personnel license conflicts
2 with or duplicates a provision of a collective bargaining
3 agreement that requires testing for drug use, that rule shall
4 not apply to any person covered by the collective bargaining
5 agreement.

6 (Source: P.A. 98-53, eff. 1-1-14; 98-463, eff. 8-16-13; 98-973,
7 eff. 8-15-14; 99-480, eff. 9-9-15; revised 10-4-18.)

8 (Text of Section after amendment by P.A. 100-1082)

9 Sec. 3.50. Emergency Medical Services personnel licensure
10 levels.

11 (a) "Emergency Medical Technician" or "EMT" means a person
12 who has successfully completed a course in basic life support
13 as approved by the Department, is currently licensed by the
14 Department in accordance with standards prescribed by this Act
15 and rules adopted by the Department pursuant to this Act, and
16 practices within an EMS System. A valid Emergency Medical
17 Technician-Basic (EMT-B) license issued under this Act shall
18 continue to be valid and shall be recognized as an Emergency
19 Medical Technician (EMT) license until the Emergency Medical
20 Technician-Basic (EMT-B) license expires.

21 (b) "Emergency Medical Technician-Intermediate" or "EMT-I"
22 means a person who has successfully completed a course in
23 intermediate life support as approved by the Department, is
24 currently licensed by the Department in accordance with
25 standards prescribed by this Act and rules adopted by the

1 Department pursuant to this Act, and practices within an
2 Intermediate or Advanced Life Support EMS System.

3 (b-5) "Advanced Emergency Medical Technician" or "A-EMT"
4 means a person who has successfully completed a course in basic
5 and limited advanced emergency medical care as approved by the
6 Department, is currently licensed by the Department in
7 accordance with standards prescribed by this Act and rules
8 adopted by the Department pursuant to this Act, and practices

9 within an Intermediate or Advanced Life Support EMS System.

10 (c) "Paramedic (EMT-P)" means a person who has successfully
11 completed a course in advanced life support care as approved by
12 the Department, is licensed by the Department in accordance
13 with standards prescribed by this Act and rules adopted by the
14 Department pursuant to this Act, and practices within an
15 Advanced Life Support EMS System. A valid Emergency Medical
16 Technician-Paramedic (EMT-P) license issued under this Act
17 shall continue to be valid and shall be recognized as a
18 Paramedic license until the Emergency Medical
19 Technician-Paramedic (EMT-P) license expires.

20 (c-5) "Emergency Medical Responder" or "EMR (First
21 Responder)" means a person who has successfully completed a
22 course in emergency medical response as approved by the
23 Department and provides emergency medical response services
24 prior to the arrival of an ambulance or specialized emergency
25 medical services vehicle, in accordance with the level of care
26 established by the National EMS Educational Standards

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1 Emergency Medical Responder course as modified by the
2 Department. An Emergency Medical Responder who provides
3 services as part of an EMS System response plan shall comply
4 with the applicable sections of the Program Plan, as approved
5 by the Department, of that EMS System. The Department shall
6 have the authority to adopt rules governing the curriculum,
7 practice, and necessary equipment applicable to Emergency
8 Medical Responders.

9 On August 15, 2014 (the effective date of Public Act
10 98-973) ~~this amendatory Act of the 98th General Assembly~~, a
11 person who is licensed by the Department as a First Responder
12 and has completed a Department-approved course in first
13 responder defibrillator training based on, or equivalent to,
14 the National EMS Educational Standards or other standards
15 previously recognized by the Department shall be eligible for
16 licensure as an Emergency Medical Responder upon meeting the
17 licensure requirements and submitting an application to the

18 Department. A valid First Responder license issued under this
19 Act shall continue to be valid and shall be recognized as an
20 Emergency Medical Responder license until the First Responder
21 license expires.

22 (c-10) All EMS Systems and licensees shall be fully
23 compliant with the National EMS Education Standards, as
24 modified by the Department in administrative rules, within 24
25 months after the adoption of the administrative rules.

26 (d) The Department shall have the authority and

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1 responsibility to:

2 (1) Prescribe education and training requirements,
3 which includes training in the use of epinephrine, for all
4 levels of EMS personnel except for EMRs, based on the
5 National EMS Educational Standards and any modifications
6 to those curricula specified by the Department through
7 rules adopted pursuant to this Act.

8 (2) Prescribe licensure testing requirements for all
9 levels of EMS personnel, which shall include a requirement
10 that all phases of instruction, training, and field
11 experience be completed before taking the appropriate
12 licensure examination. Candidates may elect to take the
13 appropriate National Registry examination in lieu of the
14 Department's examination, but are responsible for making
15 their own arrangements for taking the National Registry
16 examination. In prescribing licensure testing requirements
17 for honorably discharged members of the armed forces of the
18 United States under this paragraph (2), the Department
19 shall ensure that a candidate's military emergency medical
20 training, emergency medical curriculum completed, and
21 clinical experience, as described in paragraph (2.5), are
22 recognized.

23 (2.5) Review applications for EMS personnel licensure
24 from honorably discharged members of the armed forces of
25 the United States with military emergency medical
26

1 within one year after military discharge and shall contain:

2 (i) proof of successful completion of military emergency
3 medical training; (ii) a detailed description of the
4 emergency medical curriculum completed; and (iii) a
5 detailed description of the applicant's clinical
6 experience. The Department may request additional and
7 clarifying information. The Department shall evaluate the
8 application, including the applicant's training and
9 experience, consistent with the standards set forth under
10 subsections (a), (b), (c), and (d) of Section 3.10. If the
11 application clearly demonstrates that the training and
12 experience ~~meet~~ ~~meets~~ such standards, the Department shall
13 offer the applicant the opportunity to successfully
14 complete a Department-approved EMS personnel examination
15 for the level of license for which the applicant is
16 qualified. Upon passage of an examination, the Department
17 shall issue a license, which shall be subject to all
18 provisions of this Act that are otherwise applicable to the
19 level of EMS personnel license issued.

20 (3) License individuals as an EMR, EMT, EMT-I, A-EMT,
21 or Paramedic who have met the Department's education,
22 training and examination requirements.

23 (4) Prescribe annual continuing education and
24 relicensure requirements for all EMS personnel licensure
25 levels.

26 (5) Relicense individuals as an EMD, EMR, EMT, EMT-I,

1 A-EMT, PHRN, PHAPRN, PHPA, or Paramedic every 4 years,
2 based on their compliance with continuing education and
3 relicensure requirements as required by the Department

4 pursuant to this Act. Every 4 years, a Paramedic shall have
5 100 hours of approved continuing education, an EMT-I and an
6 advanced EMT shall have 80 hours of approved continuing
7 education, and an EMT shall have 60 hours of approved
8 continuing education. An Illinois licensed EMR, EMD, EMT,
9 EMT-I, A-EMT, Paramedic, ECRN, PHPA, PHAPRN, or PHRN whose
10 license has been expired for less than 36 months may apply
11 for reinstatement by the Department. Reinstatement shall
12 require that the applicant (i) submit satisfactory proof of
13 completion of continuing medical education and clinical
14 requirements to be prescribed by the Department in an
15 administrative rule; (ii) submit a positive recommendation
16 from an Illinois EMS Medical Director attesting to the
17 applicant's qualifications for retesting; and (iii) pass a
18 Department approved test for the level of EMS personnel
19 license sought to be reinstated.

20 (6) Grant inactive status to any EMR, EMD, EMT, EMT-I,
21 A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who
22 qualifies, based on standards and procedures established
23 by the Department in rules adopted pursuant to this Act.

24 (7) Charge a fee for EMS personnel examination,
25 licensure, and license renewal.

26 (7.5) Perform annual background checks of all

1 licensees and notify licensees and related EMS System
2 administrators of a conviction by a court of competent
3 jurisdiction of (or entry of a plea of guilty or nolo
4 contendere to) a Class X, Class 1, or Class 2 felony in
5 this State or an out-of-state equivalent offense.

6 (8) Suspend, revoke, or refuse to issue or renew the
7 license of any licensee, after an opportunity for an
8 impartial hearing before a neutral administrative law
9 judge appointed by the Director, where the preponderance of
10 the evidence shows one or more of the following:

11 (A) The licensee has not met continuing education

12 or relicensure requirements as prescribed by the
13 Department;

14 (B) The licensee has failed to maintain
15 proficiency in the level of skills for which he or she
16 is licensed;

17 (C) The licensee, during the provision of medical
18 services, engaged in dishonorable, unethical, or
19 unprofessional conduct of a character likely to
20 deceive, defraud, or harm the public;

21 (D) The licensee has failed to maintain or has
22 violated standards of performance and conduct as
23 prescribed by the Department in rules adopted pursuant
24 to this Act or his or her EMS System's Program Plan;

25 (E) The licensee is physically impaired to the
26 extent that he or she cannot physically perform the

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1 skills and functions for which he or she is licensed,
2 as verified by a physician, unless the person is on
3 inactive status pursuant to Department regulations;

4 (F) The licensee is mentally impaired to the extent
5 that he or she cannot exercise the appropriate
6 judgment, skill and safety for performing the
7 functions for which he or she is licensed, as verified
8 by a physician, unless the person is on inactive status
9 pursuant to Department regulations;

10 (G) The licensee has violated this Act or any rule
11 adopted by the Department pursuant to this Act; or

12 (H) The licensee has been convicted (or entered a
13 plea of guilty or nolo contendere ~~nolo contendere~~) by a
14 court of competent jurisdiction of a Class X, Class 1,
15 or Class 2 felony in this State or an out-of-state
16 equivalent offense.

17 (9) Prescribe education and training requirements in
18 the administration and use of opioid antagonists for all
19 levels of EMS personnel based on the National EMS

20 Educational Standards and any modifications to those
21 curricula specified by the Department through rules
22 adopted pursuant to this Act.

23 (d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN,
24 PHAPRN, PHPA, or PHRN who is a member of the Illinois National
25 Guard or an Illinois State Trooper or who exclusively serves as
26 a volunteer for units of local government with a population

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1 base of less than 5,000 or as a volunteer for a not-for-profit
2 organization that serves a service area with a population base
3 of less than 5,000 may submit an application to the Department
4 for a waiver of the fees described under paragraph (7) of
5 subsection (d) of this Section on a form prescribed by the
6 Department.

7 The education requirements prescribed by the Department
8 under this Section must allow for the suspension of those
9 requirements in the case of a member of the armed services or
10 reserve forces of the United States or a member of the Illinois
11 National Guard who is on active duty pursuant to an executive
12 order of the President of the United States, an act of the
13 Congress of the United States, or an order of the Governor at
14 the time that the member would otherwise be required to fulfill
15 a particular education requirement. Such a person must fulfill
16 the education requirement within 6 months after his or her
17 release from active duty.

18 (e) In the event that any rule of the Department or an EMS
19 Medical Director that requires testing for drug use as a
20 condition of the applicable EMS personnel license conflicts
21 with or duplicates a provision of a collective bargaining
22 agreement that requires testing for drug use, that rule shall
23 not apply to any person covered by the collective bargaining
24 agreement.

25 (Source: P.A. 99-480, eff. 9-9-15; 100-1082, eff. 8-24-19;
26 revised 10-4-18.)

1 (210 ILCS 50/3.89 new)

2 Sec. 3.89. Medical assisted transport providers.

3 (a) In this Section:

4 "Medical assisted transport provider" means an entity
5 licensed by the Department to provide non-emergency
6 bedside-to-bedside transportation of patients in compliance
7 with this Act or the rules adopted by the Department pursuant
8 to this Act, using a medical assisted transport vehicle.

9 "Medical assisted transport vehicle" means any publicly or
10 privately owned on-road vehicle that is equipped for, intended
11 to be used for, and operated for non-emergency
12 bedside-to-bedside transportation.

13 (b) The Department shall:

14 (1) require that all medical assisted transport
15 providers, both publicly and privately owned, be licensed
16 by the Department; and

17 (2) establish staffing, licensing, safety, and
18 training standards and requirements for medical assisted
19 transport providers through rules adopted under this Act,
20 including, but not limited to, the following:

21 (A) vehicle design, specification, operation, and
22 maintenance standards;

23 (B) safety equipment requirements and standards;

24 (C) medical supply and equipment requirements and
25 standards, including, but not limited to, the

1 requirement to have the following medical supply and
2 equipment items on each medical assisted transport
3 vehicle:

4 (i) a first aid kit; and

5 (ii) a communication device to contact local
6 EMS providers.

7 (D) training and hiring requirements, including,
8

9 but not limited to, the requirement that all staff
10 members providing medical assisted transport services
11 under this Section:

12 (i) have not been convicted by a court of
13 competent jurisdiction of (or have not entered a
14 plea of guilty or nolo contendere to) a Class X,
15 Class 1, or Class 2 felony in this State or an
16 out-of-state equivalent offense;

17 (ii) have been drug tested prior to hiring and
18 have passed such drug test; however, if that
19 testing for drug use conflicts with or duplicates a
20 provision of a collective bargaining agreement
21 that requires testing for drug use, this
22 subdivision shall not apply to any person covered
23 by that collective bargaining agreement;

24 (iii) have completed the safety training
25 specified in subsection (e) of Section 5-4.2 of the
26 Illinois Public Aid Code and appropriate training
in patient lifting and moving, which includes

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1 wheelchair transport via stairs;

2 (iv) have completed defensive driving training
3 equivalent to the National Safety Council's
4 Coaching the Van Driver 3 course;

5 (v) have completed basic first aid training
6 equivalent to the American Red Cross's First Aid
7 course; and

8 (vi) have completed cardiopulmonary
9 resuscitation (CPR) training; and

10 (E) annual license renewal and licensing
11 standards, including, but not limited to:

12 (i) licensing all medical assisted transport
13 providers that have met the Department's
14 requirements for licensure;

15 (ii) annually inspecting all licensed medical

16 assisted transport providers and relicensing
17 providers that have met the Department's
18 requirements for license renewal;

19 (iii) suspending, revoking, refusing to issue,
20 or refusing to renew the license of any medical
21 assisted transport provider, or that portion of a
22 license pertaining to a specific vehicle operated
23 by a provider, after an opportunity for a hearing
24 and when findings show that the provider or one or
25 more of its vehicles has failed to comply with the
26 rules adopted by the Department pursuant to this

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1 Act;

2 (iv) issuing an emergency suspension order for
3 any medical assisted transport provider or vehicle
4 licensed under this Act when the Director or his or
5 her designee has determined that an immediate or
6 serious danger to the public health, safety, and
7 welfare exists; suspension or revocation
8 proceedings that offer an opportunity for a
9 hearing shall be promptly initiated after the
10 emergency suspension order has been issued;

11 (v) prohibiting any medical assisted transport
12 provider from advertising, identifying its
13 vehicles, or disseminating information in a false
14 or misleading manner concerning the provider's
15 type and level of vehicles, location, response
16 times, level of personnel, licensure status, or
17 EMS System participation; and

18 (vi) charging each medical assisted transport
19 provider a fee that shall not exceed \$25 per
20 vehicle nor \$500 per provider; the fee shall be
21 submitted with each application for licensure and
22 license renewal.

23 (c) A medical assisted transport provider may provide

24 transport to a passenger who is ambulatory or is in a
25 wheelchair if all of the following requirements are met:

26 (1) The passenger needs no medical monitoring or

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1 clinical observation.

2 (2) The passenger is transported as follows:

3 (A) if the passenger resides in a facility licensed
4 under the Nursing Home Care Act, from the inside of his
5 or her room to a room at a physician's office or to a
6 ward, unit, or room of a hospital licensed under the
7 Hospital Licensing Act or operated under the
8 University of Illinois Hospital Act; or

9 (B) from a room at a physician's office or the
10 ward, unit, or room of a hospital licensed under the
11 Hospital Licensing Act or operated under the
12 University of Illinois Hospital Act to the inside of
13 his or her residence or, if the passenger resides in a
14 facility licensed under the Nursing Home Care Act, to
15 the inside of his or her room.

16 (d) A medical assisted transport provider may not transport
17 a passenger who meets any of the following conditions:

18 (1) He or she is acutely ill, wounded, or medically
19 unstable as determined by a licensed physician.

20 (2) He or she is experiencing an emergency medical
21 condition, an acute medical condition, or a sudden illness
22 or injury.

23 (3) He or she was administered a medication that might
24 prevent the passenger from caring for himself or herself.

25 (4) He or she requires active medical monitoring,
26 clinical observation, isolation precautions, supplemental

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1 oxygen that is not self-administered, continuous airway

2 management, suctioning during transport, or the
3 administration of intravenous fluids during transport.

4 (e) The Medical Assisted Transport Licensure Fund is
5 created as a special fund in the State treasury for the purpose
6 of receiving fines and fees collected by the Department of
7 Public Health pursuant to this Act. Moneys in the Fund shall be
8 used by the Department, subject to appropriation, to implement
9 this Section.

10 (210 ILCS 50/3.220)

11 Sec. 3.220. EMS Assistance Fund.

12 (a) There is hereby created an "EMS Assistance Fund" within
13 the State treasury, for the purpose of receiving fines and fees
14 collected by the Illinois Department of Public Health pursuant
15 to this Act.

16 (b) (Blank).

17 (b-5) All licensing, testing, and certification fees
18 authorized by this Act, excluding ambulance licensure fees,
19 within this fund shall be used by the Department for
20 administration, oversight, and enforcement of activities
21 authorized under this Act.

22 (c) All other moneys within this fund shall be distributed
23 by the Department to the EMS Regions for disbursement in
24 accordance with protocols established in the EMS Region Plans,
25 for the purposes of organization, development and improvement

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1 of Emergency Medical Services Systems, including but not
2 limited to training of personnel and acquisition, modification
3 and maintenance of necessary supplies, equipment and vehicles.

4 (d) All fees and fines collected pursuant to this Act shall
5 be deposited into the EMS Assistance Fund, except that: (1) all
6 fees collected under Section 3.86 in connection with the
7 licensure of stretcher van providers shall be deposited into
8 the Stretcher Van Licensure Fund; and (2) all fees collected
9 under Section 3.89 in connection with the licensure of medical
10 assisted transport providers shall be deposited into the
11 Medical Assisted Transport Licensure Fund.

13 Section 15. The Illinois Public Aid Code is amended by
14 changing Section 5-4.2 as follows:

15 (305 ILCS 5/5-4.2) (from Ch. 23, par. 5-4.2)

16 Sec. 5-4.2. Ambulance services payments.

17 (a) For ambulance services provided to a recipient of aid
18 under this Article on or after January 1, 1993, the Illinois
19 Department shall reimburse ambulance service providers at
20 rates calculated in accordance with this Section. It is the
21 intent of the General Assembly to provide adequate
22 reimbursement for ambulance services so as to ensure adequate
23 access to services for recipients of aid under this Article and
24 to provide appropriate incentives to ambulance service

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1 providers to provide services in an efficient and
2 cost-effective manner. Thus, it is the intent of the General
3 Assembly that the Illinois Department implement a
4 reimbursement system for ambulance services that, to the extent
5 practicable and subject to the availability of funds
6 appropriated by the General Assembly for this purpose, is
7 consistent with the payment principles of Medicare. To ensure
8 uniformity between the payment principles of Medicare and
9 Medicaid, the Illinois Department shall follow, to the extent
10 necessary and practicable and subject to the availability of
11 funds appropriated by the General Assembly for this purpose,
12 the statutes, laws, regulations, policies, procedures,
13 principles, definitions, guidelines, and manuals used to
14 determine the amounts paid to ambulance service providers under
15 Title XVIII of the Social Security Act (Medicare).

16 (b) For ambulance services provided to a recipient of aid
17 under this Article on or after January 1, 1996, the Illinois
18 Department shall reimburse ambulance service providers based
19 upon the actual distance traveled if a natural disaster,
20 weather conditions, road repairs, or traffic congestion
21 necessitates the use of a route other than the most direct

22 route.

23 (c) For purposes of this Section, "ambulance services"
24 includes medical transportation services provided by means of
25 an ambulance, medical assisted transportation, medi-car,
26 service car, or taxi.

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1 (c-1) For purposes of this Section, "ground ambulance
2 service" means medical transportation services that are
3 described as ground ambulance services by the Centers for
4 Medicare and Medicaid Services and provided in a vehicle that
5 is licensed as an ambulance by the Illinois Department of
6 Public Health pursuant to the Emergency Medical Services (EMS)
7 Systems Act.

8 (c-2) For purposes of this Section, "ground ambulance
9 service provider" means a vehicle service provider as described
10 in the Emergency Medical Services (EMS) Systems Act that
11 operates licensed ambulances for the purpose of providing
12 emergency ambulance services, or non-emergency ambulance
13 services, or both. For purposes of this Section, this includes
14 both ambulance providers and ambulance suppliers as described
15 by the Centers for Medicare and Medicaid Services.

16 (c-3) For purposes of this Section, "medi-car" means
17 transportation services provided to a patient who is confined
18 to a wheelchair and requires the use of a hydraulic or electric
19 lift or ramp and wheelchair lockdown when the patient's
20 condition does not require medical observation, medical
21 supervision, medical equipment, the administration of
22 medications, or the administration of oxygen.

23 (c-4) For purposes of this Section, "service car" means
24 transportation services provided to a patient by a passenger
25 vehicle where that patient does not require the specialized
26 modes described in subsection (c-1) or (c-3).

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1 (d) This Section does not prohibit separate billing by
2 ambulance service providers for oxygen furnished while
3 providing advanced life support services.

4 (e) ~~All Beginning with services rendered on or after July~~
5 ~~1, 2008,~~ all providers of non-emergency medical assisted
6 transportation, medi-car and service car transportation must
7 certify that the driver and employee attendant, as applicable,
8 have completed a safety program approved by the Department to
9 protect both the patient and the driver, prior to transporting
10 a patient. The provider must maintain this certification in its
11 records. The provider shall produce such documentation upon
12 demand by the Department or its representative. Failure to
13 produce documentation of such training shall result in recovery
14 of any payments made by the Department for services rendered by
15 a non-certified driver or employee attendant. Medical assisted
16 transportation, medi-car, ~~Medi-car~~ and service car providers
17 must maintain legible documentation in their records of the
18 driver and, as applicable, employee attendant that actually
19 transported the patient. Providers must recertify all drivers
20 and employee attendants every 3 years.

21 Notwithstanding the requirements above, any public
22 transportation provider of medi-car and service car
23 transportation that receives federal funding under 49 U.S.C.
24 5307 and 5311 need not certify its drivers and employee
25 attendants under this Section, since safety training is already
26 federally mandated.

1 (f) With respect to any policy or program administered by
2 the Department or its agent regarding approval of non-emergency
3 medical transportation by ground ambulance service providers,
4 including, but not limited to, the Non-Emergency
5 Transportation Services Prior Approval Program (NETSPAP), the
6 Department shall establish by rule a process by which ground
7 ambulance service providers of non-emergency medical
8 transportation may appeal any decision by the Department or its
9 agent for which no denial was received prior to the time of
10

11 transport that either (i) denies a request for approval for
12 payment of non-emergency transportation by means of ground
13 ambulance service or (ii) grants a request for approval of
14 non-emergency transportation by means of ground ambulance
15 service at a level of service that entitles the ground
16 ambulance service provider to a lower level of compensation
17 from the Department than the ground ambulance service provider
18 would have received as compensation for the level of service
19 requested. The rule shall be filed by December 15, 2012 and
20 shall provide that, for any decision rendered by the Department
21 or its agent on or after the date the rule takes effect, the
22 ground ambulance service provider shall have 60 days from the
23 date the decision is received to file an appeal. The rule
24 established by the Department shall be, insofar as is
25 practical, consistent with the Illinois Administrative
26 Procedure Act. The Director's decision on an appeal under this
Section shall be a final administrative decision subject to

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1 review under the Administrative Review Law.

2 (f-5) Beginning 90 days after July 20, 2012 (the effective
3 date of Public Act 97-842), (i) no denial of a request for
4 approval for payment of non-emergency transportation by means
5 of ground ambulance service, and (ii) no approval of
6 non-emergency transportation by means of ground ambulance
7 service at a level of service that entitles the ground
8 ambulance service provider to a lower level of compensation
9 from the Department than would have been received at the level
10 of service submitted by the ground ambulance service provider,
11 may be issued by the Department or its agent unless the
12 Department has submitted the criteria for determining the
13 appropriateness of the transport for first notice publication
14 in the Illinois Register pursuant to Section 5-40 of the
15 Illinois Administrative Procedure Act.

16 (g) Whenever a patient covered by a medical assistance
17 program under this Code or by another medical program
18 administered by the Department, including a patient covered
19

20 under the State's Medicaid managed care program, is being
21 transported from a facility and requires non-emergency
22 transportation including ground ambulance, medi-car, or
23 service car transportation, a Physician Certification
24 Statement as described in this Section shall be required for
25 each patient. Facilities shall develop procedures for a
26 licensed medical professional to provide a written and signed
Physician Certification Statement. The Physician Certification

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1 Statement shall specify the level of transportation services
2 needed and complete a medical certification establishing the
3 criteria for approval of non-emergency ambulance
4 transportation, as published by the Department of Healthcare
5 and Family Services, that is met by the patient. This
6 certification shall be completed prior to ordering the
7 transportation service and prior to patient discharge. The
8 Physician Certification Statement is not required prior to
9 transport if a delay in transport can be expected to negatively
10 affect the patient outcome.

11 The medical certification specifying the level and type of
12 non-emergency transportation needed shall be in the form of the
13 Physician Certification Statement on a standardized form
14 prescribed by the Department of Healthcare and Family Services.
15 Within 75 days after July 27, 2018 (the effective date of
16 Public Act 100-646) ~~this amendatory Act of the 100th General~~
17 ~~Assembly~~, the Department of Healthcare and Family Services
18 shall develop a standardized form of the Physician
19 Certification Statement specifying the level and type of
20 transportation services needed in consultation with the
21 Department of Public Health, Medicaid managed care
22 organizations, a statewide association representing ambulance
23 providers, a statewide association representing hospitals, 3
24 statewide associations representing nursing homes, and other
25 stakeholders. The Physician Certification Statement shall
26 include, but is not limited to, the criteria necessary to

1 demonstrate medical necessity for the level of transport needed
2 as required by (i) the Department of Healthcare and Family
3 Services and (ii) the federal Centers for Medicare and Medicaid
4 Services as outlined in the Centers for Medicare and Medicaid
5 Services' Medicare Benefit Policy Manual, Pub. 100-02, Chap.
6 10, Sec. 10.2.1, et seq. The use of the Physician Certification
7 Statement shall satisfy the obligations of hospitals under
8 Section 6.22 of the Hospital Licensing Act and nursing homes
9 under Section 2-217 of the Nursing Home Care Act.

10 Implementation and acceptance of the Physician Certification
11 Statement shall take place no later than 90 days after the
12 issuance of the Physician Certification Statement by the
13 Department of Healthcare and Family Services.

14 Pursuant to subsection (E) of Section 12-4.25 of this Code,
15 the Department is entitled to recover overpayments paid to a
16 provider or vendor, including, but not limited to, from the
17 discharging physician, the discharging facility, and the
18 ground ambulance service provider, in instances where a
19 non-emergency ground ambulance service is rendered as the
20 result of improper or false certification.

21 Beginning October 1, 2018, the Department of Healthcare and
22 Family Services shall collect data from Medicaid managed care
23 organizations and transportation brokers, including the
24 Department's NETSPAP broker, regarding denials and appeals
25 related to the missing or incomplete Physician Certification
26 Statement forms and overall compliance with this subsection.

1 The Department of Healthcare and Family Services shall publish
2 quarterly results on its website within 15 days following the
3 end of each quarter.

4 (h) On and after July 1, 2012, the Department shall reduce
5 any rate of reimbursement for services or other payments or
6 alter any methodologies authorized by this Code to reduce any

7 rate of reimbursement for services or other payments in
8 accordance with Section 5-5e.

9 (i) On and after July 1, 2018, the Department shall
10 increase the base rate of reimbursement for both base charges
11 and mileage charges for ground ambulance service providers for
12 medical transportation services provided by means of a ground
13 ambulance to a level not lower than 112% of the base rate in
14 effect as of June 30, 2018.

15 (j) On and after July 1, 2019, the Department shall:

16 (1) set the base rate of reimbursement for base charges
17 for medical assisted transportation at a level not lower
18 than 250% of the base rate for medi-car services in effect
19 on July 1, 2019;

20 (2) set the mileage rate of reimbursement for mileage
21 for medical assisted transportation at a level not lower
22 than 250% of the mileage rate for medi-car services in
23 effect on July 1, 2019;

24 (3) set a rate for bed/chair lift assist for medical
25 assisted transportation at a level not lower than 250% of
26 the rate for an additional attendant for medicare services

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1 in effect on July 1, 2019; and

2 (4) set a rate for stair lift assist for medical
3 assisted transportation at a level not to exceed \$75 per
4 stair lift assist over 4 stairs.

5 (Source: P.A. 100-587, eff. 6-4-18; 100-646, eff. 7-27-18;
6 revised 8-27-18.)

7 Section 95. No acceleration or delay. Where this Act makes
8 changes in a statute that is represented in this Act by text
9 that is not yet or no longer in effect (for example, a Section
10 represented by multiple versions), the use of that text does
11 not accelerate or delay the taking effect of (i) the changes
12 made by this Act or (ii) provisions derived from any other
13 Public Act.