

**OUTAGAMIE COUNTY BOARD MEETING
JUNE 13, 2017**

RESOLUTION NO. 28—2017-18

Supervisor T. Krueger moved, seconded by Supervisor Patience, for adoption.

RESOLUTION NO. 28—2017-18 IS ADOPTED.

1. THOMPSON	YES	13. WEGAND	YES	25. NOOYEN	YES
2. MILLER	YES	14. DE GROOT	YES	26. DUNCAN	YES
3. GRADY	YES	15. VANDEN HEUVEL	Absent	27. CULBERTSON	Absent
4. PATIENCE	YES	16. LEMANSKI	Absent	28. STURN	YES
5. GABRIELSON	YES	17. CROATT	YES	29. BUCHMAN	YES
6. FOSS	YES	18. SPEARS	YES	30. GRIESBACH	YES
7. HAMMEN	YES	19. STUECK	Absent	31. CLEGG	YES
8. T. KRUEGER	YES	20. THOMAS	YES	32. VANDERHEIDEN	YES
9. J. KRUEGER	YES	21. THYSSEN	YES	O'CONNOR-SCHEVERS	YES
10. LAMERS	YES	22. HAGEN	Absent	34. RETTLER	YES
11. MEYER	YES	23. KLEMP	YES	35. MELCHERT	YES
12. McDANIEL	YES	24. PLEUSS	YES	36. SUPRISE	YES
Item 16		Passed (31 Y - 0 N - 0 A - 5 Absent)			Majority Vote >

RESOLUTION NO.: 28—2017-18

TO THE HONORABLE, THE OUTAGAMIE COUNTY BOARD OF SUPERVISORS

LADIES AND GENTLEMEN:

MAJORITY

1 2017 Assembly Bill 151 creates an approval process and education requirements for
2 community paramedics, community emergency medical technicians, and community
3 emergency medical services providers in the state. A community paramedic or a
4 community emergency medical technician may perform services 1) for which he or she
5 is trained under the training program; 2) that are not duplicative of services already
6 being provided to a patient; and 3) that are either approved by the hospital, clinic, or
7 physician for which he or she is an employee or contractor or that are incorporated in the
8 patient care protocol submitted by the community emergency medical services provider.
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10 The bill also specifies that an emergency medical technician acting upon a delegation by
11 a health care provider does not violate the actions authorized by the Department of
12 Health Services for emergency services when performing actions in accordance with the
13 delegation.
14

15 Assembly Amendment 1 harmonizes the terminology used in the bill with that in 2017
16 Assembly Bill 59, including the use of the umbrella term “emergency medical services
17 provider” to refer to various emergency services providers.
18

19 This resolution supports legislation establishing an approval process for paramedics,
20 emergency medical technicians, and emergency medical services providers to provide
21 community services as described in 2017 Assembly Bill 151.
22

23 NOW THEREFORE, the undersigned members of the Public Safety Committee recommend
24 adoption of the following resolution.

25 BE IT RESOLVED, that the Outagamie County Board of Supervisors does support legislation
26 establishing an approval process for paramedics, emergency medical technicians, and emergency
27 medical services providers to provide community services as described in 2017 Assembly Bill 151, and


28 BE IT FINALLY RESOLVED, that the Outagamie County Clerk be directed to forward a copy
29 of this resolution to the Outagamie County Lobbyist for distribution to Governor Walker, the
30 Legislature, and Wisconsin Counties Association.


31 Dated this 13th day of June 2017
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Respectfully Submitted,

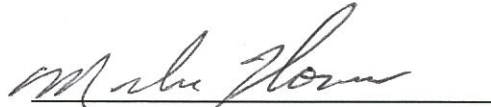
PUBLIC SAFETY COMMITTEE


James Duncan


Lee W. Hammen


Katrin Patience


Tony Krueger


Mike Thomas

Duly and officially adopted by the County Board on: June 13, 2017

Signed: 
Board Chairperson


County Clerk

Approved: 6.19.17

Vetoed: _____

Signed: 
County Executive

2017 - 2018 LEGISLATURE

2017 ASSEMBLY BILL 151

March 17, 2017 - Introduced by Representatives LOUDENBECK, SHANKLAND, ANDERSON, BEBCEAU, BERNIER, BOWEN, E. BROOKS, CONSIDINE, FELZKOWSKI, KERKMAN, KREMER, KULP, MEYERS, MURPHY, MURSAG, NOVAE, QUINN, RIPP, ROHKASTE, SINICKI, SNYDER, TAUCHEN, C. TAYLOR, TITTL, VBUWIK, WACHS and BRANTMAN, cosponsored by Senators MOULTON, BEWLEY, CARPENTER, COWLES, FEYEN, HANSEN, MILLER, OLSEN, PETROWSKI, RINGHAND, L. TAYLOR, VINEHOUT and WIRCH. Referred to Committee on Health.

AN ACT to amend 256.01 (3) and 256.12 (2) (a); and to create 256.04 (10), 256.15 (6p), 256.205, 256.21 and 256.215 of the statutes; relating to: community paramedics, community emergency medical technicians, community emergency medical services providers, and services provided by emergency medical technicians.

Analysis by the Legislative Reference Bureau

This bill creates an approval process for community paramedics, community emergency medical technicians, and community emergency medical services providers. The bill also specifies that an emergency medical technician who is acting upon a delegation by a health care provider does not violate the actions authorized by the Department of Health Services for emergency services when performing actions in accordance with the delegation.

The bill establishes criteria for an approval as a community paramedic or community emergency medical technician, including completion of a training program approved by DHS. An individual may provide services as a community paramedic or community emergency medical technician only if he or she is a volunteer for or an employee of an ambulance service provider or nontransporting emergency medical technician provider that has approval as a community emergency medical services provider or if he or she is an employee of or under contract with a hospital, clinic, or physician. A community paramedic or community emergency medical technician is required to follow any protocols and supervisory

standards established by DHS or by a medical director. A community paramedic or community emergency medical technician may perform services 1) for which he or she is trained under the training program; 2) that are not duplicative of services already being provided to a patient; and 3) that are either approved by the hospital, clinic, or physician for which he or she is an employee or contractor or that are incorporated in the patient care protocol submitted by the community emergency medical services provider.

The bill also establishes criteria for ambulance service providers and nontransporting emergency medical technician providers to be approved as community emergency medical services providers including establishing, submitting to DHS, and maintaining patient care protocols for use by community paramedics or community emergency medical technicians and providing a list of each community paramedic or community emergency medical technician of the community emergency medical services provider. A community emergency medical services provider may include in its patient care protocols only those services that do not require a license, certificate, or other credential from any of the following examining boards: medical; physical or occupational therapy; podiatry; nursing; chiropractic; dentistry; optometry; pharmacy; psychology; marriage and family therapy, professional counseling, and social work; or hearing and speech or as an acupuncturist.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 256.01 (3) of the statutes is amended to read:

256.01 (3) "Ambulance service provider" means a person engaged primarily in the business of transporting sick, disabled, or injured individuals by ambulance to or from facilities or institutions providing health services.

SECTION 2. 256.04 (10) of the statutes is created to read:

256.04 (10) Prepare recommendations on training and approval qualifications for community paramedics and community emergency medical technicians.

SECTION 3. 256.12 (2) (a) of the statutes is amended to read:

256.12 (2) (a) Any county, city, town, village, hospital, ambulance service

0 department, conduct an emergency medical services program using emergency
 1 medical technicians — paramedics for the delivery of emergency medical care to sick,
 2 disabled, or injured individuals at the scene of an emergency and during transport
 3 to a hospital, while in the hospital emergency department until responsibility for
 4 care is assumed by the regular hospital staff, and during transfer of a patient
 5 between health care facilities. An ambulance service provider may, after submission
 6 of a plan approved by the department, conduct an emergency medical services
 7 program using emergency medical technicians — paramedics for the delivery of
 8 emergency medical care to sick, disabled, or injured individuals during transfer of
 9 the individuals between health care facilities. Nothing in this section prohibits an
 10 emergency medical services program from using community paramedics and
 11 community emergency medical technicians for services described in ss. 256.205 (6)
 12 and 256.21 (6) or from providing nonemergency services in accordance with sub. (6p).
 13 Nothing in this section shall be construed to prohibit the operation of fire
 14 department, police department, for-profit ambulance service provider, or other
 15 emergency vehicles using the services of emergency medical technicians —
 16 paramedics in conjunction with a program approved by the department. Hospitals
 17 that offer approved training courses for emergency medical technicians —
 18 paramedics should, if feasible, serve as the base of operation for approved programs
 19 using emergency medical technicians — paramedics.

1 SECTION 4. 256.15 (6p) of the statutes is created to read:
 2 256.15 (6p) DELEGATION FROM A HEALTH CARE PROVIDER. An emergency medical
 3 technician who is acting upon a delegation by a health care provider does not violate
 4 the actions authorized for emergency services under sub. (6a) for actions taken in
 5 accordance with that delegation.

SECTION 5. 256.205 of the statutes is created to read:
 256.205 Community paramedics. (1) DEFINITION. In this section,
 "community paramedic" means an individual who has obtained an approval issued
 under sub. (2).
 (2) DEPARTMENTAL APPROVAL. No person may use the title "community
 paramedic" unless he or she obtains an approval from the department issued under
 this section to provide services as a community paramedic. To be eligible for an
 approval by the department as a community paramedic, an individual shall meet all
 of the following criteria:
 (a) The individual is licensed as an emergency medical technician —
 paramedic, that license is not suspended or revoked, and the individual is not the
 subject of an action under s. 256.15 (11).
 (b) The individual has the equivalent of 2 years of service as an emergency
 medical technician — paramedic.
 (c) The individual successfully completes a training program that has been
 approved by the department under sub. (3).
 (d) The individual submits an application for the approval on a form specified
 by the department.
 (e) The individual satisfies any other requirements established by the
 department.
 (3) TRAINING PROGRAM. The department shall, after consulting the board,
 approve training programs for community paramedics that include clinical
 experience, that provide flexibility in addressing local service needs, and that meet
 any other criteria established by the department.

(4) AFFILIATION. A community paramedic may provide services under sub. (6)
 only if he or she is a volunteer for or an employee of a community emergency medical
 services provider, as defined in s. 256.215 (1) (a), or if he or she is an employee of or
 under contract with a hospital, clinic, or physician.

(5) REQUIREMENTS. (a) A community paramedic shall follow any protocols and
 supervisory standards established by the department or by a medical director.

(b) A community paramedic is subject to certification, disciplinary, complaint,
 and other regulatory requirements that apply to emergency medical technicians
 under s. 256.15.

(6) SERVICES PROVIDED. Notwithstanding the actions authorized for emergency
 services under s. 256.15 (6n), a community paramedic may provide services for which
 he or she is trained under a training program approved by the department under sub.
 (3), that are not duplicative of services already being provided to a patient, and that
 are approved by the hospital, clinic, or physician for which the community paramedic
 is an employee or contractor or are incorporated in the patient care protocols under
 s. 256.215 (2) (b).

SECTION 6. 256.21 of the statutes is created to read:
 256.21 Community emergency medical technicians. (1) DEFINITION. In
 this section, "community emergency medical technician" means an individual who
 has obtained an approval issued under sub. (2).

(2) DEPARTMENTAL APPROVAL. No person may use the title "community
 emergency medical technician" unless he or she obtains an approval from the
 department issued under this section to provide services as a community emergency
 medical technician. To be eligible for an approval by the department as a community
 emergency medical technician, an individual shall meet all of the following criteria:

(a) The individual is licensed as an emergency medical technician of any level,
 that license is not suspended or revoked, and the individual is not the subject of an
 action under s. 256.15 (11).

(c) The individual successfully completes a training program that has been approved by the department under sub. (3).

(d) The individual submits an application for the approval on a form specified by the department.

(e) The individual satisfies any other requirements established by the department.

(3) TRAINING PROGRAM. The department shall, after consulting the board, approve training programs for community emergency medical technicians that include clinical experience, that provide flexibility in addressing local service needs, and that meet any other criteria established by the department.

(4) AFFILIATION. A community emergency medical technician may provide services under sub. (6) only if he or she is a volunteer for or an employee of a community emergency medical services provider, as defined in s. 256.215 (1) (a), or if he or she is an employee of or under contract with a hospital, clinic, or physician.

(5) REQUIREMENTS. (a) A community emergency medical technician shall follow any protocols and supervisory standards established by the department or by a medical director.

(b) A community emergency medical technician is subject to certification, disciplinary, complaint, and other regulatory requirements that apply to emergency medical technicians under s. 256.15.

(6) SERVICES PROVIDED. Notwithstanding the actions authorized for emergency services under s. 256.15 (6a), a community emergency medical technician may provide services for which he or she is trained under a training program approved by the department under sub. (3), that are not duplicative of services already being provided to a patient, and that are approved by the hospital, clinic, or physician for which the community emergency medical technician is an employee or contractor or are incorporated in the patient care protocols under s. 256.215 (2) (b).

SECTION 7. 256.215 of the statutes is created to read:

256.215 Providers of community emergency medical services. (1)

DEFINITIONS. In this section:

(a) "Community emergency medical services provider" means an emergency medical services provider that has approval from the department for its personnel to provide community emergency medical services under sub. (2).

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1 256.15 (6p) DELEGATION FROM A HEALTH CARE PROVIDER. An emergency medical
 2 ~~technician services practitioner~~ who is acting upon a delegation by a health care
 3 provider does not violate the actions authorized for emergency services under sub.
 4 (6n) for actions taken in accordance with that delegation.”.

5 **5.** Page 5, line 16: after that line insert:

6 “SECTION 5m. 256.205 (2) (a) and (b) and (5) (b) of the statutes, as created by
 7 2017 Wisconsin Act (this act), are amended to read:

8 (2) (a) The individual is licensed as ~~an emergency medical technician—~~
 9 ~~paramedic a paramedic~~, that license is not suspended or revoked, and the individual
 10 is not the subject of an action under s. 256.15 (11).

11 (b) The individual has the equivalent of 2 years of service as ~~an emergency~~
 12 ~~medical technician—paramedic a paramedic~~.

13 (5) (b) A community paramedic is subject to certification, disciplinary,
 14 complaint, and other regulatory requirements that apply to emergency medical
 15 ~~technicians services practitioners~~ under s. 256.15.”.

16 **6.** Page 7, line 7: after that line insert:

17 “SECTION 6m. 256.21 (title), (1), (2) (intro.), (a) and (b), (3), (4), (5) (a) and (b)
 18 and (6) of the statutes, as created by 2017 Wisconsin Act (this act), are amended
 19 to read:

20 **256.21 Community emergency medical ~~technicians services~~**
 21 **practitioners.** (1) DEFINITION. In this section, “community emergency medical
 22 ~~technician services practitioner~~” means an individual who has obtained an approval
 23 issued under sub. (2).

1 (2) (intro.) No person may use the title “community emergency medical
2 ~~technician~~ services practitioner” unless he or she obtains an approval from the
3 department issued under this section to provide services as a community emergency
4 medical ~~technician~~ services practitioner. To be eligible for an approval by the
5 department as a community emergency medical ~~technician~~ services practitioner, an
6 individual shall meet all of the following criteria:

7 (a) The individual is licensed as an emergency medical ~~technician~~ services
8 practitioner of any level, that license is not suspended or revoked, and the individual
9 is not the subject of an action under s. 256.15 (11).

10 (b) The individual has the equivalent of 2 years of service as an emergency
11 medical ~~technician~~ services practitioner at any level.

12 (3) TRAINING PROGRAM. The department shall, after consulting the board,
13 approve training programs for community emergency medical ~~technicians~~ services
14 practitioners that include clinical experience, that provide flexibility in addressing
15 local service needs, and that meet any other criteria established by the department.

16 (4) AFFILIATION. A community emergency medical ~~technician~~ services
17 practitioner may provide services under sub. (6) only if he or she is a volunteer for
18 or an employee of a community emergency medical services provider, as defined in
19 s. 256.215 (1) (a), or if he or she is an employee of or under contract with a hospital,
20 clinic, or physician.

21 (5) REQUIREMENTS. (a) A community emergency medical ~~technician~~ services
22 practitioner shall follow any protocols and supervisory standards established by the
23 department or by a medical director.

1 (b) A community emergency medical ~~technician services practitioner~~ is subject
2 to certification, disciplinary, complaint, and other regulatory requirements that
3 apply to emergency medical ~~technicians services practitioners~~ under s. 256.15.

4 (6) SERVICES PROVIDED. Notwithstanding the actions authorized for emergency
5 services under s. 256.15 (6n), a community emergency medical ~~technician services~~
6 ~~practitioner~~ may provide services for which he or she is trained under a training
7 program approved by the department under sub. (3), that are not duplicative of
8 services already being provided to a patient, and that are approved by the hospital,
9 clinic, or physician for which the community emergency medical ~~technician services~~
10 ~~practitioner~~ is an employee or contractor or are incorporated in the patient care
11 protocols under s. 256.215 (2) (b).”

12 7. Page 8, line 21: after that line insert:

13 “SECTION 7m. 256.215 (1) (b) and (d) and (2) (intro.), (b) and (c) of the statutes,
14 as created by 2017 Wisconsin Act (this act), are amended to read:

15 (1) (b) “Community emergency medical ~~technician services practitioner~~” has
16 the meaning given under s. 256.21 (1).

17 (d) “Emergency medical services provider” means an emergency medical
18 services program under s. 256.12 that provides services as a nontransporting
19 emergency medical ~~technician services practitioner~~ provider or an ambulance
20 service provider licensed under s. 256.15 (5).

21 (2) (intro.) No emergency medical services provider may advertise as providing
22 community emergency medical services or may advertise having community
23 paramedics or community emergency medical ~~technicians services practitioners~~
24 unless the emergency medical services provider has approval from the department

1 under this subsection. To be eligible for approval to provide community emergency
2 medical services, an emergency medical services provider shall satisfy all of the
3 following criteria:

4 (b) The emergency medical services provider establishes, submits to the
5 department, and maintains patient care protocols corresponding to the appropriate
6 service level to be used by a community paramedic or a community emergency
7 ~~medical technician services practitioner~~. The emergency medical services provider
8 may include in a patient care protocol only those services that do not require a
9 license, certificate, or other credential under subch. II, III, IV, or VII of ch. 448 or ch.
10 441, 446, 447, 449, 450, 451, 455, 457, or 459 to provide.

11 (c) The emergency medical services provider agrees to provide to the
12 department a list identifying each community paramedic and community emergency
13 ~~medical technician services practitioner~~ providing community emergency medical
14 services as a volunteer or employee of that emergency medical services provider. If
15 the emergency medical services provider is approved under this subsection as a
16 community emergency medical services provider, the emergency medical services
17 provider shall provide and update its list of community paramedics and community
18 emergency medical ~~technicians~~ services practitioners.

19 **SECTION 8m. Effective dates.** This act takes effect on the day after
20 publication, except as follows:

21 (1) TERMINOLOGY CHANGE RECONCILIATION. If either 2017 Assembly Bill 59 or
22 2017 Senate Bill 24 is enacted into law, the treatment of sections 256.04 (10) (by
23 SECTION 2m), 256.15 (6p) (by SECTION 4m), 256.205 (2) (a) and (b) and (5) (b) (by
24 SECTION 5m), 256.21 (title), (1), (2) (intro.), (a), and (b), (3), (4), (5) (a) and (b), and (6)
25 (by SECTION 6m), and 256.215 (1) (b) and (d) and (2) (intro.), (b), and (c) (by SECTION

2017 - 2018 Legislature

- 7 -

LRBa0176/1
TJD:klm

1 7m) of the statutes and the repeal and recreation of section 256.12 (2) (a) of the
2 statutes take effect on the effective date of 2017 Wisconsin Act ... (Assembly Bill 59)
3 or 2017 Wisconsin Act (Senate Bill 24) or on the effective date of 2017 Wisconsin
4 Act (Assembly Bill 151), whichever is later. If either 2017 Assembly Bill 59 or 2017
5 Senate Bill 24 is not enacted into law in the 2017-18 legislative session, the
6 treatment of sections 256.04 (10) (by SECTION 2m), 256.15 (6p) (by SECTION 4m),
7 256.205 (2) (a) and (b) and (5) (b) (by SECTION 5m), 256.21 (title), (1), (2) (intro.), (a),
8 and (b), (3), (4), (5) (a) and (b), and (6) (by SECTION 6m), and 256.215 (1) (b) and (d)
9 and (2) (intro.), (b), and (c) (by SECTION 7m) of the statutes and the repeal and
10 recreation of section 256.12 (2) (a) of the statutes are void.”

11

(END)



WISCONSIN LEGISLATIVE COUNCIL
AMENDMENT MEMO

2017 Assembly Bill 151	Assembly Amendment 1
<i>Memo published: April 3, 2017</i>	<i>Contact: Brian Larson, Senior Staff Attorney</i>

2017 ASSEMBLY BILL 151

2017 Assembly Bill 151 creates an approval process for community paramedics, community emergency medical technicians, and community emergency medical services providers in the state. The bill also specifies that an emergency medical technician acting upon a delegation by a health care provider does not violate the actions authorized by DHS for emergency services when performing actions in accordance with the delegation.

ASSEMBLY AMENDMENT 1

Assembly Amendment 1 harmonizes the terminology used in the bill with that in 2017 Assembly Bill 59, including the use of the umbrella term "emergency medical services provider" to refer to various emergency service providers.

BILL HISTORY

On March 27, 2017, Assembly Amendment 1 was offered by Representative Loudenbeck. On March 29, 2017, the Assembly Committee on Health recommended adoption of the amendment and passage of the bill, as amended, on a vote of Ayes, 12; Noes, 0.

BL:ksm