

Rep. Sandra M. Pihos

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Filed: 4/10/2013

09800HB1729ham002

LRB098 06704 CEL 44155 a

AMENDMENT TO HOUSE BILL 1729

AMENDMENT NO. _____. Amend House Bill 1729 by replacing everything after the enacting clause with the following:

"Section 5. The Emergency Medical Services (EMS) Systems Act is amended by changing Section 2 and by adding Section 3.33 as follows:

7 (210 ILCS 50/2) (from Ch. 111 1/2, par. 5502)

Sec. 2. Legislative intent; construction of Act. The Legislature finds and declares that emergency medical services are essential services in the State of Illinois and it is the intent of this legislation to provide the State with systems for emergency medical services by establishing within the State Department of Public Health a central authority responsible for the coordination and integration of all activities within the State concerning pre-hospital and inter-hospital emergency medical services, as well as non-emergency medical transports,

and the overall planning, evaluation, and regulation of pre-hospital emergency medical services systems.

The provisions of this Act shall not be construed to deny emergency medical services to persons outside the boundaries of this State nor to limit, restrict, or prevent any cooperative agreement for the provision of emergency medical services between this State, or any of its political subdivisions, and any other State or its political subdivisions or a federal agency.

The provisions of this Act shall not be construed to regulate the emergency transportation of persons by friends or family members, in personal vehicles that are not ambulances, specialized emergency medical service vehicles, first response vehicles or medical carriers.

This legislation is intended to provide minimum standards for the statewide delivery of EMS services. It is recognized, however, that diversities exist between different areas of the State, based on geography, location of health care facilities, availability of personnel, and financial resources. The Legislature therefore intends that the implementation and enforcement of this Act by the Illinois Department of Public Health accommodate those varying needs and interests to the greatest extent possible without jeopardizing appropriate standards of medical care, through the Department's exercise of the waiver provision of this Act and its adoption of rules pursuant to this Act.

(Source: P.A. 88-1; 89-177, eff. 7-19-95.) 1

2 (210 ILCS 50/3.33 new)

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Sec. 3.33. Areas without ambulatory services. In any county in which an ambulance service ceases operations and leaves a geographic area of that county without timely ambulance coverage, the County Administrator and County Board Chairman shall submit a written plan for covering that area to the closest EMS System Medical Director. This plan must define what ambulance provider or providers will now cover the affected area, what their range of estimated average response times will be for the area in need of coverage, any anticipated negative impacts on the geographic area previously covered by the newly-closed ambulance service or the geographic area normally covered by the ambulance provider or providers which will fill that gap, and any expected gaps in ambulance service to the geographic area. This plan shall be submitted by the county within 15 days after its initial notification of an ambulance service closing. The EMS System Medical Director shall review and submit a

copy of this plan to the Department along with a written letter of support or denial.".