

LEGISLATURE OF NEBRASKA
ONE HUNDRED SIXTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 893

Introduced by Bostelman, 23.

Read first time January 09, 2020

Committee: Health and Human Services

1 A BILL FOR AN ACT relating to emergency medical services; to amend
2 sections 13-1801, 23-1821, 28-907, 28-929, 28-929.01, 28-930,
3 28-931, 28-931.01, 38-1202, 38-1203, 38-1209, 38-1210, 38-1211,
4 38-1213, 38-1226, 38-1228, 38-1233, 38-1234, 48-115, 71-507, 71-509,
5 71-8226, 71-8227, 71-8236, 71-8237, 71-8240, 71-8248, 71-8249,
6 71-8251, and 71-8253, Reissue Revised Statutes of Nebraska, sections
7 13-303, 28-934, 38-1201, 38-1204, 38-1204.01, 38-1206.01,
8 38-1207.01, 38-1207.02, 38-1208, 38-1208.01, 38-1208.02, 38-1215,
9 38-1216, 38-1217, 38-1218, 38-1224, 38-1225, 38-1232, and 38-1237,
10 Revised Statutes Cumulative Supplement, 2018, and section 38-1220,
11 Revised Statutes Supplement, 2019; to define and redefine terms; to
12 provide for community paramedic and critical care paramedic practice
13 and discipline of training agencies; to change the scope of practice
14 of emergency care providers; to change provisions relating to the
15 State Trauma Advisory Board; to eliminate powers and duties; to
16 harmonize provisions; to eliminate obsolete provisions; and to
17 repeal the original sections.
18 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 13-303, Revised Statutes Cumulative Supplement,
2 2018, is amended to read:

3 13-303 The county boards of counties and the governing bodies of
4 cities and villages may establish an emergency medical service, including
5 the provision of scheduled and unscheduled ambulance service, as a
6 governmental service either within or without the county or municipality,
7 as the case may be. The county board or governing body may contract with
8 any city, person, firm, or corporation licensed as an emergency medical
9 service for emergency medical care by ~~out-of-hospital~~ emergency care
10 providers. Each may enter into an agreement with the other under the
11 Interlocal Cooperation Act or Joint Public Agency Act for the purpose of
12 establishing an emergency medical service or may provide a separate
13 service for itself. Public funds may be expended therefor, and a
14 reasonable service fee may be charged to the user. Before any such
15 service is established under the authority of this section, the county
16 board or the governing bodies of cities and villages shall hold a public
17 hearing after giving at least ten days' notice thereof, which notice
18 shall include a brief summary of the general plan for establishing such
19 service, including an estimate of the initial cost and the possible
20 continuing cost of operating such service. If the board or governing body
21 after such hearing determines that an emergency medical service for
22 emergency medical care by ~~out-of-hospital~~ emergency care providers is
23 needed, it may proceed as authorized in this section. The authority
24 granted in this section shall be cumulative and supplementary to any
25 existing powers heretofore granted. Any county board of counties and the
26 governing bodies of cities and villages may pay their cost for such
27 service out of available general funds or may levy a tax for the purpose
28 of providing the service, which levy shall be in addition to all other
29 taxes and shall be in addition to restrictions on the levy of taxes
30 provided by statute, except that when a rural or suburban fire protection
31 district provides the service, the county shall pay the cost for the

1 county service by levying a tax on that property not in the rural or
2 suburban fire protection district providing the service. The levy shall
3 be subject to subsection (10) of section 77-3442 or section 77-3443, as
4 applicable.

5 Sec. 2. Section 13-1801, Reissue Revised Statutes of Nebraska, is
6 amended to read:

7 13-1801 If any legal action shall be brought against any municipal
8 police officer, constable, county sheriff, deputy sheriff, firefighter,
9 ~~out-of-hospital~~ emergency care provider, or other elected or appointed
10 official of any political subdivision, who is an employee as defined in
11 section 48-115, whether such person is a volunteer or partly paid or
12 fully paid, based upon the negligent error or omission of such person
13 while in the performance of his or her lawful duties, the political
14 subdivision which employs, appoints, or otherwise designates such person
15 an employee as defined in section 48-115 shall defend him or her against
16 such action, and if final judgment is rendered against such person, such
17 political subdivision shall pay such judgment in his or her behalf and
18 shall have no right to restitution from such person.

19 A political subdivision shall have the right to purchase insurance
20 to indemnify itself in advance against the possibility of such loss under
21 this section, and the insurance company shall have no right of
22 subrogation against the person. This section shall not be construed to
23 permit a political subdivision to pay for a judgment obtained against a
24 person as a result of illegal acts committed by such person.

25 Sec. 3. Section 23-1821, Reissue Revised Statutes of Nebraska, is
26 amended to read:

27 23-1821 (1) Every hospital, emergency care facility, physician,
28 nurse, ~~out-of-hospital~~ emergency care provider, or law enforcement
29 officer shall immediately notify the county coroner in all cases when it
30 appears that an individual has died while being apprehended by or while
31 in the custody of a law enforcement officer or detention personnel.

1 (2) Any person who violates this section shall be guilty of a Class
2 IV misdemeanor.

3 Sec. 4. Section 28-907, Reissue Revised Statutes of Nebraska, is
4 amended to read:

5 28-907 (1) A person commits the offense of false reporting if he or
6 she:

7 (a) Furnishes material information he or she knows to be false to
8 any peace officer or other official with the intent to instigate an
9 investigation of an alleged criminal matter or to impede the
10 investigation of an actual criminal matter;

11 (b) Furnishes information he or she knows to be false alleging the
12 existence of the need for the assistance of an emergency medical service
13 or ~~out-of-hospital~~ emergency care provider or an emergency in which human
14 life or property are in jeopardy to any hospital, emergency medical
15 service, or other person or governmental agency;

16 (c) Furnishes any information, or causes such information to be
17 furnished or conveyed by electric, electronic, telephonic, or mechanical
18 means, knowing the same to be false concerning the need for assistance of
19 a fire department or any personnel or equipment of such department;

20 (d) Furnishes any information he or she knows to be false concerning
21 the location of any explosive in any building or other property to any
22 person; or

23 (e) Furnishes material information he or she knows to be false to
24 any governmental department or agency with the intent to instigate an
25 investigation or to impede an ongoing investigation and which actually
26 results in causing or impeding such investigation.

27 (2)(a) False reporting pursuant to subdivisions (1)(a) through (d)
28 of this section is a Class I misdemeanor. ~~and~~

29 (b) False reporting pursuant to subdivision (1)(e) of this section
30 is an infraction.

31 Sec. 5. Section 28-929, Reissue Revised Statutes of Nebraska, is

1 amended to read:

2 28-929 (1) A person commits the offense of assault on an officer, an
3 emergency responder, a state correctional employee, a Department of
4 Health and Human Services employee, or a health care professional in the
5 first degree if:

6 (a) He or she intentionally or knowingly causes serious bodily
7 injury:

8 (i) To a peace officer, a probation officer, a firefighter, an ~~out-~~
9 ~~of-hospital~~ emergency care provider, or an employee of the Department of
10 Correctional Services;

11 (ii) To an employee of the Department of Health and Human Services
12 if the person committing the offense is committed as a dangerous sex
13 offender under the Sex Offender Commitment Act; or

14 (iii) To a health care professional; and

15 (b) The offense is committed while such officer, firefighter, ~~out-~~
16 ~~of-hospital~~ emergency care provider, or employee is engaged in the
17 performance of his or her official duties or while the health care
18 professional is on duty at a hospital or a health clinic.

19 (2) Assault on an officer, an emergency responder, a state
20 correctional employee, a Department of Health and Human Services
21 employee, or a health care professional in the first degree shall be a
22 Class ID felony.

23 Sec. 6. Section 28-929.01, Reissue Revised Statutes of Nebraska, is
24 amended to read:

25 28-929.01 For purposes of sections 28-929, 28-929.02, 28-930,
26 28-931, and 28-931.01:

27 (1) Emergency care provider means (a) an emergency medical
28 responder; (b) an emergency medical technician; (c) an advanced emergency
29 medical technician; (d) a community paramedic; (e) a critical care
30 paramedic; or (f) a paramedic, as those persons are licensed and
31 classified under the Emergency Medical Services Practice Act;

1 (2) ~~(1)~~ Health care professional means a physician or other health
2 care practitioner who is licensed, certified, or registered to perform
3 specified health services consistent with state law who practices at a
4 hospital or a health clinic;

5 (3) ~~(2)~~ Health clinic has the definition found in section 71-416;
6 and

7 (4) ~~(3)~~ Hospital has the definition found in section 71-419. ~~;~~ and

8 ~~(4) Out-of-hospital emergency care provider means (a) an emergency~~
9 ~~medical responder; (b) an emergency medical technician; (c) an advanced~~
10 ~~emergency medical technician; or (d) a paramedic, as those persons are~~
11 ~~licensed and classified under the Emergency Medical Services Practice~~
12 ~~Act.~~

13 Sec. 7. Section 28-930, Reissue Revised Statutes of Nebraska, is
14 amended to read:

15 28-930 (1) A person commits the offense of assault on an officer, an
16 emergency responder, a state correctional employee, a Department of
17 Health and Human Services employee, or a health care professional in the
18 second degree if:

19 (a) He or she:

20 (i) Intentionally or knowingly causes bodily injury with a dangerous
21 instrument:

22 (A) To a peace officer, a probation officer, a firefighter, an ~~out-~~
23 ~~of-hospital~~ emergency care provider, or an employee of the Department of
24 Correctional Services;

25 (B) To an employee of the Department of Health and Human Services if
26 the person committing the offense is committed as a dangerous sex
27 offender under the Sex Offender Commitment Act; or

28 (C) To a health care professional; or

29 (ii) Recklessly causes bodily injury with a dangerous instrument:

30 (A) To a peace officer, a probation officer, a firefighter, an ~~out-~~
31 ~~of-hospital~~ emergency care provider, or an employee of the Department of

1 Correctional Services;

2 (B) To an employee of the Department of Health and Human Services if
3 the person committing the offense is committed as a dangerous sex
4 offender under the Sex Offender Commitment Act; or

5 (C) To a health care professional; and

6 (b) The offense is committed while such officer, firefighter, ~~out-~~
7 ~~of-hospital~~ emergency care provider, or employee is engaged in the
8 performance of his or her official duties or while the health care
9 professional is on duty at a hospital or a health clinic.

10 (2) Assault on an officer, an emergency responder, a state
11 correctional employee, a Department of Health and Human Services
12 employee, or a health care professional in the second degree shall be a
13 Class II felony.

14 Sec. 8. Section 28-931, Reissue Revised Statutes of Nebraska, is
15 amended to read:

16 28-931 (1) A person commits the offense of assault on an officer, an
17 emergency responder, a state correctional employee, a Department of
18 Health and Human Services employee, or a health care professional in the
19 third degree if:

20 (a) He or she intentionally, knowingly, or recklessly causes bodily
21 injury:

22 (i) To a peace officer, a probation officer, a firefighter, an ~~out-~~
23 ~~of-hospital~~ emergency care provider, or an employee of the Department of
24 Correctional Services;

25 (ii) To an employee of the Department of Health and Human Services
26 if the person committing the offense is committed as a dangerous sex
27 offender under the Sex Offender Commitment Act; or

28 (iii) To a health care professional; and

29 (b) The offense is committed while such officer, firefighter, ~~out-~~
30 ~~of-hospital~~ emergency care provider, or employee is engaged in the
31 performance of his or her official duties or while the health care

1 professional is on duty at a hospital or a health clinic.

2 (2) Assault on an officer, an emergency responder, a state
3 correctional employee, a Department of Health and Human Services
4 employee, or a health care professional in the third degree shall be a
5 Class IIIA felony.

6 Sec. 9. Section 28-931.01, Reissue Revised Statutes of Nebraska, is
7 amended to read:

8 28-931.01 (1) A person commits the offense of assault on an officer,
9 an emergency responder, a state correctional employee, a Department of
10 Health and Human Services employee, or a health care professional using a
11 motor vehicle if:

12 (a) By using a motor vehicle to run over or to strike an officer, an
13 emergency responder, a state correctional employee, a Department of
14 Health and Human Services employee, or a health care professional or by
15 using a motor vehicle to collide with an officer's, an emergency
16 responder's, a state correctional employee's, a Department of Health and
17 Human Services employee's, or a health care professional's motor vehicle,
18 he or she intentionally and knowingly causes bodily injury:

19 (i) To a peace officer, a probation officer, a firefighter, an ~~out-~~
20 ~~of-hospital~~ emergency care provider, or an employee of the Department of
21 Correctional Services;

22 (ii) To an employee of the Department of Health and Human Services
23 if the person committing the offense is committed as a dangerous sex
24 offender under the Sex Offender Commitment Act; or

25 (iii) To a health care professional; and

26 (b) The offense is committed while such officer, firefighter, ~~out-~~
27 ~~of-hospital~~ emergency care provider, or employee is engaged in the
28 performance of his or her official duties or while the health care
29 professional is on duty at a hospital or a health clinic.

30 (2) Assault on an officer, an emergency responder, a state
31 correctional employee, a Department of Health and Human Services

1 employee, or a health care professional using a motor vehicle shall be a
2 Class IIIA felony.

3 Sec. 10. Section 28-934, Revised Statutes Cumulative Supplement,
4 2018, is amended to read:

5 28-934 (1) Any person who knowingly and intentionally strikes any
6 public safety officer with any bodily fluid is guilty of assault with a
7 bodily fluid against a public safety officer.

8 (2) Except as provided in subsection (3) of this section, assault
9 with a bodily fluid against a public safety officer is a Class I
10 misdemeanor.

11 (3) Assault with a bodily fluid against a public safety officer is a
12 Class IIIA felony if the person committing the offense strikes with a
13 bodily fluid the eyes, mouth, or skin of a public safety officer and knew
14 the source of the bodily fluid was infected with the human
15 immunodeficiency virus, hepatitis B, or hepatitis C at the time the
16 offense was committed.

17 (4) Upon a showing of probable cause by affidavit to a judge of this
18 state that an offense as defined in subsection (1) of this section has
19 been committed and that identifies the probable source of the bodily
20 fluid or bodily fluids used to commit the offense, the judge shall grant
21 an order or issue a search warrant authorizing the collection of any
22 evidence, including any bodily fluid or medical records or the
23 performance of any medical or scientific testing or analysis, that may
24 assist with the determination of whether or not the person committing the
25 offense or the person from whom the person committing the offense
26 obtained the bodily fluid or bodily fluids is infected with the human
27 immunodeficiency virus, hepatitis B, or hepatitis C.

28 (5) As used in this section:

29 (a) Bodily fluid means any naturally produced secretion or waste
30 product generated by the human body and shall include, but not be limited
31 to, any quantity of human blood, urine, saliva, mucus, vomitus, seminal

1 fluid, or feces; and

2 (b) Public safety officer includes any of the following persons who
3 are engaged in the performance of their official duties at the time of
4 the offense: A peace officer; a probation officer; a firefighter; an ~~out-~~
5 ~~of-hospital~~ emergency care provider as defined in section 28-929.01; a
6 health care professional as defined in section 28-929.01; an employee of
7 a county, city, or village jail; an employee of the Department of
8 Correctional Services; an employee of the secure youth confinement
9 facility operated by the Department of Correctional Services, if the
10 person committing the offense is committed to such facility; an employee
11 of the Youth Rehabilitation and Treatment Center-Geneva or the Youth
12 Rehabilitation and Treatment Center-Kearney; or an employee of the
13 Department of Health and Human Services if the person committing the
14 offense is committed as a dangerous sex offender under the Sex Offender
15 Commitment Act.

16 Sec. 11. Section 38-1201, Revised Statutes Cumulative Supplement,
17 2018, is amended to read:

18 38-1201 Sections 38-1201 to 38-1237 and sections 16 to 18 of this
19 act shall be known and may be cited as the Emergency Medical Services
20 Practice Act.

21 Sec. 12. Section 38-1202, Reissue Revised Statutes of Nebraska, is
22 amended to read:

23 38-1202 It is the intent of the Legislature in enacting the
24 Emergency Medical Services Practice Act to (1) effectuate the delivery of
25 quality ~~out-of-hospital~~ emergency medical care in the state, (2)
26 ~~eliminate duplication of statutory requirements,~~ (3) ~~merge the former~~
27 ~~boards responsible for regulating ambulance services and emergency~~
28 ~~medical care,~~ (4) ~~replace the former law regulating providers of and~~
29 ~~services delivering emergency medical care,~~ (5) provide for the
30 appropriate licensure of persons providing ~~out-of-hospital~~ medical care
31 and licensure of organizations providing emergency medical services, (3)

1 ~~(6)~~ provide for the establishment of educational requirements and
2 permitted practices for persons providing ~~out-of-hospital~~ emergency
3 medical care, (4) ~~(7)~~ provide a system for regulation of ~~out-of-hospital~~
4 emergency medical care which encourages ~~out-of-hospital~~ emergency care
5 providers and emergency medical services to provide the highest degree of
6 care which they are capable of providing, and (5) ~~(8)~~ provide a flexible
7 system for the regulation of ~~out-of-hospital~~ emergency care providers and
8 emergency medical services that protects public health and safety.

9 The act shall be liberally construed to effect the purposes of,
10 carry out the intent of, and discharge the responsibilities prescribed in
11 the act.

12 Sec. 13. Section 38-1203, Reissue Revised Statutes of Nebraska, is
13 amended to read:

14 38-1203 The Legislature finds:

15 (1) That ~~out-of-hospital~~ emergency medical care is a primary and
16 essential health care service and that the presence of an adequately
17 equipped ambulance and trained ~~out-of-hospital~~ emergency care providers
18 may be the difference between life and death or permanent disability to
19 those persons in Nebraska making use of such services in an emergency;

20 (2) That effective delivery of ~~out-of-hospital~~ emergency medical
21 care may be assisted by a program of training and licensure of ~~out-of-~~
22 ~~hospital~~ emergency care providers and licensure of emergency medical
23 services in accordance with rules and regulations adopted by the board;

24 (3) That the Emergency Medical Services Practice Act is essential to
25 aid in advancing the quality of care being provided by ~~out-of-hospital~~
26 emergency care providers and by emergency medical services and the
27 provision of effective, practical, and economical delivery of ~~out-of-~~
28 ~~hospital~~ emergency medical care in the State of Nebraska;

29 (4) That the services to be delivered by ~~out-of-hospital~~ emergency
30 care providers are complex and demanding and that training and other
31 requirements appropriate for delivery of the services must be constantly

1 reviewed and updated; and

2 (5) That the enactment of a regulatory system that can respond to
3 changing needs of patients and ~~out-of-hospital~~ emergency care providers
4 and emergency medical services is in the best interests of the residents
5 ~~citizens~~ of Nebraska.

6 Sec. 14. Section 38-1204, Revised Statutes Cumulative Supplement,
7 2018, is amended to read:

8 38-1204 For purposes of the Emergency Medical Services Practice Act
9 and elsewhere in the Uniform Credentialing Act, unless the context
10 otherwise requires, the definitions found in sections 38-1205 to 38-1214
11 and sections 16 to 18 of this act apply.

12 Sec. 15. Section 38-1204.01, Revised Statutes Cumulative Supplement,
13 2018, is amended to read:

14 38-1204.01 Advanced emergency medical technician practice of ~~out-of-~~
15 ~~hospital~~ emergency medical care means care provided in accordance with
16 the knowledge and skill acquired through successful completion of an
17 approved program for an advanced emergency medical technician. Such care
18 includes, but is not limited to, (1) all of the acts that an emergency
19 medical technician is authorized to perform and (2) complex
20 interventions, treatments, and pharmacological interventions.

21 Sec. 16. Community paramedicine practice of emergency medical care
22 means care provided by an advanced emergency medical technician,
23 emergency medical technician, emergency medical technician-intermediate,
24 or paramedic in accordance with the knowledge and skill acquired through
25 successful completion of an approved program for community paramedicine
26 at the respective licensure classification of the emergency care provider
27 except for an emergency medical responder.

28 Sec. 17. Critical care paramedic practice of emergency medical care
29 means care provided by a paramedic in accordance with the knowledge and
30 skill acquired through successful completion of an approved program for a
31 critical care paramedic.

1 Sec. 18. Section 38-1208, Revised Statutes Cumulative Supplement,
2 2018, is amended to read:

3 ~~38-1208~~ Emergency ~~Out-of-hospital~~ emergency care provider includes
4 all licensure classifications of emergency care providers established
5 pursuant to the Emergency Medical Services Practice Act. Prior to
6 December 31, 2025, ~~out-of-hospital~~ emergency care provider includes ~~out-~~
7 ~~of-hospital~~ advanced emergency medical technician, emergency medical
8 responder, emergency medical technician, emergency medical technician-
9 intermediate, and paramedic. On and after December 31, 2025, ~~out-of-~~
10 ~~hospital~~ emergency care provider includes advanced emergency medical
11 technician, emergency medical responder, emergency medical technician,
12 community paramedic, critical care paramedic, and paramedic.

13 Sec. 19. Section 38-1206.01, Revised Statutes Cumulative Supplement,
14 2018, is amended to read:

15 38-1206.01 Emergency medical responder practice of ~~out-of-hospital~~
16 emergency medical care means care provided in accordance with the
17 knowledge and skill acquired through successful completion of an approved
18 program for an emergency medical responder. Such care includes, but is
19 not limited to, (1) contributing to the assessment of the health status
20 of an individual, (2) simple, noninvasive interventions, and (3)
21 minimizing secondary injury to an individual.

22 Sec. 20. Section 38-1207.01, Revised Statutes Cumulative Supplement,
23 2018, is amended to read:

24 38-1207.01 Emergency medical technician practice of ~~out-of-hospital~~
25 emergency medical care means care provided in accordance with the
26 knowledge and skill acquired through successful completion of an approved
27 program for an emergency medical technician. Such care includes, but is
28 not limited to, (1) all of the acts that an emergency medical responder
29 can perform, and (2) simple invasive interventions, management and
30 transportation of individuals, and nonvisualized intubation.

31 Sec. 21. Section 38-1207.02, Revised Statutes Cumulative Supplement,

1 2018, is amended to read:

2 38-1207.02 Emergency medical technician-intermediate practice of
3 ~~out-of-hospital~~ emergency medical care means care provided in accordance
4 with the knowledge and skill acquired through successful completion of an
5 approved program for an emergency medical technician-intermediate. Such
6 care includes, but is not limited to, (1) all of the acts that an
7 advanced emergency medical technician can perform, and (2) visualized
8 intubation. This section terminates on December 31, 2025.

9 Sec. 22. Section 38-1208.01, Revised Statutes Cumulative Supplement,
10 2018, is amended to read:

11 38-1208.01 Paramedic practice of ~~out-of-hospital~~ emergency medical
12 care means care provided in accordance with the knowledge and skill
13 acquired through successful completion of an approved program for a
14 paramedic. Such care includes, but is not limited to, (1) all of the acts
15 that an emergency medical technician-intermediate can perform, and (2)
16 surgical cricothyrotomy.

17 Sec. 23. Section 38-1208.02, Revised Statutes Cumulative Supplement,
18 2018, is amended to read:

19 38-1208.02 Practice of ~~out-of-hospital~~ emergency medical care means
20 the performance of any act using judgment or skill based upon the United
21 States Department of Transportation education standards and guideline
22 training requirements, the National Highway Traffic Safety
23 Administration's National Emergency Medical Service Scope of Practice
24 Model and National Emergency Medical Services Education Standards, an
25 education program for community paramedicine or a critical care paramedic
26 that is approved by the board and the Department of Health and Human
27 Services, and permitted practices and procedures for the level of
28 licensure listed in section 38-1217. Such acts include the identification
29 of and intervention in actual or potential health problems of individuals
30 and are directed toward addressing such problems based on actual or
31 perceived traumatic or medical circumstances—~~prior to or during~~

1 ~~transportation to a hospital or for routine transportation between health~~
2 ~~care facilities or services.~~ Such acts are provided under therapeutic
3 regimens ordered by a physician medical director or through protocols as
4 provided by the Emergency Medical Services Practice Act.

5 Sec. 24. Section 38-1209, Reissue Revised Statutes of Nebraska, is
6 amended to read:

7 38-1209 Patient means an individual who either identifies himself or
8 herself as being in need of medical attention or upon assessment by an
9 ~~out-of-hospital~~ emergency care provider has an injury or illness
10 requiring treatment.

11 Sec. 25. Section 38-1210, Reissue Revised Statutes of Nebraska, is
12 amended to read:

13 38-1210 Physician medical director means a qualified physician who
14 is responsible for the medical supervision of ~~out-of-hospital~~ emergency
15 care providers and verification of skill proficiency of ~~out-of-hospital~~
16 emergency care providers pursuant to section 38-1217.

17 Sec. 26. Section 38-1211, Reissue Revised Statutes of Nebraska, is
18 amended to read:

19 38-1211 Protocol means a set of written policies, procedures, and
20 directions from a physician medical director to an ~~out-of-hospital~~
21 emergency care provider concerning the medical procedures to be performed
22 in specific situations.

23 Sec. 27. Section 38-1213, Reissue Revised Statutes of Nebraska, is
24 amended to read:

25 38-1213 Qualified physician surrogate means a qualified, trained
26 medical person designated by a qualified physician in writing to act as
27 an agent for the physician in directing the actions or renewal of
28 licensure of ~~out-of-hospital~~ emergency care providers.

29 Sec. 28. Section 38-1215, Revised Statutes Cumulative Supplement,
30 2018, is amended to read:

31 38-1215 (1) The board shall have seventeen members appointed by the

1 Governor with the approval of a majority of the Legislature. The
2 appointees may begin to serve immediately following appointment and prior
3 to approval by the Legislature.

4 (2)(a) Seven members of the board shall be active ~~out-of-hospital~~
5 emergency care providers at the time of and for the duration of their
6 appointment, and each shall have at least five years of experience in his
7 or her level of licensure at the time of his or her appointment or
8 reappointment. Of the seven members who are ~~out-of-hospital~~ emergency
9 care providers, two shall be emergency medical responders, two shall be
10 emergency medical technicians, one shall be an advanced emergency medical
11 technician, and two shall be paramedics.

12 (b) Three of the members shall be qualified physicians actively
13 involved in emergency medical care. At least one of the physician members
14 shall be a board-certified emergency physician, and at least one of the
15 physician members shall specialize in pediatrics.

16 (c) Five members shall be appointed to include one member who is a
17 representative of an approved training agency, one member who is a
18 physician assistant with at least five years of experience and active in
19 ~~out-of-hospital~~ emergency medical care education, one member who is a
20 registered nurse with at least five years of experience and active in
21 ~~out-of-hospital~~ emergency medical care education, and two public members
22 who meet the requirements of section 38-165 and who have an expressed
23 interest in the provision of ~~out-of-hospital~~ emergency medical care.

24 (d) The remaining two members shall have any of the qualifications
25 listed in subdivision (a), (b), or (c) of this subsection.

26 (e) In addition to any other criteria for appointment, among the
27 members of the board appointed after January 1, 2017, there shall be at
28 least three members who are volunteer emergency medical care providers,
29 at least one member who is a paid emergency medical care provider, at
30 least one member who is a firefighter, at least one member who is a law
31 enforcement officer, and at least one member who is active in the

1 Critical Incident Stress Management Program. If a person appointed to the
2 board is qualified to serve as a member in more than one capacity, all
3 qualifications of such person shall be taken into consideration to
4 determine whether or not the diversity in qualifications required in this
5 subsection has been met.

6 (f) At least five members of the board shall be appointed from each
7 congressional district, and at least one of such members shall be a
8 physician member described in subdivision (b) of this subsection.

9 (3) Members shall serve five-year terms beginning on December 1 and
10 may serve for any number of such terms. The terms of the members of the
11 board appointed prior to December 1, 2008, shall be extended by two years
12 and until December 1 of such year. Each member shall hold office until
13 the expiration of his or her term. Any vacancy in membership, other than
14 by expiration of a term, shall be filled within ninety days by the
15 Governor by appointment as provided in subsection (2) of this section.

16 (4) Special meetings of the board may be called by the department or
17 upon the written request of any six members of the board explaining the
18 reason for such meeting. The place of the meetings shall be set by the
19 department.

20 (5) The Governor upon recommendation of the department shall have
21 power to remove from office at any time any member of the board for
22 physical or mental incapacity to carry out the duties of a board member,
23 for continued neglect of duty, for incompetency, for acting beyond the
24 individual member's scope of authority, for malfeasance in office, for
25 any cause for which a professional credential may be suspended or revoked
26 pursuant to the Uniform Credentialing Act, or for a lack of license
27 required by the Emergency Medical Services Practice Act.

28 (6) Except as provided in subsection (5) of this section and
29 notwithstanding subsection (2) of this section, a member of the board who
30 changes his or her licensure classification after appointment or has a
31 licensure classification which is terminated under section 38-1207.02 or

1 38-1217 when such licensure classification was a qualification for
2 appointment shall be permitted to continue to serve as a member of the
3 board until the expiration of his or her term.

4 Sec. 29. Section 38-1216, Revised Statutes Cumulative Supplement,
5 2018, is amended to read:

6 38-1216 In addition to any other responsibilities prescribed by the
7 Emergency Medical Services Practice Act, the board shall:

8 (1) Promote the dissemination of public information and education
9 programs to inform the public about ~~out-of-hospital~~ emergency medical
10 service care and other ~~out-of-hospital~~ medical information, including
11 appropriate methods of medical self-help, first aid, and the availability
12 of ~~out-of-hospital~~ emergency medical services training programs in the
13 state;

14 (2) Provide for the collection of information for evaluation of the
15 availability and quality of ~~out-of-hospital~~ emergency medical care,
16 evaluate the availability and quality of ~~out-of-hospital~~ emergency
17 medical care, and serve as a focal point for discussion of the provision
18 of ~~out-of-hospital~~ emergency medical care;

19 (3) Establish model procedures for patient management in ~~out-of-~~
20 ~~hospital~~ medical emergencies that do not limit the authority of law
21 enforcement and fire protection personnel to manage the scene during an
22 ~~out-of-hospital~~ medical emergency;

23 (4) Not less than once each five years, undertake a review and
24 evaluation of the act and its implementation together with a review of
25 the ~~out-of-hospital~~ emergency medical care needs of the residents
26 ~~citizens~~ of the State of Nebraska and submit electronically a report to
27 the Legislature with any recommendations which it may have; and

28 (5) Identify communication needs of emergency medical services and
29 make recommendations for development of a communications plan for a
30 communications network for ~~out-of-hospital~~ emergency care providers and
31 emergency medical services.

1 Sec. 30. Section 38-1217, Revised Statutes Cumulative Supplement,
2 2018, is amended to read:

3 38-1217 The board shall adopt rules and regulations necessary to:

4 (1) Create licensure requirements for advanced emergency medical
5 technicians, emergency medical responders, emergency medical technicians,
6 and paramedics and, until December 31, 2025, create renewal requirements
7 for emergency medical technicians-intermediate. The rules and regulations
8 shall include all criteria and qualifications for each classification
9 determined to be necessary for protection of public health and safety;

10 (2) Provide for temporary licensure of an ~~out-of-hospital~~ emergency
11 care provider who has completed the educational requirements for a
12 licensure classification enumerated in subdivision (1) of this section
13 but has not completed the testing requirements for licensure under such
14 subdivision. A temporary license shall allow the person to practice only
15 in association with a licensed ~~out-of-hospital~~ emergency care provider
16 under physician medical direction and shall be valid until the date on
17 which the results of the next licensure examination are available to the
18 department. The temporary license shall expire immediately if the
19 applicant has failed the examination. In no case may a temporary license
20 be issued for a period extending beyond one year. The rules and
21 regulations shall include qualifications and training necessary for
22 issuance of such temporary license, the practices and procedures
23 authorized for a temporary licensee under this subdivision, and
24 supervision required for a temporary licensee under this subdivision. The
25 requirements of this subdivision and the rules and regulations adopted
26 and promulgated pursuant to this subdivision do not apply to a temporary
27 license issued as provided in section 38-129.01;

28 (3) Provide for temporary licensure of an ~~out-of-hospital~~ emergency
29 care provider relocating to Nebraska, if such ~~out-of-hospital~~ emergency
30 care provider is lawfully authorized to practice in another state that
31 has adopted the licensing standards of the EMS Personnel Licensure

1 Interstate Compact. Such temporary licensure shall be valid for one year
2 or until a license is issued and shall not be subject to renewal. The
3 requirements of this subdivision do not apply to a temporary license
4 issued as provided in section 38-129.01;

5 (4) Set standards for the licensure of basic life support services
6 and advanced life support services. The rules and regulations providing
7 for licensure shall include standards and requirements for: Vehicles,
8 equipment, maintenance, sanitation, inspections, personnel, training,
9 medical direction, records maintenance, practices and procedures to be
10 provided by employees or members of each classification of service, and
11 other criteria for licensure established by the board;

12 (5) Authorize emergency medical services to provide differing
13 practices and procedures depending upon the qualifications of ~~out-of-~~
14 ~~hospital~~ emergency care providers available at the time of service
15 delivery. No emergency medical service shall be licensed to provide
16 practices or procedures without the use of personnel licensed to provide
17 the practices or procedures;

18 (6) Authorize ~~out-of-hospital~~ emergency care providers to perform
19 any practice or procedure which they are authorized to perform with an
20 emergency medical service other than the service with which they are
21 affiliated when requested by the other service and when the patient for
22 whom they are to render services is in danger of loss of life;

23 (7) Provide for the approval of training agencies, provide for
24 disciplinary action against training agencies, and establish minimum
25 standards for services provided by training agencies;

26 (8) Provide for the minimum qualifications of a physician medical
27 director in addition to the licensure required by section 38-1212;

28 (9) Provide for the use of physician medical directors, qualified
29 physician surrogates, model protocols, standing orders, operating
30 procedures, and guidelines which may be necessary or appropriate to carry
31 out the purposes of the Emergency Medical Services Practice Act. The

1 model protocols, standing orders, operating procedures, and guidelines
2 may be modified by the physician medical director for use by any ~~out-of-~~
3 ~~hospital~~ emergency care provider or emergency medical service before or
4 after adoption;

5 ~~(10) Establish criteria for approval of organizations issuing~~
6 ~~cardiopulmonary resuscitation certification which shall include criteria~~
7 ~~for instructors, establishment of certification periods and minimum~~
8 ~~curricula, and other aspects of training and certification;~~

9 (10) ~~(11)~~ Establish renewal and reinstatement requirements for ~~out-~~
10 ~~of-hospital~~ emergency care providers and establish continuing competency
11 requirements. Continuing education is sufficient to meet continuing
12 competency requirements. The requirements may also include, but not be
13 limited to, one or more of the continuing competency activities listed in
14 section 38-145 which a licensed person may select as an alternative to
15 continuing education. The reinstatement requirements for ~~out-of-hospital~~
16 emergency care providers shall allow reinstatement at the same or any
17 lower level of licensure for which the ~~out-of-hospital~~ emergency care
18 provider is determined to be qualified;

19 (11) ~~(12)~~ Create licensure, renewal, and reinstatement requirements
20 for emergency medical service instructors. The rules and regulations
21 shall include the practices and procedures for licensure, renewal, and
22 reinstatement;

23 (12) ~~(13)~~ Establish criteria for emergency medical technicians-
24 intermediate, advanced emergency medical technicians, emergency medical
25 technicians, community paramedicine, critical care paramedics, or
26 paramedics performing activities within their scope of practice and as
27 determined by a licensed health care practitioner as defined in section
28 38-1224 at a hospital or health clinic under section 38-1224. Such
29 criteria shall include, but not be limited to, a requirement that such
30 activities shall only be performed at the discretion of, and with the
31 approval of, the governing authority of such hospital or health clinic.

1 ~~For purposes of this subdivision, health clinic has the definition found~~
2 ~~in section 71-416 and hospital has the definition found in section~~
3 ~~71-419; and~~

4 (13) ~~(14)~~ Establish model protocols for compliance with the Stroke
5 System of Care Act by an emergency medical service and an emergency care
6 provider.

7 Sec. 31. Section 38-1218, Revised Statutes Cumulative Supplement,
8 2018, is amended to read:

9 38-1218 (1) The board may approve curricula for the licensure
10 classifications listed in the Emergency Medical Services Practice Act.

11 (2) The department and the board shall consider the following
12 factors, in addition to other factors required or permitted by the
13 Emergency Medical Services Practice Act, when adopting rules and
14 regulations for a licensure classification:

15 (a) Whether the initial training required for licensure in the
16 classification is sufficient to enable the ~~out-of-hospital~~ emergency care
17 provider to perform the practices and procedures authorized for the
18 classification in a manner which is beneficial to the patient and
19 protects public health and safety;

20 (b) Whether the practices and procedures to be authorized are
21 necessary to the efficient and effective delivery of ~~out-of-hospital~~
22 emergency medical care;

23 (c) Whether morbidity can be reduced or recovery enhanced by the use
24 of the practices and procedures to be authorized for the classification;
25 and

26 (d) Whether continuing competency requirements are sufficient to
27 maintain the skills authorized for the classification.

28 (3) An applicant for licensure for a licensure classification listed
29 in subdivision (1) of section 38-1217 who is a military spouse may apply
30 for a temporary license as provided in section 38-129.01.

31 Sec. 32. Section 38-1220, Revised Statutes Supplement, 2019, is

1 amended to read:

2 38-1220 The following are exempt from the licensing requirements of
3 the Emergency Medical Services Practice Act:

4 (1) The occasional use of a vehicle or aircraft not designated as an
5 ambulance and not ordinarily used in transporting patients or operating
6 emergency care, rescue, or resuscitation services;

7 (2) Vehicles or aircraft rendering services as an ambulance in case
8 of a major catastrophe or emergency when licensed ambulances based in the
9 localities of the catastrophe or emergency are incapable of rendering the
10 services required;

11 (3) Ambulances from another state which are operated from a location
12 or headquarters outside of this state in order to transport patients
13 across state lines, but no such ambulance shall be used to pick up
14 patients within this state for transportation to locations within this
15 state except in case of an emergency;

16 (4) Ambulances or emergency vehicles owned and operated by an agency
17 of the United States Government and the personnel of such agency;

18 (5) Except for the provisions of section 38-1232, physicians,
19 physician assistants, registered nurses, ~~licensed practical nurses~~, or
20 advanced practice registered nurses, who hold current Nebraska licenses
21 and are exclusively engaged in the practice of their respective
22 professions;

23 (6) Persons authorized to perform ~~out-of-hospital~~ emergency care in
24 other states when incidentally working in Nebraska in response to an
25 emergency situation; and

26 (7) Students under the supervision of (a) a licensed ~~out-of-hospital~~
27 emergency care provider performing emergency medical services that are an
28 integral part of the training provided by an approved training agency or
29 (b) an organization accredited by the Commission on Accreditation of
30 Allied Health Education Programs for the level of training the student is
31 completing.

1 Sec. 33. Section 38-1224, Revised Statutes Cumulative Supplement,
2 2018, is amended to read:

3 38-1224 (1) An ~~out-of-hospital~~ emergency care provider other than an
4 emergency medical responder may not assume the duties incident to the
5 title or practice the skills of an ~~out-of-hospital~~ emergency care
6 provider unless he or she ~~(a)~~ is acting under the supervision of a
7 licensed health care practitioner ~~or under the direction of a registered~~
8 ~~nurse and (b) is employed by or serving as a member of an emergency~~
9 ~~medical service, a hospital, or a health clinic licensed by the~~
10 ~~department.~~

11 (2) An ~~out-of-hospital~~ emergency care provider may only practice the
12 skills he or she is authorized to employ and which are covered by the
13 license issued to such provider pursuant to the Emergency Medical
14 Services Practice Act or as authorized pursuant to the EMS Personnel
15 Licensure Interstate Compact.

16 (3) For purposes of this section, licensed health care practitioner
17 means (a) a physician medical director or physician surrogate for
18 purposes of supervision of an ~~out-of-hospital~~ emergency care provider for
19 an emergency medical service or (b) a physician, a physician assistant,
20 or an advanced practice registered nurse for purposes of supervision of
21 an ~~out-of-hospital~~ emergency care provider in a setting other than an
22 incident to which an emergency medical service has been called for a
23 hospital or health clinic. A registered nurse may direct an ~~out-of-~~
24 ~~hospital~~ emergency care provider in a setting other than an emergency
25 medical service hospital or health clinic.

26 Sec. 34. Section 38-1225, Revised Statutes Cumulative Supplement,
27 2018, is amended to read:

28 38-1225 (1) No patient data received or recorded by an emergency
29 medical service or an ~~out-of-hospital~~ emergency care provider shall be
30 divulged, made public, or released by an emergency medical service or an
31 ~~out-of-hospital~~ emergency care provider, except that patient data may be

1 released for purposes of treatment, payment, and other health care
2 operations as defined and permitted under the federal Health Insurance
3 Portability and Accountability Act of 1996, as such act existed on
4 January 1, 2018, or as otherwise permitted by law. Such data shall be
5 provided to the department for public health purposes pursuant to rules
6 and regulations of the department. For purposes of this section, patient
7 data means any data received or recorded as part of the records
8 maintenance requirements of the Emergency Medical Services Practice Act.

9 (2) Patient data received by the department shall be confidential
10 with release only (a) in aggregate data reports created by the department
11 on a periodic basis or at the request of an individual, (b) as case-
12 specific data to approved researchers for specific research projects, (c)
13 as protected health information to a public health authority, as such
14 terms are defined under the federal Health Insurance Portability and
15 Accountability Act of 1996, as such act existed on January 1, 2018, and
16 (d) as protected health information, as defined under the federal Health
17 Insurance Portability and Accountability Act of 1996, as such act existed
18 on January 1, 2018, to an emergency medical service, to an ~~out-of-~~
19 ~~hospital~~ emergency care provider, or to a licensed health care facility
20 for purposes of treatment. A record may be shared with the emergency
21 medical service or ~~out-of-hospital~~ emergency care provider that reported
22 that specific record. Approved researchers shall maintain the
23 confidentiality of the data, and researchers shall be approved in the
24 same manner as described in section 81-666. Aggregate reports shall be
25 public documents.

26 (3) No civil or criminal liability of any kind or character for
27 damages or other relief or penalty shall arise or be enforced against any
28 person or organization by reason of having provided patient data pursuant
29 to this section.

30 Sec. 35. Section 38-1226, Reissue Revised Statutes of Nebraska, is
31 amended to read:

1 38-1226 No ambulance shall transport any patient upon any street,
2 road, highway, airspace, or public way in the State of Nebraska unless
3 such ambulance, when so transporting patients, is occupied by at least
4 one licensed ~~out-of-hospital~~ emergency care provider. Such requirement
5 shall be met if any of the individuals providing the service is a
6 licensed physician, registered nurse, or licensed physician assistant, ~~or~~
7 ~~licensed practical nurse~~ functioning within the scope of practice of his
8 or her license.

9 Sec. 36. Section 38-1228, Reissue Revised Statutes of Nebraska, is
10 amended to read:

11 38-1228 The department, with the approval of the board, may,
12 whenever it deems appropriate, waive any rule, regulation, or standard
13 relating to the licensure of emergency medical services or ~~out-of-~~
14 ~~hospital~~ emergency care providers when the lack of a licensed emergency
15 medical service in a municipality or other area will create an undue
16 hardship in the municipality or other area in meeting the emergency
17 medical service needs of the residents ~~people~~ thereof.

18 Sec. 37. Section 38-1232, Revised Statutes Cumulative Supplement,
19 2018, is amended to read:

20 38-1232 (1) No ~~out-of-hospital~~ emergency care provider, physician
21 assistant, registered nurse, or licensed practical nurse who provides
22 public emergency care shall be liable in any civil action to respond in
23 damages as a result of his or her acts of commission or omission arising
24 out of and in the course of his or her rendering in good faith any such
25 care. Nothing in this subsection shall be deemed to grant any such
26 immunity for liability arising out of the operation of any motor vehicle,
27 aircraft, or boat or while such person was impaired by alcoholic liquor
28 or any controlled substance enumerated in section 28-405 in connection
29 with such care, nor shall immunity apply to any person causing damage or
30 injury by his or her willful, wanton, or grossly negligent act of
31 commission or omission.

1 (2) No qualified physician or qualified physician surrogate who
2 gives orders, either orally or by communication equipment, to any ~~out-of-~~
3 ~~hospital~~ emergency care provider at the scene of an emergency, no ~~out-of-~~
4 ~~hospital~~ emergency care provider following such orders within the limits
5 of his or her licensure, and no ~~out-of-hospital~~ emergency care provider
6 trainee in an approved training program following such orders, shall be
7 liable civilly or criminally by reason of having issued or followed such
8 orders but shall be subject to the rules of law applicable to negligence.

9 (3) No physician medical director shall incur any liability by
10 reason of his or her use of any unmodified protocol, standing order,
11 operating procedure, or guideline provided by the board pursuant to
12 subdivision (9) of section 38-1217.

13 Sec. 38. Section 38-1233, Reissue Revised Statutes of Nebraska, is
14 amended to read:

15 38-1233 No ~~out-of-hospital~~ emergency care provider shall be subject
16 to civil liability based solely upon failure to obtain consent in
17 rendering emergency medical, surgical, hospital, or health services to
18 any individual regardless of age when the patient is unable to give his
19 or her consent for any reason and there is no other person reasonably
20 available who is legally authorized to consent to the providing of such
21 care.

22 Sec. 39. Section 38-1234, Reissue Revised Statutes of Nebraska, is
23 amended to read:

24 38-1234 No act of commission or omission of any ~~out-of-hospital~~
25 emergency care provider while rendering emergency medical care within the
26 limits of his or her licensure or status as a trainee to a person who is
27 deemed by the provider to be in immediate danger of injury or loss of
28 life shall impose any liability on any other person, and this section
29 shall not relieve the ~~out-of-hospital~~ emergency care provider from
30 personal liability, if any.

31 Sec. 40. Section 38-1237, Revised Statutes Cumulative Supplement,

1 2018, is amended to read:

2 38-1237 It shall be unlawful for any person who has not been
3 licensed pursuant to the Emergency Medical Services Practice Act or
4 authorized pursuant to the EMS Personnel Licensure Interstate Compact to
5 hold himself or herself out as an ~~out-of-hospital~~ emergency care
6 provider, to use any other term to indicate or imply that he or she is an
7 ~~out-of-hospital~~ emergency care provider, or to act as such a provider
8 without a license therefor. It shall be unlawful for any person to
9 operate a training agency for the initial training or renewal or
10 reinstatement of licensure of ~~out-of-hospital~~ emergency care providers
11 unless the training agency is approved pursuant to rules and regulations
12 of the department. It shall be unlawful for any person to operate an
13 emergency medical service unless such service is licensed.

14 Sec. 41. Section 48-115, Reissue Revised Statutes of Nebraska, is
15 amended to read:

16 48-115 The terms employee and worker are used interchangeably and
17 have the same meaning throughout the Nebraska Workers' Compensation Act.
18 Such terms include the plural and all ages and both sexes. For purposes
19 of the act, employee or worker shall be construed to mean:

20 (1) Every person in the service of the state or of any governmental
21 agency created by it, including the Nebraska National Guard and members
22 of the military forces of the State of Nebraska, under any appointment or
23 contract of hire, expressed or implied, oral or written;

24 (2) Every person in the service of an employer who is engaged in any
25 trade, occupation, business, or profession as described in section 48-106
26 under any contract of hire, expressed or implied, oral or written,
27 including aliens and also including minors. Minors for the purpose of
28 making election of remedies under the Nebraska Workers' Compensation Act
29 shall have the same power of contracting and electing as adult employees.

30 As used in subdivisions (1) through (11) of this section, the terms
31 employee and worker shall not be construed to include any person whose

1 employment is not in the usual course of the trade, business, profession,
2 or occupation of his or her employer.

3 If an employee subject to the Nebraska Workers' Compensation Act
4 suffers an injury on account of which he or she or, in the event of his
5 or her death, his or her dependents would otherwise have been entitled to
6 the benefits provided by such act, the employee or, in the event of his
7 or her death, his or her dependents shall be entitled to the benefits
8 provided under such act, if the injury or injury resulting in death
9 occurred within this state, or if at the time of such injury (a) the
10 employment was principally localized within this state, (b) the employer
11 was performing work within this state, or (c) the contract of hire was
12 made within this state;

13 (3) Volunteer firefighters of any fire department of any rural or
14 suburban fire protection district, city, village, or nonprofit
15 corporation, which fire department is organized under the laws of the
16 State of Nebraska. Such volunteers shall be deemed employees of such
17 rural or suburban fire protection district, city, village, or nonprofit
18 corporation while in the performance of their duties as members of such
19 department and shall be considered as having entered and as acting in the
20 regular course and scope of their employment from the instant such
21 persons commence responding to a call to active duty, whether to a fire
22 station or other place where firefighting equipment that their company or
23 unit is to use is located or to any activities that the volunteer
24 firefighters may be directed to do by the chief of the fire department or
25 some person authorized to act for such chief. Such volunteers shall be
26 deemed employees of such rural or suburban fire protection district,
27 city, village, or nonprofit corporation until their return to the
28 location from which they were initially called to active duty or until
29 they engage in any activity beyond the scope of the performance of their
30 duties, whichever occurs first.

31 Members of such volunteer fire department, before they are entitled

1 to benefits under the Nebraska Workers' Compensation Act, shall be
2 recommended by the chief of the fire department or some person authorized
3 to act for such chief for membership therein to the board of directors of
4 the rural or suburban fire protection district or nonprofit corporation,
5 the mayor and city commission, the mayor and council, or the chairperson
6 and board of trustees, as the case may be, and upon confirmation shall be
7 deemed employees of such entity. Members of such fire department after
8 confirmation to membership may be removed by a majority vote of the
9 entity's board of directors or governing body and thereafter shall not be
10 considered employees of such entity. Firefighters of any fire department
11 of any rural or suburban fire protection district, nonprofit corporation,
12 city, or village shall be considered as acting in the performance and
13 within the course and scope of their employment when performing
14 activities outside of the corporate limits of their respective districts,
15 cities, or villages, but only if directed to do so by the chief of the
16 fire department or some person authorized to act for such chief;

17 (4) Members of the Nebraska Emergency Management Agency, any city,
18 village, county, or interjurisdictional emergency management
19 organization, or any state emergency response team, which agency,
20 organization, or team is regularly organized under the laws of the State
21 of Nebraska. Such members shall be deemed employees of such agency,
22 organization, or team while in the performance of their duties as members
23 of such agency, organization, or team;

24 (5) Any person fulfilling conditions of probation, or community
25 service as defined in section 29-2277, pursuant to any order of any court
26 of this state who shall be working for a governmental body, or agency as
27 defined in section 29-2277, pursuant to any condition of probation, or
28 community service as defined in section 29-2277. Such person shall be
29 deemed an employee of the governmental body or agency for the purposes of
30 the Nebraska Workers' Compensation Act;

31 (6) Volunteer ambulance drivers and attendants and ~~out-of-hospital~~

1 emergency care providers who are members of an emergency medical service
2 for any county, city, village, rural or suburban fire protection
3 district, nonprofit corporation, or any combination of such entities
4 under the authority of section 13-303. Such volunteers shall be deemed
5 employees of such entity or combination thereof while in the performance
6 of their duties as ambulance drivers or attendants or ~~out-of-hospital~~
7 emergency care providers and shall be considered as having entered into
8 and as acting in the regular course and scope of their employment from
9 the instant such persons commence responding to a call to active duty,
10 whether to a hospital or other place where the ambulance they are to use
11 is located or to any activities that the volunteer ambulance drivers or
12 attendants or ~~out-of-hospital~~ emergency care providers may be directed to
13 do by the chief or some person authorized to act for such chief of the
14 volunteer ambulance service or ~~out-of-hospital~~ emergency care service.
15 Such volunteers shall be deemed employees of such county, city, village,
16 rural or suburban fire protection district, nonprofit corporation, or
17 combination of such entities until their return to the location from
18 which they were initially called to active duty or until they engage in
19 any activity beyond the scope of the performance of their duties,
20 whichever occurs first. Before such volunteer ambulance drivers or
21 attendants or ~~out-of-hospital~~ emergency care providers are entitled to
22 benefits under the Nebraska Workers' Compensation Act, they shall be
23 recommended by the chief or some person authorized to act for such chief
24 of the volunteer ambulance service or ~~out-of-hospital~~ emergency care
25 service for membership therein to the board of directors of the rural or
26 suburban fire protection district or nonprofit corporation, the governing
27 body of the county, city, or village, or combination thereof, as the case
28 may be, and upon such confirmation shall be deemed employees of such
29 entity or combination thereof. Members of such volunteer ambulance or
30 ~~out-of-hospital~~ emergency care service after confirmation to membership
31 may be removed by majority vote of the entity's board of directors or

1 governing body and thereafter shall not be considered employees of such
2 entity. Volunteer ambulance drivers and attendants and ~~out-of-hospital~~
3 emergency care providers for any county, city, village, rural or suburban
4 fire protection district, nonprofit corporation, or any combination
5 thereof shall be considered as acting in the performance and within the
6 course and scope of their employment when performing activities outside
7 of the corporate limits of their respective county, city, village, or
8 district, but only if directed to do so by the chief or some person
9 authorized to act for such chief;

10 (7) Members of a law enforcement reserve force appointed in
11 accordance with section 81-1438. Such members shall be deemed employees
12 of the county or city for which they were appointed;

13 (8) Any offender committed to the Department of Correctional
14 Services who is employed pursuant to section 81-1827. Such offender shall
15 be deemed an employee of the Department of Correctional Services solely
16 for purposes of the Nebraska Workers' Compensation Act;

17 (9) An executive officer of a corporation elected or appointed under
18 the provisions or authority of the charter, articles of incorporation, or
19 bylaws of such corporation who owns less than twenty-five percent of the
20 common stock of such corporation or an executive officer of a nonprofit
21 corporation elected or appointed under the provisions or authority of the
22 charter, articles of incorporation, or bylaws of such corporation who
23 receives annual compensation of more than one thousand dollars from such
24 corporation. Such executive officer shall be an employee of such
25 corporation under the Nebraska Workers' Compensation Act.

26 An executive officer of a corporation who owns twenty-five percent
27 or more of the common stock of such corporation or an executive officer
28 of a nonprofit corporation who receives annual compensation of one
29 thousand dollars or less from such corporation shall not be construed to
30 be an employee of the corporation under the Nebraska Workers'
31 Compensation Act unless such executive officer elects to bring himself or

1 herself within the provisions of the act. Such election shall be in
2 writing and filed with the secretary of the corporation and with the
3 workers' compensation insurer. Such election shall be effective upon
4 receipt by the insurer for the current policy and subsequent policies
5 issued by such insurer and shall remain in effect until the election is
6 terminated, in writing, by the officer and the termination is filed with
7 the insurer or until the insurer ceases to provide coverage for the
8 corporation, whichever occurs first. Any such termination of election
9 shall also be filed with the secretary of the corporation. If insurance
10 is provided through a master policy or a multiple coordinated policy
11 pursuant to the Professional Employer Organization Registration Act on or
12 after January 1, 2012, then such election or termination of election
13 shall also be filed with the professional employer organization. If
14 coverage under the master policy or multiple coordinated policy ceases,
15 then such election shall also be effective for a replacement master
16 policy or multiple coordinated policy obtained by the professional
17 employer organization and shall remain in effect for the new policy as
18 provided in this subdivision. If such an executive officer has not
19 elected to bring himself or herself within the provisions of the Nebraska
20 Workers' Compensation Act pursuant to this subdivision and a health,
21 accident, or other insurance policy covering such executive officer
22 contains an exclusion of coverage if the executive officer is otherwise
23 entitled to workers' compensation coverage, such exclusion is null and
24 void as to such executive officer.

25 It is the intent of the Legislature that the changes made to this
26 subdivision by Laws 2002, LB 417, shall apply to policies of insurance
27 against liability arising under the act with an effective date on or
28 after January 1, 2003, but shall not apply to any such policy with an
29 effective date prior to January 1, 2003;

30 (10) Each individual employer, partner, limited liability company
31 member, or self-employed person who is actually engaged in the individual

1 employer's, partnership's, limited liability company's, or self-employed
2 person's business on a substantially full-time basis who elects to bring
3 himself or herself within the provisions of the Nebraska Workers'
4 Compensation Act. Such election shall be in writing and filed with the
5 workers' compensation insurer. Such election shall be effective upon
6 receipt by the insurer for the current policy and subsequent policies
7 issued by such insurer and shall remain in effect until the election is
8 terminated, in writing, by such person and the termination is filed with
9 the insurer or until the insurer ceases to provide coverage for the
10 business, whichever occurs first. If insurance is provided through a
11 master policy or a multiple coordinated policy pursuant to the
12 Professional Employer Organization Registration Act on or after January
13 1, 2012, then such election or termination of election shall also be
14 filed with the professional employer organization. If coverage under the
15 master policy or multiple coordinated policy ceases, then such election
16 shall also be effective for a replacement master policy or multiple
17 coordinated policy obtained by the professional employer organization and
18 shall remain in effect for the new policy as provided in this
19 subdivision. If any such person who is actually engaged in the business
20 on a substantially full-time basis has not elected to bring himself or
21 herself within the provisions of the Nebraska Workers' Compensation Act
22 pursuant to this subdivision and a health, accident, or other insurance
23 policy covering such person contains an exclusion of coverage if such
24 person is otherwise entitled to workers' compensation coverage, such
25 exclusion shall be null and void as to such person; and

26 (11) An individual lessor of a commercial motor vehicle leased to a
27 motor carrier and driven by such individual lessor who elects to bring
28 himself or herself within the provisions of the Nebraska Workers'
29 Compensation Act. Such election is made if he or she agrees in writing
30 with the motor carrier to have the same rights as an employee only for
31 purposes of workers' compensation coverage maintained by the motor

1 carrier. For an election under this subdivision, the motor carrier's
2 principal place of business must be in this state and the motor carrier
3 must be authorized to self-insure liability under the Nebraska Workers'
4 Compensation Act. Such an election shall (a) be effective from the date
5 of such written agreement until such agreement is terminated, (b) be
6 enforceable against such self-insured motor carrier in the same manner
7 and to the same extent as claims arising under the Nebraska Workers'
8 Compensation Act by employees of such self-insured motor carrier, and (c)
9 not be deemed to be a contract of insurance for purposes of Chapter 44.
10 Section 48-111 shall apply to the individual lessor and the self-insured
11 motor carrier with respect to personal injury or death caused to such
12 individual lessor by accident or occupational disease arising out of and
13 in the course of performing services for such self-insured motor carrier
14 in connection with such lease while such election is effective.

15 Sec. 42. Section 71-507, Reissue Revised Statutes of Nebraska, is
16 amended to read:

17 71-507 For purposes of sections 71-507 to 71-513:

18 (1) Alternate facility means a facility other than a health care
19 facility that receives a patient transported to the facility by an
20 emergency services provider;

21 (2) Department means the Department of Health and Human Services;

22 (3) Designated physician means the physician representing the
23 emergency services provider as identified by name, address, and telephone
24 number on the significant exposure report form. The designated physician
25 shall serve as the contact for notification in the event an emergency
26 services provider believes he or she has had significant exposure to an
27 infectious disease or condition. Each emergency services provider shall
28 designate a physician as provided in subsection (2) of section 71-509;

29 (4) Emergency services provider means an ~~out-of-hospital~~ emergency
30 care provider licensed pursuant to the Emergency Medical Services
31 Practice Act or authorized pursuant to the EMS Personnel Licensure

1 Interstate Compact, a sheriff, a deputy sheriff, a police officer, a
2 state highway patrol officer, a funeral director, a paid or volunteer
3 firefighter, a school district employee, and a person rendering emergency
4 care gratuitously as described in section 25-21,186;

5 (5) Funeral director means a person licensed under section 38-1414
6 or an employee of such a person with responsibility for transport or
7 handling of a deceased human;

8 (6) Funeral establishment means a business licensed under section
9 38-1419;

10 (7) Health care facility has the meaning found in sections 71-419,
11 71-420, 71-424, and 71-429 or any facility that receives patients of
12 emergencies who are transported to the facility by emergency services
13 providers;

14 (8) Infectious disease or condition means hepatitis B, hepatitis C,
15 meningococcal meningitis, active pulmonary tuberculosis, human
16 immunodeficiency virus, diphtheria, plague, hemorrhagic fevers, rabies,
17 and such other diseases as the department may by rule and regulation
18 specify;

19 (9) Patient means an individual who is sick, injured, wounded,
20 deceased, or otherwise helpless or incapacitated;

21 (10) Patient's attending physician means the physician having the
22 primary responsibility for the patient as indicated on the records of a
23 health care facility;

24 (11) Provider agency means any law enforcement agency, fire
25 department, emergency medical service, funeral establishment, or other
26 entity which employs or directs emergency services providers or public
27 safety officials;

28 (12) Public safety official means a sheriff, a deputy sheriff, a
29 police officer, a state highway patrol officer, a paid or volunteer
30 firefighter, a school district employee, and any civilian law enforcement
31 employee or volunteer performing his or her duties, other than those as

1 an emergency services provider;

2 (13) Responsible person means an individual who has been designated
3 by an alternate facility to carry out the facility's responsibilities
4 under sections 71-507 to 71-513. A responsible person may be designated
5 on a case-by-case basis;

6 (14) Significant exposure means a situation in which the body
7 fluids, including blood, saliva, urine, respiratory secretions, or feces,
8 of a patient or individual have entered the body of an emergency services
9 provider or public safety official through a body opening including the
10 mouth or nose, a mucous membrane, or a break in skin from cuts or
11 abrasions, from a contaminated needlestick or scalpel, from intimate
12 respiratory contact, or through any other situation when the patient's or
13 individual's body fluids may have entered the emergency services
14 provider's or public safety official's body or when an airborne pathogen
15 may have been transmitted from the patient or individual to the emergency
16 services provider or public safety official; and

17 (15) Significant exposure report form means the form used by the
18 emergency services provider to document information necessary for
19 notification of significant exposure to an infectious disease or
20 condition.

21 Sec. 43. Section 71-509, Reissue Revised Statutes of Nebraska, is
22 amended to read:

23 71-509 (1) If a health care facility or alternate facility
24 determines that a patient treated or transported by an emergency services
25 provider has been diagnosed or detected with an infectious airborne
26 disease, the health care facility or alternate facility shall notify the
27 department as soon as practical but not later than forty-eight hours
28 after the determination has been made. The department shall investigate
29 all notifications from health care facilities and alternate facilities
30 and notify as soon as practical the physician medical director of each
31 emergency medical service with an affected ~~out-of-hospital~~ emergency

1 medical care services provider employed by or associated with the
2 service, the fire chief of each fire department with an affected
3 firefighter employed by or associated with the department, the head of
4 each law enforcement agency with an affected peace officer employed by or
5 associated with the agency, the funeral director of each funeral
6 establishment with an affected individual employed by or associated with
7 the funeral establishment, and any emergency services provider known to
8 the department with a significant exposure who is not employed by or
9 associated with an emergency medical service, a fire department, a law
10 enforcement agency, or a funeral establishment. Notification of affected
11 individuals shall be made as soon as practical.

12 (2) Whenever an emergency services provider believes he or she has
13 had a significant exposure while acting as an emergency services
14 provider, he or she may complete a significant exposure report form. A
15 copy of the completed form shall be given by the emergency services
16 provider to the health care facility or alternate facility, to the
17 emergency services provider's supervisor, and to the designated
18 physician.

19 (3) Upon receipt of the significant exposure form, if a patient has
20 been diagnosed during the normal course of treatment as having an
21 infectious disease or condition or information is received from which it
22 may be concluded that a patient has an infectious disease or condition,
23 the health care facility or alternate facility receiving the form shall
24 notify the designated physician pursuant to subsection (5) of this
25 section. If the patient has not been diagnosed as having an infectious
26 disease or condition and upon the request of the designated physician,
27 the health care facility or alternate facility shall request the
28 patient's attending physician or other responsible person to order the
29 necessary diagnostic testing of the patient to determine the presence of
30 an infectious disease or condition. Upon such request, the patient's
31 attending physician or other responsible person shall order the necessary

1 diagnostic testing subject to section 71-510. Each health care facility
2 shall develop a policy or protocol to administer such testing and assure
3 confidentiality of such testing.

4 (4) Results of tests conducted under this section and section 71-510
5 shall be reported by the health care facility or alternate facility that
6 conducted the test to the designated physician and to the patient's
7 attending physician, if any.

8 (5) Notification of the patient's diagnosis of infectious disease or
9 condition, including the results of any tests, shall be made orally to
10 the designated physician within forty-eight hours of confirmed diagnosis.
11 A written report shall be forwarded to the designated physician within
12 seventy-two hours of confirmed diagnosis.

13 (6) Upon receipt of notification under subsection (5) of this
14 section, the designated physician shall notify the emergency services
15 provider of the exposure to infectious disease or condition and the
16 results of any tests conducted under this section and section 71-510.

17 (7) The notification to the emergency services provider shall
18 include the name of the infectious disease or condition diagnosed but
19 shall not contain the patient's name or any other identifying
20 information. Any person receiving such notification shall treat the
21 information received as confidential and shall not disclose the
22 information except as provided in sections 71-507 to 71-513.

23 (8) The provider agency shall be responsible for the costs of
24 diagnostic testing required under this section and section 71-510, except
25 that if a person renders emergency care gratuitously as described in
26 section 25-21,186, such person shall be responsible for the costs.

27 (9) The patient's attending physician shall inform the patient of
28 test results for all tests conducted under such sections.

29 Sec. 44. Section 71-8226, Reissue Revised Statutes of Nebraska, is
30 amended to read:

31 71-8226 Physician medical director means a qualified physician who

1 is responsible for the medical supervision of ~~out-of-hospital~~ emergency
2 care providers and verification of skill proficiency of ~~out-of-hospital~~
3 emergency care providers.

4 Sec. 45. Section 71-8227, Reissue Revised Statutes of Nebraska, is
5 amended to read:

6 71-8227 Qualified physician surrogate means a qualified, trained
7 medical person, designated by a qualified physician in writing to act as
8 an agent for the physician in directing the actions of ~~out-of-hospital~~
9 emergency care providers.

10 Sec. 46. Section 71-8236, Reissue Revised Statutes of Nebraska, is
11 amended to read:

12 71-8236 The State Trauma Advisory Board is created. The board shall
13 be composed of representatives knowledgeable in emergency medical
14 services and trauma care, including emergency medical providers such as
15 physicians, nurses, hospital personnel, prehospital or emergency care
16 ~~out-of-hospital~~ providers, local government officials, state officials,
17 consumers, and persons affiliated professionally with health science
18 schools. The Director of Public Health or his or her designee shall
19 appoint the members of the board for staggered terms of three years each.
20 The department shall provide administrative support to the board. All
21 members of the board may be reimbursed for their actual and necessary
22 expenses incurred in the performance of their duties as such members as
23 provided in sections 81-1174 to 81-1177. The terms of members
24 representing the same field shall not expire at the same time.

25 The board shall elect a chairperson and a vice-chairperson whose
26 terms of office shall be for two years. The board shall meet at least
27 twice per year by written request of the director or the chairperson.

28 Sec. 47. Section 71-8237, Reissue Revised Statutes of Nebraska, is
29 amended to read:

30 71-8237 The State Trauma Advisory Board shall:

31 (1) Advise the department regarding trauma care needs throughout the

1 state;

2 (2) Advise the Board of Emergency Medical Services regarding trauma
3 care to be provided throughout the state by ~~out-of-hospital~~ and emergency
4 medical services;

5 (3) Review the regional trauma plans and recommend changes to the
6 department before the department adopts the plans;

7 (4) Review proposed departmental rules and regulations for trauma
8 care;

9 (5) Recommend modifications in rules regarding trauma care; and

10 (6) Draft a five-year statewide prevention plan that each trauma
11 care region shall implement.

12 Sec. 48. Section 71-8240, Reissue Revised Statutes of Nebraska, is
13 amended to read:

14 71-8240 The department shall establish and maintain the following on
15 a statewide basis:

16 (1) Trauma system objectives and priorities;

17 (2) Minimum trauma standards for facilities, equipment, and
18 personnel for advanced, basic, comprehensive, and general level trauma
19 centers and specialty level burn or pediatric trauma centers;

20 (3) Minimum standards for facilities, equipment, and personnel for
21 advanced, intermediate, and general level rehabilitation centers;

22 (4) Minimum trauma standards for the development of facility patient
23 care protocols;

24 (5) Trauma care regions as provided for in section 71-8250;

25 (6) Recommendations for an effective trauma transportation system;

26 (7) The minimum number of hospitals and health care facilities in
27 the state and within each trauma care region that may provide designated
28 trauma care services based upon approved regional trauma plans;

29 (8) The minimum number of prehospital or emergency ~~out-of-hospital~~
30 care providers in the state and within each trauma care region that may
31 provide trauma care services based upon approved regional trauma plans;

1 (9) A format for submission of the regional trauma plans to the
2 department;

3 (10) A program for emergency medical services and trauma care
4 research and development;

5 (11) Review and approve regional trauma plans;

6 (12) The initial designation of hospitals and health care facilities
7 to provide designated trauma care services in accordance with needs
8 identified in the approved regional trauma plan; and

9 (13) The trauma implementation plan incorporating the regional
10 trauma plans.

11 Sec. 49. Section 71-8248, Reissue Revised Statutes of Nebraska, is
12 amended to read:

13 71-8248 The department shall establish and maintain a statewide
14 trauma registry to collect and analyze data on the incidence, severity,
15 and causes of trauma, including traumatic brain injury. The registry
16 shall be used to improve the availability and delivery of prehospital or
17 emergency ~~out-of-hospital~~ care and hospital trauma care services.
18 Specific data elements of the registry shall be defined by rule and
19 regulation of the department. Every health care facility designated as an
20 advanced, a basic, a comprehensive, or a general level trauma center, a
21 specialty level burn or pediatric trauma center, an advanced, an
22 intermediate, or a general level rehabilitation center, or a prehospital
23 or emergency care ~~out-of-hospital~~ provider shall furnish data to the
24 registry. All other hospitals may furnish trauma data as required by the
25 department by rule and regulation. All hospitals involved in the care of
26 a trauma patient shall have unrestricted access to all prehospital
27 reports for the trauma registry for that specific trauma occurrence.

28 Sec. 50. Section 71-8249, Reissue Revised Statutes of Nebraska, is
29 amended to read:

30 71-8249 (1) All data collected under section 71-8248 shall be held
31 confidential pursuant to sections 81-663 to 81-675. Confidential patient

1 medical record data shall only be released as (a) Class I, II, or IV
2 medical records under sections 81-663 to 81-675, (b) aggregate or case-
3 specific data to the regional trauma system quality assurance program and
4 the regional trauma advisory boards, (c) protected health information to
5 a public health authority, as such terms are defined under the federal
6 Health Insurance Portability and Accountability Act of 1996, as such act
7 existed on January 1, 2008, and (d) protected health information, as
8 defined under the federal Health Insurance Portability and Accountability
9 Act of 1996, as such act existed on January 1, 2008, to an emergency
10 medical service, to an ~~out-of-hospital~~ emergency care provider, to a
11 licensed health care facility, or to a center that will treat or has
12 treated a specific patient.

13 A record may be shared with the emergency medical service, the ~~out-~~
14 ~~of-hospital~~ emergency care provider, the licensed health care facility,
15 or center that reported that specific record.

16 (2) Patient care quality assurance proceedings, records, and reports
17 developed pursuant to this section and section 71-8248 are confidential
18 and are not subject to discovery by subpoena or admissible as evidence in
19 any civil action, except pursuant to a court order which provides for the
20 protection of sensitive information of interested parties, including the
21 department, pursuant to section 25-12,123.

22 Sec. 51. Section 71-8251, Reissue Revised Statutes of Nebraska, is
23 amended to read:

24 71-8251 The department shall establish a regional trauma advisory
25 board within each trauma care region. The department shall appoint
26 members, to be comprised of a balance of hospital representatives and
27 ~~out-of-hospital~~ emergency care ~~services~~ providers, local elected
28 officials, consumers, local law enforcement representatives, and local
29 government agencies involved in the delivery of emergency medical
30 services and trauma care recommended by the local emergency medical
31 services providers and medical facilities located within the region. All

1 members of the board may be reimbursed for their actual and necessary
2 expenses incurred in the performance of their duties as such members
3 pursuant to sections 81-1174 to 81-1177.

4 Sec. 52. Section 71-8253, Reissue Revised Statutes of Nebraska, is
5 amended to read:

6 71-8253 (1) If there are conflicts between the Statewide Trauma
7 System Act and the Emergency Medical Services Practice Act pertaining to
8 ~~out-of-hospital~~ emergency medical services, the Emergency Medical
9 Services Practice Act shall control.

10 (2) Nothing in the Statewide Trauma System Act shall limit a
11 patient's right to choose the physician, hospital, facility,
12 rehabilitation center, specialty level burn or pediatric trauma center,
13 or other provider of health care services.

14 Sec. 53. Original sections 13-1801, 23-1821, 28-907, 28-929,
15 28-929.01, 28-930, 28-931, 28-931.01, 38-1202, 38-1203, 38-1209, 38-1210,
16 38-1211, 38-1213, 38-1226, 38-1228, 38-1233, 38-1234, 48-115, 71-507,
17 71-509, 71-8226, 71-8227, 71-8236, 71-8237, 71-8240, 71-8248, 71-8249,
18 71-8251, and 71-8253, Reissue Revised Statutes of Nebraska, sections
19 13-303, 28-934, 38-1201, 38-1204, 38-1204.01, 38-1206.01, 38-1207.01,
20 38-1207.02, 38-1208, 38-1208.01, 38-1208.02, 38-1215, 38-1216, 38-1217,
21 38-1218, 38-1224, 38-1225, 38-1232, and 38-1237, Revised Statutes
22 Cumulative Supplement, 2018, and section 38-1220, Revised Statutes
23 Supplement, 2019, are repealed.