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AB-2130 Emergency medical services: training. (2021-2022)

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Assembly Bill No. 2130

CHAPTER 256

An act to amend Sections 1797.170, 1797.171, and 1797.172 of the Health and Safety Code, relating to emergency medical services.

[Approved by Governor September 06, 2022. Filed with Secretary of State September 06, 2022.]

LEGISLATIVE COUNSEL'S DIGEST

AB 2130, Cunningham. Emergency medical services: training.

Under existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, the Emergency Medical Services Authority is responsible for establishing minimum standards and promulgating regulations for the training and scope of practice for an Emergency Medical Technician I and II (EMT-I and EMT-II) and Emergency Medical Technician-Paramedic (EMT-P).

This bill, commencing July 1, 2024, would require an EMT-I, EMT-II, and EMT-P, upon initial licensure, to complete at least 20 minutes of training on issues relating to human trafficking.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 1797.170 of the Health and Safety Code is amended to read:

1797.170. (a) The authority shall develop and, after approval by the commission pursuant to Section 1799.50, adopt regulations for the training and scope of practice for EMT-I certification.

(b) (1) No later than July 1, 2019, the authority, local EMS agency, and certifying entity shall require an applicant to provide either the individual taxpayer identification number or social security number for purposes of applying for a certificate or the renewal of a certificate.

(2) If the authority, local EMS agency, or certifying entity utilizes a national examination to issue a certificate, and if a reciprocity agreement or comity exists between the State of California and the state requesting release of the individual taxpayer identification number or social security number, any deputy, agent, clerk, officer, or employee of the authority or agency may release an individual's taxpayer identification number or social security number to an examination or certifying entity, only for the purpose of verification of certification or examination status.

(3) The individual taxpayer identification or the social security number shall serve to establish the identification of persons affected by state tax laws and for purposes of establishing compliance with subsection (a) of Section 666 of Title 42 of the

United States Code, Section 60.15 of Title 45 of the Code of Federal Regulations, Section 17520 of the Family Code, and Section 11105 of the Penal Code, and to that end, the information furnished pursuant to this section shall be used exclusively for those purposes.

(4) The authority, local EMS agency, and certifying entity shall not do either of the following:

(A) Require an applicant to disclose citizenship status or immigration status for purposes of the application or renewal of a certificate.

(B) Deny certification to an otherwise qualified and eligible applicant based solely on the applicant's citizenship status or immigration status.

(c) An individual certified as an EMT-I pursuant to this division shall be recognized as an EMT-I on a statewide basis, and recertification shall be based on statewide standards.

(d) Effective July 1, 1990, an individual certified as an EMT-I pursuant to this act shall complete a course of training on the nature of sudden infant death syndrome that is developed by the California SIDS program in the State Department of Public Health in consultation with experts in the field of sudden infant death syndrome.

(e) On or before July 1, 2016, the authority shall develop and, after approval by the commission pursuant to Section 1799.50, adopt regulations to include the administration of naloxone hydrochloride in the training and scope of practice of EMT-I certification. These regulations shall be substantially similar to existing regulations set forth in Chapter 3 (commencing with Section 100101) of Division 9 of Title 22 of the California Code of Regulations that authorize an EMT-I to receive EMT-II training in the administration of naloxone hydrochloride without having to complete the entire EMT-II certification course. This subdivision shall be implemented in accordance with Chapter 5 (commencing with Section 1798).

(f) To ensure that EMT-Is licensed in this state are able to assist individuals living with cognitive impairment, the authority shall, as part of EMT-I basic training, include a component within the dementia-specific training hours on how to interact effectively with persons with dementia and their caregivers. In developing this component, the authority may consult with community organizations advocating on behalf of Californians with dementia or Alzheimer's disease.

(g) Commencing July 1, 2024, the authority shall require every EMT-I, upon initial licensure, to complete at least 20 minutes of training on issues relating to human trafficking.

SEC. 2. Section 1797.171 of the Health and Safety Code is amended to read:

1797.171. (a) The authority shall develop, and after approval of the commission pursuant to Section 1799.50, shall adopt, minimum standards for the training and scope of practice for EMT-II.

(b) (1) No later than July 1, 2019, the authority, local EMS agency, and certifying entity shall require an applicant to provide either the individual taxpayer identification number or social security number for purposes of applying for a certificate or the renewal of a certificate.

(2) If the authority, local EMS agency, or certifying entity utilizes a national examination to issue a certificate, and if a reciprocity agreement or comity exists between the State of California and the state requesting release of the individual taxpayer identification number or social security number, any deputy, agent, clerk, officer, or employee of the authority or agency may release an individual's taxpayer identification number or social security number to an examination or certifying entity, only for the purpose of verification of certification or examination status.

(3) The individual taxpayer identification or the social security number shall serve to establish the identification of persons affected by state tax laws and for purposes of establishing compliance with subsection (a) of Section 666 of Title 42 of the United States Code, Section 60.15 of Title 45 of the Code of Federal Regulations, Section 17520 of the Family Code, and Section 11105 of the Penal Code, and to that end, the information furnished pursuant to this section shall be used exclusively for those purposes.

(4) The authority, local EMS agency, and certifying entity shall not do either of the following:

(A) Require an applicant to disclose citizenship status or immigration status for purposes of the application or renewal of a certificate.

(B) Deny certification to an otherwise qualified and eligible applicant based solely on the applicant's citizenship status or immigration status.

(c) An EMT-II shall complete a course of training on the nature of sudden infant death syndrome in accordance with subdivision (d) of Section 1797.170.

(d) (1) In rural or remote areas of the state where patient transport times are particularly long and where local resources are inadequate to support an EMT-P program for EMS responses, the director may approve additions to the scope of practice of EMT-IIs serving the local system, if requested by the medical director of the local EMS agency, and if the EMT-II has received training equivalent to that of an EMT-P. The approval of the director, in consultation with a committee of local EMS medical directors named by the Emergency Medical Directors Association of California, is required prior to implementation of any addition to a local optional scope of practice for EMT-IIs proposed by the medical director of a local EMS agency. A drug or procedure that is not part of the basic EMT-P scope of practice, including, but not limited to, any approved local options, shall not be added to any EMT-II scope of practice pursuant to this subdivision.

(2) Approval of additions to the scope of practices pursuant to this subdivision may be given only for EMT-II programs in effect on January 1, 1994.

(e) To ensure that EMT-IIs licensed in this state are able to assist individuals living with cognitive impairment, the authority shall, as part of EMT-II basic training, include a component within the dementia-specific training hours on how to interact effectively with persons with dementia and their caregivers. In developing this component, the authority may consult with community organizations advocating on behalf of Californians with dementia or Alzheimer's disease.

(f) Commencing July 1, 2024, the authority shall require every EMT-II, upon initial licensure, to complete at least 20 minutes of training on issues relating to human trafficking.

SEC. 3. Section 1797.172 of the Health and Safety Code is amended to read:

1797.172. (a) The authority shall develop and, after approval by the commission pursuant to Section 1799.50, adopt minimum standards for the training and scope of practice for EMT-Ps.

(b) The approval of the director, in consultation with a committee of local EMS medical directors named by the EMS Medical Directors Association of California, is required prior to implementation of any addition to a local optional scope of practice for EMT-Ps proposed by the medical director of a local EMS agency.

(c) (1) Notwithstanding any other law, the authority shall be the agency solely responsible for licensure and licensure renewal of EMT-Ps who meet the standards and are not precluded from licensure because of any of the reasons listed in subdivision (c) of Section 1798.200. The authority shall require an applicant to provide an individual taxpayer identification number or the social security number in order to establish the identity of the applicant. The information obtained as a result of a state and federal level criminal offender record information search shall be used in accordance with Section 11105 of the Penal Code, and to determine whether the applicant is subject to denial of licensure or licensure renewal pursuant to this division. Submission of fingerprint images to the Department of Justice may not be required for licensure renewal upon determination by the authority that fingerprint images have previously been submitted to the Department of Justice during initial licensure, or a previous licensure renewal, provided that the license has not lapsed and the applicant has resided continuously in the state since the initial licensure.

(2) The individual taxpayer identification or the social security number shall serve to establish the identification of persons affected by state tax laws and for purposes of establishing compliance with subsection (a) of Section 666 of Title 42 of the United States Code, Section 60.15 of Title 45 of the Code of Federal Regulations, Section 17520 of the Family Code, and Section 11105 of the Penal Code, and to that end, the information furnished pursuant to this section shall be used exclusively for those purposes.

(3) If the authority utilizes a national examination to issue a certificate, and if a reciprocity agreement or comity exists between the State of California and the state requesting release of the individual taxpayer identification number or social security number, any deputy, agent, clerk, officer, or employee of the authority may release an individual's taxpayer identification number or social security number to an examination or certifying entity, only for the purpose of verification of certification or examination status.

(4) The authority shall not do either of the following:

(A) Require an applicant to disclose citizenship status or immigration status for purposes of the application or renewal of a certificate.

(B) Deny certification to an applicant based solely on the applicant's citizenship status or immigration status.

(5) On and after January 1, 2023, the Paramedic Disciplinary Review Board shall make the final determination after an appeal of a licensure denial pursuant to Article 2.5 (commencing with Section 1797.125).

(d) The authority shall charge fees for the licensure and licensure renewal of EMT-Ps in an amount sufficient to support the authority's licensure program at a level that ensures the qualifications of the individuals licensed to provide quality care. The basic fee for licensure or licensure renewal of an EMT-P shall not exceed one hundred twenty-five dollars (\$125) until the adoption of

regulations that specify a different amount that does not exceed the authority's EMT-P licensure, license renewal, and enforcement programs. The authority shall annually evaluate fees to determine if the fee is sufficient to fund the actual costs of the authority's licensure, licensure renewal, and enforcement programs. If the evaluation shows that the fees are excessive or are insufficient to fund the actual costs of the authority's EMT-P licensure, licensure renewal, and enforcement programs, then the fees shall be adjusted accordingly through the rulemaking process described in the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code). Separate additional fees may be charged, at the option of the authority, for services that are not shared by all applicants for licensure and licensure renewal, including, but not limited to, any of the following services:

(1) Initial application for licensure as an EMT-P.

(2) Competency testing, the fee for which shall not exceed thirty dollars (\$30), except that an additional fee may be charged for the cost of any services that provide enhanced availability of the exam for the convenience of the EMT-P, such as on-demand electronic testing.

(3) Fingerprint and criminal record check. The applicant shall, if applicable according to subdivision (c), submit fingerprint images and related information for criminal offender record information searches with the Department of Justice and the Federal Bureau of Investigation.

(4) Out-of-state training equivalency determination.

(5) Verification of continuing education for a lapse in licensure.

(6) Replacement of a lost licensure card. The fees charged for individual services shall be set so that the total fees charged to EMT-Ps shall not exceed the authority's actual total cost for the EMT-P licensure program.

(e) The authority may provide nonconfidential, nonpersonal information relating to EMS programs to interested persons upon request, and may establish and assess fees for the provision of this information. These fees shall not exceed the costs of providing the information.

(f) At the option of the authority, fees may be collected for the authority by an entity that contracts with the authority to provide any of the services associated with the EMT-P program. All fees collected for the authority in a calendar month by any entity designated by the authority pursuant to this section to collect fees for the authority shall be transmitted to the authority for deposit into the Emergency Medical Services Personnel Fund within 30 calendar days following the last day of the calendar month in which the fees were received by the designated entity, unless the contract between the entity and the authority specifies a different timeframe.

(g) To ensure that EMT-Ps licensed in this state are able to assist individuals living with cognitive impairment, the authority shall, as part of EMT-P basic training, include a component within the dementia-specific training hours on how to interact effectively with persons with dementia and their caregivers. In developing this component, the authority may consult with community organizations advocating on behalf of Californians with dementia or Alzheimer's disease.

(h) Commencing July 1, 2024, the authority shall require every EMT-P, upon initial licensure, to complete at least 20 minutes of training on issues relating to human trafficking.