

107TH CONGRESS
1ST SESSION

H. R. 1353

To amend the Public Health Service Act and titles XVIII and XIX of the Social Security Act to sustain access to vital emergency medical services in rural areas.

IN THE HOUSE OF REPRESENTATIVES

APRIL 3, 2001

Mr. KENNEDY of Minnesota introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Public Health Service Act and titles XVIII and XIX of the Social Security Act to sustain access to vital emergency medical services in rural areas.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Sustaining Access to
5 Vital Emergency Medical Services Act of 2001”.

1 **SEC. 2. RURAL EMERGENCY MEDICAL SERVICE TRAINING**
2 **AND EQUIPMENT ASSISTANCE PROGRAM.**

3 Part E of title XII of the Public Health Service Act
4 (42 U.S.C. 300d–51 et seq.), as amended by section 1305
5 of the Children’s Health Act of 2000 (Public Law 106–
6 310; 114 Stat. 1141) is amended by adding at the end
7 the following new section:

8 **“SEC. 1254. RURAL EMERGENCY MEDICAL SERVICE TRAIN-**
9 **ING AND EQUIPMENT ASSISTANCE PROGRAM.**

10 “(a) GRANTS.—The Secretary, acting through the
11 Administrator of the Health Resources and Services Ad-
12 ministration (referred to in this section as the ‘Secretary’)
13 shall award grants to eligible entities to enable such enti-
14 ties to provide for improved emergency medical services
15 in rural areas.

16 “(b) ELIGIBILITY.—To be eligible to receive a grant
17 under this section, an entity shall—

18 “(1) be—

19 “(A) a State emergency medical services
20 office;

21 “(B) a State emergency medical services
22 association;

23 “(C) a State office of rural health;

24 “(D) a local government entity;

25 “(E) a State or local ambulance provider;

26 or

1 “(F) any other entity determined appro-
2 priate by the Secretary; and

3 “(2) prepare and submit to the Secretary an
4 application at such time, in such manner, and con-
5 taining such information as the Secretary may re-
6 quire, that includes—

7 “(A) a description of the activities to be
8 carried out under the grant; and

9 “(B) an assurance that the applicant will
10 comply with the matching requirement of sub-
11 section (e).

12 “(c) USE OF FUNDS.—An entity shall use amounts
13 received under a grant made under subsection (a), either
14 directly or through grants to emergency medical service
15 squads that are located in, or that serve residents of, a
16 non-metropolitan statistical area, an area designated as
17 rural area by any law or regulation of the State, or a rural
18 census tract of a metropolitan statistical area (as deter-
19 mined under the most recent Goldsmith Modification,
20 originally published in the Federal Register on February
21 27, 1992 (57 Fed. Reg. 6725)), to—

22 “(1) hire or recruit emergency medical service
23 personnel;

24 “(2) recruit or retain volunteer emergency med-
25 ical service personnel;

1 “(3) train emergency medical service personnel
2 in emergency response, injury prevention, safety
3 awareness, and other topics relevant to the delivery
4 of emergency medical services;

5 “(4) fund specific training to meet State or
6 Federal certification requirements;

7 “(5) develop new ways to educate emergency
8 health care providers through the use of technology-
9 enhanced educational methods (such as distance
10 learning);

11 “(6) acquire emergency medical services vehi-
12 cles, including ambulances;

13 “(7) acquire emergency medical services equip-
14 ment, including cardiac defibrillators;

15 “(8) acquire personal protective equipment for
16 emergency medical services personnel as required by
17 the Occupational Safety and Health Administration;
18 and

19 “(9) educate the public concerning
20 cardiopulmonary resuscitation (CPR), first aid, in-
21 jury prevention, safety awareness, illness prevention,
22 and other related emergency preparedness topics.

23 “(d) PREFERENCE.—In awarding grants under this
24 section the Secretary shall give preference to—

1 “(1) applications that reflect a collaborative ef-
2 fort by 2 or more of the entities described in sub-
3 paragraphs (A) through (F) of subsection (b)(1);
4 and

5 “(2) applications submitted by entities that in-
6 tend to use amounts provided under the grant to
7 fund activities described in any of paragraphs (1)
8 through (5) of subsection (c).

9 “(e) MATCHING REQUIREMENT.—The Secretary may
10 not make a grant under this section to an entity unless
11 the entity agrees that the entity will make available (di-
12 rectly or through contributions from other public or pri-
13 vate entities) non-Federal contributions toward the activi-
14 ties to be carried out under the grant in an amount equal
15 to 5 percent of the amount received under the grant.

16 “(f) EMERGENCY MEDICAL SERVICES.—In this sec-
17 tion, the term ‘emergency medical services’—

18 “(1) means resources used by a qualified public
19 or private nonprofit entity, or by any other entity
20 recognized as qualified by the State involved, to de-
21 liver medical care outside of a medical facility under
22 emergency conditions that occur—

23 “(A) as a result of the condition of the pa-
24 tient; or

1 “(B) as a result of a natural disaster or
2 similar situation; and

3 “(2) includes services delivered by an emer-
4 gency medical services provider (either compensated
5 or volunteer) or other provider recognized by the
6 State involved that is licensed or certified by the
7 State as an emergency medical technician or its
8 equivalent (as determined by the State), a registered
9 nurse, a physician assistant, or a physician that pro-
10 vides services similar to services provided by such an
11 emergency medical services provider.

12 “(g) AUTHORIZATION OF APPROPRIATIONS.—

13 “(1) IN GENERAL.—There is authorized to be
14 appropriated to carry out this section, \$50,000,000
15 for each of fiscal years 2002 through 2007.

16 “(2) ADMINISTRATIVE COSTS.—The Director
17 may use not more than 10 percent of the amount
18 appropriated under paragraph (1) for a fiscal year
19 for the administrative expenses of carrying out this
20 section.”.

21 **SEC. 3. PRUDENT LAYPERSON STANDARD FOR EMERGENCY**
22 **AMBULANCE SERVICES UNDER MEDICARE**
23 **AND MEDICAID.**

24 (a) AMBULANCE SERVICES FOR MEDICARE FEE-
25 FOR-SERVICE BENEFICIARIES.—Section 1861(s)(7) of

1 the Social Security Act (42 U.S.C. 1395x(s)(7)) is amend-
2 ed by inserting before the semicolon at the end the fol-
3 lowing: “, except that such regulations shall not fail to
4 treat ambulance services as medical and other health serv-
5 ices solely because the ultimate diagnosis of the individual
6 receiving the ambulance services results in the conclusion
7 that ambulance services were not necessary, as long as the
8 request for ambulance services is made after the sudden
9 onset of a medical condition that would be classified as
10 an emergency medical condition (as defined in section
11 1852(d)(3)(B))”.

12 (b) AMBULANCE SERVICES FOR MEDICARE+CHOICE
13 ENROLLEES.—Section 1852(d)(3)(A) of the Social Secu-
14 rity Act (42 U.S.C. 1395w–22(d)(3)(A)) is amended by
15 inserting “(including the services described in section
16 1861(s)(7))” after “outpatient services” in the matter
17 preceding clause (i).

18 (c) AMBULANCE SERVICES IN MEDICAID MANAGED
19 CARE PLANS.—Section 1932(b)(2)(B) of the Social Secu-
20 rity Act (42 U.S.C. 1396u–2(b)(2)(B)) is amended by in-
21 serting “(including the services described in section
22 1861(s)(7) (if covered by the State plan))” after “out-
23 patient services” in the matter preceding clause (i).

1 (d) **EFFECTIVE DATE.**—The amendments made by
2 this section shall apply with respect to services provided
3 on and after the date of enactment of the Act.

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