

HOUSE COMMITTEE ON HUMAN RESOURCES

June 6, 1997 Hearing Room H-170

1:00 PM Tapes 123 - 125

MEMBERS PRESENT:

Rep. Patti Milne, Chair

Rep. Jackie Taylor, Vice-Chair

Rep. Richard Devlin

Rep. Steve Harper

Rep. Jane Lokan

Rep. Kitty Piercy

MEMBER EXCUSED:

STAFF PRESENT:

Lori Long, Administrator

Diane Quinones, Administrative Support

MEASURE/ISSUES HEARD:

HB 3689 Work Session

SB 890 Public Hearing / Work Session

SB 435 Public Hearing

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

Tape/#	Speaker	Comments
TAPE 123, A		
001	Chair Milne	Calls meeting to order at 1:35 p.m.
002	Chair Milne	Opens a work session on HB 3689.
<u>HB 3689</u> <u>WORK</u> <u>SESSION</u>		

003	Rep. Jo Ann Bowman	<p>Oregon Legislator, House District 19, testifies in support of HB 3689 and the -4 amendments dated 06/04/97 (EXHIBIT A).</p> <p>* the amendments retain the grandparent exemption</p> <p>* the bill restores immigrant benefits to those that will become ineligible under the Federal Welfare Reform Act</p> <p>* discusses the proposal of an interim committee that could address issues of the bill that were not dealt with during the 1997 session</p>
015	Chair Milne	Asks if the -4 amendments before the committee bring the bill up to date.
018	Rep. Bowman	Responds affirmatively.
028	Rep. Kruse	MOTION: Moves to ADOPT HB 3689-4 amendments dated 06/04/97.
033	Chair Milne	Hearing no objection, declares the motion CARRIED.
034	Rep. Kruse	MOTION: Moves HB 3689 to the full committee with a DO PASS AS AMENDED recommendation.
038	Rep. Devlin	<p>Comments on the necessity for action that insures a quality of life for legal immigrants.</p> <p>Explains that he holds a small reservation about exempting all grandparents from work requirements.</p>
044	Rep. Bowman	Asks the committee if an emergency clause can be adopted as a conceptual amendment.
046	Rep. Kruse	An emergency clause can appear in a budget note to be reviewed by Ways and Means.
		VOTE: 7-0
		AYE: In a roll call vote, all members present vote Aye.
055	Chair Milne	The motion CARRIES.
058	Rep. Bowman	Thanks the committee for their effort and support with HB 3689.
060	Chair Milne	Thanks Rep. Bowman for bringing the bill to the committee and vows to support it through Ways and Means.
062	Chair Milne	Closes the work session on HB 3689.
070	Chair Milne	Opens a public hearing on SB 890.
<u>SB 890</u> <u>PUBLIC</u>		

HEARING		
072	Sen. Ken Baker	<p>Oregon Legislator, Senate District 14, testifies in support of SB 890.</p> <ul style="list-style-type: none"> * in the early 1970s there were less than 2500 dialysis patients in the country * currently, there are 200,000 dialysis patients * Oregon has approximately 3000 dialysis patients * unlicensed technicians are performing dialysis services under the supervision of an RN or M.D. * the bill allows the Health Division in consultation with the Board of Medical Examiners (BME) and the Oregon Board of Nursing (OBN) to set up training that will result in the certification of dialysis technicians * approximately 150 unlicensed technicians in Oregon are working * there is national language that can be adopted into statute
092	Rep. Lokan	Asks what the practice is in other states.
095	Jim Curtis	<p>President, National Association of Nephrology Technicians (NANT), discusses the practice of certifying technicians in other states.</p> <ul style="list-style-type: none"> * 5 states currently have specific educational requirements to certify technicians * 6 states are considering adopting certification programs for dialysis technicians
101	Sen. Baker	<p>Oregon has hospital and clinical facilities training technician to provide kidney dialysis health care.</p> <p>The practice needs to become more regulated and standardized.</p>
104	Chair Milne	Asks if this kind of work is very precise or technical.
106	Sen. Baker	Responds affirmatively.
107	Rep. Kruse	Asks if there is any opposition to this bill.
111	Curtis	<ul style="list-style-type: none"> * There are some duties that the Oregon Nurses Association is concerned about delegating to dialysis technicians. * The ONA will bring these concerns forward during discussions intended to clarify educational requirements rather than during legislative hearings.
120	Rep. Taylor	Asks how the federal government has been involved in creating more dialysis patients between the mid 1970s and 1997.

123	Sen. Baker	In 1973 the US congress passed the End Stage Renal Disease Program to be paid, when necessary, by social security.
127	Rep. Taylor	Asks if more people were able to receive treatment because of this federal action.
130	Sen. Baker	Responds affirmatively.
134	Rep. Taylor	Asks about conducting dialysis in a private home and the responsibility of a technician to instruct such a patient in proper treatment procedures.
137	Curtis	This bill will only affect those technicians that are involved in clinical facilities and not home health care.
145	Chair Milne	Closes the public hearing on SB 890.
146	Chair Milne	Opens a work session on SB 890.
<u>SB 890</u> <u>WORK</u> <u>SESSION</u>		
147	Rep. Kruse	MOTION: Moves SB 890 to the floor with a DO PASS AS AMENDED recommendation.
150	Rep. Piercy	Asks if the Health Division is OK with this bill.
157	Kathleen Smail	Health Care Licensing Certification Programs, Oregon Health Division, testifies that the OHD is neutral on the bill and is ready to manage a program if the bill is passed.
		VOTE: 7-0 AYE: In a roll call vote, all members present vote Aye.
177	Chair Milne	The motion CARRIES. REP. LOKAN will lead discussion on the floor.
178	Chair Milne	Closes the work session on SB 890.
179	Chair Milne	Opens a public hearing on SB 435.
<u>SB 435</u> <u>PUBLIC</u> <u>HEARING</u>		
188	Sen. Bill Fisher	Oregon Legislator, Senate District 23, sponsor of SB 435, testifies in support of SB 435A. * This bill is an indication of providers wanting cost efficiency. * Asks the committee not to complicate it with too many amendments.
		Oregon Ambulance Association, submits and presents written testimony in support of SB 435A (EXHIBIT B).

228	Nan Hiem	<p>* bill clarifies that Emergency Medical Technicians (EMT) can perform non emergency work i.e. first aid care when it is incident to the operation of an ambulance</p> <p>* SB 435A is supported by the Oregon State Paramedics Association</p> <p>* Oregon Health Division (OHD) submitted a fiscal that has since been rescinded with the amendments adopted in the Senate Committee</p>
271	Shawn Baird	<p>EMT and Vice President of Operations, Woodburn Ambulance, submits and presents testimony in support of SB 435A (EXHIBIT C).</p> <p>* bill clarifies what EMTs are already doing i.e. "public assists"</p> <p>* discusses an example of an elderly person having frequent falls from their bed and calling EMTs for assistance</p> <p>* bill would have no impact on the emergency services provided by EMTs - emergency response time within agency regulations is not negotiable</p>
TAPE 124, A		
001	Baird	<p>* bill keeps the laws up to date around EMT jurisdiction within their practice</p> <p>* SB 435 requires no additional training, it addresses what EMTs are already doing.</p>
037	Long	Asks about the fiscal impact that accompanied the bill from the senate.
040	Hiem	<p>* The OHD is now saying that that fiscal is unnecessary.</p> <p>* Gregg Lander from the OHD is in attendance and can answer the committee's questions regarding this issue.</p>
043	Bruce Latta	<p>EMT, Vice President, Oregon Ambulance Association, President, Bay City Ambulance, testifies in support of SB 435A.</p> <p>* rural emergency service providers are in a unique situation of being available for non emergency responses since doctors and hospitals are not as accessible as in urban areas</p>
066	Rep. Harper	Asks who is saying that EMTs cannot respond to or provide non emergency care.
073'	Latta	<p>* No specific incident or statement has been made that says EMTs can't do these things.</p> <p>* Currently the scope of practice for EMTs doesn't clarify that non-emergency care is within its language, however, it is a service that is more often being provided by EMTs.</p>

		* as paid professionals the "good Samaritan law" doesn't protect EMTs
080	Hiem	An interim committee made up of many health care providers came up with the idea and intent of this bill.
095	Rep. Taylor	Asks for more clarification on the scope of practice for EMTs and if this will require further training.
099	Hiem	* This bill will not require further training. * First aid work is included in the EMT training. * The bill was amended with the language "incident to the operation of an ambulance."
105	Rep. Devlin	Asks if non-emergency health screening on school children or some such health related care might become part of the scope of practice for EMTs once this bill is passed.
110	Hiem	* The scope of practice for EMTs is set by the Board of Medical Examiners (BME) within the perimeters of the law.
118	Rep. Devlin	Asks if there is language that defines what an "incident to the operation of an ambulance is."
124	Baird	Responds affirmatively. * The language is in chapter 682. * This bill does not change the scope of what EMTs do.
142	Rep. Devlin	Asks if the committee is being asked to relay on the BME to define the functions of EMTs.
145	Hiem	Responds affirmatively. * The bill is written so that the scope of practice will not be broadened, only clarified.
156	Sen. Kintigh	Oregon Legislator, Senate District 22, testifies in opposition to SB 435. * Explains his concerns about expanding the scope of practice for EMTs, thus, bringing them into competition with registered nurses (RN) and others in private practice.
165	Jean Austin RN	Columbia River Association of Occupational Health Nurses, submits and presents the -A2 amendments (EXHIBIT D) limiting the scope of practice of EMTs and a position statement in opposition to SB 435 A (EXHIBIT E). * the public needs EMTs attending emergencies * Occupational Health Nurses have knowledge about non emergency health care that EMTs are not trained to provide
267	Rep. Harper	Asks Sen. Kintigh if these concerns were brought up in the Senate committee.

270	Sen. Kintigh	He asked questions while the bill was being heard by the Senate Committee and never felt comfortable that the answers he was given were very helpful.
287	Chair Milne	Asks for clarification of section 9 in the -A2 amendments regarding EMTs responding at a "place of employment."
290	Austin	<p>* "A place of employment" would be the work site of an individual in need of first response health care.</p> <p>* Section 9 is making sure that the employee in need will be given the most complete care by EMTs and a nurse from the work place.</p> <p>* The main point of the amendments is to limit the scope of practice of EMTs to perform first response, emergency care and transport.</p>
332	Rep. Piercy	Comments that the BME oversees the scope of practice for EMTs keeping an informed eye on what EMTs may or may not do.
340	Austin	<p>* The BME has approved an expanded scope of practice for physician assistants who are not even nurses.</p> <p>* Health Maintenance Organizations (HMOs) are about saving money more than providing safe, effective health care these days.</p> <p>* The issues should be about public safety.</p>
366	Rep. Piercy	Asks if the Oregon Nurses Association (ONA) has approved the -A2 amendments.
367	Austin	<p>* The amendments have the approval of the Occupational Health Nurse Association.</p> <p>* She is an ONA member, but is not representing that organization.</p>
375	Rep. Taylor	Asks if an Occupational Health Nurse is the first person called if care is needed on a job site.
380	Austin	<p>Responds affirmatively.</p> <p>The Occupational Health Nurse is called if they are on the site.</p>
388	Rep. Taylor	Asks for clarity of Austin's opposition.
395	Austin	<p>* EMTs don't have the knowledge of assessing non emergency first aid care needs.</p> <p>* The public is at risk for untrained decision making on the part of the EMT in a non emergency situation requiring treatment.</p>
430	Rep. Taylor	Comments that the amendments adopted on the Senate side state a response is limited to "incident to the operation of an ambulance" and that this would be enough of a limiting factor to the scope of practice of EMTs.

TAPE 123, B		
001	Austin	Does not understand why language in the original bill stating "emergency care does not include acts of medical diagnosis or prescription of therapeutic or corrective measures" was removed if the EMT proponents did not want to widen their scope of practice.
027	Chair Milne	Asks Sen. Kintigh if he has any further comments on the -A2 amendments to SB 435A.
031	Sen. Kintigh	* Limits are appropriate to place on EMTs. * As soon as additions are made to the scope of practice the profession will most likely be back to remove additional restrictions regarding their ability to provide care.
045	Chair Milne	Asks what the response would be if an elderly gentleman fell out of bed.
050	Sen. Kintigh	He would initially need to be attended to and then be referred to a doctor right away.
055	Austin	Comments that her father fell from his bed and the response team came and put him back in his bed without checking his vitals or determining if he needed to go to a hospital.
075	Rep. Taylor	Asks if a nurse is not available should the patient be automatically transported to a hospital.
087	Austin	EMTs should ask the right questions and take the right precautions with vital signs and determining cause to a certain degree. The problem is that EMTs have a wide range of ability and expertise and are not liable if they make a poor choice.
090	Rep. Taylor	Comments that that this amendment is expanding the scope of practice of the Occupational Health Nurse as an EMT consultant. Comments that the requests by the emergency response team seem reasonable and she cannot support the -A2 amendments.
120	Gary McLean	Northwest Paramedic Alliance, submits and presents written testimony in opposition to SB 435 (EXHIBIT F) * explains letters of opposition from the Multnomah County Democratic Central Committee and the Multnomah County Republican Central Committee * The Oregon State Ambulance Association stated that they weren't interested in scope of practice changes however, their written testimony conflicts with this statement. * There is reference to additional training in SB 435, page 3, lines 41-44, regarding minimal education requirements.

		<p>* The House Human Resource Committee recently passed out SB 193 which will eliminate EMT 1, 2, 3 and 4 levels perhaps causing conflict with SB 435.</p> <p>* discusses a letter from the BME stating that this bill has the potential to increase the scope of practice for EMTs significantly</p>
200	McLean	Continues presentation of written testimony.
260	John Praggastis	Northwest Paramedics Alliance, submits and presents written testimony in opposition to SB 435 (EXHIBIT G).
285	Rep. Taylor	Asks where permissive language exists in the bill that allows EMTs to write prescriptions.
290	Praggastis	<p>* It is done with reverse wording.</p> <p>* On page 1, lines 19 and 20, of SB 435A removes language referring to "prescription of therapeutic or corrective measures" thus causing the possible reversal of intent.</p>
300	Rep. Taylor	<p>Comments that "therapeutic measures" are not the same as writing prescriptions.</p> <p>"measures" are usually seen as actions</p> <p>Does not believe the intent of this language is to allow EMTs to write prescriptions.</p>
318	Praggastis	<p>* HMOs are causing EMTs to practice out of their scope of practice.</p> <p>* EMTs don't have patient histories or charts and no immediate access to the patient's doctors.</p> <p>* This bill may cause EMTs to step on the toes of allied health providers.</p> <p>* This bill was originally identified as a house keeping measure and progressed to routine health care legislation.</p>
363	Rep. Harper	Asks if this testimony was provided to the senate committee.
365	McLean	They found out about the bill the night before the senate committee was to hear the bill and did not have all this testimony ready.
375	Rep. Harper	Asks for more clarification on the specific duties that will widen the EMT scope of practice.
382	Praggastis	<p>* In the past EMTs have provided non emergency care including bandaging people and sending them on their way.</p> <p>* The HMOs are looking to benefit in big dollars with this bill since it could lower emergency room and hospital visits.</p> <p>* Ambulance technicians don't have the expertise and diagnostic</p>

		equipment to determine the proper long term treatment for sick individuals.
419	McLean	Explains that the language stating "incident to the operation of an ambulance" is not in correct. The word ambulance is plural in the bill and changes the meaning of the intent.
TAPE 124, B		
012	Chair Milne	Notes that the letter from Francis Martinez, Chair to the Multnomah County Republican Central Committee, is not an endorsement of the Central Committee but, is on his own behalf.
020	McLean	Was under the assumption that the letter represented the Central Committee however, does not have information that Mr. Martinez checked with all the committee members.
025	Chair Milne	The letter is not on Committee letterhead and does make reference that it is on behalf of the Committee.
027	McLean	Concurs with Chair Milne's comments.
037	Ray Hobizal	Practicing EMT and Director, American Medical Response, submits written testimony in support of SB 435 (EXHIBIT H). * SB 435A is a good piece of legislation on its own merit without the proposed amendments.
045	Terry Schmidt MD	Physician Advisor for Emergency Medical Response, testifies in support of SB 435. * Every EMT has a physician supervisor and all duties performed have specific protocols that are written by physicians. * The BME writes a scope of practice that enables but does not require EMTs to perform duties up to a certain level. * EMTs violate their scope of practice frequently when they run up against situations that don't need transport to a hospital but do need some immediate medical attention, this bill will allow EMTs to do what they are already doing as well as fix any potential problems resulting from EMTs handling non emergency treatment. * Supervising physicians will still be a part of the profession of EMTs
083	Rep. Lokan	Asks about the way that EMTs are generally used, their frequency of use by the public, and the most common situations they find themselves in.
086	Schmidt	* The most obvious assumption by the public is that EMTs are called in potentially life threatening situations i.e. a car accident, severe chest pains, physical violence, etc. * Many calls to an EMT unit are non emergency, functional, i.e.

		transporting a cancer patient from his home to the hospital for chemotherapy, putting people back in bed after a fall, etc.
098	Rep. Lokan	Asks if EMTs are provided with enough training that addresses asking the correct questions, taking vital signs, and making the right assessments before taking action.
101	Rep. Lokan	Responds affirmatively. Believes that the profession will be changing and additional training may be necessary in the future.
107	Rep. Devlin	Asks if the language of the bill is not defining scope of practice but is permissive.
108	Schmidt	Responds affirmatively.
109	Rep. Devlin	Asks if the proponents are trusting the scope of practice to the BME.
120	Schmidt	Responds affirmatively. Others who are involved are:

1. The Oregon Health Division

2. The physicians responsible for defining EMT protocols

122 Rep. Devlin Asks if it is the intention of the bill to allow the BME to include school health screenings, as an example, in EMT scope of practice at a future date.
* The BME could say that EMTs "can" provide health screenings but would not say that they "must."

126 Schmidt
* This bill addresses the scope of ambulance care and that does not include things like health screenings.

Medical Director, Multnomah County Emergency Medical Services for 9-1-1.

Chair, Oregon State Emergency Medical Services Advisory Committee.

Testifies in support of SB 435.

128 Jon Jui M.D.
* Supports allowing EMTs to do their job as they currently practice.
* When the public calls it is in their mind that they are in an emergency including the elderly woman who can't get to the pharmacy for her diabetic medicine.
* Public health and prevention is a big issue in this legislation.
* Many other states don't restrict the "emergency" scope of practice for EMTs the way Oregon does.

* Discusses the rural provider's role in their communities.

* Rural EMTs are a key source of health care.

185 Rep. Taylor Asks if a link to a medical doctor or facility exists each time an EMT unit is dispatched.

Responds affirmatively.

190 Jui In Multnomah County EMTs call the medical resource hospital, connecting themselves with an on-line physician.

198 Rep. Lokan Asks about the contention between the EMTs and the Occupational Health Nurses.

201 Jui What the committee is seeing is a turf battle, much like the contention between Physicians and Physician Assistants and the definitions of their scope of practices.

215 Schmidt The language that governs EMTs must be clarified because it is causing problems for health care providers to know who is supposed to be performing what duties.

230 Chair Milne Asks for a response on the concern that EMTs might be able to write prescriptions.

235 Schmidt Does not believe the language allows EMTs to write prescriptions

248 Alec Jensen Executive Director, Tualatin Valley Fire and Rescue, testifies in support of SB 435.

* Other organizations that support this bill are:

1. The Oregon Fire Chiefs' Association

2. The Oregon Fire District Directors' Association

3. Members of the Joint Fire Service Legislative Committees, including State Fire Fighters Council of Volunteers

* Discusses the limits placed on EMTs and the high costs to patients from ambulance transports and emergency room visits.

* Life threatening emergency calls are the minority of the EMT's job.

* Concurs with testimony that the committee is seeing a turf battle.

310 Rep. Lokan Asks if the proponent has ever prescribed medication.

313 Jensen No he has not.

Program Manager, Portland Fire Bureau, submits and presents written testimony in support of SB 435 (**EXHIBIT I**).

319 Markley Drake * several years ago the definition of "emergency care" was changed, creating the problem before the House Human Resource Committee today

* non emergency care makes up approximately eighty percent of the duties

performed by EMTs
Director, Emergency Medical Services, Oregon Health Division,

* The original bill had a fiscal impact.

* After much discussion and amendments adopted in the Senate Committee the fiscal impact from the bill was rescinded.

364 Greg Lander * The bill does not greatly change the scope of practice for EMTs.

* In 1973 the initial legislation defining the scope of practice for EMTs was written.

* The Attorney General has noted that there is a problem resulting from language used in 1973.

431 Rep. Taylor Comments that this bill may save the state some money.

**TAPE
125, A**

Oregon Nurses Association (ONA), testifies in regards to SB 435.

* The ONA is neutral on the bill.

* a very limited representation of health care providers were involved in crafting the language in SB 435

* there is discomfort within these parties as to whether the language does what the parties intended to accomplish

005 Brian Delashmutt * individuals are interpreting the language inappropriately

* discusses the language that could potentially be interpreted by a court of law to allow EMTs to prescribe drugs on page 1, lines 25 and 26 and believes it needs to be cleaned up

* EMTs don't always know if the situation they are responding to is an emergency and they must assess the situation upon their arrival.

* McLean had a point about the word ambulance being plural in the language of the bill and the misinterpretation it may cause.

067 Chair Milne Asks proponents and opponents to find some consensus and bring agreements to the committee's next hearing.

077 Chair Milne Closes the hearing on SB 435.

080 Chair Milne Adjourns the meeting at 3:30 p.m.

Submitted By, Reviewed By,

Diane Quinones, Lori Long,

Administrative Support Administrator

EXHIBIT SUMMARY

A - HB 3689 -4 amendments dated 06/04/97, Rep. Jo Ann Bowman, 1 p.

B - SB 435 written testimony, Nan Heim, 1 p.

C - SB 435 written testimony, Shawn Baird, 1 p.

D - SB 435 -A2 amendments dated 06/06/97, Sen. Bob Kintigh, 2 pp.

E - SB 435, Position Statement, Jean Austin, 1 p.

F - SB 435, written information and testimony, Gary McLean, 26 pp.

G - SB 435, written testimony, John Praggastis, 4 pp.

H - SB 435, written testimony, Ray Hobizal, 2 pp.

I - SB 435, written information and testimony, 11 pp.