

# SENATE BILL No. 288

March 30, 2017, Introduced by Senator ROBERTSON and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled  
"Public health code,"  
(MCL 333.1101 to 333.25211) by adding sections 17039 and 17539.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1        SEC. 17039. (1) SUBJECT TO SECTION 16215, A PHYSICIAN WHO  
2        SUPERVISES A COMMUNITY PARAMEDIC MAY DELEGATE TO THE COMMUNITY  
3        PARAMEDIC THE PERFORMANCE OF MEDICAL CARE SERVICES FOR A PATIENT  
4        WHO IS UNDER THE CASE MANAGEMENT RESPONSIBILITY OF THE PHYSICIAN,  
5        IF THE DELEGATION IS CONSISTENT WITH THE COMMUNITY PARAMEDIC'S  
6        TRAINING. HOWEVER, A PHYSICIAN SHALL NOT DELEGATE ULTIMATE  
7        RESPONSIBILITY FOR THE QUALITY OF MEDICAL CARE SERVICES, EVEN IF  
8        THE MEDICAL CARE SERVICES ARE PROVIDED BY A COMMUNITY PARAMEDIC.

9        (2) A PHYSICIAN WHO SUPERVISES A COMMUNITY PARAMEDIC IS  
10       RESPONSIBLE FOR THE CLINICAL SUPERVISION OF A COMMUNITY PARAMEDIC  
11       TO WHOM THE PHYSICIAN DELEGATES THE PERFORMANCE OF MEDICAL CARE

SERVICES UNDER SUBSECTION (1).

(3) AN INDIVIDUAL SHALL NOT ENGAGE IN PRACTICE AS A COMMUNITY PARAMEDIC UNLESS HE OR SHE IS CERTIFIED AS A COMMUNITY PARAMEDIC BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES. THE DEPARTMENT OF HEALTH AND HUMAN SERVICES SHALL ISSUE A CERTIFICATE AS A COMMUNITY PARAMEDIC TO AN INDIVIDUAL ONLY IF HE OR SHE MEETS ALL OF THE FOLLOWING REQUIREMENTS:

(A) IS CURRENTLY LICENSED AS A PARAMEDIC UNDER SECTION 20950.

(B) HAS 2 YEARS OF FULL-TIME SERVICE AS A PARAMEDIC, OR AN EQUIVALENT AMOUNT OF PART-TIME EXPERIENCE AS DETERMINED BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.

(C) HAS SUCCESSFULLY COMPLETED A COMMUNITY PARAMEDIC TRAINING PROGRAM FROM A COLLEGE OR UNIVERSITY THAT IS APPROVED BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OR ACCREDITED BY A DEPARTMENT-APPROVED NATIONAL ACCREDITATION ORGANIZATION. THE TRAINING PROGRAM MUST INCLUDE CLINICAL EXPERIENCE AND DIDACTIC INSTRUCTION THAT HAS A FAMILY PRACTICE OR TERTIARY CARE FOCUS AND MEETS 1 OF THE FOLLOWING:

(i) IS PROVIDED UNDER THE SUPERVISION OF A MEDICAL DIRECTOR.

(ii) IS PROVIDED BY AN ADVANCED PRACTICE REGISTERED NURSE WHO IS OPERATING UNDER THE DIRECT SUPERVISION OF A PRIMARY CARE PHYSICIAN, A NURSE PRACTITIONER WHO IS OPERATING UNDER THE DIRECT SUPERVISION OF A PRIMARY CARE PHYSICIAN, OR A PHYSICIAN'S ASSISTANT WITH WHOM A PRIMARY CARE PHYSICIAN HAS A PRACTICE AGREEMENT.

(4) IN HIS OR HER PRACTICE AS A COMMUNITY PARAMEDIC, AN INDIVIDUAL MAY PROVIDE SERVICES ACCORDING TO THE TERMS OF A WRITTEN PATIENT CARE PLAN DEVELOPED BY THE PATIENT'S PRIMARY CARE

1   PHYSICIAN, BY A NURSE PRACTITIONER WHO IS OPERATING UNDER THE  
2   SUPERVISION OF THAT PRIMARY CARE PHYSICIAN, OR BY A PHYSICIAN'S  
3   ASSISTANT WITH WHOM THAT PRIMARY CARE PHYSICIAN HAS A PRACTICE  
4   AGREEMENT. THE CARE PLAN MUST ENSURE THAT THE SERVICES PROVIDED BY  
5   THE COMMUNITY PARAMEDIC ARE CONSISTENT WITH THE SERVICES OFFERED BY  
6   THE PATIENT'S PRIMARY CARE PHYSICIAN, THAT THE PATIENT RECEIVES THE  
7   NECESSARY SERVICES, AND THAT THERE IS NO DUPLICATION OF SERVICES TO  
8   THE PATIENT.

9       (5) ALL LICENSURE, DISCIPLINARY, COMPLAINT, RENEWAL, AND OTHER  
10   REGULATORY REQUIREMENTS THAT APPLY TO PARAMEDICS UNDER PART 209  
11   APPLY TO A COMMUNITY PARAMEDIC'S LICENSE AS A PARAMEDIC UNDER  
12   SECTION 20950.

13       (6) THE DEPARTMENT OF HEALTH AND HUMAN SERVICES BY RULE SHALL  
14   ESTABLISH A PROCESS FOR THE APPLICATION, GRANT, AND RENEWAL OF  
15   COMMUNITY PARAMEDIC CERTIFICATES FOR PURPOSES OF THIS SECTION.

16       (7) AS USED IN THIS SECTION, "PRACTICE AS A COMMUNITY  
17   PARAMEDIC" MEANS THE PRACTICE OF MEDICINE OR OSTEOPATHIC MEDICINE  
18   AND SURGERY DELEGATED BY AND PERFORMED UNDER THE SUPERVISION OF A  
19   PHYSICIAN WHO IS LICENSED UNDER THIS ARTICLE.

20       SEC. 17539. (1) SUBJECT TO SECTION 16215, A PHYSICIAN WHO  
21   SUPERVISES A COMMUNITY PARAMEDIC MAY DELEGATE TO THE COMMUNITY  
22   PARAMEDIC THE PERFORMANCE OF MEDICAL CARE SERVICES FOR A PATIENT  
23   WHO IS UNDER THE CASE MANAGEMENT RESPONSIBILITY OF THE PHYSICIAN,  
24   IF THE DELEGATION IS CONSISTENT WITH THE COMMUNITY PARAMEDIC'S  
25   TRAINING. HOWEVER, A PHYSICIAN SHALL NOT DELEGATE ULTIMATE  
26   RESPONSIBILITY FOR THE QUALITY OF MEDICAL CARE SERVICES, EVEN IF  
27   THE MEDICAL CARE SERVICES ARE PROVIDED BY A COMMUNITY PARAMEDIC.

1           (2) A PHYSICIAN WHO SUPERVISES A COMMUNITY PARAMEDIC IS  
2 RESPONSIBLE FOR THE CLINICAL SUPERVISION OF A COMMUNITY PARAMEDIC  
3 TO WHOM THE PHYSICIAN DELEGATES THE PERFORMANCE OF MEDICAL CARE  
4 SERVICES UNDER SUBSECTION (1).

5           (3) AN INDIVIDUAL SHALL NOT ENGAGE IN PRACTICE AS A COMMUNITY  
6 PARAMEDIC UNLESS HE OR SHE IS CERTIFIED AS A COMMUNITY PARAMEDIC BY  
7 THE DEPARTMENT OF HEALTH AND HUMAN SERVICES. THE DEPARTMENT OF  
8 HEALTH AND HUMAN SERVICES SHALL ISSUE A CERTIFICATE AS A COMMUNITY  
9 PARAMEDIC TO AN INDIVIDUAL ONLY IF HE OR SHE MEETS ALL OF THE  
10 FOLLOWING REQUIREMENTS:

11           (A) IS CURRENTLY LICENSED AS A PARAMEDIC UNDER SECTION 20950.

12           (B) HAS 2 YEARS OF FULL-TIME SERVICE AS A PARAMEDIC, OR AN  
13 EQUIVALENT AMOUNT OF PART-TIME EXPERIENCE AS DETERMINED BY THE  
14 DEPARTMENT OF HEALTH AND HUMAN SERVICES.

15           (C) HAS SUCCESSFULLY COMPLETED A COMMUNITY PARAMEDIC TRAINING  
16 PROGRAM FROM A COLLEGE OR UNIVERSITY THAT IS APPROVED BY THE  
17 DEPARTMENT OF HEALTH AND HUMAN SERVICES OR ACCREDITED BY A  
18 DEPARTMENT-APPROVED NATIONAL ACCREDITATION ORGANIZATION. THE  
19 TRAINING PROGRAM MUST INCLUDE CLINICAL EXPERIENCE AND DIDACTIC  
20 INSTRUCTION THAT HAS A FAMILY PRACTICE OR TERTIARY CARE FOCUS AND  
21 MEETS 1 OF THE FOLLOWING:

22           (i) IS PROVIDED UNDER THE SUPERVISION OF A MEDICAL DIRECTOR.

23           (ii) IS PROVIDED BY AN ADVANCED PRACTICE REGISTERED NURSE WHO  
24 IS OPERATING UNDER THE DIRECT SUPERVISION OF A PRIMARY CARE  
25 PHYSICIAN, A NURSE PRACTITIONER WHO IS OPERATING UNDER THE DIRECT  
26 SUPERVISION OF A PRIMARY CARE PHYSICIAN, OR A PHYSICIAN'S ASSISTANT  
27 WITH WHOM A PRIMARY CARE PHYSICIAN HAS A PRACTICE AGREEMENT.

1           (4) IN HIS OR HER PRACTICE AS A COMMUNITY PARAMEDIC, AN  
2 INDIVIDUAL MAY PROVIDE SERVICES ACCORDING TO THE TERMS OF A WRITTEN  
3 PATIENT CARE PLAN DEVELOPED BY THE PATIENT'S PRIMARY CARE  
4 PHYSICIAN, BY A NURSE PRACTITIONER WHO IS OPERATING UNDER THE  
5 SUPERVISION OF THAT PRIMARY CARE PHYSICIAN, OR BY A PHYSICIAN'S  
6 ASSISTANT WITH WHOM THAT PRIMARY CARE PHYSICIAN HAS A PRACTICE  
7 AGREEMENT. THE CARE PLAN MUST ENSURE THAT THE SERVICES PROVIDED BY  
8 THE COMMUNITY PARAMEDIC ARE CONSISTENT WITH THE SERVICES OFFERED BY  
9 THE PATIENT'S PRIMARY CARE PHYSICIAN, THAT THE PATIENT RECEIVES THE  
10 NECESSARY SERVICES, AND THAT THERE IS NO DUPLICATION OF SERVICES TO  
11 THE PATIENT.

12           (5) ALL LICENSURE, DISCIPLINARY, COMPLAINT, RENEWAL, AND OTHER  
13 REGULATORY REQUIREMENTS THAT APPLY TO PARAMEDICS UNDER PART 209  
14 APPLY TO A COMMUNITY PARAMEDIC'S LICENSE AS A PARAMEDIC UNDER  
15 SECTION 20950.

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17 ESTABLISH A PROCESS FOR THE APPLICATION, GRANT, AND RENEWAL OF  
18 COMMUNITY PARAMEDIC CERTIFICATES FOR PURPOSES OF THIS SECTION.

19           (7) AS USED IN THIS SECTION, "PRACTICE AS A COMMUNITY  
20 PARAMEDIC" MEANS THE PRACTICE OF MEDICINE OR OSTEOPATHIC MEDICINE  
21 AND SURGERY DELEGATED BY AND PERFORMED UNDER THE SUPERVISION OF A  
22 PHYSICIAN WHO IS LICENSED UNDER THIS ARTICLE.

23           Enacting section 1. This amendatory act takes effect 90 days  
24 after the date it is enacted into law.

25           Enacting section 2. This amendatory act does not take effect  
26 unless Senate Bill No. 289

27                     of the 99th Legislature is enacted into law.