

# Senate Bill 52

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## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires ambulance services and emergency medical services providers to report patient encounter data to electronic emergency medical services data system managed by Oregon Health Authority. Requires that certain patient outcome data be available to ambulance service or emergency medical service provider. Directs authority to establish method for patient data transfer. Specifies permissible uses of data.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to emergency services; creating new provisions; amending ORS 431A.100, 682.017 and  
3 682.056; and declaring an emergency.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1.** ORS 682.017 is amended to read:

6 682.017. *[(1) In accordance with ORS chapter 183, the Oregon Health Authority may adopt rules*  
7 *as necessary for carrying out this chapter.]*

8 *[(2) The Oregon Health Authority shall [establish appropriate] adopt rules in accordance with*  
9 *[the provisions of] ORS chapter 183 [concerning the administration of this chapter. Such rules may]*  
10 **that** include, but are not limited to:

11 *[(a)] (1) Requirements relating to the types and numbers of emergency vehicles, including sup-*  
12 *plies and equipment carried[;].*

13 *[(b)] (2) Requirements for the operation and coordination of ambulances and other emergency*  
14 *care systems[;].*

15 *[(c)] (3) Criteria for the use of two-way communications[; and].*

16 *[(d)] (4) Procedures for summoning and dispatching aid.*

17 **(5) Requirements that ambulance services and emergency medical services providers re-**  
18 **port patient encounter data to an electronic emergency medical services data system man-**  
19 **aged by the authority. The requirements must specify the data that an ambulance service**  
20 **or an emergency medical services provider must report, the form and frequency of the re-**  
21 **porting and the procedures and standards for the administration of the data system.**

22 *[(3)] (6) [The authority shall adopt rules establishing] Levels of licensure for emergency medical*  
23 *services providers. The lowest level of emergency medical services provider licensure must be an*  
24 *emergency medical responder license.*

25 **(7) Other rules as necessary to carry out the provisions of this chapter.**

26 **SECTION 2.** ORS 682.056 is added to and made a part of ORS chapter 682.

27 **SECTION 3.** ORS 682.056 is amended to read:

28 682.056. *[(1) Upon the request of the designated official of an ambulance service as defined in ORS*

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 682.051, an emergency medical services provider as defined in ORS 682.025, the emergency medical  
 2 services system authority in the county in which a prehospital care event occurred or the Oregon Health  
 3 Authority, a hospital licensed under ORS chapter 441 may provide to the requester the following in-  
 4 formation:]

5 **(1)(a) Ambulance services and emergency medical services providers shall report patient**  
 6 **encounter data to the electronic emergency medical services data system managed by the**  
 7 **Oregon Health Authority for each patient care event in accordance with rules adopted by the**  
 8 **authority under ORS 682.017.**

9 **(b) The authority by rule shall specify the patient encounter data elements to be trans-**  
 10 **ferred from the electronic emergency medical services data system to the Oregon Trauma**  
 11 **Registry and shall establish the procedures for the electronic transfer of the patient en-**  
 12 **counter data.**

13 **(2)(a) The patient outcome data described in subsection (3) of this section about a patient**  
 14 **who an ambulance service or emergency medical services provider transported to a hospital,**  
 15 **and that the hospital entered into the Oregon Trauma Registry, must be available to the**  
 16 **designated official of the ambulance service or to the emergency medical services provider**  
 17 **that transported the patient.**

18 **(b) The authority by rule shall specify the method by which the patient outcome data**  
 19 **will be made available to the designated official of an ambulance service or to the emergency**  
 20 **medical services provider.**

21 **(3) Patient outcome data includes:**

22 (a) The *[disposition]* **health outcomes** of the *[person]* **patient** who was the subject of the pre-  
 23 hospital care event from the emergency department or other intake facility of the hospital, including  
 24 but not limited to:

25 (A) Whether the *[person]* **patient** was admitted to the hospital; and

26 (B) If the *[person]* **patient** was admitted, to what unit the *[person]* **patient** was assigned;

27 (b) The **patient's chief complaint, the diagnosis** *[given the person]* **the patient received** in the  
 28 emergency department or other intake facility **and any procedures performed on the patient;**  
 29 *[and]*

30 *[(c) Whether within the first hour after the person arrived at the hospital, the person received one*  
 31 *or more medical procedures on a list that the authority shall establish by rule.]*

32 **(c) The emergency department or hospital discharge disposition of the patient; and**

33 **(d) Demographic or standard health care information as required by the authority by**  
 34 **rule.**

35 *[(2)]* **(4) [Information] Data** provided pursuant to *[subsection (1) of]* this section shall be:

36 (a) Treated as a confidential medical record and not disclosed; **and**

37 (b) Considered privileged data under ORS 41.675 and 41.685.; *[and]*

38 *[(c) Used only for legitimate medical quality assurance and quality improvement activities.]*

39 *[(3) A hospital may charge a fee reasonably related to the actual cost of providing the information*  
 40 *requested pursuant to this section.]*

41 *[(4) For purposes of this section, "emergency medical services system" has the meaning given in*  
 42 *ORS 41.685.]*

43 **(5) Data provided pursuant to this section may be used for quality assurance, quality**  
 44 **improvement, epidemiological assessment and investigation, public health critical response**  
 45 **planning, prevention activities and other purposes that the authority determines necessary.**

**SECTION 4.** ORS 431A.100 is amended to read:

431A.100. (1) As used in this section, “individually identifiable information” means:

(a) Individually identifiable health information as that term is defined in ORS 179.505; and

(b) Information that could be used to identify a health care provider, **emergency medical services provider**, ambulance service medical transportation agency or health care facility.

(2) Notwithstanding ORS 431A.090, individually identifiable information may be released from the Oregon Trauma Registry:

(a) For use in executive session to conduct specific case reviews by:

(A) The State Trauma Advisory Board or any area trauma advisory board;

(B) The State Emergency Medical Service Committee; or

(C) The Emergency Medical Services for Children Advisory Committee.

(b) To the Oregon Health Authority for purposes related to the administration of public health programs, including:

(A) The establishment of a registry of information related to brain injury trauma as described in ORS 431A.085 (6); and

(B) The performance of epidemiological investigations of the causes of and risk factors associated with trauma injuries.

(c) To an emergency medical services provider or a designated trauma center for purposes related to quality of service assurance and improvement, if the information is related to the treatment of an individual by the provider or center.

(d) To the Department of Human Services for purposes related to enabling the department to plan for and provide services to individuals adversely affected by trauma injuries, if the department agrees to use the information only for the purposes described in this paragraph and to maintain the confidentiality of the information.

(e) To a person conducting research if:

(A) An institutional review board has approved the research in accordance with 45 C.F.R. part 46; and

(B) The person agrees to maintain the confidentiality of the information.

**(f) To the designated official of an ambulance service or to an emergency medical services provider pursuant to ORS 682.056.**

(3) The Oregon Health Authority may release only the minimum amount of individually identifiable information necessary to carry out the purposes for which the information is released under this section.

**SECTION 5. (1) The amendments to ORS 431A.100, 682.017 and 682.056 by sections 1, 3 and 4 of this 2017 Act become operative on January 1, 2018.**

**(2) The Oregon Health Authority may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the authority to exercise, on or after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the authority by the amendments to ORS 431A.100, 682.017 and 682.056 by sections 1, 3 and 4 of this 2017 Act.**

**SECTION 6. This 2017 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2017 Act takes effect on its passage.**