

[AB 40](#) (Rodriguez D) **Emergency medical services.**

Last Amended: 9/1/2023

Status: 9/7/2023-Read third time. Passed. Ordered to the Assembly. (Ayes 31. Noes 4.). In Assembly. Concurrence in Senate amendments pending. May be considered on or after September 9 pursuant to Assembly Rule 77.

Location: 9/7/2023-A. CONCURRENCE

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar:

9/8/2023 #33 ASSEMBLY CONCURRENCE IN SENATE AMENDMENTS

Summary:

Would, on or before December 31, 2024, require the Emergency Medical Services Authority to develop and implement an electronic signature for use between the emergency department medical personnel at a receiving hospital and the transporting emergency medical personnel that captures the points in time when the ambulance arrives at the hospital emergency department bay and when transfer of care is executed for documentation of ambulance patient offload time, as defined. The bill would require every local EMS agency, by July 1, 2024, to develop a standard not to exceed 30 minutes, 90% of the time, for ambulance patient offload time and report the standardized time to the authority. The bill would authorize local EMS agencies to engage stakeholders in developing this standard, as specified. The bill would also require the authority to develop and implement by December 31, 2024, an audit tool to improve data accuracy regarding transfer of care, as specified, and to provide technical assistance and funding as needed, subject to an appropriation, for small rural hospitals and volunteer EMS providers to implement these provisions. The bill would require the authority to adopt emergency regulations to implement these provisions on or before December 31, 2024.

[AB 379](#) (Rodriguez D) **Emergency medical services.**

Last Amended: 7/10/2023

Status: 9/1/2023-Failed Deadline pursuant to Rule 61(a)(11). (Last location was APPR. SUSPENSE FILE on 8/14/2023)(May be acted upon Jan 2024)

Location: 9/1/2023-S. 2 YEAR

Desk	Policy	Fiscal	Floor	Desk	Policy	2 year	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary:

The existing Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act establishes the Emergency Medical Services Authority (authority), which is responsible for the coordination and integration of all emergency medical services. Existing law authorizes each county to develop an emergency medical services program and requires a county that does so to designate a local EMS agency (LEMSA). Existing law requires the authority to develop planning and implementation guidelines for emergency medical services systems that address specified components, including the assessment of hospital and critical care centers and data collection and evaluation. This bill would require these guidelines to include a list of standardized terminology for a LEMSA to use when granting exemptions for 911 response times, as specified.

[AB 716](#) (Boerner D) **Ground medical transportation.**

Last Amended: 9/6/2023

Status: 9/7/2023-Read second time. Ordered to third reading.

Location: 9/7/2023-S. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary:

Current law requires the Emergency Medical Services Authority to report specified information, including reporting ambulance patient offload time twice per year to the Commission on Emergency Medical Services. This bill would require the authority to annually report the allowable maximum rates for ground ambulance transportation services in each county, including trending the rates by county, as specified. This bill contains other related provisions and other existing laws.

[AB 767](#) (Gipson D) **Community Paramedicine or Triage to Alternate Destination Act.**

Last Amended: 9/1/2023

Status: 9/7/2023-Assembly Rule 77 suspended. Senate amendments concurred in. To Engrossing and Enrolling.

Location: 9/7/2023-A. ENROLLMENT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary:

The Community Paramedicine or Triage to Alternate Destination Act of 2020 (the act) authorizes a local EMS agency to develop a community paramedicine or triage to alternate destination program, as defined, to provide specified community paramedicine services. The act requires the authority to develop, and after approval by the Commission on Emergency Medical Services, adopt regulations and establish minimum standards for the development of those programs. This act prohibits a person or organization from providing community paramedicine or triage to alternate destination services or representing, advertising, or otherwise implying that it is authorized to provide those services unless it is expressly authorized by a local EMS agency to provide those services as part of a program approved by the authority. The act also prohibits a community paramedic or a triage paramedic from providing their respective services unless the community paramedic or triage paramedic has been certified and accredited to perform those services and is working as an employee of an authorized provider. The act is repealed on January 1, 2024. This bill would extend the act until January 1, 2031. The bill would expand the allowable community paramedicine services program specialties to include providing short-term, postdischarge followup for persons recently discharged from a hospital due to a serious health condition, including collaboration with, and by providing referral to, home health services when eligible. The bill would require, on or before January 1, 2025, the Emergency Medical Services Authority to amend regulations to include sufficient state-level program oversight that would allow for local EMS agencies to develop community paramedicine programs, as specified.

[AB 902](#) **(Rodriguez D) Ambulances: fee and toll exemptions.**

Last Amended: 4/19/2023

Status: 7/27/2023-Approved by the Governor. Chaptered by Secretary of State - Chapter 124, Statutes of 2023.

Location: 7/27/2023-A. CHAPTERED

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conc.			

Summary:

Current law requires the owner or operator of a toll facility, upon the request of the local emergency service provider, to enter into an agreement for the use of a toll facility. This bill would clarify that the owner or operator of a toll facility is required to enter into an agreement for the use of a toll facility upon the request of a private

or public local emergency service provider.

AB 1168 (Bennett D) Emergency medical services (EMS): prehospital EMS. Last

Amended: 7/13/2023

Status: 9/5/2023-Read second time. Ordered to third reading.

Location: 9/5/2023-S. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
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Summary:

The Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act governs local emergency medical services (EMS) systems and authorizes each county to develop an EMS program and designate a local EMS agency. Current law requires a county to enter into a written agreement with a city or fire district that contracted for or provided prehospital EMS as of June 1, 1980.

Current law requires, until that written agreement is reached, prehospital EMS to be continued at not less than the existing level and the administration of prehospital EMS by cities and fire districts contracting for or providing those services as of June 1, 1980, to be retained by those cities and fire districts. This bill would require a city to be treated as if it had retained its authorities regarding, and the administration of, prehospital EMS if specified requirements are met.

AB 1376 (Carrillo, Juan D) Emergency medical services: liability limitation.

Last Amended: 6/26/2023

Status: 9/5/2023-Read second time. Ordered to third reading.

Location: 9/5/2023-S. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conc.			

Summary:

Would provide that a private provider of ambulance services, and employees of that provider, when operating in accordance with the standards, regulations, policies, and protocols of local emergency medical services agencies, shall not be criminally or civilly liable for the continued detainment of a person when that detainment is requested by a peace officer, facility staff, or other professionals authorized to detain persons in specified circumstances involving the transport and continued containment of a person who requires mental health evaluation and treatment, as specified. The bill would require a private provider of ambulance services subject to these provisions to provide care according to the policies and

procedures established by the local emergency medical services agency, as specified, and the policies of the California Emergency Medical Services Authority. The bill would also prohibit a private provider of ambulance services that provides transportation to a designated facility, as defined, from requiring a person who is voluntarily agreeing to transport to be placed on an involuntary hold as a precondition to that transport.

[AB 1651](#) (Sanchez R) **Pupil health: emergency medical care: epinephrine auto- injectors.**

Last Amended: 3/30/2023

Status: 9/5/2023-Read second time. Ordered to third reading.

Location: 9/5/2023-S. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary:

Current law requires school districts, county offices of education, and charter schools to provide emergency epinephrine auto-injectors to school nurses or trained volunteer personnel, and authorizes school nurses and trained personnel to use epinephrine auto-injectors to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an anaphylactic reaction, as provided. Current law defines “volunteer” and “trained personnel” for these purposes to mean an employee who has volunteered to administer epinephrine auto-injectors, as provided. This bill would require school districts, county offices of education, and charter schools to, among other things, store those emergency epinephrine auto-injectors in an accessible location upon need for emergency use and include that location in specified annual notices. This bill would extend the definition of “volunteer” and “trained personnel” to include the holder of an Activity Supervisor Clearance Certificate, as specified, who has volunteered to administer epinephrine auto-injectors, as provided.

Total Measures: 8

Total Tracking Forms: 8