

AN ACT concerning regulation.

**Be it enacted by the People of the State of Illinois,
represented in the General Assembly:**

Section 5. The Emergency Medical Services (EMS) Systems Act is amended by changing Section 3.155 as follows:

(210 ILCS 50/3.155)

Sec. 3.155. General provisions.

(a) Authority and responsibility for the EMS System shall be vested in the EMS Resource Hospital, through the EMS Medical Director or his designee.

(b) For an inter-hospital emergency or non-emergency medical transport, in which the physician from the sending hospital provides the EMS personnel with written medical orders, such written medical orders cannot exceed the scope of care which the EMS personnel are authorized to render pursuant to this Act.

(c) For an inter-hospital emergency or non-emergency medical transport of a patient who requires medical care beyond the scope of care which the EMS personnel are authorized to render pursuant to this Act, a qualified physician, nurse, perfusionist, or respiratory therapist familiar with the scope of care needed must accompany the patient and the transferring hospital and physician shall

assume medical responsibility for that portion of the medical care.

(d) No emergency medical services vehicles or personnel from another State or nation may be utilized on a regular basis to pick up and transport patients within this State without first complying with this Act and all rules adopted by the Department pursuant to this Act.

(e) This Act shall not prevent emergency medical services vehicles or personnel from another State or nation from rendering requested assistance in this State in a disaster situation, or operating from a location outside the State and occasionally transporting patients into this State for needed medical care. Except as provided in Section 31 of this Act, this Act shall not provide immunity from liability for such activities.

(f) Except as provided in subsection (e) of this Section, no person or entity shall transport emergency or non-emergency patients by ambulance, SEMSV, or medical carrier without first complying with the provisions of this Act and all rules adopted pursuant to this Act.

(g) Nothing in this Act or the rules adopted by the Department under this Act shall be construed to authorize any medical treatment to or transportation of any person who objects on religious grounds.

(h) Patients, individuals who accompany a patient, and emergency medical services personnel may not smoke while

inside an ambulance or SEMSV. The Department of Public Health may impose a civil penalty on an individual who violates this subsection in the amount of \$100.

(i) When a patient has been determined by EMS personnel to (1) have no immediate life-threatening injuries or illness, (2) ~~not be under the influence of drugs or alcohol,~~ (3) have no immediate or obvious need for transport to an emergency department, and (3) ~~(4)~~ have an immediate need for transport to an EMS System-approved mental health facility, the EMS personnel may contact Online Medical Control or his or her EMS Medical Director or Emergency Communications Registered Nurse to request bypass or diversion of the closest emergency department, as outlined in paragraph (5) of subsection (c) of Section 3.20, and request transport to the closest or appropriate EMS System-approved mental health facility. In addition, EMS personnel may transport a patient to an EMS System-approved urgent care or immediate care facility that meets the proper criteria and is approved by Online Medical Control or his or her EMS Medical Director or Emergency Communications Registered Nurse.

(Source: P.A. 102-623, eff. 8-27-21.)