

1 AN ACT concerning regulation.

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

4 Section 5. The Emergency Medical Services (EMS) Systems  
5 Act is amended by changing Sections 3.10, 3.50, 3.85, and  
6 3.155 as follows:

7 (210 ILCS 50/3.10)

8 Sec. 3.10. Scope of services.

9 (a) "Advanced Life Support (ALS) Services" means an  
10 advanced level of pre-hospital and inter-hospital emergency  
11 care and non-emergency medical services that includes basic  
12 life support care, cardiac monitoring, cardiac defibrillation,  
13 electrocardiography, intravenous therapy, administration of  
14 medications, drugs and solutions, use of adjunctive medical  
15 devices, trauma care, and other authorized techniques and  
16 procedures, as outlined in the provisions of the National EMS  
17 Education Standards relating to Advanced Life Support and any  
18 modifications to that curriculum specified in rules adopted by  
19 the Department pursuant to this Act.

20 That care shall be initiated as authorized by the EMS  
21 Medical Director in a Department approved advanced life  
22 support EMS System, under the written or verbal direction of a  
23 physician licensed to practice medicine in all of its branches

1 or under the verbal direction of an Emergency Communications  
2 Registered Nurse.

3 (b) "Intermediate Life Support (ILS) Services" means an  
4 intermediate level of pre-hospital and inter-hospital  
5 emergency care and non-emergency medical services that  
6 includes basic life support care plus intravenous cannulation  
7 and fluid therapy, invasive airway management, trauma care,  
8 and other authorized techniques and procedures, as outlined in  
9 the Intermediate Life Support national curriculum of the  
10 United States Department of Transportation and any  
11 modifications to that curriculum specified in rules adopted by  
12 the Department pursuant to this Act.

13 That care shall be initiated as authorized by the EMS  
14 Medical Director in a Department approved intermediate or  
15 advanced life support EMS System, under the written or verbal  
16 direction of a physician licensed to practice medicine in all  
17 of its branches or under the verbal direction of an Emergency  
18 Communications Registered Nurse.

19 (c) "Basic Life Support (BLS) Services" means a basic  
20 level of pre-hospital and inter-hospital emergency care and  
21 non-emergency medical services that includes medical  
22 monitoring, clinical observation, airway management,  
23 cardiopulmonary resuscitation (CPR), control of shock and  
24 bleeding and splinting of fractures, as outlined in the  
25 provisions of the National EMS Education Standards relating to  
26 Basic Life Support and any modifications to that curriculum

1 specified in rules adopted by the Department pursuant to this  
2 Act.

3 That care shall be initiated, where authorized by the EMS  
4 Medical Director in a Department approved EMS System, under  
5 the written or verbal direction of a physician licensed to  
6 practice medicine in all of its branches or under the verbal  
7 direction of an Emergency Communications Registered Nurse.

8 (d) "Emergency Medical Responder Services" means a  
9 preliminary level of pre-hospital emergency care that includes  
10 cardiopulmonary resuscitation (CPR), monitoring vital signs  
11 and control of bleeding, as outlined in the Emergency Medical  
12 Responder (EMR) curriculum of the National EMS Education  
13 Standards and any modifications to that curriculum specified  
14 in rules adopted by the Department pursuant to this Act.

15 (e) "Pre-hospital care" means those medical services  
16 rendered to patients for analytic, resuscitative, stabilizing,  
17 or preventive purposes, precedent to and during transportation  
18 of such patients to health care facilities.

19 (f) "Inter-hospital care" means those medical services  
20 rendered to patients for analytic, resuscitative, stabilizing,  
21 or preventive purposes, during transportation of such patients  
22 from one hospital to another hospital.

23 (f-5) "Critical care transport" means the pre-hospital or  
24 inter-hospital transportation of a critically injured or ill  
25 patient by a vehicle service provider, including the provision  
26 of medically necessary supplies and services, at a level of

1 service beyond the scope of the Paramedic. When medically  
2 indicated for a patient, as determined by a physician licensed  
3 to practice medicine in all of its branches, an advanced  
4 practice registered nurse, or a physician's assistant, in  
5 compliance with subsections (b) and (c) of Section 3.155 of  
6 this Act, critical care transport may be provided by:

7 (1) Department-approved critical care transport  
8 providers, not owned or operated by a hospital, utilizing  
9 Paramedics with additional training, nurses, or other  
10 qualified health professionals; or

11 (2) Hospitals, when utilizing any vehicle service  
12 provider or any hospital-owned or operated vehicle service  
13 provider. Nothing in Public Act 96-1469 requires a  
14 hospital to use, or to be, a Department-approved critical  
15 care transport provider when transporting patients,  
16 including those critically injured or ill. Nothing in this  
17 Act shall restrict or prohibit a hospital from providing,  
18 or arranging for, the medically appropriate transport of  
19 any patient, as determined by a physician licensed to  
20 practice in all of its branches, an advanced practice  
21 registered nurse, or a physician's assistant.

22 (g) "Non-emergency medical services" means the provision  
23 of, and all actions necessary before and after the provision  
24 of, Basic Life Support (BLS) Services, Advanced Life Support  
25 (ALS) Services, and critical care transport ~~medical care,~~  
26 ~~clinical observation, or medical monitoring rendered to~~

1 patients whose conditions do not meet this Act's definition of  
2 emergency, before, after, or during transportation of such  
3 patients to or from health care facilities visited for the  
4 purpose of obtaining medical or health care services which are  
5 not emergency in nature, using a vehicle regulated by this Act  
6 and personnel licensed under this Act.

7 (g-5) The Department shall have the authority to  
8 promulgate minimum standards for critical care transport  
9 providers through rules adopted pursuant to this Act. All  
10 critical care transport providers must function within a  
11 Department-approved EMS System. Nothing in Department rules  
12 shall restrict a hospital's ability to furnish personnel,  
13 equipment, and medical supplies to any vehicle service  
14 provider, including a critical care transport provider.  
15 Minimum critical care transport provider standards shall  
16 include, but are not limited to:

- 17 (1) Personnel staffing and licensure.
- 18 (2) Education, certification, and experience.
- 19 (3) Medical equipment and supplies.
- 20 (4) Vehicular standards.
- 21 (5) Treatment and transport protocols.
- 22 (6) Quality assurance and data collection.

23 (h) The provisions of this Act shall not apply to the use  
24 of an ambulance or SEMSV, unless and until emergency or  
25 non-emergency medical services are needed during the use of  
26 the ambulance or SEMSV.

1 (Source: P.A. 99-661, eff. 1-1-17; 100-513, eff. 1-1-18.)

2 (210 ILCS 50/3.50)

3 Sec. 3.50. Emergency Medical Services personnel licensure  
4 levels.

5 (a) "Emergency Medical Technician" or "EMT" means a person  
6 who has successfully completed a course in basic life support  
7 as approved by the Department, is currently licensed by the  
8 Department in accordance with standards prescribed by this Act  
9 and rules adopted by the Department pursuant to this Act, and  
10 practices within an EMS System. A valid Emergency Medical  
11 Technician-Basic (EMT-B) license issued under this Act shall  
12 continue to be valid and shall be recognized as an Emergency  
13 Medical Technician (EMT) license until the Emergency Medical  
14 Technician-Basic (EMT-B) license expires.

15 (b) "Emergency Medical Technician-Intermediate" or "EMT-I"  
16 means a person who has successfully completed a course in  
17 intermediate life support as approved by the Department, is  
18 currently licensed by the Department in accordance with  
19 standards prescribed by this Act and rules adopted by the  
20 Department pursuant to this Act, and practices within an  
21 Intermediate or Advanced Life Support EMS System.

22 (b-5) "Advanced Emergency Medical Technician" or "A-EMT"  
23 means a person who has successfully completed a course in  
24 basic and limited advanced emergency medical care as approved  
25 by the Department, is currently licensed by the Department in

1 accordance with standards prescribed by this Act and rules  
2 adopted by the Department pursuant to this Act, and practices  
3 within an Intermediate or Advanced Life Support EMS System.

4 (c) "Paramedic (EMT-P)" means a person who has  
5 successfully completed a course in advanced life support care  
6 as approved by the Department, is licensed by the Department  
7 in accordance with standards prescribed by this Act and rules  
8 adopted by the Department pursuant to this Act, and practices  
9 within an Advanced Life Support EMS System. A valid Emergency  
10 Medical Technician-Paramedic (EMT-P) license issued under this  
11 Act shall continue to be valid and shall be recognized as a  
12 Paramedic license until the Emergency Medical  
13 Technician-Paramedic (EMT-P) license expires.

14 (c-5) "Emergency Medical Responder" or "EMR (First  
15 Responder)" means a person who has successfully completed a  
16 course in emergency medical response as approved by the  
17 Department and provides emergency medical response services  
18 ~~prior to the arrival of an ambulance or specialized emergency~~  
19 ~~medical services vehicle,~~ in accordance with the level of care  
20 established by the National EMS Educational Standards  
21 Emergency Medical Responder course as modified by the  
22 Department, or who. ~~An Emergency Medical Responder who~~  
23 provides services as part of an EMS System response plan ~~shall~~  
24 ~~comply with the applicable sections of the Program Plan,~~ as  
25 approved by the Department, of that EMS System. The Department  
26 shall have the authority to adopt rules governing the

1 curriculum, practice, and necessary equipment applicable to  
2 Emergency Medical Responders.

3 On August 15, 2014 (the effective date of Public Act  
4 98-973), a person who is licensed by the Department as a First  
5 Responder and has completed a Department-approved course in  
6 first responder defibrillator training based on, or equivalent  
7 to, the National EMS Educational Standards or other standards  
8 previously recognized by the Department shall be eligible for  
9 licensure as an Emergency Medical Responder upon meeting the  
10 licensure requirements and submitting an application to the  
11 Department. A valid First Responder license issued under this  
12 Act shall continue to be valid and shall be recognized as an  
13 Emergency Medical Responder license until the First Responder  
14 license expires.

15 (c-10) All EMS Systems and licensees shall be fully  
16 compliant with the National EMS Education Standards, as  
17 modified by the Department in administrative rules, within 24  
18 months after the adoption of the administrative rules.

19 (d) The Department shall have the authority and  
20 responsibility to:

21 (1) Prescribe education and training requirements,  
22 which includes training in the use of epinephrine, for all  
23 levels of EMS personnel except for EMRs, based on the  
24 National EMS Educational Standards and any modifications  
25 to those curricula specified by the Department through  
26 rules adopted pursuant to this Act.



1           (2) Prescribe licensure testing requirements for all  
2 levels of EMS personnel, which shall include a requirement  
3 that all phases of instruction, training, and field  
4 experience be completed before taking the appropriate  
5 licensure examination. Candidates may elect to take the  
6 appropriate National Registry examination in lieu of the  
7 Department's examination, but are responsible for making  
8 their own arrangements for taking the National Registry  
9 examination. In prescribing licensure testing requirements  
10 for honorably discharged members of the armed forces of  
11 the United States under this paragraph (2), the Department  
12 shall ensure that a candidate's military emergency medical  
13 training, emergency medical curriculum completed, and  
14 clinical experience, as described in paragraph (2.5), are  
15 recognized.

16           (2.5) Review applications for EMS personnel licensure  
17 from honorably discharged members of the armed forces of  
18 the United States with military emergency medical  
19 training. Applications shall be filed with the Department  
20 within one year after military discharge and shall  
21 contain: (i) proof of successful completion of military  
22 emergency medical training; (ii) a detailed description of  
23 the emergency medical curriculum completed; and (iii) a  
24 detailed description of the applicant's clinical  
25 experience. The Department may request additional and  
26 clarifying information. The Department shall evaluate the

1 application, including the applicant's training and  
2 experience, consistent with the standards set forth under  
3 subsections (a), (b), (c), and (d) of Section 3.10. If the  
4 application clearly demonstrates that the training and  
5 experience meet such standards, the Department shall offer  
6 the applicant the opportunity to successfully complete a  
7 Department-approved EMS personnel examination for the  
8 level of license for which the applicant is qualified.  
9 Upon passage of an examination, the Department shall issue  
10 a license, which shall be subject to all provisions of  
11 this Act that are otherwise applicable to the level of EMS  
12 personnel license issued.

13 (3) License individuals as an EMR, EMT, EMT-I, A-EMT,  
14 or Paramedic who have met the Department's education,  
15 training and examination requirements.

16 (4) Prescribe annual continuing education and  
17 relicensure requirements for all EMS personnel licensure  
18 levels.

19 (5) Relicense individuals as an EMD, EMR, EMT, EMT-I,  
20 A-EMT, PHRN, PHAPRN, PHPA, or Paramedic every 4 years,  
21 based on their compliance with continuing education and  
22 relicensure requirements as required by the Department  
23 pursuant to this Act. Every 4 years, a Paramedic shall  
24 have 100 hours of approved continuing education, an EMT-I  
25 and an advanced EMT shall have 80 hours of approved  
26 continuing education, and an EMT shall have 60 hours of

1 approved continuing education. An Illinois licensed EMR,  
2 EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHPA, PHAPRN, or  
3 PHRN whose license has been expired for less than 36  
4 months may apply for reinstatement by the Department.  
5 Reinstatement shall require that the applicant (i) submit  
6 satisfactory proof of completion of continuing medical  
7 education and clinical requirements to be prescribed by  
8 the Department in an administrative rule; (ii) submit a  
9 positive recommendation from an Illinois EMS Medical  
10 Director attesting to the applicant's qualifications for  
11 retesting; and (iii) pass a Department approved test for  
12 the level of EMS personnel license sought to be  
13 reinstated.

14 (6) Grant inactive status to any EMR, EMD, EMT, EMT-I,  
15 A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who  
16 qualifies, based on standards and procedures established  
17 by the Department in rules adopted pursuant to this Act.

18 (7) Charge a fee for EMS personnel examination,  
19 licensure, and license renewal.

20 (8) Suspend, revoke, or refuse to issue or renew the  
21 license of any licensee, after an opportunity for an  
22 impartial hearing before a neutral administrative law  
23 judge appointed by the Director, where the preponderance  
24 of the evidence shows one or more of the following:

25 (A) The licensee has not met continuing education

26 or relicensure requirements as prescribed by the

1 Department;

2 (B) The licensee has failed to maintain  
3 proficiency in the level of skills for which he or she  
4 is licensed;

5 (C) The licensee, during the provision of medical  
6 services, engaged in dishonorable, unethical, or  
7 unprofessional conduct of a character likely to  
8 deceive, defraud, or harm the public;

9 (D) The licensee has failed to maintain or has  
10 violated standards of performance and conduct as  
11 prescribed by the Department in rules adopted pursuant  
12 to this Act or his or her EMS System's Program Plan;

13 (E) The licensee is physically impaired to the  
14 extent that he or she cannot physically perform the  
15 skills and functions for which he or she is licensed,  
16 as verified by a physician, unless the person is on  
17 inactive status pursuant to Department regulations;

18 (F) The licensee is mentally impaired to the  
19 extent that he or she cannot exercise the appropriate  
20 judgment, skill and safety for performing the  
21 functions for which he or she is licensed, as verified  
22 by a physician, unless the person is on inactive  
23 status pursuant to Department regulations;

24 (G) The licensee has violated this Act or any rule  
25 adopted by the Department pursuant to this Act; or

26 (H) The licensee has been convicted (or entered a

1 plea of guilty or nolo contendere ~~nolo contendere~~) by  
2 a court of competent jurisdiction of a Class X, Class  
3 1, or Class 2 felony in this State or an out-of-state  
4 equivalent offense.

5 (9) Prescribe education and training requirements in  
6 the administration and use of opioid antagonists for all  
7 levels of EMS personnel based on the National EMS  
8 Educational Standards and any modifications to those  
9 curricula specified by the Department through rules  
10 adopted pursuant to this Act.

11 (d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN,  
12 PHAPRN, PHPA, or PHRN who is a member of the Illinois National  
13 Guard or an Illinois State Trooper or who exclusively serves  
14 as a volunteer for units of local government with a population  
15 base of less than 5,000 or as a volunteer for a not-for-profit  
16 organization that serves a service area with a population base  
17 of less than 5,000 may submit an application to the Department  
18 for a waiver of the fees described under paragraph (7) of  
19 subsection (d) of this Section on a form prescribed by the  
20 Department.

21 The education requirements prescribed by the Department  
22 under this Section must allow for the suspension of those  
23 requirements in the case of a member of the armed services or  
24 reserve forces of the United States or a member of the Illinois  
25 National Guard who is on active duty pursuant to an executive  
26 order of the President of the United States, an act of the

1 Congress of the United States, or an order of the Governor at  
2 the time that the member would otherwise be required to  
3 fulfill a particular education requirement. Such a person must  
4 fulfill the education requirement within 6 months after his or  
5 her release from active duty.

6 (e) In the event that any rule of the Department or an EMS  
7 Medical Director that requires testing for drug use as a  
8 condition of the applicable EMS personnel license conflicts  
9 with or duplicates a provision of a collective bargaining  
10 agreement that requires testing for drug use, that rule shall  
11 not apply to any person covered by the collective bargaining  
12 agreement.

13 (f) At the time of applying for or renewing his or her  
14 license, an applicant for a license or license renewal may  
15 submit an email address to the Department. The Department  
16 shall keep the email address on file as a form of contact for  
17 the individual. The Department shall send license renewal  
18 notices electronically and by mail to a licensee ~~all licensees~~  
19 who provides ~~provide~~ the Department with his or her email  
20 address. The notices shall be sent at least 60 days prior to  
21 the expiration date of the license.

22 (Source: P.A. 100-1082, eff. 8-24-19; 101-81, eff. 7-12-19;  
23 101-153, eff. 1-1-20; revised 12-3-19.)

24 (210 ILCS 50/3.85)

25 Sec. 3.85. Vehicle Service Providers.

1 (a) "Vehicle Service Provider" means an entity licensed by  
2 the Department to provide emergency or non-emergency medical  
3 services in compliance with this Act, the rules promulgated by  
4 the Department pursuant to this Act, and an operational plan  
5 approved by its EMS System(s), utilizing at least ambulances  
6 or specialized emergency medical service vehicles (SEMSV).

7 (1) "Ambulance" means any publicly or privately owned  
8 on-road vehicle that is specifically designed, constructed  
9 or modified and equipped, and is intended to be used for,  
10 and is maintained or operated for the emergency  
11 transportation of persons who are sick, injured, wounded  
12 or otherwise incapacitated or helpless, or the  
13 non-emergency medical transportation of persons who  
14 require the presence of medical personnel to monitor the  
15 individual's condition or medical apparatus being used on  
16 such individuals.

17 (2) "Specialized Emergency Medical Services Vehicle"  
18 or "SEMSV" means a vehicle or conveyance, other than those  
19 owned or operated by the federal government, that is  
20 primarily intended for use in transporting the sick or  
21 injured by means of air, water, or ground transportation,  
22 that is not an ambulance as defined in this Act. The term  
23 includes watercraft, aircraft and special purpose ground  
24 transport vehicles or conveyances not intended for use on  
25 public roads.

26 (3) An ambulance or SEMSV may also be designated as a

1 Limited Operation Vehicle or Special-Use Vehicle:

2 (A) "Limited Operation Vehicle" means a vehicle  
3 which is licensed by the Department to provide basic,  
4 intermediate or advanced life support emergency or  
5 non-emergency medical services that are exclusively  
6 limited to specific events or locales.

7 (B) "Special-Use Vehicle" means any publicly or  
8 privately owned vehicle that is specifically designed,  
9 constructed or modified and equipped, and is intended  
10 to be used for, and is maintained or operated solely  
11 for the emergency or non-emergency transportation of a  
12 specific medical class or category of persons who are  
13 sick, injured, wounded or otherwise incapacitated or  
14 helpless (e.g. high-risk obstetrical patients,  
15 neonatal patients).

16 (C) "Reserve Ambulance" means a vehicle that meets  
17 all criteria set forth in this Section and all  
18 Department rules, except for the required inventory of  
19 medical supplies and durable medical equipment, which  
20 may be rapidly transferred from a fully functional  
21 ambulance to a reserve ambulance without the use of  
22 tools or special mechanical expertise.

23 (b) The Department shall have the authority and  
24 responsibility to:

25 (1) Require all Vehicle Service Providers, both  
26 publicly and privately owned, to function within an EMS



1 System.

2 (2) Require a Vehicle Service Provider utilizing  
3 ambulances to have a primary affiliation with an EMS  
4 System within the EMS Region in which its Primary Service  
5 Area is located, which is the geographic areas in which  
6 the provider renders the majority of its emergency  
7 responses. This requirement shall not apply to Vehicle  
8 Service Providers which exclusively utilize Limited  
9 Operation Vehicles.

10 (3) Establish licensing standards and requirements for  
11 Vehicle Service Providers, through rules adopted pursuant  
12 to this Act, including but not limited to:

13 (A) Vehicle design, specification, operation and  
14 maintenance standards, including standards for the use  
15 of reserve ambulances;

16 (B) Equipment requirements;

17 (C) Staffing requirements; and

18 (D) License renewal at intervals determined by the  
19 Department, which shall be not less than every 4  
20 years.

21 The Department's standards and requirements with  
22 respect to vehicle staffing for private, nonpublic local  
23 government employers must allow for ~~an~~ alternative ~~rural~~  
24 staffing models that include an EMR who drives an  
25 ambulance with a licensed EMT, EMT-I, A-EMT, Paramedic, or  
26 PHRN, as appropriate, in the patient compartment providing

1 care to the patient pursuant to the approval of the EMS  
2 System Program Plan developed and approved by the EMS  
3 Medical Director for an EMS System. The Department shall  
4 monitor the implementation and performance of alternative  
5 staffing models and may issue a notice of termination of  
6 an alternative staffing model only upon evidence that an  
7 EMS System Program Plan is not being adhered to.

8 An EMS System Program Plan for a Basic Life Support  
9 transport utilizing an EMR and an EMT shall include the  
10 following:

11 (A) Alternative staffing models for a Basic Life  
12 Support transport utilizing an EMR and an EMT shall  
13 only be utilized for interfacility Basic Life Support  
14 transports and medical appointments, excluding any  
15 transport to or from a dialysis center.

16 (B) Protocols that shall include dispatch  
17 procedures to properly screen and assess patients for  
18 EMR-staffed and EMT-staffed Basic Life Support  
19 transport.

20 (C) A requirement that a provider shall implement  
21 a quality assurance plan with mechanisms outlined to  
22 audit dispatch screening and the outcome of transports  
23 performed.

24 (D) The EMT shall have at least one year of  
25 experience in performance of pre-hospital emergency  
26 care.

1           (E) The licensed EMR must complete a defensive  
2           driving course prior to participation in the  
3           Department's alternative staffing model.

4           (F) The length of the EMS System Program Plan for a  
5           Basic Life Support transport utilizing an EMR and an  
6           EMT shall be for one year, and must be renewed annually  
7           if proof of the criteria being met is submitted,  
8           validated, and approved by the EMS Medical Director  
9           for the EMS System and the Department.

10          The Department must allow for an alternative rural  
11          staffing model for those vehicle service providers that  
12          serve a rural or semi-rural population of 10,000 or fewer  
13          inhabitants and exclusively uses volunteers, paid-on-call,  
14          or a combination thereof.

15          (4) License all Vehicle Service Providers that have  
16          met the Department's requirements for licensure, unless  
17          such Provider is owned or licensed by the federal  
18          government. All Provider licenses issued by the Department  
19          shall specify the level and type of each vehicle covered  
20          by the license (BLS, ILS, ALS, ambulance, SEMSV, limited  
21          operation vehicle, special use vehicle, reserve  
22          ambulance).

23          (5) Annually inspect all licensed vehicles operated by  
24          Vehicle Service Providers.

25          (6) Suspend, revoke, refuse to issue or refuse to  
26          renew the license of any Vehicle Service Provider, or that

1 portion of a license pertaining to a specific vehicle  
2 operated by the Provider, after an opportunity for a  
3 hearing, when findings show that the Provider or one or  
4 more of its vehicles has failed to comply with the  
5 standards and requirements of this Act or rules adopted by  
6 the Department pursuant to this Act.

7 (7) Issue an Emergency Suspension Order for any  
8 Provider or vehicle licensed under this Act, when the  
9 Director or his designee has determined that an immediate  
10 and serious danger to the public health, safety and  
11 welfare exists. Suspension or revocation proceedings which  
12 offer an opportunity for hearing shall be promptly  
13 initiated after the Emergency Suspension Order has been  
14 issued.

15 (8) Exempt any licensed vehicle from subsequent  
16 vehicle design standards or specifications required by the  
17 Department, as long as said vehicle is continuously in  
18 compliance with the vehicle design standards and  
19 specifications originally applicable to that vehicle, or  
20 until said vehicle's title of ownership is transferred.

21 (9) Exempt any vehicle (except an SEMSV) which was  
22 being used as an ambulance on or before December 15, 1980,  
23 from vehicle design standards and specifications required  
24 by the Department, until said vehicle's title of ownership  
25 is transferred. Such vehicles shall not be exempt from all  
26 other licensing standards and requirements prescribed by

1 the Department.

2 (10) Prohibit any Vehicle Service Provider from  
3 advertising, identifying its vehicles, or disseminating  
4 information in a false or misleading manner concerning the  
5 Provider's type and level of vehicles, location, primary  
6 service area, response times, level of personnel,  
7 licensure status or System participation.

8 (10.5) Prohibit any Vehicle Service Provider, whether  
9 municipal, private, or hospital-owned, from advertising  
10 itself as a critical care transport provider unless it  
11 participates in a Department-approved EMS System critical  
12 care transport plan.

13 (11) Charge each Vehicle Service Provider a fee per  
14 transport vehicle, due annually at time of inspection. The  
15 fee per transport vehicle shall be set by administrative  
16 rule by the Department and shall not exceed 100 vehicles  
17 per provider.

18 (Source: P.A. 97-333, eff. 8-12-11; 97-1014, eff. 1-1-13;  
19 98-452, eff. 1-1-14.)

20 (210 ILCS 50/3.155)

21 Sec. 3.155. General Provisions.

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

25 (b) For an inter-hospital emergency or non-emergency

1 medical transport, in which the physician from the sending  
2 hospital provides the EMS personnel with written medical  
3 orders, such written medical orders cannot exceed the scope of  
4 care which the EMS personnel are authorized to render pursuant  
5 to this Act.

6 (c) For an inter-hospital emergency or non-emergency  
7 medical transport of a patient who requires medical care  
8 beyond the scope of care which the EMS personnel are  
9 authorized to render pursuant to this Act, a qualified  
10 physician, nurse, perfusionist, or respiratory therapist  
11 familiar with the scope of care needed must accompany the  
12 patient and the transferring hospital and physician shall  
13 assume medical responsibility for that portion of the medical  
14 care.

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

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

1 activities.

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

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

11 (h) Patients, individuals who accompany a patient, and  
12 emergency medical services personnel may not smoke while  
13 inside an ambulance or SEMSV. The Department of Public Health  
14 may impose a civil penalty on an individual who violates this  
15 subsection in the amount of \$100.

16 (i) When a patient has been determined by EMS personnel to  
17 (1) have no immediate life-threatening injuries or illness,  
18 (2) not be under the influence of drugs or alcohol, (3) have no  
19 immediate or obvious need for transport to an emergency  
20 department, and (4) have an immediate need for transport to an  
21 EMS System-approved mental health facility, the EMS personnel  
22 may contact Online Medical Control or his or her EMS Medical  
23 Director or Emergency Communications Registered Nurse to  
24 request bypass or diversion of the closest emergency  
25 department, as outlined in paragraph (5) of subsection (c) of  
26 Section 3.20, and request transport to the closest or

1 appropriate EMS System-approved mental health facility. In  
2 addition, EMS personnel may transport a patient to an EMS  
3 System-approved urgent care or immediate care facility that  
4 meets the proper criteria and is approved by Online Medical  
5 Control or his or her EMS Medical Director or Emergency  
6 Communications Registered Nurse.

7 (Source: P.A. 92-376, eff. 8-15-01.)

8 Section 99. Effective date. This Act takes effect upon  
9 becoming law.