WEST VIRGINIA LEGISLATURE
REGULAR SESSION, 1984

ENROLLED
Committee Substitute for
SENATE BILL NO. 263

(By Mr. Bo Hudak)

PASSED March 10, 1984
In Effect ninety days from Passage
ENROLLED
COMMITTEE SUBSTITUTE
FOR
Senate Bill No. 263
(MR. BOETTNER, original sponsor)

[Passed March 10, 1984; in effect ninety days from passage]

AN ACT to repeal article four-d, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended; to amend and reenact article four-c of said chapter; to repeal article three-b, chapter thirty of said code; to amend and reenact section nine, article fourteen, chapter seventeen-c of said code; to amend and reenact section one, article two-c, chapter twenty-two of said code; to amend and reenact section two, article six-a, chapter forty-nine of said code; and to amend article six, chapter sixty-one of said code by adding thereto a new section, designated section twenty, all relating to emergency medical services; providing a short title; purpose; definitions; establishing office of emergency medical services; establishing emergency medical services advisory council and providing for powers and duties; powers and duties of director under article; exempting certain vehicles and aircraft; providing standards for emergency service personnel; requirements for training programs; extension of certificates and temporary certificates; providing for refusal or suspension and
revocation of certificates or temporary certificates and appeal therefrom; establishing liability for the cost of ambulance service; providing violations and criminal penalties; authorizing injunctive relief; listing services that may be performed by emergency medical service personnel; giving certain powers to emergency service personnel during emergency communications failures and disasters; limiting liability of providers of emergency medical services and requiring insurance in lieu thereof; limiting liability for failure to obtain consent; providing for person in charge in case of emergencies; providing the offense of obstructing emergency services personnel and a criminal penalty therefor; allowing service reciprocity agreements for mutual aid; giving the director authority to restrict services by out of state providers; giving the director of the department of health authority to make regulations; providing for severability; prohibiting the following of authorized emergency vehicles; providing for emergency service personnel in coal mines; mandating emergency medical service personnel to report suspected child abuse and neglect; and providing the offense of falsely reporting an emergency incident and a criminal penalty therefor.

*Be it enacted by the Legislature of West Virginia:*

That article four-d, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be repealed; that article four-c of said chapter be amended and reenacted; that article three-b, chapter thirty be repealed; that section nine, article fourteen, chapter seventeen-c of said code be amended and reenacted; that section one, article two-c, chapter twenty-two of said code be amended and reenacted; that section two, article six-a, chapter forty-nine of said code be amended and reenacted; and that article six, chapter sixty-one of said code be amended by adding thereto a new section, designated section twenty, all to read as follows:

**CHAPTER 16. PUBLIC HEALTH.**

**ARTICLE 4C. EMERGENCY MEDICAL SERVICES ACT.**

§16-4C-1. Short title.

1 This article shall be known as the "Emergency Medical Services Act of 1984."
§16-4C-2. Purposes of article.

1 The Legislature finds and declares: (1) That the safe and efficient operation of life-saving and life-preserving emergency medical service to meet the needs of citizens of this state is a matter of general public interest and concern; (2) that, in order to ensure provision of adequate emergency medical services within this state for the protection of the public health, safety and welfare, it is imperative that minimum standards for emergency medical service personnel be established and enforced by the state; (3) that emergency medical service personnel should meet minimum training standards promulgated by the director; (4) that it is the public policy of this state to enact legislation to carry out these purposes and comply with minimum standards for emergency medical service personnel as specified herein; and (5) that any patient who receives emergency medical service and who is unable to consent thereto should be liable for the reasonable cost of such service.

§16-4C-3. Definitions.

1 As used in this article, unless the context clearly requires a different meaning:
2 "Ambulance" means any privately or publicly owned vehicle or aircraft which is designed, constructed or modified; equipped or maintained; and operated for the transportation of patients.
3 "Ambulance service" means the transportation, and treatment at the site of pickup and en route, of a patient to or from a place where medical, hospital or clinical service is normally available.
4 "Council" means the emergency medical service advisory council created pursuant to section five of this article.
5 "Director" means the director of health.
6 "Emergency medical services" means all services which are set forth in P.L. 93-154 "The Emergency Medical Services Act of 1973" and those included in and made a part of the emergency medical services plan of the department of health inclusive of, but not limited to, caring for and giving life-saving or life-preserving treatment to a patient.
“Emergency medical service personnel” means any person certified by the director to provide emergency medical services as set out in section eight of this article and includes, but is not limited to, emergency medical service attendants, emergency medical technicians, emergency medical technicians-ambulance, emergency medical technicians-intermediate, mobile intensive care paramedics, emergency medical technician-paramedics, physicians, osteopathic physicians, persons certified to provide cardiopulmonary resuscitation, registered nurses and licensed practical nurses who have been trained in first aid, or other licensed or certified health providers who meet the standards and training requirements as determined by the director.

“Emergency medical service attendant” means a person certified by the director to render such emergency medical services as are authorized for such emergency medical service attendant in section eight of this article.

“Emergency medical technician” means a person certified by the director to render such emergency medical services as are authorized for such emergency medical technician in section eight of this article.

“Emergency medical technician-ambulance” means a person certified by the director to render such emergency medical services as are authorized for such emergency medical technician-ambulance in section eight of this article.

“Emergency medical technician-intermediate” means a person certified by the director to render such emergency medical services as are authorized for such emergency medical technician-intermediate in section eight of this article.

“Mobile intensive care paramedic” means a person certified by the director to render such emergency medical services as are authorized for such mobile intensive care paramedic in section eight of this article.

“Emergency medical technician-paramedic” means a person certified by the director to render such emergency medical services as are authorized for such emergency medical technician-paramedic in section eight of this article.

“Emergency medical service provider” means any
authority, person, corporation, partnership or other entity
which owns or operates an ambulance
which provides emergency medical service in this state.
“Governing body” has the meanings ascribed to it as
applied to a municipality in subsection (b), subdivision (1),
section two, article one, chapter eight of this code.
“Line officer” means the emergency medical service
personnel present at the scene of an accident, injury or
illness who has taken the responsibility for patient care.
“Medical command” means the issuing of orders by a
physician or osteopathic physician from a medical facility
to emergency medical service personnel for the purpose of
providing appropriate patient care.
“Municipality” has the meaning ascribed to it in
subsection (a), subdivision (1), section two, article one,
chapter eight of this code.
“Patient” means any sick, injured, wounded or otherwise
incapacitated or helpless person, or an expectant mother
who needs medical, hospital or clinical service under an
existing or imminent emergency situation.
“Service reciprocity” means the provision of emergency
medical services to citizens of this state by emergency
medical service personnel certified to render such services
by a neighboring state.
“Small emergency medical service provider” means any
emergency medical service provider which is made up of
less than twenty emergency medical service personnel.
§16-4C-4. Office of emergency medical services created;
staffing.
1 There is hereby created within state government under
2 the director of the department of health an office to be
3 known as the office of emergency medical services.
4 The director may employ such technical, clerical,
5 stenographic and other personnel as may be necessary to
carry out the purposes of this article. Such personnel may
6 be paid from funds appropriated therefor or from such
other funds as may be made available for carrying out the
7 purposes of this article.
8 The office of emergency medical services as created by
9 former section four, article four-d of this chapter, shall
10 continue in existence as the office of emergency medical
11 services established by this section.
§16-4C-5. Emergency medical services advisory council; duties, composition, appointment, meetings, compensation and expenses.

1 The emergency medical service advisory council, heretofore created and established by former section seven of this article, shall be continued for the purpose of developing, with the director, standards for emergency medical service personnel and for the purpose of providing advice to the office of emergency medical services and the director thereof, as established by section four of this article with respect to reviewing and making recommendations for and providing assistance to the establishment and maintenance of adequate emergency medical services for all portions of this state.

2 The council shall have the duty to advise the director in all matters pertaining to his duties and functions in relation to carrying out the purpose of this article.

3 The council shall be composed of thirteen members appointed by the governor by and with the advice and consent of the Senate. Within twenty days of the effective date of this act the West Virginia professional paramedic and EMT association shall submit to the governor a list of six names of representatives from their association and a list of three names shall be submitted to the governor of representatives of their respective organizations by the West Virginia association of county officials, West Virginia state firemen's association, West Virginia hospital association, West Virginia state medical association, West Virginia chapter of the American college of emergency physicians, West Virginia emergency medical services administrators association, and the state department of education. Within thirty days of the effective date of this act the governor shall appoint from the respective lists submitted two persons who represent the West Virginia professional paramedic and EMT association, and one person from the West Virginia association of county officials, West Virginia state firemen's association, West Virginia hospital association, West Virginia state medical association, West Virginia chapter of the American college of emergency physicians, West Virginia emergency medical services administrators association, and the state department of education. The governor shall in addition
appoint one person to represent emergency medical service providers operating within the state, one person to represent small emergency medical service providers operating within this state and two persons to represent the general public.

The council shall choose its own chairman and meet at the call of the director at least quarterly.

The members of such council may be reimbursed for any and all reasonable and necessary expenses actually incurred in the performance of their duties.

§16-4C-6. Powers and duties of director.

1 The director shall have the following powers and duties:
2 (a) In accordance with chapter twenty-nine-a of this code, to promulgate rules and regulations regarding the age, training, retraining, testing and certification and recertification of emergency medical service personnel:
3 Provided, That the director may not promulgate any rule or regulation until it is approved by the emergency medical services advisory council. The council shall take no action unless a quorum is present.
4 (b) To apply for, receive, and expend advances, grants, contributions and other forms of assistance from the state or federal government or from any private or public agencies or foundations to carry out the provisions of this article.
5 (c) To design, develop and annually review a statewide emergency medical services implementation plan. Such plan shall recommend aid and assistance and all other such acts as shall be necessary to carry out the purposes of this article:
6 (1) To encourage local participation by area, county and community officials and area and regional emergency medical services boards of directors; and
7 (2) To develop a system for monitoring and evaluating emergency medical services programs throughout the state.
8 (d) To provide professional and technical assistance and to make information available to regional and area emergency medical services boards of directors and other potential applicants or program sponsors of emergency medical services for purposes of developing a statewide system of such services.
(e) To assist local government agencies or area and regional emergency medical services boards of directors and other public or private entities in obtaining federal, state or other available funds and services.

(f) To cooperate and work with federal, state and local governmental agencies, private organizations and other entities as may be necessary to carry out the purposes of this article.

(g) To acquire in the name of the state by grant, purchase, gift, devise or any other methods such appropriate real and personal property as may be reasonable and necessary to carry out the purposes of this article.

(h) To make grants and allocations of funds and property so acquired or which may have been appropriated to such agency to other agencies of state and local government as may be appropriate to carry out the purposes of this article.

(i) To expend and distribute by grant or bailment such funds and property to all such state and local agencies for the purpose of performing the duties and responsibilities of such agency all such funds which it may have so acquired or which may have been appropriated by the Legislature of this state.

(j) To develop a program to inform the public concerning emergency medical services programs.

(k) To review and disseminate information regarding federal grant assistance relating to emergency medical services.

(l) To prepare and submit to the governor and Legislature recommendations for legislation in the area of emergency medical services.

(m) To review and make recommendations for and to assist or aid in all projects and programs which provide for emergency medical services regardless of whether or not such projects or programs are funded through the office of emergency medical services. Such review and approval shall be required for all emergency medical services projects, programs or services for which application is made to receive state or federal funds for their operation after the effective date of this bill.
(n) To take all necessary and appropriate action to encourage and foster the cooperation of all emergency medical service providers and facilities within this state.

(o) Nothing in this article shall be construed to allow the director to dissolve, invalidate or eliminate any existing EMS program or ambulance providers in service at the time of adoption of the amendment to this article in the regular session of the Legislature in the year one thousand eight hundred eighty-four, or to deny them fair access to federal and state funding and to medical facilities and training programs, nor require an EMS program serving any community having thirty or fewer active volunteers to have more than one person who is certified as an emergency medical service personnel notwithstanding the provisions of section eight of this article or any other provision of this code.

§16-4C-7. Vehicles, aircraft and persons aboard them exempted from requirements of article.

1. The following vehicles and aircraft are exempted from the application of the provisions of this article and rules promulgated pursuant to it and persons aboard them are not required to comply with the provisions of section eight of this article:

(a) Privately owned vehicles and aircraft not ordinarily used in the business or service of transporting patients.

(b) Vehicles and aircraft used as ambulances in case of a catastrophe or emergency when the ambulances normally staffed by certified emergency medical service personnel based in the locality of the catastrophe or emergency are insufficient to render the service required.

(c) Ambulances based outside this state, except that emergency medical service personnel aboard any such ambulance receiving a patient within this state for transportation to a location within this state must comply with the provisions of this article and the rules promulgated pursuant to it except in the event of a catastrophe or emergency when the ambulances normally staffed by certified emergency medical service personnel based in the locality of the catastrophe or emergency are insufficient to render the services required.
§16-4C-8. Standards for emergency medical service personnel.

(1) After the first day of January, one thousand nine hundred eighty-five, every ambulance which provides ambulance service or emergency medical services shall carry two persons who are certified as emergency medical service personnel, one of which personnel shall be in the patient compartment at all times when a patient is being transported by such ambulance. As a minimum, of the personnel carried by any ambulance operated by any emergency medical service provider, one shall be trained in cardiopulmonary resuscitation and one shall be certified as an emergency medical service attendant.

(2) After the first day of July, one thousand nine hundred eighty-six, at least one of the emergency medical services personnel referred to in the immediately preceding subsection shall be minimally certified as an emergency medical technician-ambulance on any emergency call and such person shall be in the patient compartment at all times a patient is being transported.

As a minimum, the training for each class of emergency medical service personnel shall include

(a) Emergency medical service attendant: Shall have earned and possess valid certificates from the department or by authorities recognized and approved by the director in advanced first aid or equivalent training and cardiopulmonary resuscitation.

(b) Emergency medical technician: Shall have successfully completed the course on emergency care of the sick and injured established by the director or by authorities recognized and approved by the director.

(c) Emergency medical technician-ambulance: Shall have successfully completed the course for certification as an emergency medical technician-ambulance as established by the director or authorities recognized and approved by the director.
(d) Emergency medical technician-intermediate: Shall have successfully completed the course for certification as an emergency medical technician-ambulance and such other course of study and certification as may be established by the director.

(e) Mobile intensive care paramedic: Shall have successfully completed the course for certification as a mobile intensive care paramedic and such other course of study and certification as may be established by the director.

(f) Emergency medical technician-paramedic: Shall have completed the course for certification as an emergency medical technician-paramedic and such other course of study and certification as may be established by the director.

The foregoing shall not be considered to limit the power of the director to prescribe training, certification and recertification standards.

State and county continuing education and recertification programs for all levels of emergency medical service providers shall be available to emergency medical service providers at a convenient site within the county in which the emergency medical service provider operates, or in an adjacent county within thirty minutes travel time of the provider's primary place of operation. Such continuing education programs shall be provided free of charge by the department of health to all non-profit emergency medical service providers.

(3) Any person desiring emergency medical services personnel certification shall apply to the director using forms and procedures prescribed by the director. Upon receipt of such application, the director shall determine if the applicant meets the requirements for certification and examine the applicant, as in his discretion, is necessary to make such a determination. If it is determined that the applicant meets all of the requirements, the director shall issue an appropriate emergency medical service personnel certificate to the applicant. Emergency medical service personnel certificates issued by the director shall be valid for a period not to exceed three years from the date of their issuance unless sooner suspended or revoked by the director. Certificates may be renewed for additional
periods not to exceed three years after review and
determination by the director that such holder meets the
requirements established for emergency medical service
personnel.

(4) The director may issue a temporary emergency
medical service personnel certificate to an applicant, with
or without examination of the applicant, when he finds
such issuance to be in the public interest. Unless sooner
suspended or revoked a temporary certificate shall be valid
initially for a period not exceeding one hundred twenty
days and it shall not be renewed thereafter unless the
director finds such renewal to be in the public interest:
Provided, That the expiration date of any such temporary
certificate issued shall be extended until the holder of such
certificate is afforded at least one opportunity to take an
emergency medical services personnel training course
within the general area where he serves as an emergency
medical service personnel, but the expiration date shall not
be extended for any longer period of time or for any other
reason.
The director may, on petition from an emergency medical
service provider, squad, ambulance authority or county
commission, grant an extension for compliance with
paragraphs (1) and (2) of this section where circumstances
prevent such emergency medical service provider, squad,
ambulance authority or county commission from meeting
the time frames indicated. Such extension shall be for no
longer than twelve calendar months from the date of the
request, and the request for extension must include such
information as may be required by the director to determine
if all reasonable efforts have been made to comply with this
section. No petitioner shall be granted more than one
extension under this section.

§16-4C-9. Suspension or revocation of certificate or temporary
certificate.

(a) The director may at any time upon his own motion,
and shall, upon the verified written complaint of any
person, cause an investigation to be conducted to determine
whether there are any grounds for the suspension or
revocation of a certificate or temporary certificate issued
under the provisions of this article.
(b) The director shall suspend or revoke any certificate or temporary certificate when he finds the holder thereof has:

1. Obtained a certificate or temporary certificate by means of fraud or deceit; or
2. Been grossly incompetent and/or grossly negligent as defined by the director in accordance with rules and regulations or by prevailing standards of emergency medical services care; or
3. Failed or refused to comply with the provisions of this article or any reasonable rule and regulation promulgated by the director hereunder or any order or final decision of the director.

(c) The director shall suspend or revoke any certificate or temporary certificate if he finds the existence of any grounds which would justify the denial of an application for such certificate or temporary permit if application were then being made for it.

§16-4C-10. Notice of refusal, suspension or revocation of certificate; appeals to director; judicial review.

An application for an original emergency medical service personnel certificate, for the renewal of an emergency medical service personnel certificate or for a temporary emergency medical service personnel certificate, shall be acted upon by the director and the director's certificate delivered or mailed, or a copy of any order of the director denying any such application delivered or mailed to the applicant, by the director within fifteen days after the date upon which such application including test scores, if applicable, was received by the director.

Whenever the director refuses to issue an emergency medical service personnel certificate or a temporary emergency medical service personnel certificate, or suspends or revokes an emergency medical service personnel certificate, or a temporary emergency medical service personnel certificate, he shall make and enter an order to that effect, which order shall specify the reasons for such denial, suspension or revocation, and shall cause a copy of such order to be served in person or by certified mail, return receipt requested, on the applicant or certificate holder, as the case may be.
Whenever a certificate is suspended or revoked, the director shall in the order of suspension or revocation direct the holder thereof to return his certificate to the director. It shall be the duty of such certificate holder to comply with any such order following expiration of the period provided for an appeal to the director.

Any applicant or certificate holder, as the case may be, adversely affected by an order made and entered by the director may appeal to the director for an order vacating or modifying such order or for such order as the director should have entered. The person so appealing shall be known as the appellant. An appeal shall be perfected by filing a notice of appeal with the director within ten days after the date upon which the appellant received the copy of such order. The notice of appeal shall be in such form and contain such information as may be prescribed by the director, but in all cases shall contain a description of any order appealed from and the grounds for said appeal. The filing of the notice of appeal shall operate to stay or suspend execution of any order which is the subject matter of the appeal. All of the pertinent provisions of article five, chapter twenty-nine-a of this code apply to and govern the hearing on appeal and the administrative procedures in connection with and following such hearing, with like effect as if the provisions of said article five, chapter twenty-nine-a of this code were set forth in extenso herein.

The director shall set a hearing date which shall be not less than ten days after he received the notice of appeal unless there is a postponement or continuance. The director may postpone or continue any hearing on his own motion, or for good cause shown upon the application of the appellant. The appellant shall be given notice of said hearing in person or by certified mail, return receipt requested. Any such hearing shall be held in Charleston, Kanawha County, West Virginia, unless another place is specified by the director.

After such hearing and consideration of all of the testimony, evidence and record in the case, the director shall make and enter an order affirming, modifying or vacating his initial order or shall make and enter any new order. Such order shall be accompanied by findings of fact and conclusions of law as specified in section three, article five, chapter twenty-nine-a of this code, and a copy of such
order and accompanying findings and conclusions shall be served upon the appellant, in person or by certified mail, return receipt requested. The order of the director shall be final unless vacated or modified upon judicial review thereof.

Any appellant adversely affected by a final order made and entered by the director is entitled to judicial review thereof. All of the pertinent provisions of section four, article five, chapter twenty-nine-a of this code shall apply to and govern such review with like effect as if the provisions of said section four, article five, chapter twenty-nine-a of this code were set forth in extenso herein. The judgment of the circuit court shall be final unless reversed, vacated or modified on appeal to the supreme court of appeals in accordance with the provisions of section one, article six, chapter twenty-nine-a of this code.

§16-4C-11. Liability for cost of ambulance service.

1 Any patient who receives ambulance service and who is unable to give his consent to or contract for the service, whether or not he has agreed or consented to liability for the service, shall be liable in implied contract to the entity providing the ambulance service for the cost thereof.

2 Any person who receives ambulance service upon his request for such service shall be liable for the cost thereof.

§16-4C-12. Violations; criminal penalties.

1 Any person who operates an ambulance with an insufficient number of emergency medical service personnel aboard when not lawfully permitted to do so, or who represents himself as a certified emergency medical service personnel knowing such representation to be untrue shall be guilty of a misdemeanor, and, upon conviction thereof, shall be fined not less than one hundred dollars nor more than one thousand dollars.

§16-4C-13. Actions to enjoin violations; injunctive relief.

1 Whenever it appears to the director that any person has been or is violating or is about to violate any provisions of this article or any final order of the director, the director may apply in the name of the state, to the circuit court of the county in which the violation or violations or any part
Enr. Com. Sub. for S. B. No. 263] 16

thereof has occurred, is occurring or is about to occur, for an
injunction against such person and any other persons who
have been, are or are about to be, involved in, or in any way
participating in, any practices, acts or omissions, so in
violation, enjoining such person or persons from any such
violation or violations. Such application may be made and
prosecuted to conclusion whether or not any such violation
or violations have resulted or shall result in prosecution or
conviction under the provisions of section twelve of the
article.

Upon application by the director, the circuit courts of this
state may by mandatory or prohibitory injunction compel
compliance with the provisions of this article and all final
orders of the director.

The circuit court may issue a temporary injunction in any
case pending a decision on the merits of any application
filed.

The judgment of the circuit court upon any application
permitted by the provisions of this section shall be final
unless reversed, vacated or modified on appeal to the
supreme court of appeals. Any such appeal shall be sought
in the manner and within the time provided by law for
appeals from circuit courts in other civil cases.

§16-4C-14. Services that may be performed by emergency
medical services personnel.

Notwithstanding any other provision of law, emergency
medical service personnel, by each class, may provide the
following care:

(1) Emergency medical services attendant - Render
basic first-aid and cardiopulmonary resuscitation and
other services as are established by the director.

(2) Emergency medical technician - Render care which
may be performed by an emergency medical services
attendant, and other services as are established by the
director.

(3) Emergency medical technician-ambulance -
Render the care permitted which may be performed by an
emergency medical service attendant and by an emergency
medical technician, and in addition, other services as are
established by the director.
(4) Emergency medical technician-intermediate —
Render the care permitted which may be performed by an
emergency medical service attendant, emergency medical
technician, and emergency medical technician-ambulance,
and in addition, upon the order of a medical command
physician or surgeon and other services as are established
by the director.
(5) Mobile intensive care paramedic — Render care
which may be performed by an emergency medical service
attendant, an emergency medical technician, emergency
medical technician-ambulance, emergency medical
technician-intermediate; and, in addition, upon order of a
medical command physician or surgeon, perform any other
services as are established by the director.
(6) Emergency medical technician-paramedic —
Render care which may be performed by an emergency
medical service attendant, an emergency medical
technician, an emergency medical technician-ambulance,
emergency medical technician-intermediate, mobile
intensive care paramedic, and in addition, upon order of a
medical command physician or surgeon perform any other
services as are established by the director.


(1) If radio or telephone communications between an
emergency medical technician-intermediate, a mobile
intensive care paramedic or an emergency medical
technician-paramedic and physician fail during an
emergency situation, such emergency medical technician-
intermediate, mobile intensive care paramedic or
emergency medical technician-paramedic may perform any
procedure for which such emergency medical technician-
intermediate, mobile intensive care paramedic or
emergency medical technician-paramedic is authorized by
section fourteen of this article if in the judgment of the
emergency medical technician-intermediate, mobile
intensive care paramedic or emergency medical technician-
paramedic the life of the patient is in immediate danger and such care is required to preserve life.

(2) In the event of a disaster or other occurrence where the communication system between emergency medical technician-intermediate, mobile intensive care paramedic or emergency medical technician-paramedic and physician is unable to adequately convey individual direction to the emergency medical technician-intermediate, mobile intensive care paramedic or emergency medical technician-paramedic, such emergency medical technician-intermediate, mobile intensive care paramedic or emergency medical technician-paramedic may perform such services as are authorized by section fourteen of this article without direct voice contact with a medical command physician or written order of a medical command physician, and may release immediate control of such patient upon whom such services have been performed to any emergency medical services personnel in order that such emergency medical technician-intermediate, mobile intensive care paramedic or emergency medical technician-paramedic may provide immediate services to other patients affected by such disaster or such other occurrence.

(3) In the event that services are provided under the circumstances contemplated by this section, such emergency medical technician-intermediate, mobile intensive care paramedic or emergency medical technician-paramedic shall, within five days of the providing of such services, make a report to the director on forms prescribed by the director of what services were performed, the identity of the patient or patients upon whom such services were performed and the circumstances justifying the provision of such services and such other information as may be required by the director.

§16-4C-16. Limitation of liability; mandatory errors and omissions insurance.

(1) On and after the first day of July, one thousand nine hundred eighty-five, every person, corporation, ambulance service, emergency medical service provider, emergency ambulance authority, emergency ambulance service, other persons which employ emergency medical services personnel with or without wages for ambulance service or
§16-4C-17. Limitation of liability for failure to obtain consent.

1 No emergency medical services personnel may be subject to civil liability, based solely upon failure to obtain consent in rendering emergency medical services to any individual regardless of age where the patient is unable to give his consent for any reason, including minority, and where there is no other person reasonably available who is legally authorized to consent to the providing of such care or who is
legally authorized to refuse to consent to the providing of
such care.

Nothing in this act shall be construed to require medical
treatment or transportation for any adult in contravention
of his or her stated objection thereto upon religious
grounds.

§16-4C-18. Authority of emergency medical services
personnel in charge of emergencies.

When any department, agency or entity which provides
emergency medical services under the authority of this
article is responding to, operating at or returning from
emergencies, any emergency medical services personnel
serving in the capacity of an emergency medical services
line officer in charge, shall control and direct the providing
of emergency medical services. The emergency medical
service personnel serving in the capacity of an emergency
medical services line officer shall determine whether a
patient shall be transported from the emergency scene,
determine what care shall be rendered prior to such
transport, determine what appropriate facility to which
such patient shall be transported, and otherwise fully direct
and control the providing of emergency medical services
and patient care.

Nothing included in this section shall be construed to
restrict or interfere with the authority of a fire officer in
charge to supervise or direct those fire department
personnel under his command or to restrict any person from
entering a hazardous area for which such fire officer has
assumed the responsibility.

§16-4C-19. Obstructing emergency medical service
personnel.

Any person who knowingly or intentionally obstructs or
interferes with emergency medical services or rescue
personnel performing or attempting to perform functions or
duties as emergency medical services or rescue personnel
shall be guilty of a misdemeanor, and, upon conviction
thereof, shall be fined not more than one thousand dollars
or confined in the county jail for a period not exceeding one
year, or both fined and confined.
§16-4C-20. Service reciprocity agreements for mutual aid.

Any persons or entities providing lawful emergency medical services under the provisions of this article are hereby authorized in their discretion to enter into and renew service reciprocity agreements, for such period as they may deem advisable, with the appropriate emergency medical services providers, county, municipal or other governmental units or in counties contiguous to the state of West Virginia in the state of Ohio, the commonwealth of Pennsylvania, the state of Maryland, the commonwealth of Virginia or the commonwealth of Kentucky, in order to establish and carry into effect a plan to provide mutual aid across state lines, through the furnishing of properly certified personnel and equipment for the provision of emergency medical services in this state and such counties contiguous to this state upon written approval by the director.

No such person or entity may enter into any such agreement unless the agreement provides that each of the parties to such agreement shall waive any and all claims against the other parties thereto, which may arise out of their activities outside of their respective jurisdictions under such agreement and shall indemnify and save harmless the other parties to such agreement from all claims by third parties for property damages or personal injuries which may arise out of the activities of the other parties to such agreement outside their respective jurisdictions under such agreement.

The director is hereby authorized to enter into service reciprocity agreements with appropriate officials in other states for the purpose of providing emergency medical services to the citizens of this state by emergency medical service personnel properly certified in their respective state or states. A formal agreement between the director and an authorized official of another state must be in effect prior to such service being provided. Individual certification of other state emergency medical service personnel is not required for purposes of providing services to West Virginia citizens following the creation of such agreement by the responsible officials.
§16-4C-21. Restriction for provision of emergency medical services by out of state emergency medical service personnel or providers of emergency medical services.

The director may issue an order on his own motion upon written request of any emergency medical service provider or county commission in this state, to restrict an out of state provider of emergency medical services or an out of state emergency medical service personnel to a particular geographic area of the state of West Virginia or prohibit such provider or personnel from providing emergency medical services within the borders of this state when in the opinion of the director such services are not required or do not meet the standards set forth herein or those established by rules and regulations as authorized by this article.

§16-4C-22. Authority of the director to make regulations.

The director is hereby authorized and empowered to make regulations pursuant to the procedures established in chapter twenty-nine-a of this code for the purpose of carrying out the purposes of this article into effect.

CHAPTER 17C. TRAFFIC REGULATIONS AND LAWS OF THE ROAD.

ARTICLE 14. MISCELLANEOUS RULES.

§17C-14-9. Following authorized emergency vehicles.

The driver of any vehicle other than one on official business may not follow any authorized emergency vehicle traveling in response to a fire alarm or other emergency closer than five hundred feet or drive into or park such vehicle within the block where such authorized emergency vehicle has stopped in answer to a fire alarm or other emergency.

CHAPTER 22. MINES AND MINERALS.

ARTICLE 2C. EMERGENCY MEDICAL PERSONNEL.

§22-2C-1. Emergency personnel in coal mines.

(a) Emergency medical services personnel shall be employed on each shift at every mine that: (1) Employs more
than ten employees and (2) more than eight persons are present on the shift. Said emergency medical services personnel shall be employed at their regular duties at a central location, or when more than one such person is required pursuant to subsection (b) or (c) at locations, convenient for quick response to emergencies; and further shall have available to them at all times such equipment as shall be prescribed by the director, in consultation with the director of the department of health.

(b) Until the first day of July, one thousand nine hundred eighty-five, emergency medical services personnel shall be defined as a medical service attendant as defined in article four-c, chapter sixteen of this code, paramedic as defined in article three-b, chapter thirty of this code, or physician assistant as defined in article three-a, chapter thirty of this code. At least one emergency medical services personnel shall be employed at a mine for every seventy employees or any part thereof who are engaged at one time, in the extraction, production or preparation of coal.

(c) After the first day of July, one thousand nine hundred eighty-five, emergency medical services personnel shall be defined as a person who is certified as an emergency medical technician-mining, emergency medical technician, emergency medical technician-ambulance, emergency medical technician-intermediate, mobile intensive care paramedic, emergency medical technician-paramedic as defined in section three, article four-c, chapter sixteen of this code, or physician assistant as defined in section sixteen, article three-a, chapter thirty of this code. At least one emergency medical services personnel shall be employed at a mine for every fifty employees or any part thereof who are engaged at any time, in the extraction, production or preparation of coal.

(d) A training course designed specifically for certification of emergency medical technician-mining, shall be developed at the earliest practicable time by the director of health in consultation with the board of miner training, education and certification. The training course for initial certification as an emergency medical technician-mining shall not be less than sixty hours, which shall include, but is not limited to, mast trouser application, basic life support skills, and emergency room observation.
or other equivalent practical exposure to emergencies as prescribed by the director of the department of health.

(e) The maintenance of a valid emergency medical technician-mining certificate may be accomplished without taking a three year recertification examination provided that such emergency medical technician-mining personnel completes an eight hour annual retraining and testing program prescribed by the director of health in consultation with the board of miner training, education and certification.

(f) All emergency medical services personnel currently certified as emergency medical service attendant, emergency medical technician shall receive certification as emergency medical technicians without further training and examination for the remainder of their three year certification period; such emergency medical service attendant, emergency medical technician may upon expiration of such certification become certified as an emergency medical technician-mining upon completion of the eight hour retraining program referred to in subsection (e) above.

CHAPTER 49. CHILD WELFARE.

ARTICLE 6A. REPORTS OF CHILDREN SUSPECTED TO BE ABUSED OR NEGLECTED.

§49-6A-2. Persons mandated to report suspected abuse and neglect.

When any medical, dental or mental health professional, Christian Science practitioner, religious healer, school teacher or other school personnel, social service worker, child care or foster care worker, emergency medical services personnel, peace officer or law-enforcement official has the reasonable cause to suspect that a child is neglected or abused or observes the child being subjected to conditions that are likely to result in abuse or neglect, such person shall immediately report the circumstances or cause a report to be made to the state department of human services: Provided, That any person required to report under this article who is a member of the staff of a public or private institution, school, facility or agency shall immediately notify the person in charge of such institution,
school, facility or agency or a designated agent thereof, who shall report or cause a report to be made. However, nothing in this article is intended to prevent individuals from reporting on their own behalf.

In addition to those persons and officials specifically required to report situations involving suspected abuse or neglect of children, any other person may make a report if such person has reasonable cause to suspect that a child has been abused or neglected in a home or institution or observes the child being subjected to conditions or circumstances that would reasonably result in abuse or neglect.

CHAPTER 61. CRIMES AND THEIR PUNISHMENT.

ARTICLE 6. CRIMES AGAINST THE PEACE.

§61-6-20. Falsely reporting an emergency incident.

A person is guilty of reporting a false emergency incident when knowing the information reported, conveyed or circulated is false or baseless, he:

(1) Initiates or circulates a false report or warning of or impending occurrence of a fire, explosion, crime, catastrophe, accident, illness or other emergency under circumstances in which it is likely that public alarm or inconvenience will result or that firefighting apparatus, ambulance apparatus, one or more rescue vehicles or other emergency apparatus might be summoned; or

(2) Reports, by word or action, to any official or quasi-official agency or organization having the function of dealing with emergencies involving danger to life or property, an alleged occurrence or impending occurrence of a fire, explosion, crime, catastrophe, accident, illness or other emergency in which it is likely that public alarm or inconvenience will result or that firefighting apparatus, ambulance apparatus, one or more rescue vehicles or other emergency apparatus might be summoned, which did not occur, does not in fact exist; or

(3) Reports to a law-enforcement officer or agency the alleged occurrence of any offense or incident which did not in fact occur or an allegedly impending occurrence of an offense or incident which is not in fact about to occur or
false information relating to an actual offense or incident or to the alleged implication of some person therein; or
(4) Without just cause, calls or summon by telephone, fire alarm system or otherwise, any firefighting apparatus, ambulance apparatus, rescue vehicles or other emergency vehicles.

Any person who violates this section is guilty of a misdemeanor, and, upon conviction thereof, shall be fined not more than five hundred dollars or confined in the county jail not more than six months, or both fined and confined.
The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Committee

Chairman House Committee

Originated in the Senate.

In effect ninety days from passage.

Clerk of the Senate

Clerk of the House of Delegates

President of the Senate

Speaker House of Delegates

The within ... is approved ... this the 30 ... day of ... March ... 1984.

Governor