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HOUSE BILL NO. 777

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Health, Welfare and Institutions on January 23, 2018)

(Patron Prior to Substitute—Delegate Ransone)

A BILL to amend the Code of Virginia by adding a section numbered 32.1-111.4:9, relating to emergency air medical transportation; informed decision.

Be it enacted by the General Assembly of Virginia:

- 1. That the Code of Virginia is amended by adding a section numbered 32.1-111.4:9 as follows: § 32.1-111.4:9. Notice requirements for emergency air medical transportation.
- A. Before emergency medical services personnel initiate air transportation of a patient by an emergency medical services air transportation provider, the emergency medical services personnel shall obtain written consent to such air transportation from the patient.
- B. Emergency medical services personnel shall be exempt from complying with the provisions of subsection A if the emergency medical services personnel determine and document that, due to emergency circumstances, compliance might jeopardize the health or safety of the patient or that the patient is unable to provide consent.
- 2. That the provisions of the first enactment of this act shall become effective on July 1, 2019.
- 3. That the Office of Emergency Medical Services shall develop (i) a process by which emergency medical services personnel shall obtain consent of a patient prior to initiating air transportation by an emergency medical services air transportation provider and (ii) a form on which such consent shall be executed. The Office of Emergency Medical Services shall report on the development of such process and form to the Chairmen of the House Committee on Education, the House Committee on Health, Welfare and Institutions, and the Senate Committee on Education and Health on the development of the protocol by December 1, 2018.
- 4. That the Office of Emergency Medical Services shall develop a statewide emergency medical services air transportation dispatch protocol and shall report to the Chairmen of the House Committee on Education, the House Committee on Health, Welfare and Institutions, and the Senate Committee on Education and Health on the development of the protocol by December 1, 2018.