



October 7, 2019

## NOTICE OF PROPOSED RULEMAKING Chapter 511-9-2 "Emergency Medical Services"

Revisions to Rule 511-9-2-.02  
"Definitions"

Revisions to Rule 511-9-2-.03  
"Statewide Emergency Medical Services  
Advisory Councils"

Adoption of Rule 511-9-2-.04  
"Regional Emergency Medical Services Advisory Councils"

The Department of Public Health ("DPH") proposes the attached revisions to Chapter 511-9-2 of its regulations. The revisions relate to statewide and regional EMS Advisory Councils and are proposed pursuant to DPH's authority under O.C.G.A. §§ 31-2A-6, 31-11-2, 31-11-3, 31-11-5, and 31-11-60.1.

The purpose of the proposed rulemaking is to clarify the regulatory structure for oversight and administration of the EMS Communications Program under O.C.G.A. § 31-11-3.

The proposed revisions to Rule 511-9-2-.02 refine existing definitions and add terms that align with existing terminology used in practice. The proposed amendments to Rule 511-9-2-.03 define and clarify the roles and responsibilities of statewide EMS Advisory Councils.

DPH further proposes to adopt Chapter 511-9-2-.04, entitled "Regional Emergency Medical Services Advisory Councils." The proposed rule describes the roles and responsibilities of the Regional Emergency Medical Services Advisory Councils ("REMSACs"), which serve as the designated local coordinating entities within each of the ten EMS Regions in the state, pursuant to O.C.G.A. § 31-11-3. The proposed rule further codifies the procedures for REMSACs to make recommendations to the Department regarding Regional Ambulance Zoning Plans, including recommendations for the designation of 911 Zone Providers and the geographic territories such providers will cover when responding to medical emergency calls.

The proposed amendments have been posted to the Department's website at <https://dph.georgia.gov/regulationsrule-making>. Interested persons may submit comments on these proposed revisions in writing addressed to:

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Written comments must be submitted on or before November 6, 2019. Comments may also be presented in person at a public meeting scheduled for 10:00 a.m. on October 28, 2019, in EOC Briefing Room, Room 3-240, at 2 Peachtree Street, NW, Atlanta, Georgia 30303. The Commissioner of Public Health will consider the proposed rules for adoption on or about November 7, 2019, to become effective on or about December 9, 2019.

Kristin L. Miller  
General Counsel  
Georgia Department of Public Health

# RULES OF THE DEPARTMENT OF PUBLIC HEALTH

## CHAPTER 511-9-2 Emergency Medical Services

### 511-9-2-.02 Definitions.

### 511-9-2-.03 Statewide Emergency Medical Services Advisory Councils.

### 511-9-2-.04 ~~Repealed and Reserved~~ Regional Emergency Medical Services Advisory Councils.

#### Rule 511-9-2-.02 Definitions

The following definitions shall apply in the interpretation of these standards:

- (a) "Advanced Cardiac Life Support (ACLS) Certification" means successful completion of a Department approved course utilizing nationally recognized advanced cardiac care standards.
- (b) "Advanced Emergency Medical Technician" or "AEMT" means a person who has been licensed by the Department after having successfully attained certification by National Registry of Emergency Medical Technicians (NREMT) as an Advanced Emergency Medical Technician (AEMT).
- (c) "Advanced Life Support (ALS)" means the assessment, and if necessary, treatment or transportation by ambulance, utilizing medically necessary supplies and equipment provided by at least one individual licensed above the level of emergency medical technician.
- (d) "Advanced Tactical Paramedic (ATP) means a certification issued by the United States Special Operations Command (USSOCOM) Medic Certification Program.
- (e) "Air Ambulance Service" means an agency or company providing ambulance service with rotor-wing aircraft that is operated under a valid license from the Department.
- (f) "Ambulance - Air" means a rotary-wing aircraft registered by the Department that is specially constructed and equipped and is intended to be used for air medical emergency transportation of patients.
- (g) "Ambulance - Ground" means a motor vehicle registered by the Department that is specially constructed and equipped and is intended to be used for emergency transportation of patients.
- (h) "Ambulance Service" means the provision of emergency care and transportation for a wounded, injured, sick, invalid, or incapacitated human being to or from a place where medical care is furnished.

- (i) "Ambulance Service Medical Director" or "EMS Agency Medical Director" means a physician licensed to practice in this state, who provides medical direction to an EMS agency service licensed by the Ddepartment.
- (j) "Approved" means acceptable to the Ddepartment based on its determination as to conformance with existing standards.
- (k) "Arrest" means the taking or detaining in custody of a person by a law enforcement official upon probable cause of a crime.
- (l) "Authorized Agent" means a person with the legal authority to sign on behalf of the legal owner of a business entity.
- (m) "Base of Operations" means the primary location at which administration of the service occurs and where records are maintained. All service providers must designate one Base of Operations location within the State of Georgia.
- (n) "Basic Life Support (BLS)" means treatment or transportation by ground ambulance vehicle or treatment with medically necessary supplies and services involving non-invasive life support measures.
- (o) "Board" means the Board of Public Health.
- (p) "Cardiac Technician" means a person who has been licensed by the Ddepartment after having successfully completed an approved cardiac technician certification exam, or licensed by the Composite State Board of Medical Examiners, now known as the Georgia Composite Medical Board, prior to January 1, 2002. This is a historical reference only, as no new cardiac technician licenses will be issued.
- (q) "Charge" means a formal claim of criminal wrongdoing brought by a law enforcement official or prosecutor against an individual, whether by arrest warrant, information, accusation, or indictment.
- (r) "Clinical Preceptor" means a licensed emergency medical technician, advanced emergency medical technician, emergency medical technician-intermediate, cardiac technician, paramedic, IV team member, registered nurse, physician's assistant, allied health professional or physician who meets the requirements for preceptors as established by the Ddepartment.
- (s) "Commissioner" means the Commissioner of the Department of Public Health.
- (t) "Communication Protocols" means guidelines that specify which emergency interventions require direct voice order from medical control in the rendering of prehospital emergency medical care to a patient and may include other guidelines relative to communication between medics and medical control.
- (u) "CPR Certification" means successful completion of a Ddepartment-approved healthcare provider course in cardiopulmonary resuscitation.
- (v) "Department" means the Department of Public Health, Office of Emergency Medical Services and Trauma.
- (w) "Designated 911 Zone Provider" means an EMS agency providing ground ambulance service and operating under a valid ambulance license issued by the Department, which is granted a specific geographical territory or emergency response zone to provide emergency transport services following a public call in compliance with the regional ambulance zoning plan for the EMS Region.

~~(x)(w)~~ "Emergency" means a request for a non-planned response or an urgent need for the protection of life, health, or safety, as perceived by a prudent layperson.

~~(y)~~ "Emergency Medical Services" or "Emergency Medical Services System" or "EMS" or "EMS System" means the integrated system of medical response established and designed to respond, assess, treat, and facilitate the disposition of victims of acute injury or illness and those in need of medically safe transportation. EMS also includes medical response provided in hazardous environments, rescue situations, disasters and mass casualties, mass gathering events, as well as interfacility transfer of patients and participation in community health activities.

~~(z)(x)~~ "Emergency Medical Services Agency" or "EMS Agency" means an air ambulance agency services, ground ambulance agency services, medical first responder agency services, and or neonatal transport agency services licensed by the Ddepartment.

~~(aa)(y)~~ "Emergency Medical Service Advisory Council" or "EMSAC" means an advisory council that provides advice to the Ddepartment in matters essential to its operations with respect to emergency medical services.

~~(bb)(z)~~ "Emergency Medical Service Instructor - Level I" means an individual qualified and licensed to teach continuing education, state approved Emergency Medical Responder courses and community education programs.

~~(cc)(aa)~~ "Emergency Medical Service Instructor - Level II" means an individual qualified and licensed to teach and coordinate emergency medical technician, and advanced emergency medical technician courses.

~~(dd)(bb)~~ "Emergency Medical Service Instructor - Level III" means an individual qualified and licensed to teach and coordinate paramedic courses, in addition to Level II courses.

~~(ee)(cc)~~ "Emergency Medical Services Medical Directors Advisory Council" (EMSMDAC) means an advisory council that provides advice to the Ddepartment on issues essential to medical direction of the EMS system.

~~(ff)(dd)~~ "Emergency Medical Services Personnel" or "EMS Personnel" means any emergency medical technician, emergency medical technician-intermediate, advanced emergency medical technician, cardiac technician, or paramedic licensed by the Ddepartment or any emergency medical responder.

~~(gg)~~ "Emergency Medical Service Region" or "EMS Region" means a geographic area identified by the Department for the purpose of administratively sub-dividing the emergency medical services system in this state. Each EMS Region shall be comprised of counties from one or more health districts established by the Department.

~~(hh)(ee)~~ "Emergency Medical Responder" (EMR) means a person who has successfully completed an emergency medical responder course approved by the Ddepartment.

~~(ii)(ff)~~ "Emergency Medical Technician" or "EMT" means a person who has been licensed by the Ddepartment after being certified by National Registry of Emergency Medical Technicians (NREMT) as an Emergency Medical Technician (EMT).

~~(jj)(hh)~~ "Emergency Medical Technician - Intermediate" or "EMT-I" means a person who has been licensed by the Ddepartment after being certified by the National Registry of Emergency Medical

Technicians (NREMT) as an ~~E~~mergency ~~M~~edical ~~T~~echnician - ~~I~~ntermediate (EMT-I) prior to March 31, 2013.

(kk) ~~(kk)~~ "Emergency Response Zone" means a geographical territory identified by the Department within each EMS Region for the purposes of providing emergency medical transport services by designated ambulance services following a public call.

(ll)(ii) ~~(ii)~~ "Ground Ambulance Service" means an agency or company providing ambulance service with ground-based vehicles operating under a valid license from the ~~D~~epartment.

mm)(jj) ~~(jj)~~ "Guidelines" (See "Medical Protocol").

(nn)(kk) ~~(kk)~~ "Health District" means the geographical district designated by the ~~D~~epartment.

(oo)(H) ~~(H)~~ "Inactive Status" in the context of a license or designation issued by the ~~D~~epartment means said license, or designation is no longer valid due to failure to meet current required standards.

(pp)(mm) ~~(mm)~~ "Indictment" means a formal written charge of criminal wrongdoing framed by a prosecuting authority and found by a grand jury.

(qq)(nn) ~~(nn)~~ "Invalid Car" means a non-emergency transport vehicle used only to transport persons who are convalescent or otherwise non-ambulatory, and do not require medical care during transport.

(rr)(oo) ~~(oo)~~ "License" when issued to a person signifies that its facilities, vehicles, personnel and operations comply with O.C.G.A. Chapter 31-11, Rules and Regulations, and policies of the ~~D~~epartment.

(ss)(pp) ~~(pp)~~ "License Officer" means the Commissioner of Public Health or his/her designee.

(tt)(qq) ~~(qq)~~ "License Renewal Cycle" means a period of time established by the ~~D~~epartment for renewal of licenses. The term recertification as it applies to individuals is synonymous with license renewal.

(uu)(rr) ~~(rr)~~ "Licensed Nurse" means an individual who is currently licensed or registered in the State of Georgia as a registered nurse, advanced practice registered nurse, nurse practitioner or licensed practical nurse.

(vv)(ss) ~~(ss)~~ "Medic" means any emergency medical technician, emergency medical technician - intermediate, advanced emergency medical technician, cardiac technician, or paramedic licensed by the ~~D~~epartment.

(ww)(tt) ~~(tt)~~ "Medical Advisor" (See "Ambulance Service Medical Director").

(xx)(uu) ~~(uu)~~ "Medical Control" means the clinical guidance from a physician to emergency medical services personnel regarding the prehospital management of a patient.

(yy)(vv) ~~(vv)~~ "Medical Control Physician" means the physician providing clinical guidance to emergency medical services personnel regarding the prehospital management of a patient.

(zz)(ww) ~~(ww)~~ "Medical Direction" means the administrative process of providing medical guidance or supervision including but not limited to system design, education, critique, and quality improvement by a physician to emergency medical services personnel.

(aaa)(xx) ~~(xx)~~ "Medical First Responder Service" means an agency or company duly licensed by the ~~D~~epartment that provides on-site care until the arrival of the ~~D~~epartment's designated ambulance provider.

~~(bbb)(yy)~~ "Medical First Responder Vehicle" means a motor vehicle registered by the ~~D~~department for the purpose of providing response to emergencies.

~~(ccc)(zz)~~ "Medical Protocol" means a prehospital treatment guidelines, approved by the local EMS medical director, used to manage an emergency medical condition in the field by outlining the permissible and appropriate medical treatment that may be rendered by emergency medical services personnel to a patient experiencing a medical emergency.

~~(ddd)(aaa)~~ "Neonatal Transport Personnel" means licensed or certified health care professionals specially trained in the care of neonates.

~~(eee)(bbb)~~ "Neonatal Transport Provider" means an agency or company providing facility-to-facility transport for neonates that is operated under a valid neonatal transport license from the ~~D~~department.

~~(fff)(eee)~~ "Neonatal Transport Vehicle" means a motor vehicle registered by the ~~D~~department that is equipped for the purpose of transporting neonates to a place where medical care is furnished.

~~(ggg)(ddd)~~ "Neonate" means an infant 0 - 184 days of age, as defined by the Georgia Regional Perinatal Care Program.

~~(hhh)(eee)~~ "Office of Emergency Medical Services and Trauma" (the ~~D~~department) means the regulatory subdivision of the Georgia Department of Public Health, directly responsible for the statewide emergency medical services system.

~~(iii)(fff)~~ "Paramedic" means a person who has been licensed by the ~~D~~department after having ~~being been~~ certified by the National Registry of Emergency Medical Technicians (NREMT) as a paramedic or United States Special Operations Command (USSOCOM) as an Advanced Tactical Paramedic (ATP), or licensed by the Composite State Board of Medical Examiners, now known as the Georgia Composite Medical Board, prior to January 1, 2002.

~~(jii)(ggg)~~ "Patient Care Report (PCR)" means the documentation that contains the data set required by the ~~D~~department, either written or electronic that records the information regarding a request for a response. This includes, but is not limited to: Agency responding, vehicle identity, medics on the call, date of the call, times pertinent to the call, care rendered, treatment and transport information, pertinent patient information such as vital signs, and symptoms. Patient Care Report is synonymous with Prehospital Care Report.

~~(kkk)(hhh)~~ "Provisional License" when issued to an ambulance service means a license issued to an ambulance service on a conditional basis to allow a newly established ambulance service to demonstrate that its facilities and operations comply with state statues and these rules and regulations.

(lll)"Public Call" as used in these regulations means a request for an ambulance service from a member of the public to a Public Safety Answering Point (PSAP) when dialing "9-1-1", or a request for an ambulance by any law enforcement agency, fire department, rescue squad, or any other public safety agency.

~~(mmm)(iii)~~ "Reasonable Distance" means that distance established by the local medical director based on the ambulance service's geographical area of responsibility, the ambulance service's ability to maintain emergency capabilities, and hospital resources.

~~(nnn)(jii)~~ "Recertification Cycle" (See "License Renewal Cycle").

~~(ooo)(kkk)~~ "Regional Ambulance Zoning Plan" means the ~~D~~Department approved method of distributing emergency calls among designated ambulance services in designated geographical territories or zones within each ~~health district~~ EMS Region in the State.

~~(ppp)(lll)~~ "Regional Emergency Medical Services Medical Director" means a person, having approval of the Regional EMS Council and Office of Emergency Medical Services and Trauma, who is a physician licensed to practice medicine in this state, familiar with the design and operation of prehospital emergency experienced in the prehospital emergency care of acutely ill or injured patients, and experienced in the administrative processes affecting regional and state prehospital emergency medical services systems.

~~(qqq)(mmm)~~ "Reserve Ambulance" means a registered ambulance that temporarily does not meet the standards for ambulance equipment and supplies in these rules and policies of the ~~D~~Department.

~~(rrr)(nnn)~~ "Specialty Care Center" means a licensed hospital dedicated to a specific sub-specialty care including, but not limited to, trauma, stroke, pediatric, burn and cardiac care.

~~(sss)(ooo)~~ "Specialty Care Transport" means transportation in a registered ambulance or neonatal unit between health care facilities during which certain special skills above and beyond those taught in state approved initial paramedic education are utilized. Provided, however, that this definition is not intended to authorize a medic to operate beyond his or her scope of practice.

**Authority:** O.C.G.A. §§ 31-2A-3, 31-2A-6, 31-11-2, 31-11-5.

**Rule 511-9-2-.03 Statewide Emergency Medical Services Advisory Councils**

- (1) Emergency Medical Services Advisory Council (~~EMSAC~~).
- (a) Purpose. ~~The department shall establish a~~ A statewide an Emergency Medical Services Advisory Council (EMSAC) shall be established to advise the ~~D~~department in matters essential to its operations with respect to emergency medical services systems.
- (b) General Provisions.
1. The Director and Deputy Director of the State Office of EMS and Trauma shall act as liaisons between EMSAC and the Department, and shall provide support, education, and guidance to EMSAC related to its roles.
  2. 4. EMSAC Council recommendations are advisory and are not binding on the Ddepartment or on agencies under contract to the Ddepartment.
  3. EMSAC shall adopt bylaws subject to the approval of the Department and shall conduct its business in accordance with the Georgia Open Records and Open Meetings Acts. Bylaws shall address frequency of meetings, recording of minutes, membership, creation and function of committees, managing of conflicts of interest, voting, and other issues relevant to the function of an advisory council.
  4. 2. EMSAC The Council shall be composed of between twenty-five (25) and thirty-five (35) members who are knowledgeable in the field of EMS emergency medical service systems and all components thereof, and who represent a broad section cross-section of Georgia's citizens, including consumers of services, providers of services, and recognized experts in the field. Membership shall include representation from each of the following categories, provided that a single member may represent more than one category:
    - (i) At least one representative from each of the state's ten EMS Regions;
    - (ii) At least one representative from each of the following systems of care:
      - (a) Cardiac
      - (b) Stroke
      - (c) Trauma
      - (d) Pediatrics
      - (e) Perinatal Care/Obstetrics
    - (iii) A representative from the statewide Emergency Medical Services Medical Director's Advisory Council;
    - (iv) A representative of EMS education;
    - (v) A representative from a fire/rescue service;
    - (vi) A representative from an emergency management agency;
    - (vii) At least one representative from each of the following EMS agency license types:
      - (a) Ground Ambulance



(b) Neonatal Ambulance

(c) Air Ambulance

(d) Medical First Responder

(viii) At least one representative from each of the following EMS agency ownership types:

(a) Government (City, County or State)

(b) Private (Corporation, Limited Liability Company, Sole Proprietorship, or other entity)

(c) Hospital

(ix) Consumers or experts in the field of EMS.

5. 3. Members shall be appointed by the Commissioner or his/her designee for a term specified in EMSAC's the council bylaws.
6. Each EMSAC member shall serve in a volunteer capacity, without remuneration by the Department, and shall not be entitled to reimbursement of any expenses, including travel expenses.
- ~~4. The Council shall adopt bylaws subject to the approval of the department and shall conduct its business in accordance with the Georgia Open Records and Open Meetings Acts. Said bylaws shall address frequency of meetings, recording of minutes, creation and function of committees, and other issues relevant to the function of an advisory council.~~
- ~~5. Staff assistance essential to the operations of the Council shall be provided from the resources of the Department of Public Health and are subject to the department's approval.~~
- ~~6. Responsibilities shall include, but not be limited to: reviewing and providing comment on legislative activities, standards, and policies which affect those persons, services, or agencies regulated under these rules and O.C.G.A. Chapter 31-11; and, participating as an advocacy body to improve Georgia's statewide emergency medical services systems and all components thereof.~~

(c) EMSAC's responsibilities shall include, but not be limited to:

1. Recommending standards and policies which affect those persons, services, or agencies regulated under these rules and Chapter 11 of Title 31 of the Official Code of Georgia;
2. Reviewing and providing comment on legislative proposals; and
3. Participating as an advocacy body to improve Georgia's statewide emergency medical services systems and all components thereof.

(2) Emergency Medical Services Medical Directors Advisory Council (~~EMSDAC~~).

- (a) Purpose. The Department shall establish a statewide an Emergency Medical Services Medical Directors Advisory Council (EMSMDAC) to advise the Department on issues related to medical direction of the EMS system.
- (b) General Provisions.
  1. The Director and Deputy Director of the State Office of EMS and Trauma and the State EMS Medical Director shall serve as liaisons between EMSMDAC and the Department, and shall provide support, education, and guidance to EMSMDAC related to its roles.

- ~~2. 4.~~ EMSMDAC Council recommendations are advisory and are not binding on the Ddepartment or on agencies under contract to the Ddepartment.
- ~~3. 4.~~ EMSMDAC shall adopt bylaws subject to the approval of the Department and shall conduct its business in accordance with the Georgia Open Records and Open Meetings Acts.-Bylaws shall address frequency of meetings, recording of minutes, membership, creation and function of committees, managing conflicts of interest, voting, and other issues relevant to the function of an advisory council.
- ~~4.~~ EMSMDAC shall be composed of between twenty-five (25) and thirty (30) physician members who are knowledgeable in the field of EMS systems and all components thereof, and who represent a broad cross-section of Georgia's EMS programs and the medical community. Membership shall include representation from each of the following categories, provided that a single member may represent more than one category:
- (i) At least one member from each of the state's ten EMS Regions;
  - (ii) At least one representative from each of the following systems of care:
    - (a) Cardiac
    - (b) Stroke
    - (c) Trauma
    - (d) Pediatrics
    - (e) Perinatal Care/Obstetrics
  - (iii) Physicians with an interest and/or expertise in the provision of emergency medical care.
- ~~5. 2.~~ EMSMDAC The council members shall be appointed by the Commissioner or his/her designee for a term specified in EMSMDAC's council bylaws.
- ~~6.~~ Each EMSMDAC member shall serve in a volunteer capacity, without remuneration by the Department, and shall not be entitled to reimbursement of any expenses, including travel expenses.
- ~~3.~~ The Council shall be composed of physician members who are knowledgeable in the field of EMS systems and all components thereof, and who represent a broad section of the Georgia's EMS programs and the medical community.
- ~~4.~~ The Council shall adopt bylaws subject to the approval of the department and shall conduct its business in accordance with the Georgia Open Records and Open Meetings Acts. Said bylaws shall address frequency of meetings, recording of minutes, creation and function of committees, and other issues relevant to the function of an advisory council.
- (c) Responsibilities of EMSMDAC shall include, but not be limited to:
- 1. Acting as a liaison with the medical community, medical facilities, and appropriate governmental entities;
  - 2. Advising and providing consultation to the Ddepartment on practice issues related to the care delivered by entities and personnel under the jurisdiction of the Ddepartment;
  - 3. Advising on and reviewing matters of medical direction and training in conformity with accepted emergency medical practices and procedures;

4. Recommending and reviewing policies and procedures affecting patient care rendered by EMS emergency medical services personnel;
5. Advising on the scope and extent of EMS practice for the emergency medical services of Georgia;
6. Advising on the scope of practice for EMS personnel licensed in Georgia;
7. Advising on the formulation of medical, communication, and emergency transportation protocols; and
8. Advising on quality improvement issues related to patient care rendered by EMS emergency medical services personnel.

**Authority:** O.C.G.A. §§ 31-2A-3, 31-2A-6, 31-11-5, 31-11-60.1.

**511-9-2-.04 Repealed and Reserved Regional Emergency Medical Services Advisory Councils.**

- (1) Purpose. In accordance with the designation made by the Board of Public Health pursuant to Georgia Code Section 31-11-3(a), a Regional Emergency Medical Services Advisory Council (REMSAC) shall serve as the local coordinating entity in each EMS Region.
- (2) General Provisions
- (a) The Regional EMS Director shall serve as a liaison between the Department and the REMSAC in each EMS Region, and shall provide support, education, and guidance on the REMSAC's responsibilities related to its role as the designated local coordinating entity for their EMS Region.
- (b) Each REMSAC shall adopt bylaws subject to the approval of the Department and shall conduct its business in accordance with the Georgia Open Records and Open Meetings Acts. Bylaws shall address frequency of meetings, recording of minutes, membership, terms of members, creation and function of committees, managing conflicts of interest, voting, administration and review of the Regional Ambulance Zoning Plan, and other issues relevant to the function of an advisory council.
- (c) Each REMSAC shall be composed of between twenty-five (25) and fifty (50) members who are both knowledgeable and interested in the EMS system and represent the interests of a broad cross-section of the EMS Region's citizens. Membership shall include representation from each of the following categories, provided that a single member may represent more than one category:
1. At least one member from each of the counties served by the REMSAC shall be appointed by the county commission, subject to membership requirements specified in the REMSAC bylaws;
  2. At least one representative from each of the following systems of care:
    - (i) Cardiac
    - (ii) Stroke
    - (iii) Trauma
    - (iv) Pediatrics
    - (v) Perinatal Care/Obstetrics
  3. An EMS agency medical director from a designated 911 zone provider in a county served by the REMSAC;
  4. A representative of EMS education;
  5. A representative from a fire/rescue service;
  6. A representative from an emergency management agency;
  7. At least one representative from each of the following EMS agency license types, if present in the EMS Region:
    - (i) Air Ambulance
    - (ii) Ground Ambulance
    - (iii) Neonatal Ambulance

(iv) Medical First Responder

6. At least one representative from each of the following EMS agency ownership types, if present in the EMS Region:

(i) Government (City, County or State)

(ii) Private (Corporation, Limited Liability Company, Sole Proprietorship, or other entity)

(iii) Hospital

(7) Consumers or experts in the field of EMS.

(d) REMSAC members, other than those appointed by the county commissions, shall be appointed by the Commissioner or his/her designee, subject to membership requirements specified in the REMSAC bylaws.

(e) Each REMSAC member shall serve in a volunteer capacity, without remuneration by the Department, and shall not be entitled to reimbursement of any expenses, including travel expenses.

(3) Regional Ambulance Zoning Plan

(a) Each EMS Region shall have a Regional Ambulance Zoning Plan that is based primarily on the considerations of economy, efficiency, and benefit to the public welfare.

(b) The Department shall develop the Regional Ambulance Zoning Plan based on recommendations from the REMSAC and shall provide oversight and supervision of the operations of the Regional Ambulance Zoning Plan for each EMS Region.

(c) The REMSAC shall make recommendations to the Board or its designee for the designation of one or more 911 Zone Provider(s) for each Emergency Response Zone within the EMS Region, subject to approval or modification by the Board or its designee in accordance with the procedures set forth in Code Section 31-11-3 and under the circumstances outlined in subparagraph (4) of this Rule.

(d) Following implementation of the Regional Ambulance Zoning Plan, the REMSAC may review data regarding key performance measures specified by the Department for each designated 911 Zone Provider in the EMS Region.

(e) The Department may make administrative updates to the Regional Ambulance Zoning Plan as needed. Such updates may include business name changes and documentation of subcontracting relationships between designated 911 zone providers and other licensed ambulance services.

(f) The Department may designate a licensed ambulance service to serve as a temporary 911 Zone Provider for an Emergency Response Zone if the current designated 911 Zone Provider abandons the Emergency Response Zone, is no longer eligible to participate in the Regional Ambulance Zoning Plan, or surrenders the Emergency Response Zone with notice insufficient to allow timely modification of the Regional Ambulance Zoning Plan. The temporary designation shall be in place until the Regional Ambulance Zoning Plan is modified in accordance with subsection (4), below.

(4) Modification of the Regional Ambulance Zoning Plan

(a) The REMSAC shall make recommendations for modification of the Regional Ambulance Zoning Plan to the Board or its designee, in accordance with the procedures established in subparagraph (b) of this section, if any of the following events occurs:

1. The current designated 911 Zone Provider is no longer eligible to participate in the Regional Ambulance Zoning Plan, as determined by the Department; or
  2. The current designated 911 Zone Provider notifies the Department that it intends to voluntarily surrender its designation status for its assigned Emergency Response Zone(s); or
  3. The current designated 911 Zone Provider has abandoned its assigned Emergency Response Zone(s), as determined by the Department; or
  4. The REMSAC receives a written request for a detailed examination and assessment of the Regional Ambulance Zoning plan for one or more Emergency Response Zones, conducts a detailed examination and assessment in accordance with procedures specified by the Department, and determines that:
    - (i) There has been a significant decline in the economy, efficiency, or benefit to the public welfare within a specific Emergency Response Zone or the EMS Region as a whole; or
    - (ii) There exists an opportunity for significant improvement in the economy, efficiency, or benefit to the public welfare within a specific Emergency Response Zone or the EMS Region as a whole.
- (b) The REMSAC shall comply with the following procedures when making recommendations for modification of the Regional Ambulance Zoning Plan:
1. The REMSAC shall post a notice soliciting proposals from all licensed ambulance providers seeking designation as the 911 zone provider for a specific Emergency Response Zone. The notice shall specify:
    - (i) The ten (10) day period during which proposals will be accepted; and
    - (ii) The information that must be included in the proposal including, but not limited to, a written description of the territory in which the ambulance provider can respond to emergency calls and data regarding key performance measures as specified by the Department.
  2. The REMSAC shall evaluate all proposals based primarily on the considerations of economy, efficiency, and benefit to the public welfare.
  3. Within ten (10) days after the period for receiving proposals has ended, the REMSAC shall make a recommendation to the Board or its designee, in the format specified by the Department, regarding the territorial zones and the method of distributing emergency calls among the ambulance providers within the EMS Region. If the REMSAC's recommendation includes a change in one or more designated 911 zone providers, the recommendation shall provide for a transition plan and include the effective date of the modification.
- (c) The Board or its designee, upon receipt of the REMSAC's recommendation, shall either approve the recommendation, conduct a hearing as provided in Code Section 31-11-3(d), or remand the recommendation back to the REMSAC if the Department determines the REMSAC did not follow procedures set forth in this rule.
- (d) The Regional Ambulance Zoning Plan shall be administered in accordance with the decision of the Board or its designee.