



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2501 - Short Title

Cite as: O.S. §, \_\_\_

Sections 1-2502 through 1-2521 of this title shall be known and may be cited as the "Oklahoma Emergency Response Systems Development Act".

**Historical Data**

Laws 1990, HB 1645, c. 320, § 5, emerg. eff. May 30, 1990; Amended by Laws 1999, HB 1158, c. 156, § 1, eff. November 1, 1999 (superseded document available).

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

<i>Cite Name</i>	<i>Level</i>
<b>Oklahoma Attorney General's Opinions</b>	
<i>Cite</i>	<i>Name</i> <span style="float: right;"><i>Level</i></span>
<u>2002 OK AG 4,</u>	<u>Question Submitted by: The Honorable Dale W. Wells, State Representative, District 33</u> <span style="float: right;">Cited</span>
<u>1995 OK AG 105,</u>	<u>Question Submitted by: The Honorable Ed Long, State Senator, District 19</u> <span style="float: right;">Cited</span>
<b>Oklahoma Court of Civil Appeals Cases</b>	
<i>Cite</i>	<i>Name</i> <span style="float: right;"><i>Level</i></span>
<u>1994 OK CIV APP 119, 884 P.2d 1209, 65</u> <u>Carlson v. City of Broken Arrow</u>	<span style="float: right;">Cited</span>
<u>OBJ 3926,</u>	
<u>1996 OK CIV APP 84, 920 P.2d 1083, 67</u> <u>Big Elk Ambulance EMS, Inc. v. State ex rel. Dept. of Health</u>	<span style="float: right;">Cited</span>
<u>OBJ 2636,</u>	

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None Found.



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Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2502 - Findings and Declarations of Legislature

Cite as: O.S. §, \_\_\_

The Legislature hereby finds and declares that:

1. There is a critical shortage of providers of emergency care for:

a. the delivery of fast, efficient emergency medical care for the sick and injured at the scene of a medical emergency and during transport to a health care facility, and

b. the delivery of stabilizing and definitive care at a health care facility;

2 Improved emergency service is required to reduce the mortality rate during the first critical minutes immediately following the onset of a medical emergency.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 6, emerg. eff. May 30, 1990; Amended by Laws 1999, HB 1158, c. 156, § 2, eff. November 1, 1999 ([superseded document available](#)).

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<a href="#">2002 OK AG 4,</a>	<a href="#">Question Submitted by: The Honorable Dale W. Wells, State Representative, District 33</a> <span style="float: right;"><i>Cited</i></span>
<b>Oklahoma Court of Civil Appeals Cases</b>	
<i>Cite</i>	<i>Name</i> <span style="float: right;"><i>Level</i></span>
<a href="#">1996 OK CIV APP 84, 920 P.2d 1083, 67 OBJ 2636,</a>	<a href="#">Big Elk Ambulance EMS, Inc. v. State ex rel. Dept. of Health</a> <span style="float: right;"><i>Cited</i></span>

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None Found.





**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2503 - Definitions**

Cite as: 63 O.S. § 1-2503 (OSCN 2022)

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***Multiple Amendments Enacted During the 2016 Legislative Session, and Subsequent Amendments Enacted During the 2017, 2019, and 2022 Legislative Sessions***

**Version 1 (as amended by Laws 2016, HB 2742, c. 246, § 1, eff. November 1, 2016)**

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As used in the Oklahoma Emergency Response Systems Development Act:

1. "Ambulance" means any ground, air or water vehicle which is or should be approved by the Commissioner of Health, designed and equipped to transport a patient or patients and to provide appropriate on-scene and en route patient stabilization and care as required. Vehicles used as ambulances shall meet such standards as may be required by the State Board of Health for approval, and shall display evidence of such approval at all times;
2. "Ambulance authority" means any public trust or nonprofit corporation established by the state or any unit of local government or combination of units of government for the express purpose of providing, directly or by contract, emergency medical services in a specified area of the state;
3. "Ambulance patient" or "patient" means any person who is or will be transported in a reclining position to or from a health care facility in an ambulance;
4. "Ambulance service" means any private firm or governmental agency which is or should be licensed by the State Department of Health to provide levels of medical care, including but not limited to comprehensive integrated medical care in emergency and nonemergency settings under the supervision of a physician, based on certification standards promulgated by the Board;
5. "Ambulance service district" means any county, group of counties or parts of counties formed together to provide, operate and finance emergency medical services as provided by Section 9C of Article X of the Oklahoma Constitution or Sections 1201 through 1221 of Title 19 of the Oklahoma Statutes;
6. "Board" means the State Board of Health;
7. "Certified emergency medical responder" means an individual certified by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Board;
8. "Certified emergency medical response agency" means an organization of any type certified by the Department to provide emergency medical care, but not transport. Certified emergency medical response agencies may utilize certified emergency medical responders or licensed emergency medical personnel; provided, however, that all personnel so utilized shall function under the direction of and consistent with guidelines for medical control;
9. "Classification" means an inclusive standardized identification of stabilizing and definitive emergency services provided by each hospital that treats emergency patients;
10. "CoAEMSP" means the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions;
11. "Commissioner" means the State Commissioner of Health;

12. "Community paramedic" means a licensed paramedic who meets the requirements of Section 1-2505 of this title;

13. "Community paramedic services" means services that include interventions intended to prevent unnecessary ambulance transportation or hospital emergency department use.

a. Community paramedic services must be part of a care plan ordered by a primary health care provider or a hospital provider in consultation with the medical director of an ambulance service. Such care plan must ensure that the services provided by a community paramedic do not duplicate services already provided to the patient, including home health and waiver services.

b. Community paramedic services shall include health assessment, chronic disease monitoring and education, medication compliance, immunizations and vaccinations, laboratory specimen collection, hospital discharge follow-up care and minor medical procedures compliant with the community paramedic's scope of practice and approved by the ambulance medical director;

14. "Council" means the Trauma and Emergency Response Advisory Council created in Section 1-103a.1 of this title;

15. "Critical care paramedic" or "CCP" means a licensed paramedic who has successfully completed critical care training and testing requirements in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Board;

16. "Department" means the State Department of Health;

17. "Emergency medical services system" means a system which provides for the organization and appropriate designation of personnel, facilities and equipment for the effective and coordinated local, regional and statewide delivery of health care services primarily under emergency conditions;

18. "Letter of review" means the official designation from CoAEMSP to a paramedic program that is in the "becoming accredited" process;

19. "Licensed emergency medical personnel" means an emergency medical technician (EMT), an intermediate emergency medical technician (IEMT), an advanced emergency medical technician (AEMT), or a paramedic licensed by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and the rules and standards promulgated by the Board;

20. "Licensure" means the licensing of emergency medical care providers and ambulance services pursuant to rules and standards promulgated by the Board at one or more of the following levels:

a. basic life support,

b. intermediate life support,

c. paramedic life support,

d. advanced life support,

e. stretcher aid van, and

f. specialty care, which shall be used solely for interhospital transport of patients requiring specialized en route medical monitoring and advanced life support which exceed the capabilities of the equipment and personnel provided by paramedic life support.

Requirements for each level of care shall be established by the Board. Licensure at any level of care includes a license to operate at any lower level, with the exception of licensure for specialty care; provided, however, that the highest level of care offered by an ambulance service shall be available twenty-four (24) hours each day, three hundred sixty-five (365) days per year.

Licensure shall be granted or renewed for such periods and under such terms and conditions as may be promulgated by the Board;

21. "Medical control" means local, regional or statewide medical direction and quality assurance of health care delivery in an emergency medical service system. On-line medical control is the medical direction given to licensed emergency medical personnel, certified emergency medical responders and stretcher aid van personnel by a physician via radio or telephone. Off-line medical control

is the establishment and monitoring of all medical components of an emergency medical service system, which is to include stretcher aid van service including, but not limited to, protocols, standing orders, educational programs, and the quality and delivery of on-line control;

22. "Medical director" means a physician, fully licensed without restriction, who acts as a paid or volunteer medical advisor to a licensed ambulance service and who monitors and directs the care so provided. Such physicians shall meet such qualifications and requirements as may be promulgated by the Board;

23. "Region" or "emergency medical service region" means two or more municipalities, counties, ambulance districts or other political subdivisions exercising joint control over one or more providers of emergency medical services and stretcher aid van service through common ordinances, authorities, boards or other means;

24. "Regional emergency medical services system" means a network of organizations, individuals, facilities and equipment which serves a region, subject to a unified set of regional rules and standards which may exceed, but may not be in contravention of, those required by the state, which is under the medical direction of a single regional medical director, and which participates directly in the delivery of the following services:

a. medical call-taking and emergency medical services dispatching, emergency and routine, including priority dispatching of first response agencies, stretcher aid van and ambulances,

b. emergency medical responder services provided by emergency medical response agencies,

c. ambulance services, both emergency, routine and stretcher aid van including, but not limited to, the transport of patients in accordance with transport protocols approved by the regional medical director, and

d. directions given by physicians directly via radio or telephone, or by written protocol, to emergency medical response agencies, stretcher aid van or ambulance personnel at the scene of an emergency or while en route to a hospital;

25. "Regional medical director" means a licensed physician, who meets or exceeds the qualifications of a medical director as defined by the Oklahoma Emergency Response Systems Development Act, chosen by an emergency medical service region to provide external medical oversight, quality control and related services to that region;

26. "Registration" means the listing of an ambulance service in a registry maintained by the Department; provided, however, registration shall not be deemed to be a license;

27. "Stretcher aid van" means any ground vehicle which is or should be approved by the State Commissioner of Health, which is designed and equipped to transport individuals on a stretcher or gurney type apparatus. Vehicles used as stretcher aid vans shall meet such standards as may be required by the State Board of Health for approval and shall display evidence of such approval at all times. Stretcher aid van services shall only be permitted and approved by the Commissioner in emergency medical service regions, ambulance service districts, or counties with populations in excess of four hundred thousand (400,000) people. Notwithstanding the provisions of this paragraph, stretcher aid van transports may be made to and from any federal or state veterans facility;

28. "Stretcher aid van patient" means any person who is or will be transported in a reclining position on a stretcher or gurney, who is medically stable, nonemergent and does not require any medical monitoring equipment or assistance during transport; and

29. "Transport protocol" means the written instructions governing decision-making at the scene of a medical emergency by ambulance personnel regarding the selection of the hospital to which the patient shall be transported. Transport protocols shall be developed by the regional medical director for a regional emergency medical services system or by the Department if no regional emergency medical services system has been established. Such transport protocols shall adhere to, at a minimum, the following guidelines:

a. nonemergency, routine transport shall be to the facility of the patient's choice,

b. urgent or emergency transport not involving life-threatening medical illness or injury shall be to the nearest facility, or, subject to transport availability and system area coverage, to the facility of the patient's choice, and

c. life-threatening medical illness or injury shall require transport to the nearest health care facility appropriate to the needs of the patient as established by regional or state guidelines.

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As used in the Oklahoma Emergency Response Systems Development Act:

1. "Ambulance" means any ground, air or water vehicle which is or should be approved by the State Commissioner of Health, designed and equipped to transport a patient or patients and to provide appropriate on-scene and en route patient stabilization and care as required. Vehicles used as ambulances shall meet such standards as may be required by the Commissioner for approval, and shall display evidence of such approval at all times;
2. "Ambulance authority" means any public trust or nonprofit corporation established by the state or any unit of local government or combination of units of government for the express purpose of providing, directly or by contract, emergency medical services in a specified area of the state;
3. "Ambulance patient" or "patient" means any person who is or will be transported in a reclining position to or from a health care facility in an ambulance;
4. "Ambulance service" means any private firm or governmental agency which is or should be licensed by the State Department of Health to provide levels of medical care based on certification standards promulgated by the Commissioner;
5. "Ambulance service district" means any county, group of counties or parts of counties formed together to provide, operate and finance emergency medical services as provided by Section 9C of Article X of the Oklahoma Constitution or Sections 1201 through 1221 of Title 19 of the Oklahoma Statutes;
6. "Board" means the State Board of Health;
7. "Certified emergency medical responder" means an individual certified by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Commissioner;
8. "Certified emergency medical response agency" means an organization of any type certified by the Department to provide emergency medical care and limited transport in an emergency vehicle as defined in Section 1-103 of Title 47 of the Oklahoma Statutes. A certified emergency medical response agency shall only provide transport upon approval by the appropriate online medical control at the time of transport. Certified emergency medical response agencies may utilize certified emergency medical responders or licensed emergency medical personnel; provided, however, that all personnel so utilized shall function under the direction of and consistent with guidelines for medical control;
9. "Classification" means an inclusive standardized identification of stabilizing and definitive emergency services provided by each hospital that treats emergency patients;
10. "CoAEMSP" means the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions;
11. "Commissioner" means the State Commissioner of Health;
12. "Council" means the Trauma and Emergency Response Advisory Council created in Section 1-103a.1 of this title;
13. "Critical care paramedic" or "CCP" means a licensed paramedic who has successfully completed critical care training and testing requirements in accordance with the Oklahoma Emergency Response Systems Development Act and in accordance with the rules and standards promulgated by the Commissioner;
14. "Department" means the State Department of Health;
15. "Emergency medical services system" means a system which provides for the organization and appropriate designation of personnel, facilities and equipment for the effective and coordinated local, regional and statewide delivery of health care services primarily under emergency conditions;
16. "Letter of review" means the official designation from CoAEMSP to a paramedic program that is in the "becoming accredited" process;

17. "Licensed emergency medical personnel" means an emergency medical technician (EMT), an intermediate, an advanced emergency medical technician (AEMT), or a paramedic licensed by the Department to perform emergency medical services in accordance with the Oklahoma Emergency Response Systems Development Act and the rules and standards promulgated by the Commissioner;

18. "Licensure" means the licensing of emergency medical care providers and ambulance services pursuant to rules and standards promulgated by the Commissioner at one or more of the following levels:

- a. basic life support,
- b. intermediate life support,
- c. paramedic life support,
- d. advanced life support,
- e. stretcher van, and
- f. specialty care, which shall be used solely for interhospital transport of patients requiring specialized en route medical monitoring and advanced life support which exceed the capabilities of the equipment and personnel provided by paramedic life support.

Requirements for each level of care shall be established by the Commissioner. Licensure at any level of care includes a license to operate at any lower level, with the exception of licensure for specialty care; provided, however, that the highest level of care offered by an ambulance service shall be available twenty-four (24) hours each day, three hundred sixty-five (365) days per year.

Licensure shall be granted or renewed for such periods and under such terms and conditions as may be promulgated by the Commissioner;

19. "Medical control" means local, regional or statewide medical direction and quality assurance of health care delivery in an emergency medical service system. Online medical control is the medical direction given to licensed emergency medical personnel, certified emergency medical responders and stretcher van personnel by a physician via radio or telephone. Off-line medical control is the establishment and monitoring of all medical components of an emergency medical service system, which is to include stretcher van service including, but not limited to, protocols, standing orders, educational programs, and the quality and delivery of online control;

20. "Medical director" means a physician, fully licensed without restriction, who acts as a paid or volunteer medical advisor to a licensed ambulance service and who monitors and directs the care so provided. Such physicians shall meet such qualifications and requirements as may be promulgated by the Commissioner;

21. "Region" or "emergency medical service region" means two or more municipalities, counties, ambulance districts or other political subdivisions exercising joint control over one or more providers of emergency medical services and stretcher van service through common ordinances, authorities, boards or other means;

22. "Regional emergency medical services system" means a network of organizations, individuals, facilities and equipment which serves a region, subject to a unified set of regional rules and standards which may exceed, but may not be in contravention of, those required by the state, which is under the medical direction of a single regional medical director, and which participates directly in the delivery of the following services:

- a. medical call-taking and emergency medical services dispatching, emergency and routine including priority dispatching of first response agencies, stretcher van and ambulances,
- b. emergency medical responder services provided by emergency medical response agencies,
- c. ambulance services, both emergency, routine and stretcher van including, but not limited to, the transport of patients in accordance with transport protocols approved by the regional medical director, and
- d. directions given by physicians directly via radio or telephone, or by written protocol, to emergency medical response agencies, stretcher van or ambulance personnel at the scene of an emergency or while en route to a hospital;



23. "Regional medical director" means a licensed physician, who meets or exceeds the qualifications of a medical director as defined by the Oklahoma Emergency Response Systems Development Act, chosen by an emergency medical service region to provide external medical oversight, quality control and related services to that region;

24. "Registration" means the listing of an ambulance service in a registry maintained by the Department; provided, however, registration shall not be deemed to be a license;

25. "Stretcher van" means any ground vehicle which is or should be approved by the State Commissioner of Health, which is designed and equipped to transport individuals on a stretcher or gurney type apparatus. Vehicles used as stretcher vans shall meet such standards as may be required by the Commissioner for approval and shall display evidence of licensure at all times. The Commissioner shall not establish Federal Specification KKK-A-1822 ambulance standards for stretcher vans; provided, a stretcher van shall meet Ambulance Manufacturers Division (AMD) Standards 004, 012 and 013, and shall pass corresponding safety tests.

Stretcher van services shall only be permitted and approved by the Commissioner in emergency medical service regions, ambulance service districts, or counties with populations in excess of five hundred thousand (500,000) people. Notwithstanding the provisions of this paragraph, stretcher van transports may be made to and from any federal or state veterans facility. Stretcher vans may carry and provide oxygen and may carry and utilize any equipment necessary for the provision of oxygen;

26. "Stretcher van passenger" means any person who is or will be transported in a reclining position on a stretcher or gurney, who is medically stable, nonemergent and does not require any medical monitoring equipment or assistance during transport except oxygen. Passengers must be authorized as qualified to be transported by stretcher van. Passengers shall be authorized through screening provided by a certified medical dispatching protocol approved by the Department. All patients being transported to or from any medically licensed facility shall be screened before transport. Any patient transported without screening shall be a violation of Commissioner rule by the transporting company and subject to administrative procedures of the Department; and

27. "Transport protocol" means the written instructions governing decision-making at the scene of a medical emergency by ambulance personnel regarding the selection of the hospital to which the patient shall be transported. Transport protocols shall be developed by the regional medical director for a regional emergency medical services system or by the Department if no regional emergency medical services system has been established. Such transport protocols shall adhere to, at a minimum, the following guidelines:

a. nonemergency, routine transport shall be to the facility of the patient's choice,

b. urgent or emergency transport not involving life-threatening medical illness or injury shall be to the nearest facility, or, subject to transport availability and system area coverage, to the facility of the patient's choice,

c. life-threatening medical illness or injury shall require transport to the nearest health care facility appropriate to the needs of the patient as established by regional or state guidelines, and

d. emergency ambulance transportation is not required when a patient's apparent clinical condition, as defined by applicable medical treatment protocols, does not warrant emergency ambulance transport, and nontransport of patients is authorized pursuant to applicable medical treatment protocols established by the regional medical director.

### ***Historical Data***

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Laws 1990, HB 1645, c. 320, § 7, emerg. eff. May 30, 1990; Amended by Laws 1999, HB 1158, c. 156, § 3, eff. November 1, 1999 ([superseded document available](#)); Amended by Laws 2001, SB 741, c. 411, § 5, eff. November 1, 2001 ([superseded document available](#)); Amended by Laws 2005, SB 1012, c. 433, § 1, emerg. eff. July 1, 2005 ([superseded document available](#)); Amended by Laws 2006, SB 1333, c. 155, § 1, emerg. eff. May 15, 2006 (repealed by Laws 2007, HB 2195, c. 1, § 50, emerg. eff. February 22, 2007) ([superseded document available](#)); Amended by Laws 2006, SB 1624, c. 171, § 1, emerg. eff. May 17, 2006 ([superseded document available](#)); Amended by Laws 2007, HB 2195, c. 1, § 49, emerg. eff. February 22, 2007 ([superseded document available](#)); Amended by Laws 2013, HB 1083, c. 23, § 1, eff. November 1, 2013; Amended by Laws 2013, HB 1467, c. 229, § 65, eff. November 1, 2013 ([superseded document available](#)); Amended by Laws 2016, HB 1036, c. 236, § 1, eff. November 1, 2016 (amended by Laws 2017, HB 1843, c. 30, § 1, emerg. eff. July 1, 2017) ([superseded document available](#)); Amended by Laws 2016, HB 2742, c. 246, § 1, eff. November 1, 2016 ([superseded document available](#)); Amendment Laws 2017, HB 1843, c. 30, § 1, emerg. eff. July 1, 2017, Amended by Laws 2019, SB 1018, c. 93, § 1, emerg. eff. April 18, 2019 ([superseded document available](#)); Amended by Laws 2022, SB 1515, c. 276, § 1, eff. November 1, 2022 ([superseded document available](#)).

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<b>Oklahoma Court of Civil Appeals Cases</b>	
<i>Cite</i>	<i>Name</i> <span style="float: right;"><i>Level</i></span>
<u>1994 OK CIV APP 119, 884 P.2d 1209, 65 OBJ 3926,</u>	<u>Carlson v. City of Broken Arrow</u> <span style="float: right;"><i>Cited</i></span>
<u>1996 OK CIV APP 84, 920 P.2d 1083, 67 OBJ 2636,</u>	<u>Big Elk Ambulance EMS, Inc. v. State ex rel. Dept. of Health</u> <span style="float: right;"><i>Cited</i></span>

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<u>63 O.S. 1-2503,</u>	<u>Terms Defined</u> <span style="float: right;"><i>Cited</i></span>
<u>63 O.S. 1-2503,</u>	<u>Definitions</u> <span style="float: right;"><i>Cited</i></span>



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2504 - Use of Emergency Medical Technician, Intermediate, Advanced Emergency Medical Technician or Paramedic or Critical Care Paramedic in Hospital or Health Care Facilities

Cite as: 63 O.S. § 1-2504 (OSCN 2022)

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A. Any hospital or health care facility operating within the state may utilize emergency medical technician, intermediate emergency medical technician, advanced emergency medical technician or paramedic, community paramedic or critical care paramedic personnel for the delivery of emergency medical patient care within the hospital or health care facility. Except as authorized in Section 2 of this act, all licensed ambulance services shall use emergency medical technician, intermediate emergency medical technician, advanced emergency medical technician or paramedic personnel for on-scene patient care and stabilization and the delivery of prehospital and en route emergency medical care.

B. Any hospital or health care facility operating within the state may utilize community paramedic personnel for the delivery of community paramedic services for patients who come to the hospital or health care facility who reside in this state.

C. While participating in an emergency medical technician, intermediate emergency medical technician, advanced emergency medical technician, community paramedic or paramedic training course approved by the State Department of Health, the student shall be allowed to perform in the hospital, clinic or prehospital setting, while under the direct supervision of a physician, registered nurse, or licensed emergency medical personnel who are licensed at a level equal to or above the level of training of the student, or other allied health preceptor, any of the skills determined to be appropriate for the training level of the student by the Department.

D. The student shall be allowed to perform any of the skills determined to be appropriate by the Department for the training level of the student while performing community paramedic services under the direct supervision of a physician, registered nurse or emergency medical personnel who are licensed at a level equal to or above the level of training of the student, or other allied health preceptor.

E. A registered nurse or licensed practical nurse may be used in the back of an ambulance during an interhospital transfer to supplement the skills of licensed emergency medical personnel. A registered nurse or licensed practical nurse functioning in this fashion must be following written orders of a physician or be in direct radio or telephone contact with a physician.

**Historical Data**

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Laws 1990, HB 1645, c. 320, § 8, emerg. eff. May 30, 1990; Amended by Laws 2013, HB 1083, c. 23, § 2, eff. November 1, 2013 ([superseded document available](#)); Amended by Laws 2016, HB 2742, c. 246, § 2, eff. November 1, 2016 ([superseded document available](#)); Amended by Laws 2022, HB 3132, c. 54, § 1, eff. November 1, 2022 ([superseded document available](#)).

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Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2504.1 - Required Duty to Act - Mutual Aid - Exemption

Cite as: 63 O.S. § 1-2504.1 (OSCN 2022)

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A. There is a required duty to act within the licensed area upon the acceptance of an ambulance service license. All licensed ambulance services shall respond appropriately, consistent with the level of licensure, when called for emergency service regardless of the patient's ability to pay.

B. If the ambulance service cannot physically respond within the limits of the Ambulance Service Districts Act, then the ambulance service called shall immediately call for mutual aid from a neighboring licensed ambulance service. Nonemergency, interfacility transfers are exempt from the requirements of this subsection.

***Historical Data***

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Laws 2010, HB 1881, c. 295, § 21, emerg. eff. June 6, 2010.

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**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2504.2 - Quality Assurance Reviews - Continuous Quality Improvement Activity**

Cite as: 63 O.S. § 1-2504.2 (OSCN 2022)

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A. Licensed Emergency Medical Services shall conduct Quality Assurance reviews of operations and medical care provided. This activity shall be in accordance with standards developed by Emergency Medical Services Administration and Medical Control.

B. The proceedings and records of these Quality Assurance reviews and continuous quality improvement activities conducted by Emergency Medical Services shall be confidential and not subject to disclosure by subpoena or otherwise.

C. Quality Assurance and Continuous Quality Improvement activity, records and proceedings of any licensed Emergency Medical Service shall be confidential and not subject to the Oklahoma Open Meeting Act nor the Oklahoma Open Records Act.

***Historical Data***

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Laws 2016, HB 1036, c. 236, § 2, eff. November 1, 2016.

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**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2505 - Levels of Care - Licensed Personnel**

Cite as: O.S. §, \_\_\_

Personnel licensed in the following levels of care may perform as designated under their classification:

1. "Emergency medical technician (EMT)" means an individual licensed by the State Department of Health following completion of a standard basic emergency medical technician training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill, administered by the Department or other entity designated by the Department. The licensed emergency medical technician is allowed to perform such skills as may be designated by the Department;
2. "Intermediate emergency medical technician (IEMT)" means an individual licensed as an EMT, who has completed an intermediate training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill administered by the Department or other entity designated by the Department. The intermediate emergency medical technician is allowed to perform such skills as may be designated by the Department;
3. "Advanced emergency medical technician (AEMT)" means an individual licensed as an emergency medical technician or intermediate emergency medical technician who has completed an AEMT training program approved by the Department, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skills administered by the Department or other entity designated by the Department. The advanced emergency medical technician is allowed to perform such skills as may be designated by the Department;
4. "Community paramedic" means an individual who meets the provisions of paragraph 5 of this section and:
  - a. possesses two (2) years of full-time service as a paramedic or its part-time equivalent, and
  - b. completes a training program from an entity approved by the Department; and
5. "Paramedic", including community paramedic, means an individual licensed as an EMT, IEMT or AEMT, who has completed a standard paramedic training program, who has met such other standards of competence and character as may be required, and who has passed a standard licensing examination of knowledge and skill administered by the Department or other entity designated by the Department. The paramedic is allowed to perform such skills as may be designated by the Department.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 9, emerg. eff. May 30, 1990; Amended by Laws 2013, HB 1083, c. 23, § 3, eff. November 1, 2013 ([superseded document available](#)); Amended by Laws 2016, HB 2742, c. 246, § 3, eff. November 1, 2016 ([superseded document available](#)).

**Citationizer® Summary of Documents Citing This Document**

<i>Cite Name</i>	<i>Level</i>
<i>Oklahoma Court of Civil Appeals Cases</i>	
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<b>Cite Name</b>	<b>Level</b>
<u>1994 OK CIV APP 119, 884 P.2d 1209, 65 Carlson v. City of Broken Arrow</u>	<i>Cited</i>
<u>OBJ 3926,</u>	

**Title 68. Revenue and Taxation**

<i>Cite</i>	<i>Name</i>	<i>Level</i>
<u>68 O.S. 2358,</u>	<u>Taxable Income and Adjusted Gross Income - Adjustments to Arrive at Oklahoma</u>	<i>Cited</i>
	<u>Taxable Income</u>	

**Citationizer: Table of Authority**

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**Cite      Name Level**

*None Found.*





Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2505.1 - Benefits Paid to Designated Beneficiary Upon Death of Licensed Emergency Medical Personnel or Certified Emergency Medical Responder

Cite as: 63 O.S. § 1-2505.1 (OSCN 2022)

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A. In the event of the death of any licensed emergency medical personnel or a certified emergency medical responder resulting from the official duties of such licensed emergency medical personnel or certified emergency medical responder performed while in the line of duty, the State Department of Health shall pay the designated beneficiary of the deceased the sum of Five Thousand Dollars (\$5,000.00).

B. If the designated beneficiary predeceases the emergency medical personnel or certified emergency medical responder and there is not an alternate or contingent beneficiary, the death benefit shall be payable to the personal representative of the decedent.

C. All payments made pursuant to the provisions of this section shall be paid from the Emergency Medical Personnel Death Benefit Revolving Fund created pursuant to [Section 1-2505.2 of this title](#).

**Historical Data**

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Laws 2008, HB 2693, c. 43, § 1, emerg. eff. July 1, 2008; Amended by Laws 2010, HB 2551, c. 94, § 1, emerg. eff. July 1, 2010 ([superseded document available](#)); Amended by Laws 2013, HB 1083, c. 23, § 4, eff. November 1, 2013 ([superseded document available](#)).

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

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None Found.

**Citationizer: Table of Authority**

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None Found.



**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2505.2 - Emergency Medical Personnel Death Benefit Revolving Fund**

Cite as: 63 O.S. § 1-2505.2 (OSCN 2022)

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There is hereby created in the State Treasury a revolving fund for the State Department of Health to be designated the "Emergency Medical Personnel Death Benefit Revolving Fund". The fund shall be a continuing fund, not subject to fiscal year limitations, and shall consist of all monies received by the State Department of Health from the fees imposed pursuant to Section 1-2505.3 of this title. All monies accruing to the credit of said fund are hereby appropriated and may be budgeted and expended by the State Department of Health for the purpose of making death benefit payments to the named beneficiary or personal representative of a deceased licensed emergency medical personnel or certified emergency medical responder pursuant to Section 1-2505.1 of this title. Expenditures from said fund shall be made upon warrants issued by the State Treasurer against claims filed as prescribed by law with the Director of the Office of Management and Enterprise Services for approval and payment.

***Historical Data***

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Laws 2008, HB 2693, c. 43, § 2, emerg. eff. July 1, 2008; Amended by Laws 2010, HB 2551, c. 94, § 2, emerg. eff. July 1, 2010 ([superseded document available](#)); Amended by Laws 2012, HB 3079, c. 304, § 489 ([superseded document available](#)); Amended by Laws 2013, HB 1083, c. 23, § 5, eff. November 1, 2013 ([superseded document available](#)).

***Citationizer<sup>®</sup> Summary of Documents Citing This Document***

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<i>Cite</i>	<i>Name Level</i>
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*None Found.*

***Citationizer: Table of Authority***

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*None Found.*



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2505.3 - Licensed Emergency Medical Personnel and Responder - Additional Application Fee

Cite as: 63 O.S. § 1-2505.3 (OSCN 2022)

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A. In addition to any other fee that may be authorized by law or pursuant to administrative rule of the State Department of Health effective July 1, 2010, there shall be imposed a fee of:

1. Ten Dollars (\$10.00) for each original application for licensed emergency medical personnel;
2. Two Dollars and fifty cents (\$2.50) for each renewal application for licensed emergency medical personnel;
3. Ten Dollars (\$10.00) for each original application for a certified emergency medical responder; and
4. Five Dollars (\$5.00) for each renewal application for a certified emergency medical responder.

B. The fees authorized by subsection A of this section shall be apportioned to the Emergency Medical Personnel Death Benefit Revolving Fund created pursuant to Section 1-2505.2 of this title.

***Historical Data***

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Laws 2008, HB 2693, c. 43, § 3, emerg. eff. July 1, 2008; Amended by Laws 2010, HB 2551, c. 94, § 3, emerg. eff. July 1, 2010 ([superseded document available](#)); Amended by Laws 2013, HB 1083, c. 23, § 6, eff. November 1, 2013 ([superseded document available](#)).

***Citationizer<sup>®</sup> Summary of Documents Citing This Document***

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<i>Cite</i>	<i>Name</i>	<i>Level</i>
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*None Found.*

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*None Found.*



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2506 - Performance of Medical Procedures

Cite as: O.S. §, \_\_\_

Licensed and certified emergency medical personnel, while a duty to act is in effect, shall perform medical procedures to assist patients to the best of their abilities under the direction of a medical director or in accordance with written protocols, which may include standing orders, authorized and developed by the medical director and approved by the State Department of Health when not in conflict with standards approved by the State Board of Health, giving consideration to the recommendations of the Trauma and Emergency Response Advisory Council created in Section 44 of this act. Licensure, certification and authorization for emergency medical personnel to perform medical procedures must be consistent with provisions of this act, and rules adopted by the Board. Medical control and medical directors shall meet such requirements as prescribed through rules adopted by the Board.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 10, emerg. eff. May 30, 1990; Amended by Laws 2005, SB 539, c. 204, § 1, emerg. eff. July 1, 2005 ([superseded document available](#)); Amended by Laws 2013, HB 1467, c. 229, § 66, eff. November 1, 2013 ([superseded document available](#)).

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

<i>Cite Name</i>	<i>Level</i>
<b>Oklahoma Court of Civil Appeals Cases</b>	
<i>Cite</i>	<i>Name</i>
<i>1996 OK CIV APP 84, 920 P.2d 1083, 67 O.B.J. 2636.</i>	<i>Big Elk Ambulance EMS, Inc. v. State ex rel. Dept. of Health</i>
	<i>Discussed</i>

**Citationizer: Table of Authority**

<i>Cite Name</i>	<i>Level</i>
<b>Title 63. Public Health and Safety</b>	
<i>Cite</i>	<i>Name</i>
<i>63 O.S. 1-2506.</i>	<i>Performance of Medical Procedures Under Direction of Medical Director - Licensure, Certification, and Authorization Required to Be Consistent with Act</i>
	<i>Cited</i>





**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2506.1 - Authority of First Responders to Administer Opiate Antagonists**

Cite as: 63 O.S. § 1-2506.1 (OSCN 2022)

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**A. As used in this section:**

1. "Certified alcohol and drug counselor" means any person who is not exempt pursuant to the provisions of Section 1872 of Title 59 of the Oklahoma Statutes and is not licensed under the Licensed Alcohol and Drug Counselors Act, but who provides alcohol and drug counseling services within the scope of practice while employed by an entity certified by the Department of Mental Health and Substance Abuse Services, or who is exempt from such certification, or who is under the supervision of a person recognized by the Oklahoma Board of Licensed Alcohol and Drug Counselors as a supervisor. A certified alcohol and drug counselor may provide counseling services for co-occurring disorders if he or she has been certified by the Board to provide counseling as provided in this section for co-occurring disorders;

2. "Licensed alcohol and drug counselor" means any person who provides alcohol and drug counseling services within the scope of practice, including co-occurring disorders, for compensation to any person and is licensed pursuant to the provisions of the Licensed Alcohol and Drug Counselors Act. The term "licensed alcohol and drug counselor" shall not include those professions exempted by Section 1872 of Title 59 of the Oklahoma Statutes; and

3. "Medical personnel at schools" means a certified school nurse or any other nurse employed by or under contract with a school, any licensed practitioner of the healing arts, or any person designated by the school administration to administer an opiate antagonist in the event of a suspected overdose pursuant to Section 2 of this act.

B. First responders shall have the authority to administer, without prescription, opiate antagonists when encountering an individual exhibiting signs of an opiate overdose.

C. First responders may provide, without prescription, opiate antagonists to individuals who experienced or witnessed an opiate overdose for use by those individuals at a later date.

D. For the purposes of this provision, a first responder shall include:

1. Law enforcement officials;

2. Emergency medical technicians;

3. Firefighters;

4. Medical personnel at schools including any public or charter schools, technology center schools and institutions of higher education;

5. Forensic laboratory personnel of the Oklahoma State Bureau of Investigation as designated by the Executive Director;

6. Personnel of the Department of Corrections or of any entity that contracts with the Department of Corrections to provide housing or services for inmates of the Department of Corrections; and

7. Certified alcohol and drug counselors and licensed alcohol and drug counselors.

E. Any first responder administering or providing an opiate antagonist in a manner consistent with addressing opiate overdose shall be covered under the Good Samaritan Act.

**Historical Data**

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Laws 2013, HB 1782, c. 322, § 1, eff. November 1, 2013; Amended by Laws 2017, SB 77, § 1, eff. November 1, 2017 (superseded document available); Amended by Laws 2019, HB 2519, c. 157, § 1, eff. November 1, 2019; Amended by Laws 2019, SB 85, c. 504, § 1, emerg. eff. July 1, 2019 (superseded document available).

**Citationizer® Summary of Documents Citing This Document**

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<i>Cite Name</i>	<i>Level</i>	
<b>Title 69. Roads, Bridges, and Ferries</b>		
<i>Cite</i>	<i>Name</i>	<i>Level</i>
<u>69 O.S. 1600.</u>	<u>Cost of Signage</u>	<i>Cited</i>

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**Cite**      **Name** **Level**

None Found.



**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2506.2 - Prescribing Opiate Antagonists for Family Members - Covered Under the Good Samaritan Act**

Cite as: 63 O.S. § 1-2506.2 (OSCN 2022)

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A. Upon request, a provider may prescribe an opiate antagonist to an individual for use by that individual when encountering a family member exhibiting signs of an opiate overdose.

B. When an opiate antagonist is prescribed in accordance with subsection A of this section, the provider shall provide:

1. Information on how to spot symptoms of an overdose;
2. Instruction in basic resuscitation techniques;
3. Instruction on proper naloxone administration; and
4. The importance of calling 911 for help.

C. Any family member administering an opiate antagonist in a manner consistent with addressing opiate overdose shall be covered under the Good Samaritan Act.

D. Any provider prescribing or administering an opiate antagonist in a manner consistent with addressing opiate overdose shall be covered under the Good Samaritan Act.

***Historical Data***

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Laws 2013, HB 1782, c. 322, § 2, eff. November 1, 2013; Amended by Laws 2018, SB 956, c. 106, § 13, eff. November 1, 2018 ([superseded document available](#)).

***Citationizer<sup>®</sup> Summary of Documents Citing This Document***

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**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2509 - Ambulance Service Operation - Authority of Commissioner to Revoke or Suspend License - Penalties for Violation**

Cite as: O.S. §, \_\_\_ \_\_

A. 1. No person, company, governmental entity or trust authority may operate an ambulance service within this state except as provided in this section. The State Commissioner of Health, the district attorney of the county wherein the ambulance service operates or may be found, or the Attorney General of this state shall have the authority to bring an action to enjoin the operation of any ambulance service not in compliance with the provisions of this act.

2. A ground ambulance service based outside of this state that is licensed and in good standing in its home state may respond to an emergency request for care and transport of a patient within this state provided no local licensed ambulance service is readily available, and may be exempt from the licensing requirements of this state pursuant to rules promulgated by the State Board of Health.

3. Requests for service must be referred by an Oklahoma emergency dispatch center. The Board may require such exempt ambulance service to subsequently provide documentation of emergency response activities performed within this state.

4. The State Department of Health shall have the authority to investigate any complaint associated with an emergency response by an out-of-state ambulance service in the same manner as ambulance services licensed by the Department within this state.

B. The Commissioner shall have the authority to revoke or suspend any license, to issue probationary licenses, or to levy such administrative fines and penalties as may be deemed necessary, for violations of the provisions of this act, subject to the provisions of the Administrative Procedures Act. The powers afforded the Commissioner within the general enforcement provisions of the Public Health Code are additionally incorporated herein.

C. In addition to any other penalties, any person, company, governmental entity or trust authority who violates any of the provisions of this act relating to compliance with the provisions of this act or of standards, specifications, procedures and rules adopted by the Board may be punished by the assessment of a civil penalty of not more than One Hundred Dollars (\$100.00) for each violation. Each day a violation continues shall be considered a separate offense.

D. The operation or maintenance of an ambulance service in violation of this act, or the rules promulgated by the Board, is declared a public nuisance inimical to the public welfare. The Commissioner in the name of the people of the state, through the Attorney General, or the district attorney of the county in which the ambulance service is located, may, in addition to other remedies herein provided, bring action for an injunction to restrain such violation or to enjoin the future operation or maintenance of any such ambulance service.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 13, emerg. eff. May 30, 1990; Amended by Laws 2005, SB 539, c. 204, § 2, emerg. eff. July 1, 2005 (repealed by Laws 2006, HB 3139, c. 16, § 47, emerg. eff. March 29, 2006); Amended by Laws 2005, HB 1503, c. 191, § 1, eff. November 1, 2005 ([superseded document available](#)); Amended by Laws 2006, HB 3139, c. 16, § 46, emerg. eff. March 29, 2006 ([superseded document available](#)).

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

**Cite Name** **Level**

**Oklahoma Attorney General's Opinions**

<i>Cite</i>	<i>Name</i>	<i>Level</i>
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<b>Cite Name</b>	<b>Level</b>	
<u>1995 OK AG 105,</u>	<u>Question Submitted by: The Honorable Ed Long, State Senator, District 19</u>	<i>Cited</i>

**Oklahoma Court of Civil Appeals Cases**

<i>Cite</i>	<i>Name</i>	<i>Level</i>
<u>1994 OK CIV APP 119, 884 P.2d 1209, 65</u>	<u>Carlson v. City of Broken Arrow</u>	<i>Cited</i>
<u>OBJ 3926,</u>		

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<b>Cite Name</b>	<b>Level</b>	
<b>Title 63. Public Health and Safety</b>		
<i>Cite</i>	<i>Name</i>	<i>Level</i>
<u>63 O.S. 1-2509,</u>	<u>Ambulance Service Operation - Authority of Commissioner to Revoke or Suspend License - Penalties for Violation</u>	<i>Cited</i>



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2509.1 - Rules to Implement the Oklahoma Response Systems Development Act

Cite as: O.S. §, \_\_\_

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The State Board of Health shall promulgate rules to implement the provisions of the Oklahoma Emergency Response Systems Development Act.

***Historical Data***

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Laws 2016, HB 2742, c. 246, § 4, eff. November 1, 2016.

***Citationizer<sup>®</sup> Summary of Documents Citing This Document***

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<b><i>Cite</i></b>	<b><i>Name Level</i></b>
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*None Found.*

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*None Found.*



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2510 - Creation of Oklahoma Emergency Medical Services Program

Cite as: O.S. §, \_\_\_ \_\_

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There is hereby created within the State Department of Health the Division of Emergency Medical Services, for the operation of an Oklahoma Emergency Medical Services Program.

**Historical Data**

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Laws 1990, HB 1645, c. 320, § 14, emerg. eff. May 30, 1990.

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

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<i>Cite</i>	<i>Name Level</i>
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*None Found.*

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*None Found.*



**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2511 - Powers and Duties of State Commissioner of Health**

Cite as: O.S. §, \_\_\_

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The State Commissioner of Health shall have the following powers and duties with regard to an Oklahoma Emergency Medical Services Improvement Program:

1. Administer and coordinate all federal and state programs, not specifically assigned by state law to other state agencies, which include provisions of the Federal Emergency Medical Services Systems Act and other federal laws and programs relating to the development of emergency medical services in this state. The administration and coordination of federal and state laws and programs relating to the development, planning, prevention, improvement and management of emergency medical services shall be conducted by the Division of Emergency Medical Services, as prescribed by Section 1-2510 of this title;
2. Assist private and public organizations, emergency medical and health care providers, ambulance authorities, district boards and other interested persons or groups in improving emergency medical services at the local, municipal, district or state levels. This assistance shall be through professional advice and technical assistance;
3. Coordinate the efforts of local units of government to establish service districts and set up boards of trustees or other authorities to operate and finance emergency medical services in the state as provided under Section 9C of Article X of the Oklahoma Constitution or under Sections 1201 through 1221 of Title 19 of the Oklahoma Statutes. The Commissioner shall evaluate all proposed district areas and operational systems to determine the feasibility of their economic and health services delivery;
4. Prepare, maintain and utilize a comprehensive plan and program for emergency medical services development throughout the state to be adopted by the State Board of Health, giving consideration to the recommendations of the Trauma and Emergency Response Advisory Council created in Section 44 of this act, and incorporated within the State Health Plan. The plan shall establish goals, objectives and standards for a statewide integrated system and a timetable for accomplishing and implementing different elements of the system. The plan shall also include, but not be limited to, all components of an emergency medical services system; regional and statewide planning; the establishment of standards and the appropriate criteria for the designation of facilities; data collection and quality assurance; and funding;
5. Maintain a comprehensive registry of all ambulance services operating within the state, to be published annually and maintain a registry of critical care paramedics. All ambulance service providers shall register annually with the Commissioner on forms supplied by the State Department of Health, containing such requests for information as may be deemed necessary by the Commissioner;
6. Develop a standard report form which may be used by local, regional and statewide emergency medical services and emergency medical services systems to facilitate the collection of data related to the provision of emergency medical and trauma care. The Commissioner shall also develop a standardized emergency medical services data set and an electronic submission standard. Each ambulance service shall submit the information required in this section at such intervals as may be prescribed by rules promulgated by the State Board of Health;
7. Evaluate and certify all emergency medical services training programs and emergency medical technician training courses and operational services in accordance with specifications and procedures approved by the Board. Nonaccredited paramedic training programs shall begin their final paramedic training class by December 31, 2012. Only paramedic training programs accredited or receiving a Letter of Review (LOR) by CoAEMSP may enroll new paramedic students after January 1, 2013;

8. Provide an emergency medical personnel and ambulance service licensure program to include a requirement that ambulance services licensed as specialty care ambulance providers shall be used solely for interhospital transport of patients requiring specialized en route medical monitoring and advanced life support which exceeds the capabilities of the equipment and personnel provided by paramedic life support;
9. Employ and prescribe the duties of employees as may be necessary to administer the provisions of the Oklahoma Emergency Response Systems Development Act;
10. Apply for and accept public and private gifts, grants, donations and other forms of financial assistance designed for the support of emergency medical services;
11. Develop a classification system for all hospitals that treat emergency patients. The classification system shall:
  - a. identify stabilizing and definitive emergency services provided by each hospital, and
  - b. require each hospital to notify the regional emergency medical services system control when treatment services are at maximum capacity and that emergency patients should be diverted to another hospital; and
12. Develop and monitor a statewide emergency medical services and trauma analysis system designed to:
  - a. identify emergency patients and severely injured trauma patients treated in Oklahoma,
  - b. identify the total amount of uncompensated emergency care provided each fiscal year by each hospital and ambulance service in Oklahoma, and
  - c. monitor emergency patient care provided by emergency medical service and hospitals.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 15, emerg. eff. May 30, 1990; Amended by Laws 1994, HB 2591, c. 236, § 1, eff. September 1, 1994; Amended by Laws 1999, HB 1158, c. 156, § 4, eff. November 1, 1999 ([superseded document available](#)); Amended by Laws 2001, SB 741, c. 411, § 6, eff. November 1, 2001 ([superseded document available](#)); Amended by Laws 2005, SB 539, c. 204, § 3, emerg. eff. July 1, 2005 ([superseded document available](#)); Amended by Laws 2013, HB 1083, c. 23, § 7, eff. November 1, 2013; Amended by Laws 2013, HB 1467, c. 229, § 67, eff. November 1, 2013 ([superseded document available](#)).

**Citationizer® Summary of Documents Citing This Document**

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None Found.

**Citationizer: Table of Authority**

<b>Cite Name</b>	<b>Level</b>
<b>Title 63. Public Health and Safety</b>	
<i>Cite</i>	<i>Name</i> <i>Level</i>
<a href="#"><u>63 O.S. 1-2511,</u></a>	<a href="#"><u>Powers and Duties of State Commissioner of Health</u></a> <i>Cited</i>
<a href="#"><u>63 O.S. 1-2511,</u></a>	<a href="#"><u>Powers and Duties of State Commissioner of Health</u></a> <i>Cited</i>







**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2512 - Promulgation of Rules**

Cite as: O.S. §, \_\_\_

A. The State Board of Health, giving consideration to the recommendations of the Trauma and Emergency Response Advisory Council as created in Section 44 of this act, shall promulgate rules to enact the provisions of the Oklahoma Emergency Response Systems Development Act.

B. Such rules shall specify which vehicles of licensed ambulance service providers shall be considered authorized emergency vehicles pursuant to the provisions of Section 1-103 of Title 47 of the Oklahoma Statutes. The rules shall provide that vehicles transporting licensed ambulance service personnel or life saving equipment that meet all other specifications required by the Board shall be considered authorized emergency vehicles.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 16, emerg. eff. May 30, 1990; Amended by Laws 1991, HB 1083, c. 167, § 2, emerg. eff. July 1, 1991; Amended by Laws 2001, SB 741, c. 411, § 7, eff. November 1, 2001 ([superseded document available](#)); Amended by Laws 2013, HB 1467, c. 229, § 68, eff. November 1, 2013 ([superseded document available](#)).

**Citationizer<sup>®</sup> Summary of Documents Citing This Document**

**Cite**      **Name** **Level**

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**Title 63. Public Health and Safety**

<i>Cite</i>	<i>Name</i>	<i>Level</i>
<a href="#"><u>63 O.S. 1-2512</u></a>	<a href="#"><u>Duty to Promulgate, Adopt and Publish Rules and Regulations</u></a>	<i>Cited</i>



Title 63. Public Health and Safety

Oklahoma Statutes Citationized

Title 63. Public Health and Safety

Chapter 1 - Oklahoma Public Health Code

Article Article 25 - Oklahoma Emergency Response Systems Development Act

Section 1-2512.1 - Oklahoma Emergency Response Systems Stabilization and Improvement Revolving Fund

Cite as: O.S. §, \_\_\_

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A. There is hereby created in the State Treasury a revolving fund for the State Department of Health to be designated the "Oklahoma Emergency Response Systems Stabilization and Improvement Revolving Fund". The fund shall be a continuing fund, not subject to fiscal year limitations, and shall consist of monies received by the State Department of Health in accordance with state law. All monies accruing to the credit of the fund are hereby appropriated and may be budgeted and expended by the Department for the purpose of funding assessment activities, stabilization and/or reorganization of at-risk emergency medical services, development of regional emergency medical services, training for emergency medical directors, access to training front line emergency medical services personnel, capital and equipment needs. Expenditures from the fund shall be made upon warrants issued by the State Treasurer against claims filed as prescribed by law with the Director of the Office of Management and Enterprise Services for approval and payment.

B. The State Board of Health shall promulgate rules establishing a formula and procedure for the distribution of funds from the Oklahoma Emergency Response Systems Stabilization and Improvement Revolving Fund.

**Historical Data**

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Laws 2008, SB 1918, c. 393, § 8, eff. November 1, 2008; Amended by Laws 2012, HB 3079, c. 304, § 490 ([superseded document available](#)).

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**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2513 - Filing of Application for License - Notification of Grant or Rejection of License**

Cite as: O.S. §, \_\_\_

A. All persons, companies, governmental entities or trust authorities desiring to operate an ambulance service shall file with the State Commissioner of Health an application for a license to operate the service. The Commissioner shall, within two (2) months of the date of the application, notify the applicant in writing of the granting or rejection of the license and shall, in the event of rejection, specify the reasons for the rejection.

B. The Commissioner may issue an Oklahoma Air Ambulance Provider License to an Air Ambulance provider, duly licensed in good standing and operating from bases in an adjoining state, that makes application and provides documentation pursuant to rules promulgated by the State Board of Health. Such ambulance provider staff shall not be required to be licensed in this state but shall be required to meet the licensure requirements in the state of origin.

**Historical Data**

Laws 1990, HB 1645, c. 320, § 17, emerg. eff. May 30, 1990; Amended by Laws 2005, HB 1503, c. 191, § 2, eff. November 1, 2005 (superseded document available).

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**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2515 - Authority to Regulate and Control Ambulance Service Transports - Standards - Sole-Provider System -**

**Exemption from Regulation**

Cite as: O.S. §, \_\_\_ \_\_

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- A. Notwithstanding any other provision of this title, Emergency Medical Services (EMS) Regions, Ambulance Service districts or municipalities are hereby authorized to regulate and control, pursuant to duly enacted ordinance or regulation, Ambulance Service transports originating within the jurisdiction of such EMS Regions, Ambulance Service districts or municipalities.
- B. Any ordinance or regulation adopted pursuant to subsection A of this section shall meet and may exceed, but shall not be in contravention of, the standards promulgated by the State Board of Health for Ambulance Service transports.
- C. 1. Any ordinance or regulation adopted by an EMS Region, Ambulance Service district or a municipality may establish a sole-provider system for stretcher van and/or Ambulance Service transports; provided, however, any such designated or contracted sole-provider which is not an EMS Region, Ambulance Service district, municipality, or other public entity shall be selected by competitive bidding.
2. A contract entered into pursuant to such bidding shall be with the lowest and best bidder and may be for an initial term of such duration as deemed operationally and fiscally prudent by the contracting agency. The term of such sole-provider contract shall be made public at the time bids are solicited, which solicitation shall be not less than sixty (60) days prior to the contract start date.
- D. Any EMS Region, Ambulance Service district or municipality may establish a sole-provider system for stretcher van and/or Ambulance Service transports and may allow additional geographic or political subdivisions to join such a system at any time. Whenever such a geographic or political subdivision joins such a sole-provider system, competitive bidding shall not be required and provision for servicing the new jurisdiction may be accomplished by amending the existing sole-provider contract. Furthermore, in the event the expansion of the service area of the EMS Region, Ambulance Service district or the municipality is substantial (in the sole opinion of the governing body of the EMS Region, Ambulance Service district or municipality), the existing sole-provider contract may be extended for a period sufficient to allow reasonable opportunity for recovery of capital costs of expansion, as determined by the contracting agency.
- E. The provisions of this section shall not be construed or applied to limit the operation of any emergency medical service district established and operating pursuant to Section 9C of Article 10 of the Oklahoma Constitution; provided, however, that, upon invitation and approval of a majority of the voters of the district, any such district is hereby authorized to join by appropriate agreement any system established by an EMS Region, Ambulance Service district or a municipality pursuant to the provisions of this section.
- F. The following types of patient transports shall be exempt from regulation by EMS Regions, Ambulance Service districts or municipalities:
1. Any ambulance owned or operated by, or under contract to perform ambulance transport services for, the Federal or State government, or any agency thereof;
  2. Any ambulance owned and operated by a hospital and in use to transport a patient of the owner-hospital, which patient has been admitted to and not been discharged from the owner-hospital, to or from another hospital or medical care facility at which the patient receives a diagnostic or therapeutic procedure not available at the owner-hospital;

3. Any ambulance engaged in a routine transport call to transport a patient from a hospital, nursing home, or dialysis center located within an EMS Region, Ambulance Service district or municipality to any location outside the EMS Region, Ambulance Service district or municipality;
4. Any ambulance engaged in the transport of a patient from a location outside an EMS Region, Ambulance Service district or municipality to a location inside an EMS Region, Ambulance Service district or municipality; or
5. Any ambulance engaged in the interstate transport of a patient.

**Historical Data**

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Laws 1990, HB 1645, c. 320, § 18, emerg. eff. May 30, 1990; Amended by Laws 1991, HB 1083, c. 167, § 3, emerg. eff. July 1, 1991; Amended by Laws 1995, SB 433, c. 194, § 4, eff. November 1, 1995; Amended by Laws 1997, SB 575, c. 281, § 1, emerg. eff. July 1, 1997 ([superseded document available](#)); Amended by Laws 2001, SB 741, c. 411, § 8, eff. November 1, 2001 ([superseded document available](#)); Amended by Laws 2016, HB 1036, c. 236, § 3, eff. November 1, 2016 ([superseded document available](#)).

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<b>Oklahoma Attorney General's Opinions</b>	
<i>Cite</i>	<i>Name</i> <span style="float: right;"><i>Level</i></span>
<a href="#">1995 OK AG 105.</a>	<a href="#">Question Submitted by: The Honorable Ed Long, State Senator, District 19</a> <span style="float: right;">Cited</span>

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<a href="#">63 O.S. 1-2515.</a>	<a href="#">Authority to Regulate and Control Ambulance Service Transports - Standards - Sole-Provider System - Exemption from Regulation</a> <span style="float: right;">Cited</span>



**Title 63. Public Health and Safety**

**Oklahoma Statutes Citationized**

**Title 63. Public Health and Safety**

**Chapter 1 - Oklahoma Public Health Code**

**Article Article 25 - Oklahoma Emergency Response Systems Development Act**

**Section 1-2516.1 - Permitting Assistance Agreements with Local First Responder Agencies - Requirements**

Cite as: 63 O.S. § 1-2516.1 (OSCN 2022)

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A. The governing body of any municipality, public ambulance service district organized pursuant to [Sections 1201 through 1221 of Title 19](#) of the Oklahoma Statutes, or emergency medical service district organized pursuant to [Section 9C of Article X](#) of the Oklahoma Constitution may elect to enter into agreements with local first responder agencies, whether governmental or nonprofit, for the purpose of acquiring assistance with emergency medical response.

B. All agreements entered into pursuant to subsection A of this section shall, at a minimum:

1. Determine the required training necessary in order for first responders to participate under the agreement;
2. Establish a system for identifying which first responders are eligible to participate under the agreement;
3. Establish a process for verifying the training credentials of participating first responders;
4. Establish the level of emergency medical care to be provided by the participating first responders;
5. Determine which party to the agreement shall provide compensation, if any, and insurance coverage for participating first responders;
6. Establish a process for ensuring that participating first responders are familiar and compliant with applicable operating procedures and standards of care; and
7. Establish the procedures by which participating first responders shall be notified that their assistance is required.

***Historical Data***

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Laws 2022, HB 3132, c. 54, § 2, eff. November 1, 2022.

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