

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2015**

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SENATE BILL 381

Short Title: Community Paramedicine Pilot Project/Funds. (Public)

Sponsors: Senators Rabon, Lee, Tucker (Primary Sponsors); and Rabin.

Referred to: Rules and Operations of the Senate.

March 25, 2015

A BILL TO BE ENTITLED
AN ACT TO REDUCE HEALTH CARE EXPENDITURES FOR EMERGENCY SERVICES
AND HOSPITAL STAYS BY ESTABLISHING A COMMUNITY PARAMEDICINE
PILOT PROJECT.

The General Assembly of North Carolina enacts:

SECTION 1. There is appropriated to the Department of Health and Human Services, Office of the Secretary, for fiscal year 2015-2016 the sum of two hundred ten thousand dollars (\$210,000) for the purpose of implementing a community paramedicine pilot project. The project shall focus on expanding the role of paramedics to allow for community-based initiatives that result in providing care that avoids nonemergency use of emergency rooms and 911 services, and avoids unnecessary admissions into health care facilities.

SECTION 2. The North Carolina Office of Emergency Medical Services (NCOEMS) shall set the education standards and other requirements necessary to qualify as a community paramedic eligible to participate in the pilot program established in Section 1 of this act. The Department shall consult with the NCOEMS to define the objectives, set standards, and establish the required outcomes for the project.

SECTION 3. The Department of Health and Human Services shall establish up to three program sites to implement the community paramedicine pilot project. Of the funds appropriated in Section 1 of this act, each program site may be awarded up to seventy thousand dollars (\$70,000) for fiscal year 2015-2016. The Department may give preference to counties who currently have an established community paramedic program.

SECTION 4. The Department of Health and Human Services shall submit a report to the Senate Appropriations Committee on Health and Human Services, the House of Representatives Appropriations Subcommittee on Health and Human Services, and the Fiscal Research Division by June 1, 2016, on the progress of the project and shall include an evaluation plan based on the U.S. Department of Health and Human Services, Health Resources and Services Administration Office of Rural Health Policy's, Community Paramedicine Evaluation Tool, published in March 2012.

SECTION 5. The Department of Health and Human Services shall submit a final report to the Joint Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division by November 1, 2016. At a minimum, the final report shall include the following:

- (1) An updated version of the evaluation plan required by Section 4 of this act.
- (2) An estimate of the cost to expand the program incrementally and statewide.



- 1 (3) An estimate of any potential savings of State funds associated with
2 expansion of the program.
3 (4) If expansion of the program is recommended, a time line for expanding the
4 program.
5 **SECTION 6.** This act becomes effective July 1, 2015.