EMS Data Collection Laws and or Rules

Introduction: The purpose of this document is to provide EMS systems with information about EMS laws or rules pertaining to the collection and protection of EMS data. In order to create this document, an internet search was performed on state EMS websites, state statutes, and other areas as appropriate.

For each state listed below, information is provided regarding state authority to collect EMS data and whether state laws or rules provide some form of protection to EMS data. When information was not found in either or both categories, it is thus noted. This does not necessarily mean that such a law or rule does not exist. It could mean that it was simply not discovered in the search or was not available via the internet. As this document becomes distributed, states will have the opportunity to update their sections with additional or new materials. Hyperlinks of the rules and statutes have been added for additional reference.

Alabama:

Rules 4 through 7

To Collect Data:
7a “EMS Patient Care Reports shall be submitted to the EMS Division within such deadlines as shall be specified by the Director, Division of Emergency Medical Service, Alabama Department of Public Health”

To Protect Data:
7b “Records and data collected or otherwise captured by the State Board of Health, its agents, or designees shall be deemed to be confidential medical records and shall be released only in the following circumstances” (See report for the remaining portion)

Alaska:


To Collect Data:
Page 36-37 Act 26.245
“A certified emergency medical service providing either basic life-support or advanced life-support outside a hospital must complete an approved EMS report form for each patient treated.”

To Protect Data: None found.
American Samoa:

To Collect Data: None found.

To Protect Data: None found.

Arizona:

http://www.azsos.gov/public_services/Title_09/9-25.htm

To Collect Data:

R9-25-910. Record and Reporting Requirements (A.R.S. §§ 36-2232, 36-2241, 36-2246)
“B. According to A.R.S. § 36-2241, a certificate holder shall maintain the following records for the Department's review and inspection:… All first care forms required in R9-25-514 and R9-25-615.”
*Note: Both R9-25-514 and R9-25-615 were repealed according to the same web page.

To Protect Data: None found.

Arkansas:

http://www.healthyarkansas.com/ems/pdf/ems_regulations_01.pdf

To Collect Data:

Page 15, Section IV, Advanced Response Service
Item 2 “Each licensee shall report, in a format approved by the Department, every request, which results in the dispatch of a vehicle.”

To Protect Data: None found.

California:

http://www.emsa.ca.gov/aboutemsa/emsa161.asp

To Collect Data:

II. EMS Data System Structure
“Have the capability of providing information to the State EMS Authority as outlined in State EMS Authority Reporting Needs.”
California: (cont.)

V. State EMS Authority Reporting Needs

“On the following pages are recommendations for meeting State reporting needs related to process measures of EMS systems. These are recommendations related to items specifically listed by the State. However, there are more general issues that deserve attention as well”

To Protect Data: None found.

Colorado:


To Collect Data:
25-3.5-501. Records
“(1) Each ambulance service shall prepare and transmit copies of uniform and standardized records, as specified by regulation adopted by the department, concerning the transportation and treatment of patients in order to evaluate the performance of the emergency medical services system and to plan systematically for improvements in said system at all levels.
(2) The record forms adopted by the department may distinguish between rural ambulance service and urban ambulance service and between mobile intensive care units and basic ambulance service.”

25-3.5-502. Forms and reports.
“The department shall provide the necessary forms and copies of quarterly statistical report forms for local and state evaluation of ambulance service unless specifically exempted by the board of county commissioners of a particular county for that county.”

To Protect Data: None found.

Connecticut:


To Collect Data:
19a-179-7. Records
(d)“All records maintained by a licensed or certified emergency medical services provider, including those required to be maintained by this section shall be subject to routine inspection by the OEMS upon reasonable notice to the service. In cases involving investigations by the OEMS, such records shall be made available to the OEMS during normal business hours, without prior notice. The failure to grant OEMS access to such files shall be grounds for suspension or revocation of a license or certificate.”

To Protect Data: None found.
Delaware:

http://www.delcode.state.de.us/title16/c097/index.htm#TopOfPage
http://www.delcode.state.de.us/title16/c098/index.htm#TopOfPage

To Collect Data:
Title 16, Chapter 97, § 9705 (k)
“Coordinated patient recordkeeping. -- The Office shall collect and analyze available data from all providers of the EMS system. This data will be used by the Office, in conjunction with the appropriate EMS providers, to evaluate the overall effectiveness of the system. It is necessary that the data be collected from each level of care, which includes the initial entry point through final discharge from the health care delivery system. EMS agency certification will be contingent upon agency participation in the Statewide EMS data collection system maintained by the Office.”

To Protect Data:
Title 16, Chapter 97, § 9707 (b)
“…Raw data and original records relating to medical care shall not be available for public inspection nor are they a public record within the meaning of the Delaware Freedom of Information Act, except to the extent that such raw data and original records relating to medical care would have been subject to disclosure or discovery pursuant to other statute or court rule.”

District of Columbia:

To Collect Data: None found.

To Protect Data: None found.

Florida:

http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Index&Title_Request=XXIX #TitleXXIX

To Collect Data:
Title XXIX, Chapter 395, 395.1055 1(f)
“All hospitals submit such data as necessary to conduct certificate-of-need reviews required under ss. 408.031-408.045. Such data shall include, but shall not be limited to, patient origin data, hospital utilization data, type of service reporting, and facility staffing data.”

To Protect Data:
Title XXIX, Chapter 395, 395.1055 1(f)
“The agency shall not collect data that identifies or could disclose the identity of individual patients. The agency shall utilize existing uniform statewide data sources when available and shall minimize reporting costs to hospitals.”
Georgia:

To Collect Data: None found.

To Protect Data: None found.

Guam:

To Collect Data: None found.

To Protect Data: None found.

Hawaii:

http://www.capitol.hawaii.gov/hrscurrent/Vol06_Ch0321-0344/HRS0321/HRS_0321-0224.htm

To Collect Data:
§321-224
“(4) Collect and evaluate data for the continued evaluation of the state system, subject to section 321-230”

§321-230
“…The collection and analysis of statewide emergency medical services data, including pediatrics, trauma, cardiac, medical, and behavioral medical emergencies, shall be for the purpose of improving the quality of services provided…”

To Protect Data: None found.

Idaho:


To Collect Data:
Rule 16.02.03.300.04
“Records to be maintained. The ambulance service must maintain records of each ambulance response and submit them to the EMS Bureau at least quarterly in a form approved by the EMS Bureau. These records must include at least the following information…”

To Protect Data:
Rule 16.02.006.01 and 02
“Confidentiality Of Records. Any disclosure of confidential information use or disclosed in the course of the Department’s business is subject to the restrictions in state or federal law, federal regulations and Idaho Department of Health and Welfare Rules…”
Illinois:

http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1226&ChapAct=210%A0ILCS%A050/&ChapterID=21&ChapterName=HEALTH+FACILITIES&ActName=Emergency+Medical+Services+%28EMS%29+Systems+Act%2E

To Collect Data:
(210 ILCS 50/3.125) Sec. 3.125. Complaint Investigations.
“(c) The Department shall conduct any inspections, interviews and reviews of records which it deems necessary in order to investigate complaints.”

(210 ILCS 50/3.195) Sec. 3.195. Data Collection and Evaluation.
(a) The Department shall develop and administer an emergency medical services data collection system. Nothing in this Section shall be construed to empower the Department to specify the form of internal recordkeeping.
(b) The confidentiality of patient records shall be maintained in accordance with State and federal regulations on confidentiality of records.
(c) The Department shall develop parameters by which the availability and quality of emergency medical care can be evaluated to assure a reasonable standard of performance by individuals and organizations providing such services.
(d) EMS Medical Directors shall have the authority to require System participants to provide data to the System in addition to that required by the Department. Participants shall not be required to submit financial information that is proprietary in nature and unrelated to the scope or purposes of this Act.
(Source: P.A. 89-177, eff. 7-19-95.)

To Protect Data:
(210 ILCS 50/3.195) Sec. 3.195. Data Collection and Evaluation.
“(b) The confidentiality of patient records shall be maintained in accordance with State and federal regulations on confidentiality of records.”

Indiana:

http://www.state.in.us/legislative/iac/title836.html

To Collect Data:
“836 IAC 1-1-5 Reports and records
Authority: IC 16-31-2-7
Affected: IC 4-21.5; IC 16-31-3
“Sec. 5. (a) All emergency medical service provider organizations shall comply with this section. (b) All emergency medical service provider organizations shall participate in the emergency medical service system review by collecting and reporting data elements. The elements shall be submitted to the agency by the fifteenth of the following month by electronic format or submitted on disk in the format and manner specified by the commission. The data elements prescribed by the commission are as follows…”

To Protect Data: None found.
Iowa:

http://www.idph.state.ia.us/ems/iowa_code.asp

To Collect Data:
Chapter 147A - Emergency Medical Care -- Trauma Care
132.7(4) Service Program Inspections
“(c) The department may inspect the patient care records of a service program to verify compliance with Iowa Code chapter 147A and these rules.”

132.8(7) Iowa EMS Patient Registry
“e (1) For the purpose of ensuring the completeness and quality of reportable data, the department or authorized representative may examine all or part of the patient care report as necessary to verify or clarify all reportable patient data submitted by a service program.”

To Protect Data:
132.8(7)
“c (1) The data collected by and furnished to the department pursuant to this subrule are confidential records of the condition, diagnosis, care, or treatment of patients or former patients, including outpatients, pursuant to Iowa Code section 22.7. The compilations prepared for release or dissemination from the data collect are not confidential under Iowa Code 22.7, subsection 2. However, information within individually identifies patients shall not be disclosed, and state and federal law regarding patient confidentiality shall apply”

Kansas:

http://www.ksbems.org/stats2003.htm#65-6105

To Collect Data:
65-6116 Powers of governing board of municipality
“(e) to establish and collect any charges to be made for emergency medical services or ambulance services within or without the municipality and to provide for an audit of the records of the emergency medical services operation or ambulance services; and…”

To Protect Data: None found.

Kentucky:

http://www.lrc.state.ky.us/KRS/311A00/190.PDF

To Collect Data:
311A.190 Information furnished to board by providers…
“(1) Each licensed ambulance provider and medical first response provider as defined in this chapter shall collect and provide to the board run data and information required by the board by this chapter and administrative regulation.”
Kentucky: (cont.)

To Protect Data:
“(5) Ambulance provider and medical first response provider run report forms and the information transmitted electronically to the board shall be confidential. No person shall make an unauthorized release of information on an ambulance run report form or medical first response run report form. Only the patient or the patient's parent or legal guardian if the patient is a minor, or the patient's legal guardian or person with proper power of attorney if the patient is under legal disability as being incompetent or mentally ill, or a court of competent jurisdiction may authorize the release of information on a patient's run report form or the inspection or copying of the run report form. Any authorization for the release of information or for inspection or copying of a run report form shall be in writing.”

Louisiana:

To Collect Data: None found.

To Protect Data: None found.

Maine:

http://mainegov- images.informe.org/dps/ems/docs/Maine%20EMS%20Rules%20Effective%20July%201,%202003.pdf

To Collect Data:
§9. Patient/Run Reporting Form
“3. Services will submit patient/run records, as specified by Maine EMS at least monthly.”

To Protect Data: None found.

Marianas Islands:

To Collect Data: None found.

To Protect Data: None found.
Maryland:


To Collect Data:
Title 13, Subtitle 5, § 13-509. Emergency Medical System plan.
“(a) Adoption; purpose.- In addition to the duties set forth elsewhere in this subtitle, the EMS Board shall develop and adopt an Emergency Medical System plan to ensure effective coordination and evaluation of emergency medical services delivered in this State.

(b) Provisions; regulations; opportunity for comment.-

(vi) Criteria and methodologies to evaluate the system's effectiveness in delivering quality emergency medical services needed by the citizens of Maryland; and

(vii) Provisions for the evaluation and monitoring of the Emergency Medical System plan to ensure compliance with this subtitle by all segments of the Emergency Medical System.”

To Protect Data:
Title 13, Subtitle 5, § 13-508. Same - Additional powers and duties (EMS Board)
“(vi) Except for confidential medical information, publish and give out any information that relates to the delivery of emergency medical services and is considered desirable in the public interest;”

Massachusetts:


To Collect Data:
Chapter 54 of the Acts of 2000
“SECTION 1. The general court finds and declares:
(4) an emergency medical services system includes public sector and private sector providers certified, licensed, approved or designated by the department of public health to provide specific services, subject to established standards for such services, including, without limitation, facilities, equipment and staff qualifications, and standards for communications, medical direction and control, triage, data collection and system evaluation;”

“Section 2. The department, with the assistance of interested parties that are part of the state's EMS system, including, without limitation, the regional EMS councils, shall plan, guide and coordinate programs to ensure that the state's EMS system shall:
(13) provide for a standardized patient data collection system which covers all phases of the EMS system. This system shall include, but shall not be limited to, information needed to review access, availability, quality, cost and third party reimbursement for EMS;”

To Protect Data: None found.
Michigan:

[www.michiganlegislature.org](http://www.michiganlegislature.org) and enter the MCL number listed below.

**To Collect Data:**

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.20910 Powers and duties of department.
Sec. 20910.
(1) The department shall do all of the following:
i) Collect data as necessary to assess the need for and quality of emergency medical services throughout the state pursuant to 1967 PA 270, MCL 331.531 to 331.533.

(2) The department may do all of the following:
(a) In consultation with the emergency medical services coordination committee, promulgate rules to require an ambulance operation, nontransport prehospital life support operation, or medical first response service to periodically submit designated records and data for evaluation by the department.

**To Protect Data:**

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.20919 Protocols for practice of life support agencies and licensed emergency medical services personnel; development and adoption; procedures; conflict with Michigan do-not-resuscitate procedure act prohibited; compliance with requirements; appeal; standards for equipment and personnel; negative medical or economic impacts; epinephrine auto-injector; availability of medical and economic information; review; findings.
Sec. 20919.
(1) A local medical control authority shall establish written protocols for the practice of life support agencies and licensed emergency medical services personnel within its region. The protocols shall be developed and adopted in accordance with procedures established by the department and shall include all of the following:
(g) Protocols that ensure a quality improvement program is in place within a medical control authority and provides data protection as provided in 1967 PA 270, MCL 331.531 to 331.533.

**RELEASE OF INFORMATION FOR MEDICAL RESEARCH AND EDUCATION**

Act 270 of 1967

AN ACT to provide for the release of certain information or data relating to health care research or education, health care entities, practitioners, or professions, or certain governmentally funded
programs; to limit the liability with respect to the release of certain information or data; and to safeguard the confidential character of certain information or data.

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.20175 Maintaining record for each patient; wrongfully altering or destroying records; noncompliance; fine; licensing and certification records as public records; confidentiality; disclosure; report or notice of disciplinary action; information provided in report; nature and use of certain records, data, and knowledge.
Sec. 20175.
(4) Departmental officers and employees shall respect the confidentiality of patient clinical records and shall not divulge or disclose the contents of records in a manner that identifies an individual except pursuant to court order.
(8) The records, data, and knowledge collected for or by individuals or committees assigned a professional review function in a health facility or agency, or an institution of higher education in this state that has colleges of osteopathic and human medicine, are confidential, shall be used only for the purposes provided in this article, are not public records, and are not subject to court subpoena.

Minnesota:

http://www.revisor.leg.state.mn.us/stats/144E/

To Collect Data:
http://www.revisor.leg.state.mn.us/stats/144E/123.html

144E.123 Prehospital care data.
“Subdivision 1.  Collection and maintenance.  A licensee shall collect and provide prehospital care data to the board in a manner prescribed by the board.  At a minimum, the data must include items identified by the board that are part of the National Uniform Emergency Medical Services Data Set.  A licensee shall maintain prehospital care data for every response.”

To Protect Data: None found.
Mississippi:


To Collect Data:
“1.3.4. Other common grounds for suspension or revocation are for example, but not limited to:
1.3.4.5. Failure to adhere to record keeping or reporting requirements required by BEMS.”

“§41-59-41. Records
Each licensee of an ambulance service shall maintain accurate records upon such forms as may be provided, and contain such information as may be required by the board concerning the transportation of each patient within this state and beyond its limits. Such records shall be available for inspection by the board at any reasonable time, and copies thereof shall be furnished to the board upon request.
SOURCES: Laws, 1974, ch. 507, § 10, eff from and after passage (approved April 3, 1974).

To Protect Data: None found.

Montana:

http://www.dphhs.state.mt.us/legalresources/administrativerules/title37/chapter104.pdf

To Collect Data:
CHAPTER 104 EMERGENCY MEDICAL SERVICES
37.104.212 Records and Reports
“(2) Trip reports may be reviewed by the department.
(4) Each emergency medical service must provide the department with a quarterly report, on a form provided by the department, that specifies the number and types of runs occurring during the quarter, the type of emergency, and the average response times.”

To Protect Data: None found.

Nebraska:

http://www.hhs.state.ne.us/crl/rcs/ems/emstat.pdf

To Collect Data:
71-5177. Board; duties. In addition to any other responsibilities prescribed by the Emergency Medical Services Act, the board shall:…
(2) Provide for the collection of information for evaluation of the availability and quality of out-of-hospital emergency medical care, evaluate the availability and quality of out-of-hospital
emergency medical care, and serve as a focal point for discussion of the provision of out-of-hospital emergency medical care;…”
Nebraska: (cont.)

To Protect Data:
“71-5185. Patient data; confidentiality; immunity.
(1) No patient data received or recorded by an emergency medical service or an out-of-hospital emergency care provider shall be divulged, made public, or released by an emergency medical service or an out-of-hospital emergency care provider, except that patient data may be released to the receiving health care facility, to the department for public health purposes, upon the written authorization of the patient who is the subject of the record, or as otherwise permitted by law. For purposes of this section, patient data means any data received or recorded as part of the records maintenance requirements of the Emergency Medical Services Act.
(2) Patient data received by the department shall be confidential with release only (a) in aggregate data reports created by the department on a periodic basis or at the request of an individual or (b) as case-specific data to approved researchers for specific research projects. Approved researchers shall maintain the confidentiality of the data, and researchers shall be approved in the same manner as described in section 81-666. Aggregate reports shall be public documents. Emergency medical service-specific data and out-of-hospital-emergency-care-provider-specific data shall be released only upon the written authorization of the service or the provider who is the subject of the record…”

Nevada:

To Collect Data:
http://www.leg.state.nv.us/NRS/NRS-450B.html

“NRS 450B.220 Periodic inspections. Subsequent to issuance of any permit under NRS 450B.200 and 450B.210, the health authority shall cause to be inspected the ambulances, aircraft, vehicles, medical supplies, equipment, personnel, records, premises and operational procedures of a holder of a permit whenever that inspection is deemed necessary, but no less frequently than once each year. The periodic inspection required by this section is in addition to any other state or local inspections required for ambulances, aircraft or motor vehicles under statute or ordinances.”

“NRS 450B.810 Maintenance, inspection and compilation of information. Each holder of a permit shall maintain accurate records upon such forms as may be provided by the health authority and containing such information as may be reasonably required by the board concerning the care or transportation of each patient, or both, within this state and beyond its limits. These records must be available for inspection by the health authority at any reasonable time and copies thereof must be furnished to the health authority upon request. This record does not constitute a diagnosis, and a legal signature is not required on forms dealing with the type of injury sustained by a particular patient. The health authority shall compile and provide a summary of this information.”
Nevada: (Cont.)

http://www.leg.state.nv.us/NAC/NAC-450B.html#NAC450BSec630
“NAC 450B.630 Records concerning transportation and transfer of patients. (NRS 450B.120) Records concerning the transportation and transfer of patients within or beyond the boundaries of Nevada must be available for inspection by the health division at any reasonable time. Copies of the records must be filed with the health division within 2 weeks after the request of the health division.”

“NAC 450B.645 Reports of emergency care. (NRS 450B.120) A report of emergency care must be accurate and provided in a format approved by the health division.”

To Protect Data: None found.

New Hampshire:

http://www.gencourt.state.nh.us/rules/saf-c5900.html

To Collect Data:
“(d) Recordkeeping and reporting by the unit shall be made by providing the information required by Saf-C 5902.08 and Saf-C 5902.09, as applicable, using one of the following methods:
(1) Completion of the division's patient care record (PCR) form;
(2) Electronically, using software developed and distributed by the division; or

(3) Electronically, using software developed or purchased by the unit or receiving hospital/facility, which complies with the following requirements:
   a. The database shall be directly importable into an Access97 database;
   b. The database shall export all required data fields with names and structures identical to those used by the division; and
   c. Each record shall be uniquely identified.”

To Protect Data:
“(n) For unauthorized disclosure of confidential patient information by a unit or provider a fine of $500.00 shall be imposed upon the violator along with the license revocation;”
To Collect Data:
8:40-3.9 Maintenance of records
“(b) The provider shall keep a copy of each required record, including patient care reports, at its principal place of business. The records shall be made available to Department staff upon demand.”

To Protect Data:
8:40-3.5 Standard operating procedures manual
“1. Each provider shall develop a policy to ensure that all patient information, including patient identifiable data, remains confidential and private.

New Mexico:

To Collect Data:
“The bureau is designated as the lead agency for the emergency medical services system, including injury prevention, and shall establish and maintain a program for regional planning and development, improvement, expansion and direction of emergency medical services throughout the state, including:…
C. development of requirements for the collection of data and statistics to evaluate the availability, operation and quality of providers in the state;”

To Protect Data:
“A. Any files or records in the possession of the bureau, a regional office or a provider containing identifying information about individuals requesting or receiving treatment or other health services and any unsubstantiated complaints received by the bureau regarding any provider shall be confidential and not subject to public inspection.”
New York:

http://www.health.state.ny.us/nysdoh/phforum/nycrr10.htm

To Collect Data:
Title 10, Section 800.21 - General requirements
“(l) maintain a record of each ambulance call in accordance with the provisions of section 800.32 of this Part;”*

*Note: 800.32 was not found during search for pertinent records.

To Protect Data:
http://www.health.state.ny.us/nysdoh/phforum/foil/denied.htm
“Certain records or portions thereof are excepted from disclosure under authority of Public Officers Law Section 87.2(a-i). These records include those which:
• are specifically exempted from disclosure under state or federal statute,
• if disclosed would constitute an unwarranted invasion of personal privacy,…”

North Carolina:

To Collect Data:
http://www.nccep.org/content/ems/standards/index.htm
“The baseline data that must be collected in all EMS systems (including Model EMS Systems and Specialty Care Transport Programs). Baseline EMS systems are not required to transmit this data electronically to the North Carolina Office of EMS…”

http://facility-services.state.nc.us/EMS/emsrule.pdf
10A NCAC 13P .0201 EMS SYSTEM REQUIREMENTS
“(a) County governments shall establish EMS Systems. Each EMS System shall have: (7) a mechanism to collect and electronically submit to the OEMS data that uses the EMS data set and data dictionary as specified in "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection," incorporated by reference in accordance with G.S. 150B-21.6, including subsequent amendments and additions. This document is available from the OEMS, 2707 Mail Service Center, Raleigh, North Carolina 27699-2707, at no cost. EMS Systems shall comply with this requirement by July 1, 2004;…”

To Protect Data: None found.
North Dakota:

To Collect Data:
http://www.state.nd.us/lr/information/acdata/html/..%5Cpd%5C33-11-01.pdf
33-11-01-09. Other requirements.
“5. Each ambulance run must be reported to the department in the manner and in the form determined by the department.”

To Protect Data:
http://www.state.nd.us/lr/cencode/T23C27.pdf
23-27-04.3. Emergency medical services personnel training, testing, certification, licensure, and quality review - Penalty.
“…Quality review and improvement information, data, records, and proceedings are not subject to subpoena or discovery or introduction into evidence in any civil action.”

Ohio:

http://www.ems.ohio.gov/rules/ORCOAC_combined041105.htm#EMSIRS

To Collect Data:
§ 4765.06. Incidence reporting system for collecting information on delivery and frequency of services; trauma registries; confidentiality of information.
“(A) The state board of emergency medical services shall establish an emergency medical services incidence reporting system for the collection of information regarding the delivery of emergency medical services in this state and the frequency at which the services are provided. All emergency medical service organizations shall submit to the board any information that the board determines is necessary for maintaining the incidence reporting system…”

To Protect Data:
“(E) The board shall adopt rules under section 4765.11 of the Revised Code that specify procedures for ensuring the confidentiality of information that is not to be made public under this section. The rules shall specify the circumstances in which deliberations of the persons performing risk adjustment functions under this section are not open to the public and records of those deliberations are maintained in confidence. Nothing in this section prohibits the board from making public statistical information that does not identify or tend to identify a specific recipient or provider of emergency medical services or adult or pediatric trauma care…”

Oklahoma:

To Collect Data:
http://www.health.state.ok.us/program/ems/641act.pdf
§63-1-2511. Commissioner - Powers and duties relating to Oklahoma Emergency Medical Services Improvement Program.

“6. Develop a standard report form which may be used by local, regional and statewide emergency medical services and emergency medical services systems to
Oklahoma: (cont.)
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 which may, at the
option of each ambulance service, be utilized in lieu of the standard report for
the submission of required data. Each ambulance service shall submit the
information required in this section through either the standard form or
electronic data set at such intervals as may be prescribed by rules promulgated by
the State Board of Health;”

To Protect Data:
310:641-3-160. Ambulance service and first response agency file
“(C) All run reports and their narrative(s) shall be considered confidential;”

Oregon:
http://landru.leg.state.or.us/ors/682.html

To Collect Data:
To Protect Data:
682.056 Information regarding person who is subject of prehospital care event; use of
information; confidentiality; fee.
“(1) Upon the request of the designated official of an ambulance service as defined in ORS
682.051, a first responder as defined in ORS 682.025, the emergency medical services system
authority in the county in which a prehospital care event occurred or the Department of Human
Services, a hospital licensed under ORS chapter 441 may provide to the requester the following
information:…
(a) Treated as a confidential medical record and not disclosed;
(b) Considered privileged data under ORS 41.675 and 41.685; and
(c) Used only for legitimate medical quality assurance and quality improvement activities.”

Pennsylvania:
http://www.pacode.com/secure/data/028/chapter1001/chap1001toc.html

To Collect Data:
§ 1001.41. Data and information requirements for ambulance services.
“(a) Ambulance services licensed to operate in this Commonwealth shall collect, maintain and report
accurate and reliable patient data and information for calls for assistance in the format prescribed and
on paper or electronic forms provided or approved by the Department. An ambulance service shall
file the report for any call to which it responds that results in patient care, assessment or refusal of the
patient to be assessed. The report shall be made by completing an EMS patient care report and filing
it, within 30 days, with the regional EMS council that is assigned responsibilities for the region in
Pennsylvania: (cont.)

which the ambulance is based. It shall contain information specified by the Department. The Department will publish a list of the data elements and the form specifications for the EMS patient care report form in a notice in the Pennsylvania Bulletin and on the Department’s World Wide Web Site. Paper EMS patient care report forms may be secured from regional EMS councils. Electronic reporting shall conform with the requirements published in the Pennsylvania Bulletin notice. The Department will maintain a list of software it has determined to satisfy the requirements for electronic reporting.”

To Protect Data:
§ 1001.41. Data and information requirements for ambulance services.
“(b) The Department will identify data items for the EMS patient care report as either confidential or not confidential.
(c) An ambulance service shall store the information designated as confidential in secured areas to assure that access to unauthorized persons is prevented, and shall take other necessary measures to ensure that the information is maintained in a confidential manner and is not available for public inspection or dissemination, except as authorized by § 1001.42 (relating to dissemination of information).”

Rhode Island:

http://www.rilin.state.ri.us/Statutes/TITLE23/23-4.1/INDEX.HTM

To Collect Data:
§ 23-4.1-5 Supervision of ambulance services. – The director is responsible for the statewide supervision of ambulance and rescue services and all equipment and persons coming under the provisions of this chapter.

To Protect Data: None found.

South Carolina:

http://www.scdhec.net/hr/pdfs/licen/licregs/r61-7.pdf

To Collect Data:
Section 303. Criteria for License Category of Basic Life Support (Ambulance) (Minimum Standard):
“G. The provider maintains records that include, but are not limited to, approved ambulance run reports, employee/ member rosters, time sheets, call rosters, training records and dispatch logs that show at least time call received, type call and time unit is en route. Such records are to be available for inspection by the Department with copies furnished upon request.”

Section 303. Criteria for License Category of Basic Life Support (Ambulance) (Minimum Standard):
South Carolina: (cont.)

“G. The provider maintains records that include, but are not limited to, approved ambulance run reports, employee/member rosters, time sheets, call rosters, training records and dispatch logs that show at least time call received, type call and time unit is en route. Such records are to be available for inspection by the Department with copies furnished upon request.”

Section 310. Criteria for License Category - EMT First Responder

“E. The provider maintains records that include, but are not limited to, approved patient care report forms, employee/member rosters, time sheets, call rosters, training records and dispatch logs that show at least time call received, type call and time unit is en route. Such records are to be available for inspection by the Department with copies furnished upon request.”

To Protect Data: None found.

South Dakota:

http://www.state.sd.us/dps/ems/EMTInformation/Laws.htm

To Collect Data:
http://legis.state.sd.us/statutes/index.aspx?FuseAction=DisplayStatute>Type=Statute&Statute=34-11-7
34-11-7.
“Trip records required. Each operator shall record each trip on forms designated by the licensing agency and copies submitted to the department monthly. These records shall be maintained for a period of four years and upon request be made available to the department for inspection.”

To Protect Data:
http://legis.state.sd.us/statutes/index.aspx?FuseAction=DisplayStatute&type=Statute&Statute=34-11-5.1
34-11-5.1.
“Patient information received by ambulance service is confidential. Any patient information identifying the patient's name, address, diagnosis, or treatment received by an ambulance service under the authority of this chapter is not a public record and is confidential, except for official purposes, and may not be published or disclosed without authorization from the patient or the patient's designee.”
Tennessee:

CHAPTER 140 EMERGENCY SERVICES: PART 5 EMERGENCY MEDICAL SERVICES
ACT OF 1983
http://www.state.tn.us/sos/rules/1200-1200-12/1200-12-01.pdf

To Collect Data:

68-140-504. Powers and duties of board.
“In addition to any other power, duty or responsibility given to the board by this part, the board has the power, responsibility and duty to:…
(3) Establish minimum standards governing the activities and operations of various categories of services, vehicles or personnel, licensed, permitted or certified by the board;…”

68-140-505. Powers and duties of commissioner.
“In addition to any power, duty, or responsibility given the commissioner or the department under this part, the commissioner has and shall exercise the following powers, duties and responsibilities set forth in this section. These powers and duties may be delegated in whole or part, in writing, to any official of the department, to:…
(9) Require the submission of such plans, specifications and other information as deemed necessary to carry out the provisions of this part;…”

68-140-519. Records required to be kept by licensees and permittees.
“Each ambulance service and invalid vehicle operator, licensed or permitted by the department shall maintain the following:
(A) Information required to be contained in such records shall be promulgated by the board;…”

To Protect Data:

68-140-519. Records required to be kept by licensees and permittees.
“Each ambulance service and invalid vehicle operator, licensed or permitted by the department shall maintain the following:
(D) Except as otherwise provided by law, such patient's run record or records shall not constitute a public record, and nothing contained in this part shall be deemed to impair any privilege of confidentiality conferred by law on patients, their personal representatives or heirs. Nothing in this subsection shall impair or abridge the right of the patient or the patient's authorized representative to obtain copies of the patient's hospital records in the manner provided in § 68-11-304. Nothing in this subsection shall be construed as prohibiting a patient's run record or records from being subpoenaed by a court of competent jurisdiction. As used in this subsection, "run record" includes any list of patients that is compiled or maintained by or for such patient's ambulance service provider but shall not include the dispatch log; and…”
Texas:

CHAPTER 773. EMERGENCY MEDICAL SERVICES
http://www.tdh.state.tx.us/hcqsm/ems/H&SC773intro.htm

To Collect Data:

§ 773.0612. ACCESS TO RECORDS.
“(a) The department or its representative is entitled to access to records and other documents maintained by a person that are directly related to patient care or to emergency medical services personnel to the extent necessary to enforce this chapter and the rules adopted under this chapter. A person who holds a license or certification or an applicant for a certification or license is considered to have given consent to a representative of the department entering and inspecting a vehicle or place of business in accordance with this chapter.
(b) A report, record, or working paper used or developed in an investigation under this section is confidential and may be used only for purposes consistent with the rules adopted by the board.”

§ 773.0613. INFORMATION REPORT TO DEPARTMENT.
“(a) An emergency medical services provider licensed under this chapter shall annually submit a report to the department containing information relating to the number and types of runs the emergency medical services provider makes.
(b) The department shall adopt rules relating to the type of information an emergency medical services provider must provide under this section and the manner in which the information must be provided.
(c) The department shall post the information the department receives under Subsection (a) in summary form on the department's Internet website. The department may not post any health information that is made confidential by another statute.”

To Protect Data:

§ 773.095. RECORDS AND PROCEEDINGS
“CONFIDENTIAL. (a) The proceedings and records of organized committees of hospitals, medical societies, emergency medical services providers, emergency medical services and trauma care systems, or first responder organizations relating to the review, evaluation, or improvement of an emergency medical services provider, a first responder organization, an emergency medical services and trauma care system, or emergency medical services personnel are confidential and not subject to disclosure by court subpoena or otherwise.
(b) The records and proceedings may be used by the committee and the committee members only in the exercise of proper committee functions.
(c) This section does not apply to records made or maintained in the regular course of business by an emergency medical services provider, a first responder organization, or emergency medical services personnel.”
Utah:

http://www.rules.utah.gov/publicat/code/r426/r426-007.htm

To Collect Data:
Rule R426-7. Emergency Medical Services Prehospital Data System Rules.
R426-7-2. Prehospital Data Set.
(1) Licensees or designees shall collect data as identified by the Department in this rule.
(2) The data shall be submitted to the Department monthly within 30 days of end of the month.
(3) The data shall be submitted in an electronic format determined and approved by the Department. Agencies who respond to less than 10 calls per month may submit data in a Department-approved alternate format.
(4) If the Department determines that there are errors in the data, it may return the data to the data supplier for corrections. The data supplier shall correct the data and resubmit it to the Department within 30 days of receipt from the Department. If data is returned to the agency for corrections, the agency is not in compliance with this rule until corrected data is returned, accepted and approved by the Department.

http://www.le.state.ut.us/~code/TITLE26/htm/26_03003.htm

26-3-2. Powers of department to collect and maintain health data.
The department may on a voluntary basis, except when there is specific legal authority to compel reporting of health data:
(1) collect and maintain health data on:
(a) the extent, nature, and impact of illness and disability on the population of the state;
(b) the determinants of health and health hazards;
(c) health resources, including the extent of available manpower and resources;
(d) utilization of health care;
(e) health care costs and financing; or
(f) other health or health-related matters;
(2) undertake and support research, demonstrations, and evaluations respecting new or improved methods for obtaining current data on the matters referred to in Subsection (1) of this section;
(3) collect health data under other authorities and on behalf of other governmental or not-for-profit organizations.

To Protect Data:
Utah Code Title 26 Chapter 3:
http://www.le.state.ut.us/~code/TITLE26/htm/26_03007.htm,
http://www.le.state.ut.us/~code/TITLE26/htm/26_03008.htm,
http://www.le.state.ut.us/~code/TITLE26/htm/26_03009.htm,
Vermont:

http://www.leg.state.vt.us/statutes/sections.cfm?Title=18&Chapter=017

To Collect Data:
http://www.leg.state.vt.us/statutes/fullsection.cfm?Title=18&Chapter=017&Section=00906
§ 906. Emergency medical services division; responsibilities
“To implement the policy of section 901, the department of health shall be responsible for:…
7) Establishing requirements for the collection of data by emergency medical personnel and hospitals as may be necessary to evaluate emergency medical care. (Added 1981, No. 61.)”

To Protect Data: None found.

Virginia:

http://www.vdh.state.va.us/OEMS/compliance_manual/Entire%20Final%202012VAC5-31.pdf

To Collect Data:
§ 32.1-116.1. Prehospital patient care reporting procedure; trauma registry; confidentiality.

A. In order to collect data on the incidence, severity and cause of trauma, integrate the information available from other state agencies on trauma and improve the delivery of prehospital and hospital emergency medical services, there is hereby established the Emergency Medical Services Patient Care Information System. The Emergency Medical Services Patient Care Information System shall include the prehospital patient care reporting procedure and the trauma registry.

All licensed emergency medical services agencies shall participate in the prehospital patient care reporting procedure by making available to the Commissioner or his designees the minimum data set on forms prescribed by the Board or locally developed forms which contain equivalent information. The minimum data set shall include, but not be limited to, type of medical emergency or nature of the call, the response time, the treatment provided and other items as prescribed by the Board.

Each licensed emergency medical services agency shall upon request disclose the prehospital care report to law-enforcement officials (i) when the patient is the victim of a crime or (ii) when the patient is in the custody of the law-enforcement officials and has received emergency medical services or has refused emergency medical services.

The Commissioner may delegate the responsibility for collection of this data to the Regional Emergency Medical Services Councils, Department of Health personnel or individuals under contract to the Department. The Advisory Board shall assist in the design, implementation, subsequent revisions and analyses of the data of the prehospital patient care reporting procedures.
B. All licensed hospitals which render emergency medical services shall participate in the trauma registry by making available to the Commissioner or his designees abstracts of the records of all patients admitted to the institutions' trauma and general surgery services with diagnoses related to trauma. The abstracts shall be submitted on forms provided by the Department and shall include the minimum data set prescribed by the Board.

The Commissioner shall seek the advice and assistance of the Advisory Board and the Committee on Trauma of the Virginia Chapter of the American College of Surgeons in the design, implementation, subsequent revisions and analyses of the trauma registry.

(1987, c. 480; 2002, cc. 568, 658; 2003, c. 471.)

To Protect Data:


Any licensed physician or other health care provider may disclose to an emergency medical care attendant, technician or another physician the medical or hospital records of a sick or injured person to whom such attendant, technician or physician is providing or has rendered emergency medical care or assistance for the purpose of promoting the medical education of the specific person who provided such care or assistance. Any emergency medical care attendant, technician or physician to whom such confidential records are disclosed shall not further disclose such information to any persons not entitled to receive that information in accordance with the provisions of this section.

(1988, c. 486.)

§ 32.1-116.2. Confidential nature of information supplied; publication; liability protections.

A. The Commissioner and all other persons to whom data is submitted shall keep patient information confidential. Mechanisms for protecting patient data shall be developed and continually evaluated to ascertain their effectiveness. No publication of information, research or medical data shall be made which identifies the patients by names or addresses. However, the Commissioner or his designees may utilize institutional data in order to improve the quality of and appropriate access to emergency medical services.

B. No individual, licensed emergency medical services agency, hospital, Regional Emergency Medical Services Council or organization advising the Commissioner shall be liable for any civil damages resulting from any act or omission performed as required by this article unless such act or omission was the result of gross negligence or willful misconduct.
Washington:

http://www.doh.wa.gov/hsqa/emstrauma/rcwindex.htm
http://www.doh.wa.gov/hsqa/emstrauma/wacindex.htm

To Collect Data:
WAC 246-976-330 Ambulance and aid services—Record requirements
“(1) Each ambulance and aid services must maintain a record of:…
(c) Each patient contact with at least the following information…
(2) Licensed services must make all records available for inspection and duplication upon request of the department.”

To Protect Data: None found.

West Virginia:

http://www.wvochs.org/shared/content/ems/legislationandrules/164c.PDF
http://www.wvochs.org/shared/content/ems/legislationandrules/64csr48.pdf

To Collect Data:
TITLE 64 LEGISLATIVE RULE, BUREAU FOR PUBLIC HEALTH
SERIES 48 EMERGENCY MEDICAL SERVICES

“3.5. Records.-- All EMS Agencies are responsible for the preparation and maintenance of records. The records shall be subject to and available for inspection by the commissioner. Records shall be stored in a manner as to provide reasonable safety from water and fire damage and from disclosure to persons other than those authorized by law. Secure storage shall be provided for medical records. The EMS Agency shall prepare and maintain for a period of not less than five (5) years the following records:…”

“3.5.c. Records of EMS agency service activity, including state OEMS Patient Care Records which specifically identify the vehicle operator and attendant in charge, dispatch records, and other OEMS Patient Care Record information. The OEMS Patient Care Record minimum data set as defined by the commissioner shall be submitted on a monthly schedule established by the commissioner for the individual agency.”

To Protect Data:
“4.8. Inspection.-- The commissioner has the right to inspect all places of operation of an EMS Agency or proposed EMS Agency for compliance with this rule. The inspection shall be in addition to other federal, state, or local inspections required by law. The inspection may include all places of operations of the EMS Agency or proposed EMS Agency and all records used by the EMS Agency or proposed EMS Agency. The commissioner may inspect, but not copy or maintain, records of protected status.”
West Virginia: (cont.)

“12.5. Medical information concerning any individual is confidential and shall not be shared without patient consent or disclosed except for continuing medical care, for investigations by the department of health and human resources, or by mandate of a legally executed court order.”

Wisconsin:

http://www.legis.state.wi.us/rsb/code/hfs/hfs110.html

To Collect Data:
HFS 110.08 EMT–basic or EMT–basic IV operational plan.
“(1) PLAN SUBMISSION. A county, city, town, village, prospective or licensed ambulance service provider, hospital or any combination of these may operate an EMT–basic or EMT–basic IV ambulance service. Before operating an ambulance service, a county, city, town, village, prospective or licensed ambulance service provider, hospital or any combination of these shall first submit to the department an EMT–basic or EMT–basic IV operational plan for department review and approval. Department approval of the plan shall be a prerequisite to initiation of EMT–basic or EMT–basic IV service provision. Once the plan is approved, any modifications shall be submitted to the department and approved prior to implementation.
(2) REQUIRED ELEMENTS. To be approved, an EMT–basic or EMT–basic IV operational plan shall include all of the following elements:…

(r) Written agreement to use the department’s ambulance report form or a copy of an alternative report form to be reviewed by the department for approval. The ambulance service provider shall document all ambulance runs on a report form prescribed or approved by the department. The ambulance report form is a medical record. A copy of the form shall be given to the receiving facility and a copy shall be kept by the ambulance provider.”

“146.50, Stats., or this chapter. An authorized employee or agent of the department, upon presentation of identification, shall be permitted to examine equipment or vehicles or enter the offices of the licensee during business hours without advance notice or at any other reasonable prearranged time. The authorized employee or agent of the department shall be permitted to inspect, review, and reproduce all equipment, vehicles or records of the licensee pertinent to the requirements of s. 146.50, Stats., and this chapter, including but not limited to administrative records, personnel records, records of ambulance runs, training records and vehicle records. The right to inspect, review and reproduce records applies regardless of whether the records are maintained in written, electronic or other form.”

To Protect Data: None found.
Wyoming:

http://soswy.state.wy.us/Rule_Search_Main.asp

To Collect Data: None found.

To Protect Data: None found.