

# HOUSE BILL No. 1264

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## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 16-31-3-26.

**Synopsis:** Emergency medical service provider audits. Requires each organization that provides emergency medical services to conduct an audit and review at least quarterly to assess, monitor, and evaluate the quality of patient care. Provides that audit and review proceedings are confidential and communications at the audit and review proceedings are privileged communications.

**Effective:** July 1, 2016.

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## Kirchhofer

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January 11, 2016, read first time and referred to Committee on Public Health.

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Second Regular Session of the 119th General Assembly (2016)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2015 Regular Session of the General Assembly.

# HOUSE BILL No. 1264

A BILL FOR AN ACT to amend the Indiana Code concerning health.

*Be it enacted by the General Assembly of the State of Indiana:*

- 1 SECTION 1. IC 16-31-3-26 IS ADDED TO THE INDIANA CODE
- 2 AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
- 3 1, 2016]: **Sec. 26. (a) Each provider organization shall conduct an**
- 4 **audit and review at least quarterly to assess, monitor, and evaluate**
- 5 **the quality of patient care as follows:**
- 6 (1) **The audit must evaluate patient care and personnel**
- 7 **performance.**
- 8 (2) **The results of the audit must be reviewed with the**
- 9 **emergency medical service personnel.**
- 10 (3) **Documentation for the audit and review must include the**
- 11 **following:**
- 12 (A) **The criteria used to select audited runs.**
- 13 (B) **Problem identification and resolution.**
- 14 (C) **Date of review.**
- 15 (D) **Attendance at the review.**
- 16 (E) **A summary of the discussion at the review.**
- 17 (4) **The audit and review must be conducted under the**



- 1 direction of one (1) of the following:  
2 (A) The provider organization medical director.  
3 (B) An emergency department committee that is  
4 supervised by a medical director with a provider  
5 organization representative serving as a member of the  
6 committee.  
7 (C) A committee established by the provider organization  
8 and under the direction of the medical director or medical  
9 director's designee. If the medical director selects a  
10 designee, the designee must:  
11 (i) be a physician licensed under IC 25-22.5;  
12 (ii) have an active role in the delivery of emergency care;  
13 and  
14 (iii) be designated in writing by the medical director as  
15 the medical director's designee.  
16 (5) The audit must provide a method for identifying the need  
17 for staff development programs, basic training, in-service  
18 training, and orientation.  
19 (6) The audit must evaluate all levels of care by emergency  
20 medical service personnel.  
21 (b) Except as provided by rule of the commission, all audit and  
22 review proceedings under this section are confidential, and any  
23 communications at the audit and review proceedings are privileged  
24 communications.  
25 (c) The commission may adopt rules under IC 4-22-2 to  
26 implement this section.

