OFFICE OF THE SECRETARY OF STATE
TOBIAS READ
SECRETARY OF STATE

MICHAEL KAPLAN
DEPUTY SECRETARY OF STATE

ARCHIVES DIVISION
STEPHANIE CLARK
DIRECTOR

800 SUMMER STREET NE
SALEM, OR 97310
503-373-0701

NOTICE OF PROPOSED RULEMAKING

INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 333
OREGON HEALTH AUTHORITY
PUBLIC HEALTH DIVISION

FILED: 07/31/2026 12:19 PM
ARCHIVES DIVISION SECRETARY OF STATE

FILING CAPTION: Ambulance Service Plans

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 08/25/2026 5:00 PM
The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

CONTACT:
Mellony Bernal
971-673-3152
publichealth.rules@odhsoha.oregon.gov
800 NE Oregon St. Suite 465
Portland, OR 97232

Filed By:
Public Health Division
Rules Coordinator

HEARING(S)
Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.

DATE: 08/25/2026
TIME: 11:00 AM
OFFICER: Staff

REMOTE HEARING DETAILS
MEETING URL: Click here to join the meeting
PHONE NUMBER: 971-277-2343
CONFERENCE ID: 142883816
SPECIAL INSTRUCTIONS:
This hearing is being held remotely via Microsoft Teams. To provide oral (spoken) testimony during this hearing, please contact publichealth.rules@odhsoha.oregon.gov to register to receive the link for the Microsoft Teams video conference via calendar appointment, or you may access the hearing using the meeting URL above. Alternatively, you may dial 971-277-2343, Phone Conference ID 142 883 816# for audio (listen) only. This hearing will close no later than 12:00PM (noon) but may close as early as 11:30AM if everyone who signs up to provide testimony has been heard from.

Accessibility Statement: For individuals with disabilities or individuals who speak a language other than English, OHA can provide free help. Some examples are: sign language and spoken language interpreters, real-time captioning, braille, large print, audio, and written materials in other languages. If you need help with these services, please contact the Public Health Division at 971-673-1222, 711 TTY or publichealth.rules@odhsoha.oregon.gov at least 48 hours before the meeting. All relay calls are accepted. To best ensure our ability to provide a modification please contact us if you are considering attending the meeting and require a modification. The earlier you make a request the more likely we can meet the need.

NEED FOR THE RULE(S):

The Oregon Health Authority (OHA), Public Health Division, Emergency Medical Services Program is proposing to permanently amend administrative rules in chapter 333, division 260 relating to the adoption and amendment of ambulance service plans and the establishment of ambulance service areas. These rules have not been updated since 2001. The proposed changes seek to modernize language to address longstanding gaps and challenges, reflect current processes, and align with statutory requirements.

In accordance with ORS 682.062, each county must create a plan for how ambulance services are organized. As part of this plan, counties must define specific areas where ambulance services will operate, making sure emergency services are delivered efficiently and effectively. The EMS Program is responsible for adopting rules identifying the subject matter that must be addressed in each plan, as well as review and approve each county ambulance service plan.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

ORS chapter 682 (https://www.oregonlegislature.gov/bills_laws/ors/ors682.html)

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE:

Ambulance service plans (ASPs) affect racial equity in Oregon by requiring local county leadership to develop comprehensive ambulance service plans that consider systemic factors unique to their county. Counties are required to develop plans with county-wide dispatch and ambulance response time criteria, ensuring that all areas meet the same dispatch and response times, despite the racial or economic makeup of an area. Required ASP quality improvement standards may be used to identify gaps in the treatment of disadvantaged populations. Moreover, the mandatory ambulance service patient care data submitted to the OHA may be used by counties to identify racial disparities in service access and outcomes.

While these proposed rules largely focus on language modernization, process improvements, and statutory alignment and are anticipated to have a neutral effect on racial equity in Oregon, proposed language will require local county leadership to identify in the ASP how the county planned efficient and effective ambulance response, considering the county population size and density, age distribution, geography, seasonal population changes, special events or venue driven population changes, and cultural or language factors. The county must describe how these factors influenced the development of the ASP.

FISCAL AND ECONOMIC IMPACT:

The proposed rule changes include process improvements designed to reduce the number of staff and official review from local county leadership as an ambulance service plan moves through the stages of review and approval. This may lead to a significant reduction in the cost to counties.

The proposed changes include minor changes to information that must be included in an ASP, however, language has

been added clarifying that ASPs currently adopted by the county and approved by the OHA, or those ASPs that are currently under review, do not need to comply with the revised standards until the next scheduled review period or when the county chooses to make a change before its next scheduled review. For local counties, the impact will be limited to either a reduction in costs or no change at all in the development of ambulance service plans.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) Units of local government may see improved processing of ambulance service plan reviews, which may result in a cost reduction to counties by reducing the number of staff and staff hours needed to update and adopt ambulance service plans.

There is no anticipated impact on the OHA. The OHA is currently required to review and approve ambulance service plans

There is no anticipated impact on the public; however, since counties must consider specific factors and describe in the ASP how those factors influenced the development of the ASP, this could result in shorter response times, improved quality of care and increased public satisfaction.

(2)(a) Local county governments are responsible for the development of ambulance service plans and are not considered a small business as that term is defined in statute. Ambulance service area holders may be subsequently impacted based on the changes made by county leadership. The OHA does not collect data on the number of staff each ambulance service area holder employs and therefore cannot estimate with accuracy how many agencies may be a small business. Many ambulance service area holders operating in rural or frontier regions of Oregon are likely small businesses.

(b) Local county governments are responsible for the development of ambulance service plans and are not considered a small business. Ambulance service area holders may be subsequently impacted based on the changes made by county leadership which could include staff time for policy development, tracking and reporting changes in phone numbers and contact information, revising an ambulance service plan to meet revised format criteria, and other administrative activities.

(c) Local county governments are responsible for the development of ambulance service plans and are not considered a small business. Ambulance service area holders may be subsequently impacted based on the changes made by county leadership which could include additional equipment or supplies requirements.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

While local county governments are responsible for the development of ambulance service plans and are not considered a small business as that term is defined in statute, the RAC membership included the Oregon State Ambulance Association that represents both large and small and public and private ambulance service agencies, and the Association of Oregon Counties and Special District Associations that speak to impacts on rural counties. Additional trade associations, local hospitals, local county governments, Tribal Nations, and both EMS transport and non-transport agencies participated on the RAC.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:
333-260-0000, 333-260-0010, 333-260-0020, 333-260-0030, 333-260-0035, 333-260-0040, 333-260-0050, 333-260-0060, 333-260-0070

AMEND: 333-260-0000

RULE SUMMARY: Amend 333-260-0000: Replaces references to the (Public Health) Division with the Oregon Health Authority (Authority). Clarifies that the purpose of the rules is to explain what every Ambulance Service Plan must include and how the Oregon Health Authority reviews and approves those plans. Clarifies that nothing in the rules prohibits counties from adopting or enforcing a county regulation that requires more than what is required by these rules.

CHANGES TO RULE:

333-260-0000
County and State Relationship ¶

~~The following rules refl~~(1) The purpose of these rules is to: ¶
(a) Specify the subjects th~~e Division's interpretation of 1989 Oregon Laws Chapter 722. T~~at an Ambulance Service Plan (ASP) must consider, address, and include and that the county governing body must consider and address when adopti~~on and amendment of ambulance service plan~~ng an ASP; and ¶
(b) Establish the Oregon Health Authority's (Authority's) review and approval process of an ASP.¶
(2) The Authority's role is limited to reviewing and approving ASPs ~~a~~under the ~~establishment of ambulance service areas are a matter for regulation by county government within the parameters of relevant statutes and~~se rules and applicable statutes. The Authority's role does not include enforcement of the ASP provisions.¶
(3)(a) An ordinance of any political subdivision regulating ambulance services or emergency medical services providers may not require less than is required under ORS 820.300 to 820.380, ORS chapter 682 or rules adopted thereunder, including these rules.¶
(b) Nothing in these rules prohibit political subdivisions from adopting or enforcing an ordinance that requires more than what is required by these rules.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205,~~017, ORS 682.02~~1~~5, ORS 682.027~~5~~, ORS 682.031~~5, 682.325, 682.335,~~, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0010

RULE SUMMARY: Amend 333-260-0010: Modifies definitions for clarity or to align with statute. Proposes new definitions for the terms 'ambulance service plan administrator,' 'ambulance service area provider,' and 'These rules.'

CHANGES TO RULE:

333-260-0010
Definitions ¶

As used in ~~these rules:~~¶
~~(1) "Ambulanc~~OAR chapter 333, division 260:¶
(1) "Ambulance" or "Ambulance vehicle" means a~~ny~~ privately or publicly owned motor vehicle, aircraft, or ~~marine craft operated by a Division-licensed ambulance service and~~watercraft that is regularly provided or offered to be provided for the emergency ~~and non-emergency~~ transportation of persons ~~suffering from illness,~~who are ill or injur~~y~~ed or who have disabilit~~y~~ies.¶
(2) "Ambulance ~~S~~service" means an~~y~~ individual, partnership, corporation, association, governmental ~~agency~~unit or other entity that ~~holds a Division-issued ambulance service license to provide emergency and non-emergency care and transportation to sick,~~operates ambulances and holds itself out as providing prehospital care or medical transportation to persons who are ill or injured or ~~disabled person~~who have disabilities.¶
(3) "Ambulance ~~S~~service ~~A~~area (ASA)" means a geographic area ~~which is~~ served by one ambulance service provider, and may include all or a portion of a county, or all or portions of two or more contiguous counties.¶
(4) "Ambulance ~~S~~service ~~P~~plan (~~Plan~~ASP)" means a written document~~, which outlines a process for establishing a county emergency medical services system. A plan~~ that addresses the need for and coordination of ambulance services ~~by establish~~ing a~~mbulance service areas for the entire~~ county or two or more contiguous count~~y~~ies and ~~by meeting t~~establishes o~~ther requirements of these rules. Approval of a plan shall not depend upon whether it maintains an existing system of providers or changes the system. For example, a plan may substitute franchising for an open-market system~~ne or more ambulance service areas.¶
(5) "Ambulance service plan administrator" means a primary point of contact for overseeing the development, implementation, and maintenance of an ambulance service plan.¶
(~~5~~6) "Ambulance ~~S~~service ~~P~~provider" means a~~licensed ambulance service~~n ambulance service licensed in accordance with ORS 682.045 and OAR chapter 333, division 250 that responds to 9-1-1 dispatched calls or provides ~~pre-arrange~~emergency and non-emergency ~~transfers or emergency or non-emergency inter-facility transfers.¶~~
~~(6) "County Government or~~ interfacility ambulance service transfers.¶
(7) "Ambulance service area provider" means an ambulance service provider that has been selected by the county to serve as the primary ambulance service provider to an ASA.¶
(8) "Ambulance services" includes the transportation of an individual who is ill or injured or who has a disability in an ambulance and, in connection therewith, the administration of prehospital and out-of-hospital medical, emergency or nonemergency care, if necessary. ¶
(9) "County ~~G~~governing ~~B~~body (County)" means a Board of County Commissioners or a ~~C~~county ~~C~~court.¶
(~~7~~10) "~~Division" means the Public Health Division, Oregon Health Authority.¶~~
~~(8) "Emergency Medical Service (EMS)" means those prehospital functions and services whose purpose is to prepare for and respond to medical and traumatic emergencies, including rescue and ambulance services patient care, communications and evaluation~~Emergency care" means the performance of acts or procedures under emergency conditions in the observation, care and counsel of persons who are ill or injured or who have disabilities; in the administration of care or medications prescribed by a licensed physician or naturopathic physician, insofar as any of these acts is based upon knowledge and application of the principles of biological, physical and social science as required by a completed course utilizing an approved curriculum in prehospital emergency care. "Emergency care" does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.¶
(11) "Non-emergency care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24 hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician licensed under ORS chapter 677 or naturopathic physician licensed under ORS chapter 685, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board or Oregon Board of Naturopathic Medicine in the course of providing prehospital care.¶
(~~9~~12) "Notification ~~T~~time" means the ~~length of time between the initial receipt of the request for emergency~~

~~medical service by either a provider or an emergency dispatch center (9-1-1), and the notification of all responding~~elapsed time from receiving a request for emergency medical service and the dispatch of responding ambulance services.¶
(13) "Prehospital care" means care rendered by emergency medical services providers as an incident of the operation of an ambulance and care rendered by emergency medical service ~~personnel.¶~~
~~(10) "Provider" means any~~s providers as incidents of other public~~,~~ or private ~~or volunteer entity providing EMS.~~safety duties, and includes, but is not limited to, "emergency care."¶
(1~~1~~4) "Response ~~T~~time" means the ~~length of time between the notification of each provider and the arrival of each provider's emergency medical service unit(s) at the incident scene~~elapsed time from dispatch of responding ambulance service to arrival at incident scene.¶
(15) "These rules" means OAR 333-260-0000 through OAR 333-260-0070.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.235, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.235, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0020

RULE SUMMARY: Amend 333-260-0020: Establishes dates for compliance. Updates the rule title and describes the approval and adoption process for an Ambulance Service Plan (ASP). Defines the terms 'adopted,' 'approved,' and 'proposed ASP.' Establishes that the county is responsible for: 1) identifying persons responsible for the county ASP; 2) developing, adopting and enforcing their ASP; 3) establishing one or more ambulance service area(s) (ASA) consistent with the ASP; and 4) submitting the ASP for Oregon Health Authority (OHA) review and approval. Provides that the county must notify the authority when the ASP administrator changes within 30 days of change. Establishes that contact information provided to the OHA as part of the ASP is considered supplementation documentation and may be updated as needed without requiring readoption by the county governing body. Identifies the review process by the OHA. Moves the elements and format of an ASP to OAR 333-260-0030.

CHANGES TO RULE:

333-260-0020
~~Procedures for Adoption and Approval of~~ Ambulance Service Plans~~-~~Review Process ¶

(1) A~~-county may obtain technical assistance from the Division as available in developing and amending an ambulance service plan.¶~~
~~(2) A county that does not have a Division-approved plan on July 19, 1989, must adopt and submit a plan by Dec~~s used in this rule: ¶
(a) "Adopted" means the county governing body has formally approved an ambulance service plan (ASP) in the same manner the county enacts nonemergency ordinances.¶
(b) "Approved" means an adopted ambulance service plan (ASP) that has been approved by the Oregon Health Authority (Authority) under section (6) of this rule.¶
(c) "Proposed ASP" means an ASP that has been developed by a county under ORS 682.062(1) but has not yet been adopted in the same manner that a county adopts nonem~~b~~er ~~31, 1990. A county that has a Division-approved plan that does no~~gency ordinances. ¶
(2) In accordance with ORS 682.062 and 682.063, each county is responsible for: ¶
(a) Developing and adopting an ASP that meets the requirements ~~of these rules must adopt and submit an amended plan by June 30, 2003. This requirement may be met by a plan submitted in conjunction with another contiguous county or counties. A Division-approved plan which is currently in effect, remains in effect until one of the following occurs:¶~~
~~(a) An amended plan is approved by the Division;¶~~
~~(b) There is a failure to submit an amended plan pursuant to this subsecti~~specified in these rules; and¶
(b) Establishing one or more ambulance service areas consistent with the ASP for the efficient and effective provision of ambulance services.¶
(3)(a) An approved ASP subject to Authority review under section (4) of this rule commencing on or after [insert effective date of rule] must comply with these rules. ¶
(b) An approved ASP that is in effect on [insert one day before effective date of this rule] must continue to comply with the rules in effect on [insert one day before effective date of rule]. Once the approved ASP is subject to Authority review under section (4) of this rule commencing on~~;~~ or¶
~~(c) Where an amended plan was required to be submitted pursuant to this subsection and such amended plan was disapproved by the Division, if 120 days have elapsed since such disapproval and no new amended plan has been adopted and submitted to the Division for approval.¶~~
~~(3) After March 31, 2001, a county must submit a plan or amendment(s) to the Division using the follow~~ after [insert effective date of rule], the ASP must comply with these rules. ¶
(c) An ASP that is under review by the Authority before [insert effective date of rule] must comply with the rules in effect on [insert one day before effective date of rule] to be approved by the Authority. An ASP approved under this subsection must continue to comply with the rules in effect on [insert one day before the effective date of rule]. Once the approved ASP is subject to Authority review under section (4) of this rule commencing ~~format:¶~~
~~1. CERTIFICATION BY GOVERNING BODY OF COUNTY AMBULANCE SERVICE PLAN¶~~
~~2. OVERVIEW OF COUNTY (DEMOGRAPHIC AND GEOGRAPHIC DESCRIPTION)¶~~
~~3. DEFINITIONS;¶~~
~~4. BOUNDARIES;¶~~
~~(a) ASA Map(s) with Response Time Zones:¶~~
~~(b) ASA Narrative Description:¶~~

(c) Map(s) Depon or after [insert effective date of rule], the ASP must comply with these rules.¶
(d) A county with an ASP subject to subsection (3)(c) of this rule may elect in written notificating "9-1-1," Fire Districts and Incorporated Cities:¶
(d) Alternatives Considered to Reduce Response Times.¶
5. SYSTEM ELEMENTS:¶
(a) 9-1-1 Dispatched Calls;¶
(b) Pre-arranged Non-emergency Transfers and Inter-facility Transfers;on to the Authority to comply with these rules early and request the Authority to review its ASP under these rules. A county that elects to comply early must comply with these rules upon approval of its ASP.¶
(4) A county: ¶
(a) Must submit an adopted ASP to the Authority for approval review:¶
(cA) Notification and Response Times;¶
(d) Level of Care;¶
(e) Personnel;¶
(f) Medical Supervision;When amendments are made to an existing adopted ASP; or¶
(gB) Patient Care Equipment;¶
(h) Vehicles;At the request of the Authority.¶
(ib) Training;¶
(j) Quality Improvement;¶
(A) Structure:¶
(B) Process:¶
(C) Sanctions for Non Compliant Personnel or Providers:¶
6. COORDINATION¶
(a) The Entity That Shall Administer and Revise the ASA Plan;¶
(b) Complaint Review Process;¶
(c) Mutual Aid Agreements;¶
(d) Disaster Response;¶
(A) County Resources Other Than Ambulances;¶
(B) Out of County Resources;Must submit contact information including names or phone numbers required as part of the ASP. Contact information shall consist of information that is public record and shall not include personal, non-public record contact information. This contact information shall be considered supplemental documentation, may be revised as needed, and is not subject to adoption by the county. Supplemental documentation includes but is not limited to:¶
(CA) Mass Casualty Incident Plan;¶
(D) Response to Terrorism;Phone numbers for accessing the public safety answering point (PSAP) other than dialing 9-1-1; ¶
(eB) Personnel and Equipment Resources;¶
(A) Non-transporting EMS Provider;¶
(B) HContact information for specialty non-transporting emergency services including but not limited to hazardous Mmaterials;¶
(C) S, search and Rrescue;¶
(D) S, specialized Rrescue;¶
(E) E, and extrication; and ¶
(fC) Emergency Communication and System Access;Contact information for the ASP administrator. ¶
(Ac) Telephone;¶
(B) Dispatch Procedures;¶
(C) Radio System;¶
(D) Emergency Medical Services DispatcMust provide the Authority with written notice identifying its ASP administrator including contact information and must submit written notice to the Authority within 30 calendar days of any change in the designated administrator or their Training.¶
7. PROVIDER SELECTION:¶
(a) Initicontact information.¶
(d) May obtain technical Aassignment;¶
(b) Reassignment;¶
(c) Application forstance from the Authority in developing and amending an ASA;P.¶
(de) Notification of VacaMay request preliminary review of a proposed ASP prior to adopting an ASA;¶
(e) Maintenance of Level of Service;¶
8. COUNTY ORDINANCES AND RULES:¶
(4) Procedures for the Division'sP in the same manner as the county enacts nonemergency ordinances.¶

(5) Preliminary Review.¶
(a) A county may submit a proposed ASP to the Authority for a preliminary review ~~of a~~ for compli~~submitted under section (3) of this rule are set forth in ORS 682.205(6). Except for the time frames, plans submitted prior to April 1, 2001, but not yet approved by the Division shall be processed in the same manner.~~ce with these rules.¶
(b) The ASP submitted for preliminary review must include copies of any county laws or rules relating to ASPs.¶
(c) The Authority shall notify the county regarding any identified deficiencies. The notification is not binding on the Authority nor is it a final decision. The preliminary review does not prevent the Authority from finding noncompliance during a later approval review of the same ASP.¶
(6) Approval Review.¶
(a) All adopted plans must be submitted to the Authority. ¶
(~~5~~b) The ~~Division's approval of a plan or amendments is limited to determining whether there has been compliance with these rules.¶~~
~~(6) A county is required to amend their plan, if necessary, to comply with~~ASP submitted for approval review must include the following in the submission:¶
(A) Copies of any county laws or rules relating to ASPs; and ¶
(B) A written attestation that: ¶
(i) The ASP has been developed in compliance with these rules, ORS 682.062 and 682.063, and existing county laws and rules; and¶
(ii) The ASP was adopted by the county in the same manner as the county enacts nonemergency ordinances and the date of adoption. ¶
(c) The Authority shall conduct an initial review of an adopted ASP to determine if the ASP is complete an~~y~~d a~~mendments made in ORS Chapter 682 or OAR chapter 333, divisions 250, 255 or 260. The Division~~ll documents required for submission under these rules have been submitted. ¶
(A) The Authority shall notify the ASP administrator in writing if the ASP is incomplete or the submission is missing required documentation and identify what additional information or documentation is needed; or ¶
(B) If the adopted ASP is complete and all required documentation has been submitted, the Authority shall notify the ~~county in writing each time an amendment is made in either the statute or administrative rules that may affect the plan. Anytime a county pl~~ASP administrator in writing when the Authority will begin its full review. ¶
(d) The Authority shall conduct a full review of a complete adopted ASP and determine whether the ASP satisfies these rules. An ASP fails to satisfy these rules if it does not consider or address any of the subjects required by these rules. Upon completion of its full review, the Authority shall issue a finding that: ¶
(A) The adopted ASP satisfies these rules and is a~~mended, the county must submit a copy of the amended plan to the Division~~pproved; or ¶
(B) The adopted ASP needs further development. The county shall modify the plan to comply with these rules and resubmit the modified plan for approval review.¶
(7) The ~~Division~~Authority shall review ~~each county plan no less than once every five years to ensure compliance with the statutes and administrative rules pertaining to a county ambulance service area plan. The Division shall notify the county of the results of the review.¶~~
~~(8) The Division may seek the advic~~an approved ASP once every five years. The Authority shall review the approved ASP in accordance with section (6) of this rule. If a previously approved ASP does not comply with these rules, or does not comply with new applicable rules adopted after the prior approval of the ASP, the county shall modify the plan to comply with these rules and resubmit for approval. The county may seek preliminary review before submitting for approval review.¶
(8) An approved ASP remains approved by the Authority until the county completes the approval review process and the Authority approves a new or amended ASP.¶
NOTE: The rules in effect before [insert effective date of rules] are available o~~f~~n the ~~State Emergency Medical Service Committee concerning plan complianc~~Oregon Secretary of State's website in the Oregon Administrative Rules Database or are available on file with the~~se rules~~ Authority.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0030

RULE SUMMARY: Amend 333-260-0030: Prescribes the topics and format of an Ambulance Service Plan (ASP) in Appendix A. Appendix A clarifies that terms or phrases not commonly accepted or understood must be included in the ASP. Adds a requirement that the ASP include a statement attesting to the plan being developed in accordance with state and local laws. Revises terminology and makes grammatical updates for clarity.

CHANGES TO RULE:

333-260-0030
Subjects to be ~~Consider~~Addressed in an Ambulance Service Plan ¶

(1) A county is required to ~~include in a plan~~consider, address and include in an ambulance service plan (ASP), each of the subjects or items set forth in these rules and to address ~~and consider~~ each of those subjects or items in the ~~adoption process.¶~~
~~(2) The plan submitted to the Division for approval must contain a certification signed by the governing body of the county that:¶~~
~~(a) Each subject or item contained in the plan was addressed and considered in the adoption of the plan;¶~~
~~(b) In the governing body's judgment, the ASAs established in the plan provides for the efficient and effective provision of ambulance services; and¶~~
~~(c) To the extent they are applicable, the county has complied with ORS 682.205(2)(3) and 682.335 and existing local ordinances and~~ASP.¶
(2) The ASP must be in the format prescribed in Appendix A of this rule~~s~~.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

RULE ATTACHMENTS MAY NOT SHOW CHANGES. PLEASE CONTACT AGENCY REGARDING CHANGES.

NOTE: Attachments referenced are attached to this document. You may view the attachment 333-260-0030.pdf from the Attachments panel. Alternately, you may view the attachments at the following link: https://secure.sos.state.or.us/oard/viewAttachment.action?ruleVrsnRsn=338303

ADOPT: 333-260-0035

RULE SUMMARY: Adopt 333-260-0035: New rule outlining that each Ambulance Service Plan (ASP) must include information describing how the county planned for efficient and effective ambulance response considering specified criteria.

CHANGES TO RULE:

333-260-0035
County Characteristics Affecting Ambulance Response
The ambulance service plan must include information detailing how the county planned efficient and effective ambulance response considering the following factors: ¶
(1) Population size and density;¶
(2) Age distribution;¶
(3) County geography;¶
(4) Seasonal population changes;¶
(5) Special events or venue driven population changes; and¶
(6) Cultural or language factors.
Statutory/Other Authority: ORS 413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.066

AMEND: 333-260-0040

RULE SUMMARY: Amend 333-260-0040: Revises terminology and makes grammatical changes for clarity. Clarifies that the Ambulance Service Plan (ASP) must include a digital file that includes a Geographic Information System (GIS) map showing ambulance service area (ASA) boundaries and response time zones and a printed version with specified layers.

CHANGES TO RULE:

333-260-0040
Boundaries ¶

(1) ~~The entire county must be included in a plan. One or more~~ Each ambulance service plan (ASP) must address the entire county in the ASP. One or more ambulance service areas (ASAs) may be established in a ~~plan~~n ASP. The county or contiguous counties are solely responsible for establishing all ASA boundaries within the county's jurisdiction.¶
(2) ~~A~~The ASP must include: ¶
(a) A digital file that includes a Geographic Information System (GIS) map showing ASA boundaries and response time zones ~~must be included in the plan, along with a narrative description of each ASA.~~and a printed version with the following layers: ¶
(A) Streets, avenues, and highway names;¶
(~~3~~B) A~~map depicting all "9-1-1," fire district and incorporate~~ll public safety answering point (PSAP) coverage areas, fire districts, fire departments, and city boundaries within the county ~~must be included in the plan.~~¶
(~~4~~b) ~~The plan must describe~~Descriptions of the major alternatives considered~~, if any,~~ for reducing the effects of ~~artificial~~human-made barriers and geographical barriers on response times.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0050

RULE SUMMARY: Amend 333-260-0050: Revises terminology and makes grammatical changes for clarity. Clarifies the system elements that must be included in the Ambulance Service Plan (ASP) including primary or secondary public safety answering point dispatched calls, emergency and non-emergency interfacility ambulance service transfers, ambulance staffing or personnel including supervising physician requirement, and clarifies patient care equipment requirements. Provides that notification and response times must include trauma patient response times and if the county adopts a county specific response time for non-trauma patients it must be identified in the ASP. Adds additional criteria for purposes of quality improvement including monitoring compliance with evidence-based performance measures associated with improved patient outcomes, ambulance service delivery, patient care, ambulance service delinquencies, enforcement, and failure to comply with ASP standards and requirements.

CHANGES TO RULE:

333-260-0050
System Elements ¶

(1) The ~~following system elements~~ambulance service plan (ASP) must ~~be~~ address~~ed~~ and ~~considered in the county's plan for each ASA:¶~~
~~(a) 9-1-1~~include the following system elements for each ambulance service area (ASA) provider:¶
(a) Primary or secondary public safety answering point (PSAP) dispatch~~ed~~ calls;¶
(b) ~~Pre-arrange~~Emergency and non-emergency ~~transfers and~~ inter~~-~~facility ~~transfers, by June 30, 2003;¶~~
~~(c) Notification and response time~~ambulance service transfers;¶
(~~d~~c) Level of care, ranging from basic life support to advanced life support;¶
(~~e~~d) ~~Personnel for first response vehicles and ambulances;¶~~
~~(f) Medical supervision of all medically trained emergency response personnel~~Staffing or personnel for ASA providers, other ambulance service providers, and ambulance vehicles to include qualified drivers, ambulance-based clinician(s), or licensed emergency medical services (EMS) providers;¶
(e) A supervising physician(s) for all licensed EMS providers and ambulance-based clinician(s) responding within the county;¶
(~~g~~f) Patient care equipment for ~~first response vehicles and ambulances~~ASA provider ambulance vehicles that meet or exceed the requirements specified under OAR 333-255-0072;¶
(~~h~~g) ~~Vehicle,~~Ambulance vehicle, equipment and safety requirements; and¶
(~~i~~h) Initial and continuing education training for ~~emergency response personnel; and~~licensed EMS providers.¶
(~~j~~2) ~~Quality improvement.¶~~
~~(2) Notification and response times must be addressed and considered in the plan~~The ASP must address and include notification and response times as follows:¶
(a) Notification times must be expressed in terms of percent of calls which do not exceed a specified number of minutes;¶
(b) Response times must be expressed in terms of percent of calls which do not exceed a specified number of minutes~~;~~ and¶
~~(c~~ shall include trauma patient response times as required by OAR 333-200-0080(2);¶
(c) If a county adopts a county-specific response time for non-trauma patients it must be included in the ASP; and¶
(d) Multiple response time standards may be established ~~within the ASA~~ to accommodate climate, weather, access, terrain, staffing and other factors as determined by the county.¶
(3) The ~~plan~~ASP must address and ~~consi~~include~~r~~ a quality improvement program which at a minimum describes a process for:¶
(a) Monitor~~s~~ing compliance with ~~pertinent statutes ordinanc~~the ASP, local laws, rules, and r~~ule~~egulations;¶
(b) Monitor~~s~~ing compliance with ~~standards for prehospital provi~~evidence-based performance measures that are associated with improved patient outcomes and system performance that may include~~r~~ notification ~~times, response times and~~and response times;¶
(c) Monitoring compliance with standards specified in the ASP including method and frequency; ¶
(d) Monitoring and responding to identified compliance, patient care~~;~~, and¶
~~(c) Provides for problem resolution and~~ ambulance service delivery deficiencies identified through the quality improvement process; and¶
(e) Problem resolution, informal or formal enforcement, and any legal sanctions for ~~non-compliant personnel or providers of the plan provision~~failure to comply with ASP standards and requirements.

Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0060

RULE SUMMARY: Amend 333-260-0060: Revises terminology and makes grammatical changes for clarity. Adds additional requirement relating to the topic of coordination including that the Ambulance Service Plan (ASP) address a process to receive, review, and respond to complaints about ambulance service area (ASA) providers; include mutual aid agreements with county and neighboring county ASA providers to meet the need for efficient and effective ambulance service response; identify how an ASA provider will access specialty non-transporting emergency services; access to public safety answering point through a centralized 9-1-1, and contact phone number other than 9-1-1; and access to radio and telephone systems for all ASA providers and public safety answering point (PSAP) that allow for communication between two entities.

CHANGES TO RULE:

333-260-0060
Coordination ¶

The county may delegate authority for development and administration of the ~~plan~~ambulance service plan (ASP) to an intergovernmental body. The ~~plan~~ASP must address and ~~consi~~include~~r~~:¶
(1) A process for the county to receive input from prehospital care consumers, ambulance service area (ASA) providers, and the medical community.~~¶~~
~~(2~~ in the county.¶
(2) A process to receive, review and respond to complaints about ASA providers.¶
(3) Mutual aid agreements for ambulance responses from ~~outside of the service area and responses to other service area~~within county and neighboring counties ASA providers to meet the need for ~~service in unusual circumstances~~efficient and effective ambulance service response.¶
(~~3~~4) Ambulance service providers' responsibilities in the event of a disaster, including: ~~c~~¶
(a) Coordination with county resources ~~and d~~; ¶
(b) Determination of methods for obtaining out-of-county resources other than ambulances~~, a process for adoption of a~~; and¶
(c) A mass-casualty incident plan that is recognized and approved by the county's emergency management administration.¶
(~~4~~5) ~~Personnel and equipment resources in addition to the ambulance provider for response~~Identification of how an ASA provider accesses specialty non-transporting emergency services to incidents in~~volv~~cluding but not limited to:¶
(a) Hazardous ~~M~~materials;¶
(b) Search and ~~R~~rescue;¶
(c) Specialized ~~R~~rescue; and¶
(d) Extrication.¶
(~~5~~6) Emergency radio and telephone communications systems for the county~~. Mechanisms for the following must be in operation or scheduled for implementation:¶~~
~~(a) Access to the Emergency Me~~, including but not limited to the following:¶
(a) Access to the public safety answering point (PSAP) through a centralized 9-1-1, and contact phone number for accessing the PSAP other than di~~c~~al ~~Services System centralized emergency telephone number~~ing 9-1-1;¶
(b) Radio and telephone systems for all ASA providers and PSAP that allow for communications between the two entities; ¶
(~~b~~c) Dispatch of ambulance vehicles staffed in accordance with the ~~plan~~ASP and other emergency resources based on emergency medical protocols or dispatch procedures; and¶
(~~c~~d) U.S. Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Services Dispatcher: National Standard Curriculum or equivalent training for all emergency medical services dispatchers.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066

AMEND: 333-260-0070

RULE SUMMARY: Amend 333-260-0070: Revises terminology and makes grammatical changes for clarity. Provides that the Ambulance Service Plan (ASP) must address a process for renewal of an ambulance service area (ASA), reassignment of an ambulance service provider to an ASA, and application and response to application for an ASA. Additionally, the ASP must address a process for response to termination or other end of services from an ambulance service area provider.

CHANGES TO RULE:

333-260-0070
Ambulance Service Area Provider Selection ¶

(1) The county is solely responsible for designating and administering the process of selecting an ambulance service area provider.¶
(2) The ambulance service plan must address and ~~consi~~include~~r~~ a process for:¶
(a) ~~Assigning and reassigning of~~Initial assignment of and county response to an ambulance service provider to an ambulance service area (ASA);¶
(b) Re~~sponding to an application by~~ newal of an ambulance service area provider ~~for~~to an ASA;¶
(c) Re~~sponding to notification that an ASA is being vacated; and~~assignment of an ambulance service area provider to an ASA; ¶
(d) Application to serve an existing ASA or creation of new ASA including responding to an application;¶
(~~d~~e) ~~Maintaining the existing level of service after notification that~~ Response to ambulance service area provider termination or other end of services; and¶
(f) Continuation of ambulance service after ambulance service area provider ~~is~~ vacat~~inge~~s an ASA.¶
(3) The ~~county~~ambulance service plan shall designate one emergency ambulance service area provider for each ASA. The county may designate one or more ~~non-emergency~~ ambulance service provider~~s~~ for each ASA.
Statutory/Other Authority: ORS ~~682.205, 682.215, 682.275, 682.315, 682.325, 682.335, 682.345~~413.042, ORS 682.017, ORS 682.062
Statutes/Other Implemented: ORS 682.~~205, 682.215, 682.275, 682.315, 682.325, 682.335,~~017, ORS 682.027, ORS 682.031, ORS 682.041, ORS 682.062, ORS 682.063, ORS 682.~~345~~066