

H.R. 302 – Sports Medicine Licensure Clarity Act of 2017

As has become typical within Congress as well as State Legislature, certain bills have become vehicles for other larger pieces. Late Saturday evening, September 22, 2018, a pre-conference agreement on the FAA reauthorization bill and additional measures occurred. H.R. 302 now includes the original provision - to provide protections for certain sports medicine professionals who provide certain medical services in a secondary state (people who travel with sports teams) – as well as the following:

- FAA Reauthorization Act of 2018;
- NTSB Reauthorization Act of 2018;
- Disaster Recovery Reform;
- Concrete Masonry;
- BUILD Act of 2018;
- Syria Study Group;
- Preventing Emerging Threats;
- Supplemental Appropriations for Disaster Relief, 2018;
- Maritime Security; and
- Transportation Security

In all, 1207 pages of legislation. As expected, air ambulance operations, more focused upon helicopter air ambulance operations and the balance billing concerns, were addressed within the FAA Reauthorization Act (primarily Sections 418, 419, and 420). Areas of safety within the air medical industry are addressed in Sections 311, 314, 315, and 322. Other areas noted were Section 359 that relates to drone usage in Fire and EMS operations and Section 411 that relates to enforcement of aviation consumer protection rules. A brief overview/summary of each of these sections is provided on pages 2 and 3.

I think it is also important to note that the Disaster Recovery Reform does include a section about FEMA coordination on emergency response plans (Section 1236); a section for a report on duplication in non-natural disaster preparedness grant programs (Section 1243); and a section for FEMA updates on national preparedness assessment (Section 1242).

I would suggest NASEMSO make an attempt to reach out to the Secretary of Transportation and the Secretary of Health and Human Services to request representation on the Advisory Committee created in Section 418. I further believe that NASEMSO should be considered as the means to assist the Secretary in oversight of the air medical industry, at a very minimum, the medical transportation piece, being considered by Section 420. I also believe that the Fatigue in EMS Risk Management Guidelines could be an additional resource for the Aviation Rulemaking Committee proposed to be established in Section 315.

It is important to note that this bill does not address aligning Medicare reimbursement rates for air ambulance services. Taking a stance or action upon this bill will not conflict with our previously determined support of H.R. 3378.

This piece of legislation is being reported by both the House and the Senate as a potential bill for action this week.

PRIORITY SECTIONS – NASEMSO SHOULD CONSIDER DIRECT INVOLVEMENT

****Section 418 – Advisory Committee on Air Ambulance and Patient Billing (pg. 377-382)**

Within 60 days, Secretary of Transportation, in consultation with Secretary of Health and Human Services, will establish an advisory committee for the purpose of reviewing options to improve disclosure of charges and fees for air medical services, better inform consumers of insurance options, and protect consumers from balance billing.

The advisory committee shall be both Secretaries (or their designee); a representative from each relevant federal agency as determined by the Secretary of Transportation; 1 representative for each of the following groups: State insurance regulators, Health insurance providers, Patient advocacy groups, consumer advocacy groups, physician specializing in emergency, trauma, cardiac, or stroke; 3 representatives to represent various segments of the air ambulance industry; and an additional 3 representatives not covered previously and as determined necessary and appropriate by the Secretary.

One portion of the review will include recommendations made by the Comptroller General study (GAO-17-637) including what data from air providers and other sources should be collected by DOT to better understand the market and oversight of the air ambulance industry for the purposes of pursuing action related to unfair or deceptive practices.

A report is due within 180 days after the 1st meeting of this advisory committee. Rulemaking and guidance is to start upon receipt of the report.

****Section 419 – Air Ambulance Complaints to the Department of Transportation (pg. 383)**

Amends consumer complaints (Section 42302 of title 49 U.S.C.) to clearly include transportation by air ambulance. Also requires air ambulance providers to provide specific information on any invoice, bill, or other communication provided to the patient related to reporting consumer complaints (hotline and weblink).

****Section 420 – Report to Congress on Air Ambulance Oversight (pg. 384)**

Within 180 days after the report in Section 418, a report shall be sent to Congress on air ambulance oversight to include a description on how the Secretary (of Transportation) will conduct oversight of air ambulance providers and a timeline for the issuance of any guidance concerning unfair and deceptive practices among air ambulance providers, including guidance for States to refer such matters to the Secretary.

***Section 315 – Aviation Rulemaking Committee for Part 135 Pilot Rest and Duty Rules (pg. 201-203)**

Creates this committee within 180 days of enactment. This committee shall consider recommendations of prior part 135 rulemaking committees, accommodations necessary for small businesses; scientific data derived from aviation-related fatigue and sleep research; data gathered from aviation safety reporting programs; and the need to accommodate the unique duty and rest time requirements of air ambulance pilots. 2 years to complete a report and then implement a notice of proposed rulemaking on consensus recommendations no later than 1 year after the report.

ITEMS TO MONITOR – POTENTIAL EXISTS FOR INVOLVEMENT

Section 311 – Part 135 Accident and Incident Data (pg. 195-196)

In collaboration with industry stakeholders, identification of what additional data may be needed to help identify safety issues/concerns.

Section 314 – Helicopter Air Ambulance Operations Data and Reports (pg. 197-201)

Assessment of the availability of information to the general public regarding the location of heliports and helipads used by air ambulance helicopters (1 year to complete).

Based upon the assessment, update any existing guidance on information included in the current databases of Airport Master Record forms to include helipads and heliports and develop, as appropriate, a new database specifically for listing helipads and heliports used by air ambulance helicopters (one already exists through LZControl – a free, crowdsourced database).

Incident and Accident Data Report – information added to include number of patients transported, number of hours flown by the helicopters, and number of hours flown at night. Number of accidents experienced by helicopter air ambulance operations, number of fatal accidents experienced, and the rate per 100,000 flight hours. This will ultimately be an annual report with an effort made to specifically protect the confidentiality of any trade secret or proprietary information submitted.

Section 322 – Improved Safety in Rural Areas (pg. 210)

Appears to provide part 135 operators a conditional waiver of a currently restricted practice (conducting an instrument approach without a destination Meteorological Aerodrome Report - METAR).

Section 359 – Study on Fire Department and Emergency Service Agency Use of Unmanned Air Systems (pg. 304-306)

Develops a study and report on the usage of unmanned air systems (drones) for Fire and EMS use. The Administrator must consult with national fire and emergency service organizations.

Section 411 – Enforcement of Aviation Consumer Protection Rules (pg. 370)

The Comptroller General shall conduct a study that evaluates available enforcement mechanisms, any obstacles to enforcement, and trends in DOT enforcement actions on enforcement of aviation consumer protection rules. A report on the study shall be made available to Congress within 1 year.