

**BILL NO. 2025-012**

**ORDINANCE NO. 8697**

**A SPECIAL ORDINANCE OF THE CITY OF NEVADA, MISSOURI, APPROVING AN AGREEMENT FOR ADVICE FOR OFFICIALS OF THE FIRE DEPARTMENT OF THE CITY OF NEVADA, MISSOURI, ON MEDICAL ISSUES**

**BE IT ORDAINED BY THE CITY OF NEVADA, MISSOURI THAT:**

Section 1. The agreement with Russell Kemm, D.O., attached hereto and incorporated herein by reference is approved as an obligation of this municipality.

Section 2. The agreement is effective until cancelled by either party. The parties acknowledge that the term of the agreement is 'at will,' and either party may terminate the agreement at any time, with or without prior notice, for any lawful reason, whether for good cause, bad cause, or no cause at all.

Section 3. The agreement will be in full force and effect from and after its passage and approval.

**Passed, Approved and Adopted** by the City Council of the City of Nevada, Missouri, this 1<sup>st</sup> day of April 2025.



Cynthia Dye  
CYNTHIA DYE, CITY CLERK

George C. Knox  
GEORGE C. KNOX, MAYOR

**AGENDA ITEM**  
**MARCH 18, 2025**

**Subject:** Dr. Kemm contract renewal

**Department:** Fire Department

**Notes:**

This will renew our current contract with Dr. Kemm as the City of Nevada Fire Department Medical Director.

## AGREEMENT

This agreement is made and entered into this. 1<sup>st</sup> day of April, 2025, by and between the city of Nevada, MO (hereafter 'city') and Russell Kemm DO. (hereafter 'Medical Director').

1. **Services.** Physician agrees to act as Medical Director for the Fire Department of the City of Nevada, Missouri which provides basic life support services utilizing medications in invasive procedures.

2. **Qualifications and Services.** Medical Director will maintain qualifications and provide the services for the Nevada Missouri Fire Department envisioned by 19 CSR 30-40.303, Code of Regulations of Missouri, a copy of which is attached hereto and incorporated herein by reference.

The Medical Director will maintain the license and course completion, or equivalent described in 19 CSR 30-40.303(3)(B). See said regulation and any updates.

The Medical Director, in cooperation with the emergency medical response agency administrator (Fire Chief, Nevada Fire Department) will develop implement and annually review the following: (As may be required by said regulation or any amendment thereto.) See 19 CSR 30-40.303(3)(C) and any updates.

1. Medical and treatment protocols for medical, trauma and pediatric patients;
2. Triage protocols;
3. Protocols for do-not-resuscitate requests;
4. Air Ambulance utilization; and
5. Medications and medical equipment to be utilized.

The Medical Director in corporation with the fire chief shall ensure that all licensed Fire Department personnel meet the education and skill competencies required for their level of license and patient care environment. The medical director shall have the authority to require additional education and training for any licensed fire department personnel who failed to meet the requirements and limit the patient care activities of personnel who deviate from an established standard. See 19 CSR 30-40.303(3)(D) and any updates.

The Medical Director, in cooperation with the emergency medical response agency administrator (Fire Chief, Nevada Fire Department) will develop

implement and annually review: (As may be required by said regulation or any amendment thereto.) See 19 CSR 30-40.303(3)(E) and any updates.

1. Prolonged emergency medical response agency response times;
2. Incomplete run documentation;
3. Compliance with adult and pediatric triage and treatment protocols (or sample thereof).
4. Skills performance (or sample thereof).
5. Any other activities that the administrator or medical director deem necessary.

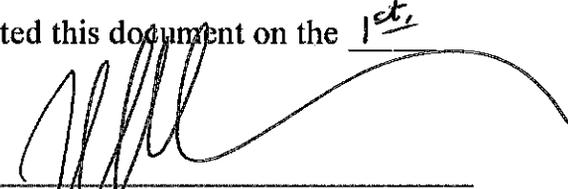
The Medical Director will become briefed on pre-arrival medical instructions through available dispatch (See See 19 CSR 30-40.303(4) and any updates.

3. **Compensation.** The Physician will be paid \$450 annually on April 1, each year the contract is continued.

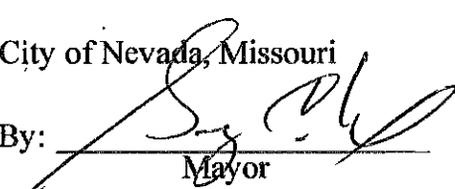
4. **Annual Agreement** but terminable at will. This agreement is effective until canceled by either party. The parties acknowledge that the term of the agreement is 'at will,' and either party may terminate the agreement at any time, with or without prior notice, for any lawful reason, whether for good cause, bad cause, or no cause at all.

In Witness Whereof the parties have executed this document on the 1<sup>st</sup> day of April, 2025.

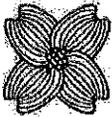


  
\_\_\_\_\_  
Russell Kemm, D.O.

City of Nevada, Missouri

By:   
\_\_\_\_\_  
Mayor

  
\_\_\_\_\_  
City Clerk



of the Department of Health.

(3) The committees should include representation from emergency medical technicians-basic, emergency medical technicians-paramedic, registered nurses with expertise in emergency medicine, firefighter/emergency medical technicians, trauma surgeons, physicians with expertise in emergency medicine, trauma nurse coordinators from designated trauma centers, emergency medical response agencies, ground ambulance service managers, EMS training entities, pediatric hospitals or physicians/registered nurses with expertise in pediatric care, emergency medical dispatchers, air ambulance services, physicians with expertise in EMS medical direction, local health departments, hospital administrators, medical examiners or coroners, and EMS consumers.

*AUTHORITY: sections 190.102 and 190.185, RSMo 2000.\* Original rule filed Dec. 1, 2000, effective May 30, 2001.*

*\*Original authority: 190.102, RSMo 1998; 190.185, RSMo 1973, amended 1989, 1993, 1995, 1998.*

**19 CSR 30-40.303 Medical Director Required for All Ambulance Services and Emergency Medical Response Agencies That Provide Advanced Life Support Services, Basic Life Support Services Utilizing Medications or Providing Assistance With Patients' Medications, or Basic Life Support Services Performing Invasive Procedures Including Invasive Airway Procedures; Dispatch Agencies Providing Pre-arrival Medical Instructions; and Training Entities**

*PURPOSE: This rule describes the qualifications and requirements related to medical directors of ambulance services, emergency medical response agencies, dispatch agencies, and training entities.*

(1) As used in this rule, the following terms shall have the meanings specified:

- (A) ACLS – advanced cardiac life support;
- (B) ALS – advanced life support;
- (C) ATLS – advanced trauma life support;
- (D) BCLS – basic cardiac life support;
- (E) BLS – basic life support;
- (F) Board eligibility – a physician who has applied to a specialty board and has received a ruling that s/he has fulfilled the requirements to take the board examination and the board certification must be obtained within five (5) years of the first appointment;
- (G) EMS – emergency medical services;
- (H) EMT-Basic – emergency medical technician-basic;
- (I) EMT-Paramedic – emergency medical technician-paramedic;
- (J) PALS – pediatric advanced life support; and
- (K) Primary care specialty – family/general practice, internal medicine, or pediatrics.

(2) Ambulance services that provide advanced life support services, basic life support services utilizing medications (medications include, but are not limited to, activated charcoal, oral glucose and/or oxygen) or providing assistance with patients' medications (patient medications include, but are not limited, to a prescribed inhaler, nitroglycerin and/or epinephrine), or basic life support services performing invasive procedures including invasive airway procedures (invasive airway procedures include, but are not limited to, esophageal

or endotracheal intubation) shall comply with this section of the regulation.

(A) Each licensed ambulance service which provides ALS care shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and who has –

- 1. Board certification in emergency medicine; or
- 2. Board certification or board eligibility in a primary care specialty or surgery and has actively practiced emergency medicine during the past year and can demonstrate current course completion or certification in ACLS, ATLS and PALS (certification in ACLS, ATLS and PALS must be obtained no later than one (1) year after initial ambulance service licensure), or documentation of equivalent education in cardiac care, trauma care and pediatric care within the past five (5) years; or

3. An active practice in the community, with current course completion or certification in ACLS and PALS (certifications shall be obtained no later than one (1) year after initial ambulance service licensure), or documented equivalent education in cardiac care and pediatric care within the past five (5) years who develops a written agreement with a physician who meets the requirements stated in (2)(A)1. or (2)(A)2. to review and approve the processes required in (2)(C), (2)(D), and (2)(E) in order to facilitate the medical direction of the ambulance service.

(B) Each licensed ambulance service which provides only BLS care shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and can demonstrate current course completion or certification in ACLS and PALS (certifications must be obtained no later than one (1) year after initial ambulance service licensure), or can document equivalent education in cardiac care and pediatric care within the past five (5) years.

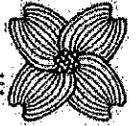
(C) The medical director, in cooperation with the ambulance service administrator, shall develop, implement and annually review the following:

- 1. Medical and treatment protocols for medical, trauma and pediatric patients;
- 2. Triage and transport protocols;
- 3. Protocols for do-not-resuscitate re-quests;
- 4. Air ambulance utilization; and
- 5. Medications and medical equipment to be utilized.

(D) The medical director, in cooperation with the ambulance service administrator, shall ensure that all licensed service personnel meet the education and skill competencies required for their level of license and patient care environment. The medical director shall have the authority to require additional education and training for any licensed service personnel who fail to meet this requirement and limit the patient care activities of personnel who deviate from established standards.

(E) The medical director, in cooperation with the ambulance service administrator, shall develop, implement and annually review the following:

- 1. Prolonged ambulance scene, response or transport times;
- 2. Incomplete run documentation;
- 3. Ambulances that are diverted from their original destinations;
- 4. Compliance with adult and pediatric triage, treatment and transport protocols (or sample thereof);
- 5. Skills performance (or sample thereof); and
- 6. Any other activities that the administrator or medical director deem necessary.



(3) Emergency medical response agencies that provide advanced life support services, basic life support services utilizing medications (medications include, but are not limited to, activated charcoal, oral glucose and/or oxygen) or providing assistance with patients' medications (patient medications include, but are not limited to, a prescribed inhaler, nitroglycerin and/or epinephrine), or basic life support services performing invasive procedures including invasive airway procedures (invasive airway procedures include, but are not limited to, esophageal or endotracheal intubation) shall comply with this section of the regulation.

(A) Each emergency medical response agency which provides ALS care shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and who has —

1. Board certification in emergency medicine; or
2. Board certification or board eligibility in a primary care specialty or surgery and has actively practiced emergency medicine during the past year and can demonstrate current course completion or certification in ACLS, ATLS and PALS (certification in ACLS, ATLS and PALS must be obtained no later than one (1) year after initial emergency medical response agency licensure), or documentation of equivalent education in cardiac care, trauma care and pediatric care within the past five (5) years; or

3. An active practice in the community, with current course completion or certification in ACLS and PALS (certifications shall be obtained no later than one (1) year after initial emergency medical response agency licensure), or documented equivalent education in cardiac care and pediatric care within the past five (5) years who develops a written agreement with a physician who meets the requirements stated in (3)(A)1. or (3)(A)2. to review and approve the processes required in (3)(C), (3)(D), and (3)(E) in order to facilitate the medical direction of the emergency medical response agency.

(B) Each emergency medical response agency which provides only BLS care shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and can demonstrate current course completion or certification in ACLS and PALS, or can document equivalent education in cardiac care and pediatric care within the past five (5) years.

(C) The medical director, in cooperation with the emergency medical response agency administrator, shall develop, implement and annually review the following:

1. Medical and treatment protocols for medical, trauma and pediatric patients;
2. Triage protocols;
3. Protocols for do-not-resuscitate requests;
4. Air ambulance utilization; and
5. Medications and medical equipment to be utilized.

(D) The medical director, in cooperation with the emergency medical response agency administrator, shall ensure that all licensed agency personnel meet the education and skill competencies required for their level of license and patient care environment. The medical director shall have the authority to require additional education and training for any licensed agency personnel who fail to meet this requirement and limit the patient care activities of personnel who deviate from established standards.

(E) The medical director, in cooperation with the emergency medical response agency administrator, shall develop, implement and annually review the following:

1. Prolonged emergency medical response agency response times;

2. Incomplete run documentation;
3. Compliance with adult and pediatric triage and treatment protocols (or sample thereof);
4. Skills performance (or sample thereof); and
5. Any other activities that the administrator or medical director deem necessary.

(4) All dispatch agencies which provide pre-arrival medical instructions shall comply with this section of the regulation.

(A) Each dispatch agency shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts who can demonstrate current course completion or certification in ACLS, or can document equivalent education in cardiac care within the past five (5) years.

(B) The medical director, in cooperation with the dispatch agency administrator, shall develop, implement and annually review the following:

1. Medical pre-arrival instruction protocols; and
2. Standards related to the administration of those protocols.

(C) The medical director, in cooperation with the dispatch agency administrator, shall ensure that all dispatch personnel giving medical pre-arrival instructions meet the education and skill competencies required for their patient care environment. The medical director shall have the authority to require additional education and training for any personnel who fail to meet this requirement and limit the activities related to giving medical pre-arrival instructions of personnel who deviate from established standards.

(D) The medical director, in cooperation with the dispatch agency administrator, shall develop, implement and annually review the following:

1. Prolonged ambulance or emergency medical response agency dispatch times;
2. Compliance with medical pre-arrival instruction protocols (or sample thereof); and
3. Any other activities that the administrator or medical director deem necessary.

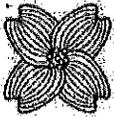
(5) Training entities shall comply with this section of the regulation.

(A) Each EMT-Paramedic training entity shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and who has —

1. Board certification in emergency medicine; or
2. Board certification or board eligibility in a primary care specialty or surgery and has actively practiced emergency medicine during the past year and can demonstrate current course completion or certification in ACLS, ATLS and PALS (certification in ACLS, ATLS and PALS must be obtained no later than one (1) year after initial training entity accreditation), or documented equivalent education in cardiac care, trauma care and pediatric care within the past five (5) years; or

(B) Each EMT-Basic, continuing education, first responder or emergency medical dispatch training entity shall have a medical director who is licensed as a doctor of medicine or a doctor of osteopathy by the Missouri State Board of Registration for the Healing Arts and can demonstrate current course completion or certification in ACLS and PALS (certifications must be obtained no later than one (1) year after initial training entity accreditation), or can document equivalent education in cardiac care and pediatric care within the past five (5) years.

(C) Each EMS training entity medical director shall be responsible for ensuring an accurate and thorough presentation



of the medical content of the education and training program. Ensure that the student has met the education and skill competencies based on current national standards and scope of practice for each level of licensure and/or certification.

**AUTHORITY:** sections 190.103, 190.108, 190.109, 190.131, 190.133, 190.134 and 190.185, RSMo Supp. 1998.\* Emergency rule filed Aug. 28, 1998; effective Sept. 7, 1998, expired March 5, 1999. Original rule filed Sept. 1, 1998, effective Feb. 28, 1999. Emergency rescission and rule filed July 30, 1999, effective Aug. 9, 1999, expired Feb. 3, 2000. Rescinded and readopted: Filed: July 30, 1999, effective Jan. 30, 2000.

\*Original authority: 190.103, RSMo 1998; 190.108, RSMo 1998; 190.109, RSMo 1998; 190.131, RSMo 1998; 190.133, RSMo 1998; 190.134, RSMo 1998; and 190.185, RSMo 1993, amended 1989, 1993, 1995, 1998.

### 19 CSR 30-40.308 Application and Licensure Requirements Standards for the Licensure and Relicensure of Air Ambulance Services

**PURPOSE:** This rule provides the requirement and standards related to the licensure and relicensure of air ambulance services.

**PUBLISHER'S NOTE:** The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

#### (1) Application Requirements for Air Ambulance Service Licensure.

(A) Each applicant for an air ambulance service license or relicensure shall submit an application for licensure to the Emergency Medical Services (EMS) Bureau no less than thirty (30) days or no more than one hundred twenty (120) days prior to their desired date of licensure or relicensure.

(B) An application shall include the following information: type of license applied for (rotary wing or fixed wing); trade name of air ambulance service; location of aircraft; number of aircraft to be used as an air ambulance(s); name, address, telephone numbers, and email address (if applicable) of operator of air ambulance service; name, address, telephone numbers, and email address (if applicable) of manager; name, address, whether a medical doctor or doctor of osteopathy, telephone numbers, email address (if applicable), and signature of medical director and date signed; certification by the medical director that they are aware of the qualification requirements and the responsibilities of an air ambulance service medical director and agree to serve as medical director; name, address, telephone numbers, and email address (if applicable) of proposed licensee of air ambulance service; name of licensee's chief executive officer; all ambulance service licensure and related administrative licensure actions taken against the ambulance service or owner by any state agency in any state; and certification by the applicant that the application contains no misrepresentations or falsifications and that the information given by them is true and complete to the best of their knowledge and that the ambulance service has both the intention and the ability to comply with the regulations promulgated under the Comprehensive Emergency Medical Service Systems Act, Chapter 190, RSMo.

(C) Each air ambulance service that meets the requirements and standards of the statute and regulations shall be licensed and relicensed for a period of five (5) years. Air ambulances based inside or outside Missouri that do intra-Missouri transports shall be licensed in the state of Missouri and shall be held to the same standards.

(D) Air ambulance services which are currently accredited by the Commission on Accreditation of Medical Transportation Services (CAMTS) and have the required liability insurance coverage shall be considered to be compliant with the rules for air ambulance services. Accredited air ambulance services shall attach to their application evidence of accreditation and proof of their liability insurance coverage. The EMS Bureau shall conduct periodic site reviews and inspections of applicable records and medical equipment as necessary to verify compliance.

(E) Fixed wing air ambulances shall meet the requirements stated in this regulation except (8)(D), (8)(F), and (12).

(2) Air ambulance services shall meet the following operation and maintenance standards:

(A) Air ambulance services shall possess or contract for a valid Federal Aviation Administration Title 14 CFR part 135 Certificate and comply with 14 CFR section 119, a regulation from the Federal Aviation Administration and be authorized to conduct helicopter air ambulance operations in accordance with Federal Aviation Regulation part 135 and this operations specification;

(B) The air ambulance service shall ensure prompt response to all requests to that service for emergency care twenty-four (24) hours per day, each and every day of the year, and shall provide patients with medically necessary care and transportation in accordance with that air ambulance service's protocols, scope of care, and capabilities.

1. If a scene request for emergency services is made to an air ambulance service which is not the recognized emergency provider, then the 911 provider or the recognized emergency provider shall be notified immediately by the air ambulance service receiving the request; and

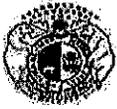
2. Emergency transports shall not require a guarantee of payment prior to transport;

(C) Each air ambulance program shall have established information that is made available to each emergency service in the area in which they operate to include the following:

1. Aircraft capabilities;
2. Appropriate utilization of air ambulances;
3. Education and skills of the crew; and
4. Safety considerations;

(D) Public liability insurance or proof of self-insurance, condition to pay losses and damage caused by or resulting from the negligent operation, maintenance, or use of ambulance services under the service's operating authority or for loss or damage to property or others. Documents submitted as proof of insurance shall specify the limits of coverage and include the ambulance service license number. Public liability coverage for air ambulance services which transport patients shall meet or exceed:

1. Two hundred fifty thousand dollars (\$250,000) for bodily injury to, or death of, one (1) person;
2. Five hundred thousand dollars (\$500,000) for bodily injury to, or death of, all persons injured or killed in any one (1) accident, subject to a minimum of two hundred fifty thousand dollars (\$250,000) per person; and
3. One hundred thousand dollars (\$100,000) for loss or damage to property of others in one (1) accident, excluding cargo; and



**MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BUREAU OF EMERGENCY MEDICAL SERVICES  
CHANGE OF MEDICAL DIRECTOR**

FOR DOH OFFICE USE ONLY DO NOT WRITE IN THIS SPACE

Reviewed by _____	<input type="checkbox"/> AIR AMBULANCE SERVICE	LICENSE OR ACCREDITATION NUMBER	DATE FORM RECEIVED
Date _____	<input type="checkbox"/> GROUND AMB. SERVICE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> EMRA		
	<input type="checkbox"/> TRAINING ENTITY		

LICENSEE MUST COMPLETE INFORMATION BELOW TYPE OR PRINT

**1. MEDICAL DIRECTOR**

NAME (LAST, FIRST, MI) \_\_\_\_\_  M.D.  D.O.

MAILING ADDRESS (STREET, ROUTE, ETC.) \_\_\_\_\_ OFFICE TELEPHONE NUMBER \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ E-MAIL \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

BOARD CERTIFICATION  ACLS  ATLS  PALS

I HEREBY CERTIFY that I am aware of the qualification requirements and the responsibilities of an ambulance services medical director (190.103 RSMo Supp. 1998 & 19 CSR 30-40.303) and I agree to serve as medical director.

SIGNATURE OF AMBULANCE SERVICE MEDICAL DIRECTOR \_\_\_\_\_ DATE \_\_\_\_\_

PLEASE ATTACH COPIES OF DOCUMENTATION OF THE ABOVE CREDENTIALS

**2. CONSULTANT MEDICAL DIRECTOR**

NAME (LAST, FIRST, MI) \_\_\_\_\_  M.D.  D.O.

MAILING ADDRESS (CITY, STATE, ZIP CODE) \_\_\_\_\_ OFFICE TELEPHONE NUMBER \_\_\_\_\_

BOARD CERTIFICATION  ACLS  ATLS  PALS  LETTER OF AGREEMENT

I HEREBY CERTIFY that I am aware of the qualification requirements and the responsibilities of an ambulance service medical director (190.103 RSMo Supp. 1998 & 19 CSR 30-40.303) and I agree to serve as consultant medical director.

SIGNATURE OF AMBULANCE SERVICE CONSULTANT MEDICAL DIRECTOR \_\_\_\_\_ DATE \_\_\_\_\_

**3. CHECK APPROPRIATE BOX**

<input type="checkbox"/> AIR AMBULANCE SERVICE	<input type="checkbox"/> EMERGENCY MEDICAL RESPONSE AGENCY	LICENSE OR ACCREDITATION NUMBER
<input type="checkbox"/> GROUND AMBULANCE SERVICE	<input type="checkbox"/> TRAINING ENTITY	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
NAME OF POLITICAL SUBDIVISION OR CORPORATION _____	NAME OF CEO _____	TELEPHONE NUMBER-BUSINESS _____
BUSINESS ADDRESS (STREET, ROUTE, ETC.) _____		TELEPHONE NUMBER-EMERGENCY _____
CITY _____ STATE _____ ZIP CODE _____	E-MAIL _____	FAX NUMBER _____

I HEREBY CERTIFY that this form contains no misrepresentations or falsifications and that the information given by me is true and complete to the best of my knowledge. I further certify that the above named service or entity has both the intention and the ability to comply with the regulations promulgated under the Comprehensive EMS Act, Chapter 190, RSMo 1998.

I have attached all licensure or accreditation and related administrative licensure actions taken against this service or entity or owner by any state agency in any state.

SIGNATURE OF AUTHORIZED REPRESENTATIVE OF SERVICE OR ENTITY \_\_\_\_\_ DATE \_\_\_\_\_

**WARNING:** In addition to licensure action, anyone who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty may be guilty of a class B misdemeanor. Missouri statutes 575.060.

Mail Application to: Bureau of Emergency Medical Services, P.O. Box 570, Jefferson City, MO 65102