

STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Health Authority, Public Health Division

333

Agency and Division

Administrative Rules Chapter Number

Update of rules pertaining to licensure of Emergency Medical Services Providers

Rule Caption

In the Matter of: Amending Oregon Administrative Rules chapter 333, division 265 pertaining to emergency medical services providers

Statutory Authority: ORS 676.165, 676.175, 682.017, 682.025, 682.028, 682.204, 682.208, 682.212, 682.215, 682.216, 682.220, 682.224, 682.265

Other Authority: SB 234 (Oregon Laws 2011, chapter 703)

Stats. Implemented: ORS 682.017 – 682.991

Need for the Rule(s):

The Oregon Health Authority, Public Health Division, Emergency Medical Services and Trauma Systems Program is proposing to amend existing rules in order to:

- Improve the program's ability to monitor the quality of care provided by emergency medical services providers to Oregonians and persons visiting the state of Oregon;
- Provide clarity to create consistency between administrative rule and statute by becoming compliant with changes passed through SB 234 in the 2011 legislative session;
- Change titles and education requirements of licensed emergency medical services providers (EMSP) to be consistent with national standards; and
- Re-present fee increases that were identified in the 2010 rule revision that became effective on July 1, 2011. Proposed increases to go into effect July 1, 2013 are also included in this report.

The proposed rule amendments change titles and education requirements of licensed emergency medical services providers to be consistent with national standards. If these changes were not made, emergency medical services providers from other states and the military would not be able to receive reciprocity in Oregon and would prevent education standards taught in emergency medical services by Oregon colleges to progress with national standards.

The passage of SB 234 during the 2011 legislative session adopted the new levels of emergency medical services providers into statute following the national standards. These rule amendments are needed in order to be in compliance with SB 234 by adding the new levels, the educational standards and new education transitional material that is needed in order to get all Oregon licensed EMSPs up to the new standards.

The proposed rules will address new continuing education requirements and reporting of skill based competency verifications that will allow the Authority to better monitor the quality of care EMSPs provide.

The proposed rulemaking also re-addresses the fee increases that were adopted in rule July 1, 2010 and will continue on a steady increase through 2013 in a tiered approach with increases on July 1, 2011 and July 1, 2013. Although the fees are not changing from what was adopted in rule last year, approval on the tier II fees effective July 1, 2011 through June 30, 2013 is being sought through the Department of Administrative Services in order to be ratified by the Legislature during the next legislative session.

Documents Relied Upon, and where they are available:

SB 234 (Oregon Laws 2011, chapter 703) –

[<http://www.leg.state.or.us/11reg/measpdf/sb0200.dir/sb0234.en.pdf>]

Oregon Revised Statutes (Chapter 682) - [<http://www.leg.state.or.us/ors/682.html>]

Oregon Administrative Rules (333-265) –

[http://arcweb.sos.state.or.us/rules/OARs_300/OAR_333/333_265.html]

U.S. Department of Transportation Curriculum –

[<http://www.nhtsa.dot.gov/portal/site/nhtsa/menuitem.2a0771e91315babbbf30811060008a0c/>]

NASEMSO Training and Certification of EMS Personnel –

[<http://www.nasemso.org/Resources/Links/index.asp>]

Fiscal and Economic Impact:

The Oregon EMS and Trauma Systems Program will have to modify the licensing forms, the webpages, the licenses issued to emergency medical services providers and the licensing software. A new provider level will have to be created in the current database. The estimated cost of completing these tasks is \$13,200 and can be absorbed with current funding that has been put into a software upgrade migration that is currently underway. This migration is taking all applications and moving them online preventing the department from creating new applications. This migration will also allow for changing of names to the new levels. Curricula for the EMT-Intermediate will have to be revised and licensing examinations for the Emergency Medical Responder and EMT-Intermediate will have to be rewritten. These tasks will be accomplished by Program staff using existing resources.

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)):

There is no impact or cost of compliance identified for other state agencies.

The community colleges that conduct emergency medical services personnel training programs will be the most directly affected governmental entities. EMS training agencies will have to create and modify the curricula for the Advanced Emergency Medical Technician and EMT-Intermediate levels and the community colleges that train paramedics will have to be nationally accredited for their students to take the licensing examination. As this is a national change, this impact would occur even without this rulemaking. The cost of this remains undetermined until the community colleges can do a cost analysis around creating a new curriculum for the Advanced EMT and until the modified EMT-Intermediate curricula can be determined.

Local governments that operate ambulance services or fire departments employing EMTs will incur some expense. Ambulance services will have to revise policies and procedures to incorporate the new classifications and will have to purchase new patches for individuals currently certified as EMT-Basics or First Responders. It is estimated that revising procedures and policies could cost about \$200.00 for an organization. Patches can be obtained for approximately \$2.50 each. This is estimated to cost about \$7.50 to \$10 for each individual member who is in a classification that will change.

The members of the public who are currently licensed as First Responders or Emergency Medical Technician-Basics will have to obtain new patches to display on their uniforms. Usually one patch is displayed on a uniform and each patch costs approximately \$2.50.

Individuals wishing to get licensed or license renewals as emergency medical services providers will be impacted by licensing and relicensing fee increases set to take effect in a tiered approach and previously adopted in rule July 1, 2010, with the next tier becoming effective July 1, 2011 and the following tier becoming effective July 1, 2013. In addition, all transporting agencies (~129), non-transporting agencies (~458), and training facilities (~49) may be effected if they are obligated to pay for the renewal fees for

certified staff. First responder and EMT estimates for indorsement, initial licensing and license renewal are based on program history and assume a 1% annual increase. Since Advance EMT is a new category there is no history to base estimates. A fiscal impact will occur to providers that are contractually obligated to pay license renewal fees for their staff.

The fee increases below are only being re-addressed to seek approval from the Department of Administrative Services in order to have them ratified by the Legislature during the next legislative session. The fees are not being changed from the amounts that were vetted with stakeholders and the public through the rulemaking process, and adopted July 1, 2010.

IMPACT WHEN additional fees identified in the July 1, 2010 amended rules take effect scheduled for July 1, 2011 for the biennium. Proposed fee increases were broken down into 3 tiers, below are tier 2 increases. The numbers in the new revenue column represent the increase in revenue to the Division for the tier 2 increase effective July 1, 2011:

Fee Title/Description	Increased Cost to License Cardholders	Number 2011-13 transactions with new fee	Impact on 2011-13 Revenue For Division
Tier 2 Fee Increases:			
INITIAL CERTIFICATION & EXAMINATION			
First Responders or Emergency Medical Responders	\$5	245	\$1,225
Basic	\$5	2,046	\$10,230
Advanced	\$15	180	\$2,700
Intermediate	\$15	61	\$915
Paramedic	\$25	185	\$4,625
RE-TESTING			
Basic Practical	\$10	470	\$4,700
Advanced Practical	\$15	49	\$735
Intermediate Practical	\$15	17	\$255
Paramedic Practical	\$15	42	\$630
RE-CERTIFICATION			
First Responders or Emergency Medical Responders	\$5	2,619	\$13,095
Basic	\$10	4,053	\$40,530
Advanced	\$10	-	\$0
Intermediate	\$15	1,024	\$15,360
Paramedic	\$20	3,146	\$62,920
INDORSEMENT (RECIPROCITY)			
First Responders or Emergency Medical Responders	\$5	44	\$220
Basic Certification	\$30	251	\$7,530
Advanced	\$55	50	\$2,750
Intermediate Certification	\$55	50	\$2,750
Paramedic Certification	\$50	137	\$6,850
Paramedic Provisional Certification	\$0	36	\$0
Total			\$178,020

IMPACT WHEN additional fees identified in RULES take effect July 1, 2013 for the biennium. These numbers in the new revenue column include result from tier 3 increases in these rules.

Fee Title/Description	Increased Cost to License Cardholders	Number 2013-15 transactions with new fee	Impact on 2013-15 Revenue For Division
Tier 3 Fee Increases:			
INITIAL CERTIFICATION & EXAMINATION			
First Responders or Emergency Medical Responders	\$5	245	\$1,225
Basic	\$10	2,046	\$20,460
Advanced	\$15	180	\$2,700
Intermediate	\$15	61	\$915
Paramedic	\$15	185	\$2,775
RE-TESTING			
Basic Practical	\$5	470	\$2,350
Advanced Practical	\$10	49	\$490
Intermediate Practical	\$10	17	\$170
Paramedic Practical	\$5	42	\$210
RECERTIFICATION			
First Responders or Emergency Medical Responders	\$3	2,619	\$7,857
Basic	\$5	4,053	\$20,265
Advanced	\$5	-	\$0
Intermediate	\$5	1,024	\$5,120
Paramedic	\$10	3,146	\$31,460
INDORSEMENT (RECIPROCITY)			
First Responders or Emergency Medical Responders	\$10	44	\$440
Basic Certification	\$15	251	\$3,765
Advanced	\$15	50	\$750
Intermediate Certification	\$15	50	\$750
Total			\$101,702

2. Cost of compliance effect on small business (ORS 183.336):

a. Estimate the number of small businesses and types of business and industries with small businesses subject to the rule: Oregon has 35 private ambulance services, 31 have fewer than fifty licensed emergency medical services personnel. The costs for private ambulance services should be minimal as Emergency Medical Technicians (formerly known as EMT-basics) and Emergency Medical Responders (formerly First Responders) will have to display different patches and will have different continuing education requirements, though the number of hours will not change. It is estimated that revising procedures and policies could cost about \$200.00 for an organization. Patches can be obtained for approximately \$2.50 each. This is estimated to cost about \$7.50 to \$10 for each individual member who is in a classification that will change.

b. Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services:

There are no changes in the reporting, recordkeeping or related activities.

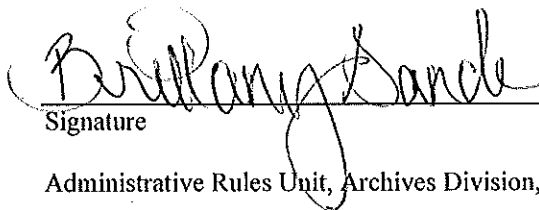
c. Equipment, supplies, labor and increased administration required for compliance:

There are no changes in the equipment or supplies for complying with these proposed regulations. There will be a change in the content of the continuing education required for emergency medical services providers, but no change in the number of hours. There is no anticipated cost related to the change in content of the continuing education requirements on small businesses.

How were small businesses involved in the development of this rule?

The EMS for the Future work group was established jointly by the Oregon Medical Board's EMS Committee and the EMS and Trauma Systems Program in 2008. The proposals of the work group were presented to the Oregon Medical Board's EMS Committee in May of 2009 and to the Oregon State EMS Committee in June of 2009. The proposals were then presented at seven stakeholder meetings held in Eugene, Portland, Newport, White City, LaGrande, Jantzen Beach and Redmond. In addition, presentations were made to the Oregon State Ambulance Association, the Oregon Fire Chiefs Association and the EMS Section of the Fire Chiefs Association and the Oregon EMS Conference. The rules pertaining to SB 234 were presented to committees such as the Oregon State Ambulance Association, Oregon Fire Medical Administrators Association, and The Oregon College Consortium. Comments were incorporated from these sessions.

Administrative Rule Advisory Committee consulted?: Yes - The State EMS Committee is the Administrative Rule Advisory Committee (RAC) for this proposed rule change. The RAC represents Oregon physicians, EMSPs, volunteer ambulance, governmental agencies, private ambulance, hospital administrators, nurses, emergency dispatchers, colleges, and at least 1 representative from each Area Trauma Advisory Board (ATAB). The RAC reviewed the proposed rule changes at the September 9, 2011 meeting at the Portland State Office Building.

 Brittany Sande, Administrative Rules Coordinator
Signature Printed name Date 10/14/11

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310. ARC 925-2007