

Rule Summary and Fiscal Analysis (Part A)**State Board of Emergency Medical Services**

Agency Name

Division

Winston Ford

Contact

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4765-15-04

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

EMT-basic scope of practice.**RULE SUMMARY**

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? **Yes**

2. Are you proposing this rule as a result of recent legislation? **Yes**

Bill Number: **HB128**General Assembly: **129**Sponsor: **Representatives
Carey and Peterson**

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **R.C. 4765.11, 4765.35**

5. Statute(s) the rule, as filed, amplifies or implements: **R.C. 4765.37**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

This rule is proposed by the EMS board in part, to implement changes to the EMT or EMT-basic scope of practice and in part, to implement statutory changes set forth by Sub. H.B. 128, 129th General Assembly which deems a reference to an EMT-basic as a reference to an emergency medical technician or EMT.

This rule is also proposed pursuant to a R.C. 119.032 five-year rule review which was scheduled for March 23, 2008. This rule was filed on March 13, 2008, in

accordance with its scheduled review and to reflect changes in the EMT-basic scope of practice; however, during the filing, EMS inadvertently neglected to make a proper FYR notation.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

This rule sets forth the emergency medical services that may be performed by an emergency medical technician and the conditions under which they may be performed. The EMS board in accordance with section 4765.37 of the Revised Code approved the addition of controlling of automatic transportation ventilators, Venturi, and partial rebreather masks to the emergency medical technician scope of practice, approved the addition of oxygen humidifier equipment application and monitoring only pursuant to written or verbal authorization of a physician. The rule rescinds the orotracheal intubation procedure from the emergency medical technician scope of practice effective January 1, 2013. Also, the reference to "EMT-basic" was changed to "emergency medical technician."

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so:

Not Applicable.

12. 119.032 Rule Review Date: **11/16/2011**

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

0

This rule is not expected to impact the agency's budget.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

N/A

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

The rule does not mandate an EMS organization to adopt any procedure or purchase the related equipment. The education committee of the EMS board determined that the anticipated cost to an EMS organization could range from zero to five thousand dollars depending on the size of the organization, the level of EMS service, and extent to which the organization chooses to adopt the additional EMS procedures. An EMS organization that chooses to adopt one or more new EMS

procedure could incur costs of direct labor, training materials and contractual services of the organization's medical director to revise the organization's written protocol.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **Yes**

You must complete Part B of the Rule Summary and Fiscal Analysis in order to comply with Am. Sub. S.B. 33 of the 120th General Assembly.

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

Rule Summary and Fiscal Analysis (Part B)

1. Does the Proposed rule have a fiscal effect on any of the following?

(a) School Districts	(b) Counties	(c) Townships	(d) Municipal Corporations
Yes	Yes	Yes	Yes

2. Please provide an estimate in dollars of the cost of compliance with the proposed rule for school districts, counties, townships, or municipal corporations. If you are unable to provide an estimate in dollars, please provide a written explanation of why it is not possible to provide such an estimate.

The education committee of the EMS board determined that the anticipated cost to an EMS organization could range from zero to five thousand dollars depending on the size of the organization, the level of EMS service and the extent to which the organization chose to adopt the additional EMS procedures. An EMS organization that chose to adopt one or more new EMS procedure could incur costs of direct labor, training materials and contractual services of the organization's medical director to revise the organization's written protocol.

3. If the proposed rule is the result of a federal requirement, does the proposed rule exceed the scope and intent of the federal requirement? **No**

4. If the proposed rule exceeds the minimum necessary federal requirement, please provide an estimate of, and justification for, the excess costs that exceed the cost of the federal requirement. In particular, please provide an estimate of the excess costs that exceed the cost of the federal requirement for (a) school districts, (b) counties, (c) townships, and (d) municipal corporations.

Not Applicable.

5. Please provide a comprehensive cost estimate for the proposed rule that includes the procedure and method used for calculating the cost of compliance. This comprehensive cost estimate should identify all of the major cost categories including, but not limited to, (a) personnel costs, (b) new equipment or other capital costs, (c) operating costs, and (d) any indirect central service costs.

The estimated cost of compliance was determined by averaging the expenditures anticipated by representatives from one full-time, paid, metropolitan fire

department, one full-time, paid, city fire department, two private ambulance agencies, two partial-paid volunteer agencies and one volunteer agency. The full-time fire departments and private ambulance agencies indicated that there would be little, if any, additional cost to comply with the rule because they employ EMS instructors. The volunteer agencies indicated they could need to pay an EMS instructor to teach the new skills.

(a) Personnel Costs

Instructor Salaries/Benefits \$0.00 - \$1000.00

Medical Director Contract Services \$0.00 - \$3500.00

(b) New Equipment or Other Capital Costs

Equipment \$0.00

(c) Operating Costs

Operating Costs \$0.00

(d) Any Indirect Central Service Costs

Indirect Services \$0.00 - \$200.00

(e) Other Costs

Printing/Supplies \$0.00 - \$300.00

6. Please provide a written explanation of the agency's and the local government's ability to pay for the new requirements imposed by the proposed rule.

Pursuant to 4765.07 of the Revised Code the state board of emergency medical services administers a grant program under which first priority is given to emergency medical service organizations to fund the training and equipping emergency medical service personnel. In addition, the State of Ohio EMS Board Regional Physicians Advisory Board Emergency Medical Services Guidelines and Procedures Manual is available on the Ohio EMS website and to assist in the development of local protocols.

7. Please provide a statement on the proposed rule's impact on economic development.

There are over 42,000 emergency medical services providers in Ohio that strive every day to deliver the highest standard of emergency medical service to their communities. According to BusinessWeek (9/9/2011) between 2005 and 2009 healthcare employment has outpaced manufacturing employment in Ohio by 21 percent. Of the 20 largest employers in Ohio, six are healthcare providers employing 131,600 workers. (Ohio Department of Development 2009).