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Initiative

Mike DeWine, Governor Jon Husted, Lt. Governor

Joseph Baker, Director

MEMORANDUM

TO: Joe Kirk, Ohio Department of Public Safety

FROM: Jacob Ritzenthaler, Business Advocate

DATE: April 6, 2023

RE: CSI Review – EMS Accreditation, Scope of Practice, and Continuing Education

> (OAC 4765-7-01 through 4765-7-13, 4765-12-01 through 4765-12-05, 4765-15-01, 4765-15-03, 4765-15-04, 4765-15-05, 4765-16-01 through 4765-16-06. 4765-17-01, 4765-17-02, 4765-17-03, 4765-17-04, 4765-19-01, 4765-19-02, 4765-19-03, and

4765-19-04)

On behalf of Lt. Governor Jon Husted, and pursuant to the authority granted to the Common Sense Initiative (CSI) Office under Ohio Revised Code (ORC) section 107.54, the CSI Office has reviewed the abovementioned administrative rule package and associated Business Impact Analysis (BIA). This memo represents the CSI Office's comments to the Department as provided for in ORC 107.54.

Analysis

This rule package consists of twenty-seven amended rules and nine no-change rules proposed by the Ohio Department of Public Safety's (DPS) Division of Emergency Medical Services (Division). This rule package was submitted to the CSI Office on February 2, 2023, and the public comment period was held open through February 24, 2023. Unless otherwise noted below, this recommendation reflects the version of the proposed rules filed with the CSI Office on February 2, 2023.

Ohio Administrative Code (OAC) Chapter 4765-7 establishes requirements for the accreditation of emergency medical services (EMS) training programs. OAC 4765-7-01 sets forth general provisions and requirements for merging certificates of accreditation and is amended to clarify rule references and requirements. OAC 4765-7-02 establishes the accreditation process for EMS training programs and includes amendments that require information submission through the Division's course

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management system and to update references and discrimination categories. OAC 4765-7-03 concerns the criteria for issuing provisional certificates and is proposed without changes. OAC 4765-7-04 and 4765-7-05 set forth requirements for accreditation application and offsite locations for training programs and include amendments that require the submission of a "Request for EMS Training Offsite" form and make updates to references. OAC 4765-7-06 establishes requirements for notifying the Division within ten days of a change in information, such as mailing address or personnel, and is amended to correct errors, clarify requirements, and unify requirements to similar rules for fire charters. OAC 4765-7-07 and 4765-7-08 set forth requirements for renewing and reinstating certificates of accreditation and approval and are amended to update the titles of referenced forms. OAC 4765-7-09 concerns the approval of EMS continuing education programs and is amended to clarify the differences between initial and renewal certificates of approval. OAC 4765-7-10 establishes the process of reinstating a revoked certificate and is proposed without changes. OAC 4765-7-11 and 4765-7-12 set forth requirements for continuing education courses, and online education and distance learning delivery systems. The rules are amended to update rule references. OAC 4765-7-13 concerns national accreditation of EMS training programs and is proposed without changes.

OAC Chapter 4765-12 establishes requirements for emergency medical responder certification. OAC 4765-12-01 lists general provisions, including criteria for waiving requirements for volunteer status. The rule is proposed without changes. OAC 4765-12-02 and 4765-12-03 set forth requirements for curriculum prior to September 1, 2012, and continuing education for emergency medical responders and are amended to update rule references. OAC 4765-12-04 establishes the scope of practice and is proposed without changes. OAC 4765-12-05 establishes the curriculum requirements and is amended to establish the difference between core competencies and discretionary competencies, which may be taught at the discretion of an EMS training program. OAC 4765-15-01, 4765-15-03, 4765-15-04, and 4765-15-05 establish requirements for emergency medical technician training programs, including curriculum, continuing education, and scope of practice. Amendments to these rules include removing pneumatic anti-shock garments and administration of activated charcoal from the scope of practice, establishing the difference between core competencies and discretionary competencies, and clarifying the required locations and hours for clinical experience.

OAC 4765-16-01 through 4765-16-06 set forth requirements for advanced emergency medical technicians/EMT-I, including curriculum, continuing education, scope of practice, and special requirements for certificate renewal. The rules include amendments that establish the difference between core competencies and discretionary competencies and update referenced rules. OAC 4765-17-01 through 4765-17-04 establish curriculum, continuing education, and scope of practice requirements for paramedics. These rules include amendments that remove carotid massage from

the scope of practice and establish the difference between core competencies and discretionary competencies. OAC 4765-19-01 through 4765-19-04 set forth requirements for EMS providers, including continuing education examination alternatives, extensions, and exemptions. The rules include amendments that update referenced rules.

During early stakeholder outreach, proposed changes to the rules were discussed during meetings of the Scope of Practice Ad Hoc Committee of the Ohio State Board of Emergency Medical, Fire and Transportation Services (EMFTS Board). During that time, DPS made changes in response to feedback that clarified the distinction between core and discretionary competencies, as well as updates to the scopes of practice for EMS personnel. During the CSI public comment period, DPS received comments from ten stakeholders. Several stakeholders expressed concern regarding changes due to House Bill 509 of the 134th General Assembly. DPS assured these stakeholders that none of the amendments present in this rule package are the result of HB 509 and that any changes to rule language would be monitored in the future. Two stakeholders suggested including additional techniques within the scope of practice for EMS providers. DPS stated that the inclusion of new practices requires review by the Scope of Practice Ad Hoc Committee and that their suggestions will be submitted for future consideration.

The business community impacted by the rules includes approximately 1,580 EMS organizations, 41,312 EMS providers, 5,820 EMS instructors, 266 medical directors, eighty-nine EMS accredited institutions, and 571 approved EMS continuing education institutions. The adverse impacts created by the rules include the cost for providers and training programs to complete training that meets standards set by the EMFTS Board, fees for letters of review and accreditation, and submitting requests for exemption or extension of continuing education requirements. DPS states that the costs of tuition for licensees can range between \$300 and \$700 for emergency medical responders, \$500 and \$1,200 for emergency medical technicians, \$1,000 and \$2,000 for advanced emergency medical technicians, and \$4,000 and \$10,000 for paramedics. Fees for training institutions include a \$1,950 application fee to receive a letter of review, a \$1,700 fee for annual accreditation, a \$500 annual fee for each satellite training location, \$750 for a self-study report evaluation, and fees for site visits, which cost \$1,350 for the letter of review application and \$2,700 for a regular site visit. DPS states that these adverse impacts are necessary to comply with statutory requirements to establish the framework for industry scope of practice, accreditation, and training and continuing education.

Recommendations

Based on the information above, the CSI Office has no recommendations on this rule package.

Conclusion

The CSI Office concludes that DPS should proceed in filing the proposed rules with the Joint Committee on Agency Rule Review.