

# CSI - Ohio

The Common Sense Initiative

## Business Impact Analysis

**Agency Name:** [Ohio Department of Public Safety \(DPS\) - Division of Emergency Medical Services \(EMS\), State Board of Emergency Medical, Fire, and Transportation Services](#)

**Regulation/Package Title:** [4765-12 \(First Responder Certification\), 4765-15 \(EMT-Basics\), 4765-16 \(EMT-Intermediates\), 4765-17 \(Paramedics\)](#)

**Rule Number(s):** [OAC Rules](#)

[4765-12-01, 44765-12-02, 765-12-03, 4765-12-04, 4765-12-05;](#)

[4765-15-01, 4765-15-03, 4765-15-04, 4765-15-05;](#)

[4765-16-01, 4765-16-02, 4765-16-03, 4765-16-04, 4765-16-05, 4765-16-06;](#)

[4765-17-01, 4765-17-02, 4765-1703, 4765-17-04](#)

**Date:** [December 1, 2017](#)

**Rule Type:**

New

☒ 5-Year Review

☒ Amended

Rescinded

☒ No Change

The Common Sense Initiative was established by Executive Order 2011-01K and placed within the Office of the Lieutenant Governor. Under the CSI Initiative, agencies should balance the critical objectives of all regulations with the costs of compliance by the regulated parties. Agencies should promote transparency, consistency, predictability, and flexibility in regulatory activities. Agencies should prioritize compliance over punishment, and to that end, should utilize plain language in the development of regulations.

**Regulatory Intent**

1. Please briefly describe the draft regulation in plain language.  
*Please include the key provisions of the regulation as well as any proposed amendments.*

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Chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the Administrative Code (OAC) set forth the curriculum standards, continuing education requirements, and scopes of practice established by the EMFTS board for the emergency medical responder (EMR), emergency medical technician (EMT), advanced emergency medical technician (AEMT), or paramedic certificate to practice.

Chapter 4765-12 of the OAC sets forth the conditions under which the board will renew an EMR certificate to practice and the emergency medical services that may be performed by an EMR, the conditions under which they may be performed, and curriculum standards to be met by an EMR training program and an EMR refresher training program.

Chapter 4765-15 of the OAC sets forth the conditions under which the board will renew an EMT certificate to practice, the emergency medical services that may be performed by an EMT, and the conditions under which they may be performed.

Chapter 4765-16 of the OAC sets forth the conditions under which the EMS board will renew an AEMT certificate to practice, the emergency medical services that may be performed by an AEMT, and the conditions under which they may be performed.

Chapter 4765-17 of the OAC sets forth the conditions under which the EMS board will renew a paramedic certificate to practice, the emergency medical services that may be performed by a paramedic, and the conditions under which they may be performed.

A summary of each of the five rules included in OAC Chapter 4765-12 is:

<b>4765-12-01</b>	<b>Amend</b>	<b>General provisions.</b>
Rule 4765-12-01 sets forth the criteria that must be demonstrated by an applicant requesting the Board to waive the requirement that an emergency medical responder must be a volunteer for a nonprofit emergency medical services (EMS) organization or non-profit fire department.		
<b>4765-12-02</b>	<b>Amend</b>	<b>Emergency medical responder curriculum prior to September 1, 2012.</b>
Rule 4765-12-02 sets forth the curriculum standards to be met by an emergency medical responder training program and refresher programs that began prior to September 1, 2012. This rule refers readers to the incorporated by reference rule.		
<b>4765-12-03</b>	<b>Amend</b>	<b>Emergency medical responder continuing education.</b>
Rule 4765-12-03 sets forth the continuing education requirements necessary to renew a certificate to practice as an emergency medical responder. This rule refers readers to the incorporated by reference rule.		
<b>4765-12-04</b>	<b>Amend</b>	<b>Emergency medical responder scope of practice.</b>
Rule 4765-12-04 sets forth the emergency medical services that may be performed by an emergency medical responder and the conditions under which the services may be performed.		
<b>4765-12-05</b>	<b>Amend</b>	<b>Emergency medical responder curriculum.</b>
Rule 4765-12-05 sets forth the curriculum standards to be met by an emergency medical responder training program. This rule refers readers to the incorporated by reference rule.		

The five rules are proposed to be amended.

- Rule OAC 4765-12-01 is amended to make the first paragraph an intro paragraph and eliminate a paragraph (A) with no paragraph (B).

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- Rules OAC 4765-12-02 and 4765-12-03, are amended to update the titles of referenced materials.
- Rule OAC 4765-12-05 is amended to delete text that was duplicated by mistake.
- Rule OAC 4765-12-05 is amended to correct the formatting (capitalization) in paragraph (D).
- Rule OAC 4765-12-04 and 4765-12-05 are amended to add approved additional services to the EMR scope of practice as set forth in section 4765.35 of the ORC and rule 4765-6-01 of the OAC and to update education curriculum requirements of the EMR.

**A summary of each of the four rules included in OAC Chapter 4765-15 is:**

<b>4765-15-01</b>	<b>Amend</b>	<b>Emergency medical technician curriculum prior to September 1, 2012.</b>
Rule 4765-15-01 sets forth the Emergency Medical Technician (EMT) curriculum prior to September 1, 2012, which was conducted in accordance with a USDOT standard and a refresher curriculum developed by the Division of EMS. The rule sets forth guidelines for evaluation of student performance and achievement. This rule refers readers to the incorporated by reference rule.		
<b>4765-15-03</b>	<b>Amend</b>	<b>Emergency medical technician continuing education.</b>
Rule 4765-15-03 sets forth the continuing education (CE) standards for EMTs, including the number of hours required in the areas of pediatric, geriatric, and trauma issues; refresher program requirements; the use of national registry registration and trauma triage training for complying with CE requirements; examination requirements; and the renewal application. This rule refers readers to the incorporated by reference rule.		
<b>4765-15-04</b>	<b>Amend</b>	<b>Emergency medical technician scope of practice.</b>
Rule 4765-15-04 sets forth the scope of practice for EMTs. The rule states that a medical director for an emergency medical organization may limit the scope of practice for EMTs within the organization. The rule requires EMTs performing emergency medical services within the scope of practice to have received training as part of their initial certification course or through subsequent training approved by the EMFTS board, or in certain emergency medical services, after having received training approved by the local medical director.		
<b>4765-15-05</b>	<b>Amend</b>	<b>Emergency medical technician curriculum.</b>
Rule 4765-15-05 sets forth the Emergency Medical Technician (EMT) curriculum effective September 1, 2012, which is conducted in accordance with "National EMS Education Standards" approved by the National Highway Traffic Safety Administration (NHTSA), the "Ohio Approved EMS Curriculum Standards" approved by the EMFTS board, and the scope of practice set forth in OAC 4765-15-04. The rule sets forth guidelines for evaluation of student performance and achievement. This rule refers readers to the incorporated by reference rule.		

- Three of the rules, all but rule 4765-15-04, are proposed to be amended to update materials referenced in the rules and to add a comment referring readers to an incorporated by reference rule.
- Rules 4765-15-04 and 4765-15-05 are amended to correct punctuation.
- Rule OAC 4765-15-04 and 4765-15-05 are amended to add approved additional services to the EMT scope of practice as set forth in section 4765.37 of the ORC and rule 4765-6-01 of the OAC and to update education curriculum requirements of the EMT.

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**A summary of each of the six rules included in OAC Chapter 4765-16 is:**

<b>4765-16-01</b>	<b>Amend</b>	<b>Advanced emergency medical technician curriculum prior to September 1, 2012.</b>
Rule 4765-16-01 sets forth the advanced emergency medical technician (AEMT) curriculum prior to September 1, 2012, which was conducted in accordance with division (D) of section 4765.16 of the Revised Code and OAC rule 4765-16-01 and was based on objectives approved by the EMFTS board as set forth in the "Ohio EMT-Intermediate Curriculum and Transition Course. "The rule sets forth guidelines for evaluation of student performance and achievement. This rule refers readers to the incorporated by reference rule.		
<b>4765-16-02</b>	<b>Amend</b>	<b>Transitional EMT-intermediate update course.</b>
Rule 4765-16-02 sets forth the requirements to renew a certificate to practice as an EMT-I (AEMT) who is not certified as completing training in emergency pharmacology as outlined OAC rule 4765-16-01. The transition course described in the rule earns forty of the sixty required CE hours for an EMT-I (AEMT). The rule sets forth a three-year period that does not require completion of the transitional course for those EMT-Paramedics (Paramedics) who have dropped back to the EMT-I (AEMT) level. This rule refers readers to the incorporated by reference rule.		
<b>4765-16-03</b>	<b>Amend</b>	<b>Advanced emergency medical technician continuing education.</b>
Rule 4765-16-03 sets forth the continuing education (CE) standards for AEMTs (EMT-I)s, including the number of hours required in the areas of pediatric, geriatric, and trauma issues; refresher program requirements; the use of national registry registration and trauma triage training for complying with CE requirements; examination requirements; and the renewal application. This rule refers readers to the incorporated by reference rule.		
<b>4765-16-04</b>	<b>Amend</b>	<b>Advanced emergency medical technician scope of practice.</b>
Rule 4765-16-04 sets forth the scope of practice for AEMTs (EMT-I)s. The rule states that a medical director for an emergency medical organization may limit the scope of practice for AEMTs within the organization. The rule requires AEMTs performing emergency medical services within the scope of practice to have received training as part of their initial certification course or through subsequent training approved by the EMFTS board, or in certain emergency medical services, after having received training approved by the local medical director.		
<b>4765-16-05</b>	<b>No Change</b>	<b>EMT-intermediate special requirements.</b>
Rule 4765-16-05 sets forth special training requirements for renewal of an EMT-Intermediate (AEMT) certificate when the certificate holder has not completed the curriculum set forth in OAC rule 4765-16-01. The rule prevents an EMT-I (AEMT) from performing any services for which the EMT-I (AEMT) has not been trained.		
<b>4765-16-06</b>	<b>Amend</b>	<b>Advanced emergency medical technician curriculum.</b>
Rule 4765-16-06 sets forth the Advanced Emergency Medical Technician (AEMT) curriculum effective September 1, 2012, which is conducted in accordance with "National EMS Education Standards" approved by the National Highway Traffic Safety Administration (NHTSA), the "Ohio Approved EMS Curriculum Standards" approved by the EMFTS board, and the scope of practice set forth in OAC 4765-16-04. The rule sets forth guidelines for evaluation of student performance and achievement. This rule refers readers to the incorporated by reference rule.		

- Rule 4765-16-05 is proposed as a No Change rule.

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- Rules OAC 4765-16-01, 4765-16-02, 4765-16-03, and 4765-16-06 are proposed to be amended to update materials referenced in the rules and to add a comment referring readers to an incorporated by reference rule.
- Rules 4765-16-04 and 4765-16-06 are amended to add approved additional services to the AEMT scope of practice as set forth in section 4765.38 of the ORC and rule 4765-6-01 of the OAC and to update education curriculum requirements of the AEMT.

**A summary of each of the four rules included in OAC Chapter 4765-17 is:**

<b>4765-17-01</b>	<b>Amend</b>	<b>Paramedic curriculum prior to September 1, 2012.</b>
Rule 4765-17-01 sets forth the paramedic curriculum prior to September 1, 2012, which was conducted in accordance with division (E) of section 4765.16 of the Revised Code and the U.S. Department of Transportation (USDOT) "1998 Emergency Medical Technician Paramedic: National Standard Curriculum." The paramedic refresher course was consistent with the "Ohio EMT-Paramedic Refresher Curriculum" objectives approved by the EMFTS Board. The rule sets forth guidelines for evaluation of student performance and achievement. This rule refers readers to the incorporated by reference rule.		
<b>4765-17-02</b>	<b>Amend</b>	<b>Paramedic continuing education.</b>
Rule 4765-17-02 sets forth the continuing education (CE) standards for paramedics, including the number of hours required in the areas of pediatric, geriatric, and trauma issues; refresher program requirements; the use of national registry registration and trauma triage training for complying with CE requirements; examination requirements; and the renewal application. This rule refers readers to the incorporated by reference rule.		
<b>4765-17-03</b>	<b>Amend</b>	<b>Paramedic scope of practice.</b>
Rule 4765-17-03 the scope of practice for paramedics. The rule states that a medical director for an emergency medical organization may limit the scope of practice for paramedics within the organization. The rule requires paramedics performing emergency medical services within the scope of practice to have received training as part of their initial certification course or through subsequent training approved by the EMFTS board, or in certain emergency medical services, after having received training approved by the local medical director.		
<b>4765-17-04</b>	<b>Amend</b>	<b>Paramedic curriculum.</b>
Rule 4765-17-04 sets forth the paramedic curriculum effective September 1, 2012, which is conducted in accordance with "National EMS Education Standards" approved by the National Highway Traffic Safety Administration (NHTSA), the "Ohio Approved EMS Curriculum Standards" approved by the EMFTS board, and the scope of practice set forth in OAC 4765-17-03. The rule sets forth guidelines for evaluation of student performance and achievement and the paramedic refresher program. This rule refers readers to the incorporated by reference rule.		

- Rules OAC 4765-17-01, 4765-17-02, and 4765-17-04 are proposed to be amended to update materials referenced in the rules and to add a comment referring readers to an incorporated by reference rule.
- Rule 4765-17-01 (A) includes a grammar correction, changing the word "an" to "a."
- Rules 4765-17-03 and 4765-17-04 are amended to add approved additional services to the paramedic scope of practice as set forth in section 4765.39 of the ORC and rule 4765-6-01 of the OAC and to update education curriculum requirements of the paramedic.

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2. **Please list the Ohio statute authorizing the Agency to adopt this regulation.**

RC 4765.11, 4765.35, 4765.37, 4765.38, 4765.39

3. **Does the regulation implement a federal requirement? Is the proposed regulation being adopted or amended to enable the state to obtain or maintain approval to administer and enforce a federal law or to participate in a federal program?**

*If yes, please briefly explain the source and substance of the federal requirement.*

The regulations do not implement federal requirements, nor are they being adopted to participate in a federal program.

4. **If the regulation includes provisions not specifically required by the federal government, please explain the rationale for exceeding the federal requirement.**

Not applicable.

5. **What is the public purpose for this regulation (i.e., why does the Agency feel that there needs to be any regulation in this area at all)?**

Pursuant to section 4765.11 of the Revised Code, the EMS board is directed to adopt rules that establish the standards for the performance of emergency medical services by EMS providers. The EMS board is directed to adopt rules that establish the EMS curricula and the hours and materials used in adult and pediatric continuing education programs and courses.

Pursuant to section 4765.11 of the Revised Code, the EMS board is directed to adopt procedures for approving additional emergency medical services the providers are authorized to perform under sections 4765.35, 4765.37, 4765.38, 4765.39 of the Revised Code. As set forth in rule 4765-6-01 of the OAC, additional services are posted on the EMS scope of practice matrix upon approval by the EMFTS Board and added to the respective EMS provider rules pertaining to scope of practice.

6. **How will the Agency measure the success of this regulation in terms of outputs and/or outcomes?**

Success of the regulation will be measured by the increase in pass rates of Ohio candidates who attempt the National Registry certification examination. In addition, success of the regulation will be measured utilizing data collected in the Emergency Medical Services Reporting System (EMSIRS). EMSIRS can be analyzed to determine the duration of EMS responses and transports, the emergency medical services performed by EMS providers, the frequency in which EMS providers perform the services, the success of emergency medical services performed, and the impact on patient care. The number of students attempting the examination, pass rates for the exams, and the various EMSIRS reports are reviewed annually to measure the success of this regulation.

### **Development of the Regulation**

7. **Please list the stakeholders included by the Agency in the development or initial review of the draft regulation.**

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***If applicable, please include the date and medium by which the stakeholders were initially contacted.***

These rules were reviewed by the Education Committee and the Medical Oversight Committee of the EMFTS Board as an agenda item during their bi-monthly meetings, as well as the education coordinators and other staff of the Ohio Division of EMS (DEMS) and legal staff of the Ohio Department of Public Safety (ODPS). Committee members represent various roles of the emergency medical profession including the State medical director, emergency medicine physicians, trauma surgeons, registered nurses, EMS providers, EMS instructors, and program coordinators representing EMS training organizations and fire service organizations.

Members of the State Board of EMFTS received copies of OAC chapters 4765-12, OAC 4765-15, 4765-16, and 4765-17 recommended amendments and proposed filing schedules as part of the board packets in advance of the August 16 and October 18, 2017 board meetings. The EMFTS Board received an Education Committee report at its June 21, 2017 and October 18, 2017 board meetings and MOC reports at its August 16 and October 18, 2017 board meetings.

The Ohio State Board of Emergency Medical, Fire, and Transportation Services is a twenty-one member board. The director of the Department of Public Safety designates a member of the Department of Public Safety as a member of the Board. Twenty members who each have “background or experience in emergency medical services or trauma care” are appointed by the Governor with the advice and consent of the Ohio Senate. The Governor attempts “to include members representing urban and rural areas, various geographical regions of the state, and various schools of training” in making appointments to the Ohio State Board of EMFTS. The appointees to the board represent Ohio’s fire and emergency medical services, private medical transportation services, mobile intensive care providers, air medical providers, trauma programs, hospitals, emergency physicians, EMS training institutions and ODPS.

In September 2017, OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 rule numbers and tag lines were posted at the EMS Small Business Regulatory Impact Web site ( [http://www.publicsafety.ohio.gov/ems\\_rules.stm](http://www.publicsafety.ohio.gov/ems_rules.stm) ) under the heading “Rules Scheduled for Review.”

When the rules are filed with CSI, govdelivery.com will be used to notify approximately 545 EMS instructors, 705 EMS agencies, and 163 “EMS for Children” subscribers about the OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 filing and stakeholder comment period. Notification about the filing and comment period for OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 will also be placed on the EMS.Ohio.gov website.

**8. What input was provided by the stakeholders, and how did that input affect the draft regulation being proposed by the Agency?**

Staff of the Ohio Division of EMS proposed changes related to punctuation, materials incorporated by reference, and formatting of OAC rules 4765-12, 4765-15, 4765-16, and 4765-17. The staff also proposed changes related to the scopes of practice in rules OAC 4765-12-04, 4765-15-04, 4765-16-04, and 4765-17-03 to implement changes approved by the EMFTS Board. The scopes of practice are relevant to current state and national standards and the proposed revisions will bring align the rules with the EMS scope of practice matrix published at the EMS Website at [http://www.publicsafety.ohio.gov/links/ems\\_scope\\_practice.pdf](http://www.publicsafety.ohio.gov/links/ems_scope_practice.pdf).

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Amendments were also proposed to OAC rules 4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04 to update the education curriculum to meet current national standards. Members of the Education Committee and MOC of the State Board of Emergency Medical, Fire, and Transportation Services (EMFTS) reviewed the proposed amendments at their October 17, 2017 meetings. Members of the Education Committee agreed to recommend the draft rules to the EMFTS Board for submission to the Common Sense Initiative (CSI) office. The EMFTS Board approved filing OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 rules and BIA with the CSI office at its October 18, 2017 meeting.

**9. What scientific data was used to develop the rule or the measurable outcomes of the rule? How does this data support the regulation being proposed?**

Changes to EMS curriculum and scope of practice are based on evidence based research. The research studies and results are acquired from national EMS organizations, national publications, and research funded through Division of EMS grants, thus representing the best practices.

**10. What alternative regulations (or specific provisions within the regulation) did the Agency consider, and why did it determine that these alternatives were not appropriate? If none, why didn't the Agency consider regulatory alternatives?**

No alternative regulations could be considered. Pursuant to section 4765.11 of the Revised Code, the EMS board is directed to adopt rules that establish the EMS curricula, continuing education institutions, standards for the performance of emergency medical services, and the procedures for approving the additional emergency medical services authorized by sections 4765.35, 4765.37, 4765.38, 4765.39 of the RC. The regulations align with the National Highway Traffic Safety Administration's (NHTSA's) systems approach for national EMS education standards, scope of practice models, accreditation, and standard testing, and the EMFTS board's strategic plan to ensure the EMS system has stable workforce of essential trained and certified EMS providers.

**11. Did the Agency specifically consider a performance-based regulation? Please explain. *Performance-based regulations define the required outcome, but don't dictate the process the regulated stakeholders must use to achieve compliance.***

The curricula set forth in OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the OAC are competency-based education standards. Pursuant to section 4765.16 of the RC, accredited EMS training organizations and approved continuing education institutions may develop their own training courses under the direction of a physician who specializes in emergency medicine. The continuing education requirements set forth in OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the OAC offer four options to complete the certificate of accreditation renewal requirements.

Pursuant to section 4765.11 of the Revised Code the EMFTS board must determine the emergency medical services that may be performed by an EMS provider and the conditions under which they may be performed by an EMS provider. In accordance with OAC rules 4765-12-04, 4765-15-04, 4765-16-04, and 4765-17-03, the medical director for any EMS organization may limit, but not exceed, the scope of practice for those EMS providers providing emergency medical services under the auspice of the medical director. The medical director is

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responsible for ensuring that the EMS providers meet the performance standards established by the medical director.

**12. What measures did the Agency take to ensure that this regulation does not duplicate an existing Ohio regulation?**

The Division of Emergency Medical Services is the only authority for EMS training, instruction and certification; therefore, a review of Chapter 4765. of the RC and agency 4765 of the OAC was completed.

**13. Please describe the Agency's plan for implementation of the regulation, including any measures to ensure that the regulation is applied consistently and predictably for the regulated community.**

Using the Division's Web site [EMS.ohio.gov](http://ems.ohio.gov) and the [gov.delivery.com](http://gov.delivery.com) user groups, the division will provide stakeholders with final rules, rule summaries, and changes to OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the OAC. The approved Ohio EMS scope of practice and curriculum will be published at the EMS web site using the following link: <http://ems.ohio.gov>. The Division of EMS staff will notify the EMS accredited training center and continuing education program directors about the approved Ohio EMS curriculum and rule revision via email and through program director directives published on the [EMS.ohio.gov/program director portal](http://EMS.ohio.gov/program-director-portal). Division of EMS staff will receive email notification of the rule changes and attend section briefings regarding implementation policy and procedures.

The Division of EMS posts information about the rule review process, including those rules scheduled for review, drafts open for public comment, proposed rules and public hearing notices, and recently adopted rules, at its *Small Business Regulatory Impact* Web site ( [http://www.publicsafety.ohio.gov/ems\\_rules.stm](http://www.publicsafety.ohio.gov/ems_rules.stm) ). The laws and rules associated with emergency medical services are provided as links at the "*Laws and Rules Overview*" site ( <http://www.ems.ohio.gov/laws.aspx> ), and the amended rules, when they effective, will be available through that link. The Division of EMS will use the EMS [gov.delivery.com](http://gov.delivery.com) system, which includes EMS instructors, EMS agencies, and "EMS for Children" lists, to distribute the final rules to stakeholders when they become effective. Division of EMS staff will receive email notification of the rule changes and attend section briefings regarding the implementation policy and procedures. During its meetings, the EMFTS Board receives regular updates about EMS rules. In addition, notification of the rule changes to Division staff will be delivered internally through staff meetings, and cross-training of staff on co-workers' job responsibilities that will increase the overall knowledge and efficiency of the Division.

**Adverse Impact to Business**

**14. Provide a summary of the estimated cost of compliance with the rule. Specifically, please do the following:**

**a. Identify the scope of the impacted business community;**

The scope of the impacted business community fluctuates but includes approximately:

- 1,330 EMS organizations;
- 41,500 EMS providers;
- 89 EMS accredited institutions, which include 38 paramedic training programs; and

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- 551 approved EMS continuing education institutions.

SOURCE: Division of Emergency Medical Services

**b. Identify the nature of the adverse impact (e.g., license fees, fines, employer time for compliance); and**

The Division of EMS staff determined that the changes to chapters 4765-12, 4765-15, 4765-16, and 4765-17 will enhance patient care with minimal costs of compliance to the provider. Cost increases to the EMS accredited institutions and continuing education sites may include new equipment and resources and additional instructor hours to meet curriculum standards.

**c. Quantify the expected adverse impact from the regulation.**

*The adverse impact can be quantified in terms of dollars, hours to comply, or other factors; and may be estimated for the entire regulated population or for a “representative business.” Please include the source for your information/estimated impact.*

The nature of the adverse impact which may result from changes to OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 would be the expense of providing or obtaining training that meets the medical standard of care established by the EMFTS Board. The costs of compliance for the EMS training institutions will vary depending on the level of EMS training and the number of training hours required for each level of certification provided. The costs of compliance to the EMS student will also vary depending on the level of EMS certification and number of training hours required.

Tuition costs range from:

- \$300 - \$700 for EMR Training,
- \$500-\$1200 for EMT training,
- \$1000-\$2000 for AEMT training, and
- \$4000-\$10,000 for paramedic training.

These regulations do not require an institution to provide specific levels of EMS training programs, only those that the institution has voluntarily applied to provide. Costs vary depending on the levels of training provided, typical class size, instructor salaries, supplies, equipment, and affiliations as the institution deems appropriate. The institutions have the sole ability to dictate the tuition costs of their programs based on budgetary needs.

The variance in costs for continuing education may also be dependent upon whether or not an individual’s department provides in-service training and the extent to which the scope of practice is adopted into local protocol by the responder’s EMS organization and medical director. EMS organizations and their medical directors determine the level of emergency medical services that responders perform.

Source: The information was updated in 2017 by DEMS staff following review of a sample of initial and renewal applications submitted by accredited institutions during the period of 01/01/2017 to 08/01/2017.

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**15. Why did the Agency determine that the regulatory intent justifies the adverse impact to the regulated business community?**

Pursuant to sections 4765.11, 4765.16, 4765.37, 4765.38, and 4765.39 of the Revised Code, the EMS Board is statutorily required to promulgate rules in regard to establishing the curricula, procedures, and standards for the performance of EMS providers, training institutions, and instructors. EMS providers respond to medical and traumatic emergencies in the pre-hospital setting and function without direct oversight. It is critical that the EMS workforce maintain an acceptable knowledge and skill level to provide quality care before and during transport to a medical facility. EMS agencies utilizing EMS providers depend upon the EMFTS Board and the Division of EMS to ensure individuals issued a certificate to practice have met a recognized standard. The Division of EMS' intent to ensure high standards in a provider's professional conduct, delivery of emergency medical services, and patient care justifies the minimal adverse impact to the business community.

Additionally, EMS agencies can apply to the EMFTS Board each year for grant money to offset the cost of continuing education renewal requirements for their personnel. EMS agencies can also apply for a certificate of approval to offer continuing education in-house, at no cost, to ensure their providers obtain sufficient training and CE to meet the requirements to renew.

**Regulatory Flexibility**

**16. Does the regulation provide any exemptions or alternative means of compliance for small businesses? Please explain.**

In order to assure safe, effective, and efficient delivery of emergency medical services, no alternatives can be considered for curriculum and training standards. The rules do not mandate an EMS organization to operate a training program, adopt any procedure, or purchase any equipment. In addition, an EMS organization issued a certificate of accreditation is not required to operate all levels of EMS training. Each EMS organization, with the approval of its medical director, determines the extent to which the provider scope of practice is adopted into local protocol and, therefore, the equipment and training required.

**17. How will the agency apply Ohio Revised Code section 119.14 (waiver of fines and penalties for paperwork violations and first-time offenders) into implementation of the regulation?**

OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 in and of themselves do not impose any penalties or sanctions. However, as set forth in provisions in RC sections 4765.33 and 4765.50, the EMFTS Board may impose administrative sanctions up to and including revocation of a certificate of accreditation, certificate of approval, certificate of practice, or certificate to teach for violations of Chapter 4765. of the RC or any rule adopted under it.

If disciplinary action is considered, each case is submitted first to the EMFTS Board's Assistant Attorney General to ensure compliance with RC section 119. The EMFTS Board reviews each situation on a case-by-case basis and may consider all information relevant to the requirements of OAC agency 4765 and RC Chapter 4765.

**18. What resources are available to assist small businesses with compliance of the regulation?**

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Starting 90 days prior to the expiration date of a certificate to practice, each certificate holder is mailed a notification of the need to renew and referred to information about continuing education requirements and forms to request extensions or exemptions. Certificate holders also are sent weekly reminders, via their provided email address, beginning at the same time as the mail notification. A certificate holder has the option of providing a secondary email address, generally their EMS employer, to also receive the email notifications.

The EMFTS Board administers grant awards set forth in RC section 4765.07, and as defined in RC section 4513.263. First priority awards are available to EMS organizations for the training of personnel, the purchase of equipment, and to improve accessibility and quality of emergency medical services in this state. The Division of EMS website includes a grants Web page that summarizes distribution details and provides grant applications. The EMS “Grant Program” Web page can be found using the following link: <http://www.ems.ohio.gov/grants.aspx>.

In addition, the Medical Oversight Committee of the EMFTS Board have developed training courses, approved by the State Medical Director, available at no charge. These courses, as well as several others, can be found at the EMS “Training & Education” Website at <http://www.ems.ohio.gov/education.aspx>.

The EMS Web page includes links to the laws and rules associated with emergency medical services, along with an overview section about accredited and approved continuing education institutions, certifications, medical, direction, scope to practice, and training and education. The *Agency Directory* at the EMS Web site (<http://www.ems.ohio.gov/about-directory.aspx>) includes the email addresses, telephone numbers, including a toll free number (1-800-233-0875), and the names of EMS staff.

Division of EMS staff members attend and present information at various conferences, seminars, and symposiums throughout the State of Ohio, such as the annual International Trauma Life Support (ITLS) Emergency Care Conference, the Ohio Association of Emergency Medical Services (OAEMS) Summer Conference, Ohio Fire and EMS Expo, Ohio EMS Grant Hospital/Ohio Health Conference, Ohio Ambulance Association Conference, Ohio State Fire Instructors Society, and the Ohio State Fair.