



## Common Sense Initiative

**Mike DeWine**, Governor  
**Jon Husted**, Lt. Governor

**Joseph Baker**, Director

### Business Impact Analysis

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

**Rule Contact Name and Contact Information:** [Joseph Kirk, jakirk@dps.ohio.gov, 614-466-5605](#)

**Regulation/Package Title (a general description of the rules' substantive content):**  
[ORC 4765-7, 4765-12, 4765-15, 4765-16, 4765-17, and 4765-19 \(EMS Accreditation, Scope of Practice, and Continuing Education\)](#)

**Rule Number(s):**

- 4765-7-01, 4765-7-02, 4765-7-03, 4765-7-04, 4765-7-05, 4765-7-06, 4765-7-07, 4765-7-08, 4765-7-09, 4765-7-10, 4765-7-11, 4765-7-12, 4765-7-13;
- 4765-12-01, 4765-12-02, 4765-12-03, 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, 4765-17-03, 4765-17-04; and
- 4765-19-01, 4765-19-02, 4765-19-03, 4765-19-04

**Date of Submission for CSI Review:** [02/01/2023](#)

**Public Comment Period End Date:** [02/24/2023](#)

**Rule Type/Number of Rules:**

New/ 0 rules

No Change/ 9 rules (FYR? [Yes](#))

Amended/ 27 rules (FYR? [Yes](#))

Rescinded/ 0 rules (FYR? [Yes](#))

The Common Sense Initiative is established in R.C. 107.61 to eliminate excessive and duplicative rules and regulations that stand in the way of job creation. Under the Common Sense Initiative, agencies must balance the critical objectives of regulations that have an adverse impact on business with the costs of compliance by the regulated parties. Agencies should promote transparency, responsiveness, predictability, and flexibility while developing regulations that are fair and easy to follow. Agencies should prioritize compliance over punishment, and to that end, should utilize plain language in the development of regulations.

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### **Reason for Submission**

1. **R.C. 106.03 and 106.031 require agencies, when reviewing a rule, to determine whether the rule has an adverse impact on businesses as defined by R.C. 107.52. If the agency determines that it does, it must complete a business impact analysis and submit the rule for CSI review.**

**Which adverse impact(s) to businesses has the agency determined the rule(s) create?**

**The rule(s):**

- a. ☒ **Requires a license, permit, or any other prior authorization to engage in or operate a line of business.**
- b. ☐ **Imposes a criminal penalty, a civil penalty, or another sanction, or creates a cause of action for failure to comply with its terms.**
- c. ☒ **Requires specific expenditures or the report of information as a condition of compliance.**
- d. ☐ **Is likely to directly reduce the revenue or increase the expenses of the lines of business to which it will apply or applies.**

### **Regulatory Intent**

2. **Please briefly describe the draft regulation in plain language.**

***Please include the key provisions of the regulation as well as any proposed amendments.***

Chapter 4765-7 of the Ohio Administrative Code (OAC) sets forth the conditions under which the State Board of Emergency Medical, Fire, and Transportation Services (EMFTS Board or Board) may approve, renew, reinstate, or deny an application for a certificate of accreditation or a certificate of approval to operate EMS training programs. In addition, this chapter sets forth the levels of EMS training authorized by the EMFTS Board and the conditions under which accredited institutions and approved continuing education (CE) institutions may offer emergency medical services (EMS) training using online education and/or distance learning systems.

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 4765-19 of the OAC is authorized by sections 4765.11 and 4765.16 of the Ohio Revised Code (RC). This chapter sets forth the following:

- The conditions under which the EMFTS Board will accept continuing education (CE) training as meeting the requirements to renew an EMS provider certificate to practice EMR, EMT, AEMT, or paramedic.
- The criteria to complete an examination in lieu of continuing education as an option to meet the requirements to renew a certificate to practice.

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- The criteria to obtain an extension beyond the expiration date of a certificate to practice to complete continuing education required for renewal of the certificate.
- The criteria to obtain an exemption from the continuing education requirement for renewal of a certificate to practice.

A summary of each of the rules and its proposed amendments is provided below:

<b>4765-7-01</b>	AMEND	<b><i>Merging of certificates of accreditation and general provisions.</i></b>
Rule 4765-7-01 sets forth general provisions for institutions holding a certificate of accreditation issued by the EMFTS Board to operate emergency medical services training programs. The rule lists the training programs that may be authorized by the EMFTS Board and the qualifications for a valid certificate of accreditation. The rule provides information about the application submitted to obtain a certificate of accreditation and refers readers to the incorporated by reference rule.		
Rule 4765-7-01 is amended to simplify the comment related to the incorporated by reference rule and revise the title of a form. The word “may,” previously omitted, is added in paragraph (D)		
<b>4765-7-02</b>	AMEND	<b><i>Accreditation of Ohio EMS training programs.</i></b>
Rule 4765-7-02 sets forth the provisions for issuing a certificate of accreditation and includes information about the application to be submitted. The rule sets forth requirements for Commission on Accreditation of Allied Health Education Programs (CAAHEP) accreditation for Ohio accredited institutions seeking to provide paramedic training programs. The rule refers readers to the incorporated by reference rule.		
Rule 4765-7-02 is amended to simplify the comment related to the incorporated by reference rule, revise the title of a form, update the categories of discrimination prohibited as a basis for accepting students, correct the spelling of “prehospital,” and add “deadlines” for obtaining a certificate to practice” as information a training program must provide to a student. The rule also amends paragraph (D)(4) to replace submitting a report with entering required data into the Division of EMS course management system.		
<b>4765-7-03</b>	NO CHANGE	<b><i>Provisional certificates.</i></b>
Rule 4765-7-03 sets forth the criteria for issuance of a provisional certificate of accreditation or certificate of approval for previously certified institutions seeking renewal. Criteria include substantial compliance with RC and OAC standards of record keeping and passage rates. The rule sets forth time frames for applying, for issuing, and for the expiration of provisional certificates, which are not renewable but may be extended by the EMFTS Board.		
<b>4765-7-04</b>	AMEND	<b><i>Application for accreditation.</i></b>
Rule 4765-7-04 sets forth the application standards for a certificate of accreditation. The rule refers readers to the incorporated by reference rule.		
Rule 4765-7-04 is amended to simplify the comment related to the incorporated by reference rule and revise the title of a form.		
<b>4765-7-05</b>	AMEND	<b><i>Offsite locations.</i></b>
Rule 4765-7-05 sets forth the provisions required of an EMS accredited institution or EMS approved institution offering courses at locations other than those submitted in applications.		
Rule 4765-7-05 is amended to add the comment related to the incorporated by reference rule and add paragraph (A)(3) regarding the “Request for EMS Offsite Training Offsite Location” form.		
<b>4765-7-06</b>	AMEND	<b><i>Notification to the board.</i></b>
Rule 4765-7-06 requires an EMS accredited institution or EMS approved institution to provide to the Division of EMS within ten days written notification of a change of mailing address or physical location and name or contact information of the authorizing official, program director, or program medical director. In addition, the institutions must notify the EMFTS Board in writing of an increase in the number of hours included in an EMS training program.		
Rule 4765-7-06 is amended to correct spelling errors, simplify the language, and make the rule more similar to rule 4765-24-06 ( <i>Notification to the executive director.</i> ), which applies to fire charters.		

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<b>4765-7-07</b>	AMEND	<b><i>Renewal of a certificate of accreditation.</i></b>
Rule 4765-7-07 sets forth the provisions for renewing a certificate of accreditation. The Division of EMS is required to notify each holder of a certificate of accreditation no later than ninety days prior to its expiration of the expiration date, mechanism for renewal, and due date for receipt of application. The rule sets a schedule for the EMFTS Board to review the passing percentages set forth in the rule. The rule refers readers to the incorporated by reference rule.		
Rule 4765-7-07 is amended to simplify the comment related to the incorporated by reference rule and revise the title of a form.		
<b>4765-7-08</b>	AMEND	<b><i>Reinstatement of a certificate of accreditation or approval, or provisional certificate of accreditation or approval.</i></b>
Rule 4765-7-08 sets forth the provisions for reinstatement of a certificate of accreditation or approval or provisional certificate of accreditation or approval. Applicants whose certificate expires within the time period for reinstatement are not eligible for a new certificate. The rule refers readers to the incorporated by reference rule.		
Rule 4765-7-08 is amended to simplify the comment related to the incorporated by reference rule and revise the title of a form.		
<b>4765-7-09</b>	AMEND	<b><i>Approval of Ohio EMS continuing education programs.</i></b>
Rule 4765-7-09 sets forth sets forth the requirements for EMFTS Board approval of an EMS CE program offered by an EMS approved institution. Certificates of approval are valid for up to five years. EMS approved institutions are required to maintain documentation as set forth in the rule. The rule refers readers to the incorporated by reference rule.		
Rule 4765-7-09 is amended to simplify the comment related to the incorporated by reference rule, revise the title of a form, and update the categories of discrimination prohibited as a basis for accepting students. In addition, paragraphs (E) and (F) are amended and paragraph (G) is added to distinguish between "initial" and "renewal" certificates of approval.		
<b>4765-7-10</b>	NO CHANGE	<b><i>Reinstatement of revoked certificate of accreditation or approval, or provisional certificate of accreditation or approval.</i></b>
Rule 4765-7-10 sets forth the restrictions for EMFTS Board approval of revoked certificates of accreditation or approval, or provisional certificates of accreditation or approval.		
<b>4765-7-11</b>	AMEND	<b><i>Continuing education course requirements for Ohio EMS accredited and approved institutions.</i></b>
Rule 4765-7-11 sets forth the requirements for CE courses offered by EMS accredited and approved institutions, including record keeping requirements.		
Rule 4765-7-11 is amended to update references to other rules in paragraph (K).		
<b>4765-7-12</b>	AMEND	<b><i>Online education and distance learning delivery systems for EMS training programs offered through an accredited institution.</i></b>
Rule 4765-7-12 sets forth the provisions for EMFTS Board approval of online and distance learning offered by EMS accredited and approved institutions.		
Rule 4765-7-12 is amended to update references to other rules in paragraphs (A)(10)(d) and (D).		
<b>4765-7-13</b>	NO CHANGE	<b><i>National accreditation of paramedic programs.</i></b>
Rule 4765-7-13 sets forth the qualifications, to become effective on January 1, 2018, for institutions offering an EMS training program at the paramedic level.		

<b>4765-12-01</b>	NO CHANGE	<b><i>General provisions.</i></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>	AMEND	<b><i>Emergency medical responder curriculum prior to September 1, 2012.</i></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.		
Rule 4765-12-02 is amended to simplify the comment related to the incorporated by reference rule.		

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<b>4765-12-03</b>	AMEND	<b><i>Emergency medical responder continuing education.</i></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.		
Rule 4765-12-03 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-12-04</b>	NO CHANGE	<b><i>Emergency medical responder scope of practice.</i></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>	AMEND	<b><i>Emergency medical responder curriculum.</i></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.		
Rule 4765-12-05 is amended to simplify the comment related to the incorporated by reference rule and to revise paragraph (B) to establish core and discretionary competencies in the scope of practice curriculum as approved by the EMFTS Board in April 2022.		

<b>4765-15-01</b>	AMEND	<b><i>Emergency medical technician curriculum prior to September 1, 2012.</i></b>
Rule 4765-15-01 sets forth the Emergency Medical Technician (EMT) curriculum prior to September 1, 2012, which was developed 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.		
Rule 4765-15-01 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-15-03</b>	AMEND	<b><i>Emergency medical technician continuing education.</i></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.		
Rule 4765-15-03 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-15-04</b>	AMEND	<b><i>Emergency medical technician scope of practice.</i></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.		
Rule 4765-15-04 is amended to delete two items from the EMT scope of practice: pneumatic paragraph (B)(11) "pneumatic anti-shock garment" and paragraph (B)(15) "administration of activated charcoal," as approved by the EMFTS Board in April 2022.		
<b>4765-15-05</b>	AMEND	<b><i>Emergency medical technician curriculum.</i></b>
Rule 4765-15-05 sets forth the Emergency Medical Technician (EMT) curriculum effective September 1, 2012, which was developed 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.		
Rule 4765-15-05 is amended to simplify the comment related to the incorporated by reference rule and to revise paragraph (B) to establish core and discretionary competencies in the scope of practice curriculum, as approved by the EMFTS Board in April 2022. Paragraph (B)(16) is amended to clarify the number of hours and location of clinical experience.		

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<b>4765-16-01</b>	AMEND	<b><i>Advanced emergency medical technician curriculum prior to September 1, 2012.</i></b>
Rule 4765-16-01 sets forth the advanced emergency medical technician (AEMT) curriculum prior to September 1, 2012, which was developed 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.		
Rule 4765-16-01 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-16-02</b>	AMEND	<b><i>Transitional EMT-intermediate update course.</i></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 provides 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.		
Rule 4765-16-02 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-16-03</b>	AMEND	<b><i>Advanced emergency medical technician continuing education.</i></b>
Rule 4765-16-03 sets forth the continuing education (CE) standards for AEMTs (EMT-Is), 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.		
Rule 4765-16-03 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-16-04</b>	NO CHANGE	<b><i>Advanced emergency medical technician scope of practice.</i></b>
Rule 4765-16-04 sets forth the scope of practice for AEMTs (EMT-Is). 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>	NO CHANGE	<b><i>EMT-intermediate special requirements.</i></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>	AMEND	<b><i>Advanced emergency medical technician curriculum.</i></b>
Rule 4765-16-06 sets forth the Advanced Emergency Medical Technician (AEMT) curriculum effective September 1, 2012, which was developed in accordance with "National EMS Education Standards" approved by the 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 4765-16-06 is amended to simplify the comment related to the incorporated by reference rule and to revise paragraph (B) to establish core and discretionary competencies in the scope of practice curriculum, as approved by the EMFTS Board in April 2022.		
<b>4765-17-01</b>	AMEND	<b><i>Paramedic curriculum prior to September 2012.</i></b>
Rule 4765-17-01 sets forth the paramedic curriculum prior to September 1, 2012, which was developed 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.		
Rule 4765-17-01 is amended to simplify the comment related to the incorporated by reference rule.		

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<b>4765-17-02</b>	<b>AMEND</b>	<b><i>Paramedic continuing education.</i></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.		
Rule 4765-17-02 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-17-03</b>	<b>AMEND</b>	<b><i>Paramedic scope of practice.</i></b>
Rule 4765-17-03 sets forth 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.		
Rule 4765-17-03 is amended to delete paragraph (B)(15) "carotid massage" from the paramedic scope of practice, as approved by the EMFTS Board in April 2022.		
<b>4765-17-04</b>	<b>AMEND</b>	<b><i>Paramedic curriculum.</i></b>
Rule 4765-17-04 sets forth the paramedic curriculum effective September 1, 2012, which was developed in accordance with "National EMS Education Standards" approved by the 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.		
Rule 4765-17-04 is amended to simplify the comment related to the incorporated by reference rule and to revise paragraph (B) to establish core and discretionary competencies in the scope of practice curriculum, as approved by the EMFTS Board in April 2022.		

<b>4765-19-01</b>	<b>NO CHANGE</b>	<b><i>Continuing education for EMS providers.</i></b>
Rule 4765-19-01 sets forth criteria of continuing education credit, including subject matter, format, and eligible providers. The rule includes provisions for the consideration of CE obtained by the holder of a certificate to practice during military service.		
<b>4765-19-02</b>	<b>NO CHANGE</b>	<b><i>Examination alternative to continuing education.</i></b>
Rule 4765-19-02 sets forth the provisions available to renew a certificate to practice by examination rather than by completing a CE program. A passing score must be achieved within three attempts. The examination must be completed within the last six months prior to expiration of the certificate to practice.		
<b>4765-19-03</b>	<b>AMEND</b>	<b><i>Extension of continuing education requirement for EMS providers.</i></b>
Rule 4765-19-03 sets forth the provisions for granting an extension of time to comply with CE requirements to renew a certificate to practice, including the application to be submitted to request an extension and provisions for certificate holders whose certificates expired while they served in the military. The rule refers readers to the incorporated by reference rule.		
Rule 4765-19-03 is amended to simplify the comment related to the incorporated by reference rule.		
<b>4765-19-04</b>	<b>AMEND</b>	<b><i>Exemption from continuing education requirements for EMS providers.</i></b>
Rule 4765-19-04 sets forth the provisions for obtaining a complete or partial exemption from compliance with CE requirements based on active duty service in the military, medical hardship, or unusual circumstances. The rule refers readers to the incorporated by reference rule.		
Rule 4765-19-04 is amended to simplify the comment related to the incorporated by reference rule.		

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**3. Please list the Ohio statute(s) that authorize the agency, board or commission to adopt the rule(s) and the statute(s) that amplify that authority.**

Rule Number	Authorizing Statute(s)	Amplifying Statute(s)
4765-7-01	4765.11	4765.17
4765-7-02	4765.11	4765.16, 4765.17
4765-7-03	4765.11	4765.17
4765-7-04	4765.11	4765.15
4765-7-05	4765.11	4765.16
4765-7-06	4765.11	4765.15, 4765.16
4765-7-07	4765.11	4765.17
4765-7-08	4765.11	4765.17
4765-7-09	4765.11	4765.15, 4765.16, 4765.17
4765-7-10	4765.11	4765.17, 4765.18
4765-7-11	4765.11, 4765.16	4765.24, 4765.31
4765-7-12	4765.11, 4765.17	4765.17
4765-7-13	4765.11	4765.16, 4765.17
4765-12-01	4765.11	4765.30
4765-12-02	4765.11	4765.16
4765-12-03	4765.11	4765.16, 4765.24, 4765.31
4765-12-04	4765.11, 4765.35	4765.35
4765-12-05	4765.11	4765.16

Rule Number	Authorizing Statute(s)	Amplifying Statute(s)
4765-15-01	4765.11	4765.16
4765-15-03	4765.11	4765.16, 4765.24, 4765.31
4765-15-04	4765.11, 4765.37	4765.37
4765-15-05	4765.11	4765.16
4765-16-01	4765.11	4765.16
4765-16-02	4765.11	4765.16
4765-16-03	4765.11	4765.16, 4765.24, 4765.31
4765-16-04	4765.11, 4765.38	1547.11, 4506.17, 4511.19, 4765.38
4765-16-05	4765.11	4765.16
4765-16-06	4765.11	765.16
4765-17-01	4765.11	4765.16
4765-17-02	4765.11	4765.16, 4765.24, 4765.31
4765-17-03	4765.11, 4765.39	1547.11, 4506.17, 4511.19, 4765.39, 4765.391
4765-17-04	4765.11	4765.16
4765-19-01	4765.11, 4765.16	4765.31, 4745.04
4765-19-02	4765.11	4765.30, 4765.31
4765-19-03	4765.11	4765.31, 5903.12
4765-19-04	4765.11, 4765.16	4765.31, 5903.10

**4. 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.

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

N/A

**6. 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)?**

**OAC Chapter 4765-7:** Pursuant to RC section 4765.11, the Board is directed to adopt rules that establish the standards and procedures under which the Board may issue, renew, suspend, or revoke certificates of accreditation and certificates of approval to operate EMS training and continuing education training programs and set forth the conditions under which accredited and approved institutions may operate these programs. Consistent, statewide, EMS training will help ensure well-trained EMS providers efficiently and effectively deliver pre-hospital patient care, improved response in emergencies, and increased safety while delivering emergency medical services. In addition, the proposed regulations also protect Ohio paramedic students by ensuring the students' education and eligibility for certification, through national standard testing, are not jeopardized.

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**OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17:** 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, and 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.

**OAC Chapter 4765-19:** Pursuant to RC section 4765.11, the EMFTS Board is directed to adopt rules that establish the standards and procedures under which the Board may issue, renew, suspend, or revoke certificates of approval to operate EMS continuing education training programs. RC section 4765.11 sets forth the criteria for and EMS CE course, how “relevant education, training, or service” may be used to fulfill required CE. In addition, the chapter sets forth meeting CE requirements by examination and options to request an exemption from or an extension of time to complete required CE. The purpose is to provide consistent, statewide, EMS training to help ensure well-trained EMS providers efficiently and effectively deliver pre-hospital patient care, improved response in emergencies, and increased safety while delivering emergency medical services.

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

**OAC Chapter 4765-7:** Success will be measured by an increase in the number of institutions in compliance with the standards set forth in OAC Chapter 4765-7. In addition, the Division of EMS will track first attempt and cumulative attempt passing percentages on the certification examinations, student complaints, and complaints regarding EMS providers that lead to investigations. Success will also be measured by the successful completion of recertification continuing education requirements by the certified providers.

**OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17:** 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.

**OAC Chapter 4765-19:** Success will be measured through the current certification audit process, which randomly audits ten percent of all certification renewals every month and audits all certificates renewed subsequent to an extension. The audits are to ensure that the certificate holders have completed the required continuing education for the previous certification period. Complaints, including those regarding patient care, are monitored as part of the administrative investigations conducted by the Division and State Board of EMFTS.

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**8. Are any of the proposed rules contained in this rule package being submitted pursuant to R.C. 101.352, 101.353, 106.032, 121.93, or 121.931?**

*If yes, please specify the rule number(s), the specific R.C. section requiring this submission, and a detailed explanation.*

No, none of the proposed rules contained in this rule package are being submitted pursuant to RC 101.352, 101.353, 106.032, 121.93, or 121.931.

**Development of the Regulation**

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

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

The Ohio State Board of Emergency Medical, Fire, and Transportation Services (EMFTS) is a twenty-one member board. The director of the Ohio Department of Public Safety designates a member of the Ohio 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. Members of the EMFTS Board and individuals with similar backgrounds and experiences make up the committees, subcommittees, and workgroups of the EMFTS Board.

Scope of practice issues, including rules, are an agenda item at the bi-monthly meetings of the Medical Oversight Committee (MOC) and frequently appear on the bi-monthly meeting agendas of the Education Committee. Other committees may participate in the development of amendments to rules and to the EMS scope of practice.

In February 2019, the Scope of Practice Ad Hoc Committee was established to address issues and concerns related specifically to the Ohio EMS Scope of Practice and to revise rules to meet the changing roles and environments in which EMS providers function, now and in the foreseeable future. The Committee held its first meeting on May 22, 2019. In the minutes of the first meeting, the Committee recorded its intention to include members who also serve on the Medical Oversight Committee (MOC), a standing committee that addresses issues pertaining to quality assurance, medical control, scope of practice, medical standards of curricula or other related issues assigned by the EMFTS Board.

In addition, the state medical director, EMS education coordinators, and other staff of the Ohio Division of EMS, and legal staff of the Ohio Department of Public Safety participate in revisions to administrative rules and the scope of practice. The Division of EMS uses [govdelivery](#) to send subscribers information about proposed rules and solicit stakeholder comments during the rule-review process. Proposed rules and related information are also posted at the DPS [“Administrative Rules”](#) Website.

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

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As part of the February 13, 2019 Board retreat, participants reviewed a document entitled *Impact of Scope of Practice Changes*. The document describes the Board's authority to revise the scope of practice (SOP) and notes the following:

Once an additional service is included in rule, all accredited programs must immediately include the service in the initial certification course.

During the retreat, the group discussed a process that would permit revising the SOP and allowing programs to implement revisions to the course curriculum in the first classes held after the effective date of the rule.

Amendments to the scope of practice rules in OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17 were proposed and approved by members of the Scope of Practice Ad Hoc Committee at its February 22, 2022 meeting. The committee worked with the Department of Public Safety legal office to develop the following language added in paragraph (B) of each of the EMS curriculum rules (4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04):

*... EMS training program shall be conducted in accordance with the "National EMS Education Standards" approved by NHTSA, the "Ohio Approved EMS Curriculum Standards" approved by the board, and consistent with the scope of practice set forth in...the Administrative Code. The above referenced national and Ohio approved standards are required core competencies for instruction in an EMS training program. Elements of the scope of practice not referenced in the "National EMS Education Standards" or the "Ohio Approved EMS Curriculum" are added competencies that may be taught at the discretion of the EMS training program.*

The amendments were developed to increase flexibility for EMS training programs, which are now required to train EMS students to "...meet all knowledge and skill standards set forth in rules 4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04" of the OAC, as set forth in rule 4765-6-02, the general provisions chapter of the EMS curriculum rules. The proposed revisions will require schools to teach a core curriculum and permit schools to teach, at their discretion, items from a list of additional curriculum topics.

In addition, the Scope of Practice Ad Hoc Committee approved a motion at its February 22, 2022 meeting to delete three items not included in the current "National EMS Education Standards" from the scope of practice rules. The three deletions are:

- 4765-15-04 (B) (11) Pneumatic anti-shock garment;
- 4765-15-04 (B) (15) Administration of activated charcoal; and
- 4765-17-03 (A) (15) Carotid massage.

The Scope of Practice Ad Hoc Committee presented its motions to the State Board of EMFTS at the Board's April 2, 2022 meeting, where they were approved.

In preparation for the five-year review of OAC chapters 4765-7, 4765-19, and the four scope of practice chapters, EMS staff reviewed and amended the rules with the scope of practice revisions and to correct

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spelling and grammar, to simplify comments related to the incorporated by reference rule, to update the titles of documents incorporated by reference, and to clarify rules that have proved to be confusing to training programs and their students. Drafts were reviewed by DPS legal staff and provided to members of the State Board of EMFTS prior to the Board October and December 2022 meetings.

When the rules are filed with CSI, govdelivery.com will be used to notify subscribers to user groups including EMS agencies, EMS instructors, EMS general bulletins, and EMS for children about the filing and stakeholder comment period. Notification about the filing and comment period will also be placed on the EMS.Ohio.gov website.

**11. 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?**

**4765-7:** As set forth in the four EMS curriculum rules—4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04—EMS training programs are conducted in accordance with the ["National EMS Education Standards,"](#) a systems approach approved by National Highway Traffic Safety Administration (NHTSA), and the "Ohio Approved EMS Curriculum Standards" and the [scope of practice](#) approved by the Board. Updated NHTSA standards were published in 2021. "Ohio Approved EMS Curriculum Standards" can be viewed at the EMS ["Forms & Applications"](#) Webpage at the "EMS Training Program Curriculum & Education Standards" tab.

The Scope of Practice Ad Hoc Committee is using two other resources as they work to update Ohio's scope of practice and curriculum. ["EMS Agenda 2050: A People-Centered Vision for the Future of Emergency Medical Services"](#) is compiled by a panel of experts working with the EMS community "...to develop a new vision for the future of EMS." ["National EMS Scope of Practice Model 2019"](#) is a publication distributed by the NHTSA. The executive summary of the SOP model states that it is "...a work product commissioned by the NHTSA as a continuation of the commitment of the NHTSA and the Health Resources and Services Administration (HRSA) to the implementation of the EMS Agenda for the Future ("EMS Agenda").

The "EMS Agenda 2050" vision for the future of medical services is developed using [six guidelines for proposed changes](#): inherently safe and effective, integrated and seamless, sustainable and efficient, reliable and prepared, socially equitable, and adaptable and innovative.

The measurable outcomes are recorded and identified by the staff of the Division of EMS monitoring pass/fail certification testing from each EMS accredited training institute. The Division of EMS staff also monitor the number of successful renewals, new and ended EMS accredited training institutes, as well as those which add or delete certification levels to their existing accreditation.

**4765-12, 4765-15, 4765-16, and 4765-17:** Changes to EMS curriculum and scope of practice rules 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. The core competencies for Ohio approved curriculum for EMS mirror the competencies set forth in the "National EMS Education Standards" published by the NHTSA.

**4765-19:** There was no scientific data available to be considered.

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**12. 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?** *Alternative regulations may include performance-based regulations, which define the required outcome, but do not dictate the process the regulated stakeholders must use to comply.*

**OAC Chapter 4765-7:** It was determined that alternative regulations may not meet the purpose of the rules to assure safe, effective, and efficient EMS response. This regulation aligns with the NHTSA's systems approach for national EMS education standards, scope of practice model, accreditation, and standard testing. In addition, NHTSA's systems approach facilitates the transfer of training from state-to-state.

**OAC chapters 4765-12, 4765-15, 4765-16, and 4765-17:** No alternative regulations were considered. Pursuant to section 4765.11 of the Revised Code, the EMFTS board is directed to adopt rules that establish the 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, and 4765.39 of the RC.

**OAC chapter 4765-19:** The rules in OAC Chapter 4765-19 provide several methods to obtain required CE credits, including an examination alternative, requesting an extension of time to complete CE credits, and requesting an exemption from the CE requirements.

**13. 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 ORC and agency 4765 of the OAC was completed. Additionally, a review was conducted using RegExplorer to make sure there was no duplication of regulations.

**14. 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 amendments to chapters 4765-7, 4765-12, 4765-15, 4765-16, 4765-17, and 4765-19 of the OAC. Access to approved Ohio EMS curriculum is published at [Forms & Applications | Emergency Medical Services \(ohio.gov\)](#) under "EMS Training Program Curriculum & Education Standards." CE requirements are published to the EMS web site at the following link: [Continuing Education Requirements | Emergency Medical Services \(ohio.gov\)](#). DEMS Staff will notify the EMS accredited and approved sites' program directors about the approved Ohio EMS curriculum and rule revisions via email and through information published on the ["Program Directors"](#) Webpages.

Division of EMS staff are available via telephone and/or face-to-face meetings to assist institutions and practitioners with the application process or with questions about the scopes of practice or continuing

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education. Questions may be submitted via email to “Ask EMS” ( <https://ems.ohio.gov/help-center/ask-ems> ) or directly to the Division’s staff using the “Agency Directory” ( <https://ems.ohio.gov/help-center/agency-directory/agency-directory> ).

The Division of EMS posts information about the rule review process, including those rules scheduled for review, drafts open for public comment, and proposed rule public hearing notices at its “EMS Laws & Rules” Web site ( <https://ems.ohio.gov/laws-and-rules> ). The “EMS Laws & Rules” Web site includes links to chapters 4765. and 4766. of the Ohio Revised Code and links to the Ohio Administrative Code chapters and rules associated with each EMS section. Access to rules filed with CSI and with the Joint Committee on Agency Rule Review (JCARR), as well as other filing documents is provided at the “EMS Laws & Rules” Web site through links with the “Register of Ohio” ( <https://registerofohio.state.oh.us/> ) and the Ohio Department of Public Safety “Administrative Rules” Web site ( <https://publicsafety.ohio.gov/what-we-do/administrative-rules-reviews> ).

The Division of EMS uses the EMS gov.delivery.com system and its user lists to distribute the final rules, when they become effective, to stakeholders. Division of EMS staff will receive email notification of the rule changes and attend section briefings regarding the implementation of 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**

**15. Provide a summary of the estimated cost of compliance with the rule(s). Specifically, please do the following:**

**a. Identify the scope of the impacted business community, and**

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

- 1,580 EMS organizations;
- 41,312 EMS providers;
- 5,820 EMS Instructors;
- 266 EMS registered medical directors;
- 89 EMS accredited institutions, which include 38 paramedic training programs; and
- 571 approved EMS continuing education institutions.

[Source: DEMS 11/09/2022 “Ohio EMS Agency List”; DEMS November 2022 report of active certifications; DEMS 11/09/2022 “Ohio EMS & Fire Training Facilities” Web site; and 12/28/2022 report of DEMS Research & Analysis staff.]

Annually, fewer than 100 providers request an exemption from completing the required continuing education. From January 1 through December 23, 2022, seven exemption requests were received.

**b. Quantify and identify the nature of all adverse impact (e.g., fees, fines, employer time for compliance, etc.).**

*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*

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*representative business. Please include the source for your information/estimated impact.*

#### **Chapter 4765-7**

OAC Chapter 4765-7, in and of itself, does not require specific expenditures. However, some provisions in these regulations require EMS training to be conducted in accordance with the standards adopted by the Board under ORC section 4765.11 and the curricula areas set forth in ORC section 4765.16 and in agency 4765 of the OAC. Adverse impacts could include the cost of instructional materials, instructor time, and equipment as the program deems necessary. OAC Chapter 4765-7 does not require any EMS accredited Institution to provide a specific certification level training; each level of training is provided at the discretion of the accredited institution.

The costs incurred by the EMS accredited institutions will vary depending on the affiliations of the EMS accredited institution and the levels of training being offered. Those institutions not changing any certification levels will see minimal if any additional costs, except for natural increases in administrative costs. Those institutions adding additional certification levels will see cost increases, as they may need to add additional instructional, administrative, and equipment resources.

Adverse impact may result from seeking and maintaining certificates of accreditation, national accreditation, and approval to operate EMS initial and continuing education training programs. These regulations require the EMS training institutions to retain written or electronic documentation that demonstrates compliance with curriculum standards and evaluation of student performance and achievement.

These regulations do not require an institution to provide specific levels of EMS training programs. Each institution applies to provide levels of training at its own discretion. 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 ability to dictate the tuition costs of their programs based on budgetary needs.

Significant costs could be associated with institutions requesting to become a paramedic training center due to the costs associated with the application process for Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) and Commission on Accreditation of Allied Health Education Programs (CAAHEP) credentials. However, graduation from a CAAHEP accredited program is a requirement for paramedic candidates who take the National Registry examination to be certified as a paramedic.

OAC Chapter 4765-7 does require institutions to gain CAAHEP national accreditation for the paramedic level of training. Costs include the Committee on CoAEMSP-related fees and the staff time and resources required to apply for the accreditation, prepare reports, acquire technology, and participate in required site visits. Some of the program fees are listed below.

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Description of Fee	CoAEMSP Letter of Review (LoR) (no status – entering the accreditation system)	CAAHEP Initial Accreditation (currently holds CoAEMSP LoR)	CAAHEP Continuing Accreditation (currently holds CAAHEP accreditation)
Annual	\$1700		
LoR Application	\$1950	\$0 not applicable	
Satellite	\$500 per satellite location per year		
LoR Application Re-evaluation and/or Self Study Report Evaluation/Re-evaluation	\$750 paid with the submission of the SSR		
Preliminary/Regular Site Visit	\$1350 paid with the submission of the LoR Application	\$2700 paid with the submission of the ISSR and CSSR for a regular site visit	

Source: Excerpt of costs obtained from CoAEMSP at <http://www.coaemsp.org/Fees.htm>, reviewed on December 21, 2022. See the Website for additional information.

#### **Chapters 4765-12, 4765-15, 4765-16, and 4765-17**

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.

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

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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.

The amendments to paragraph (B) of each of the EMS curriculum rules (4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04) are designed to increase flexibility for EMS training programs. The training programs will be required to provide training for a set of core competencies and may add competencies from a separate list at their own discretion.

Source: The information was updated in December 2022 by DEMS staff.

#### **Chapter 4765-19**

Annually, fewer than 100 providers request an exemption from completing the required continuing education. From January 1 through December 23, 2022, seven exemption requests were received.

Typically, thirty to fifty certificate holders per month request an extension to meet continuing education requirements for renewal. From January 1 through December 23, 2022, 405 extension requests were received.

SOURCE: Division of Emergency Medical Services, Certifications Section, December 2022

The holder of a certificate to practice is required to complete emergency medical services continuing education as set forth in chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the OAC. This chapter provides alternative provisions for compliance; however, the certificate holder must submit written requests to obtain these options. Failure to submit the appropriate documents in a timely manner may result in denial of the request for an alternative provision and ultimately result in the loss of the certificate to practice. Any cost associated with obtaining the required continuing education or an alternative provision would be determined by the type, provision, and location of the continuing education. The Division of EMS does not regulate or dictate any costs.

This rule, in and of itself, does not impose a penalty or sanction. However, the process for the State Board of EMFTS, pursuant to an adjudicatory hearing under Chapter 119. of the Revised Code, is described in rule 4765-10-03 of the Administrative Code. The board may impose sanctions up to and including revocation of any certificate issued by the board and may impose a fine not to exceed \$1,000 for violations of specific provisions of Chapter 4765. of the Revised Code and specific sections of the Administrative Code.

**16. Are there any proposed changes to the rules that will reduce a regulatory burden imposed on the business community? Please identify. (*Reductions in regulatory burden may include streamlining reporting processes, simplifying rules to improve readability, eliminating requirements, reducing compliance time or fees, or other related factors*).**

Amendments to paragraph (4) of rule 4765-7-02 replace the requirement to "submit a report" with entering data into the division's course management system database.

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Revisions to curriculum rules 4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04 will result in a core curriculum and an additional set of competencies, over and above the core curriculum, that may be approved by the local medical director.

Current scope of practice rules authorize local medical directors to meet but not exceed the scope of practice approved by the Board. Proposed revisions to the rules authorize local medical directors, at their discretion, to provide train EMS personnel on competencies that are within the scope of practice but beyond the core skills required to be taught in initial training by an accredited program. The objective is to provide emergency medical services to best meet the needs of Ohio's local communities.

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

**4765-7:** Pursuant to RC 4765.11, the Board is statutorily required to adopt rules that establish the standards and procedure under which the Board may issue, renew, suspend, or revoke certificates of accreditation to operate training programs and certificates of approval to operated EMS continuing education training programs. Ensuring professional standards from the training programs and in EMS providers' professional conduct, delivery of emergency medical services, and patient care justifies the minimal adverse impact to the business community.

The rules are developed using research recommendations from the "[\*EMS Agenda 2050: A People-Centered Vision for the Future of Emergency Medical Services\*](#)," which includes a set of national education standards, national accreditation, and national standard testing to ensure consistent performance outcomes for EMS providers. National Registry certification is required for all levels of initial EMS certification in Ohio; CAAHEP accreditation is required for the paramedic level training. CAAHEP is the national accreditation that has been approved by forty-seven states including those bordering Ohio.

**4765-12, 4765-15, 4765-16, and 4765-17:** Revisions to the scope of practice rules are made pursuant to sections 4765.11, 4765.37, 4765.38, and 4765.39 of the Revised Code. The EMFTS 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 safe patient care justifies the minimal adverse impact to the impacted community.

The amendments to the scopes of practice proposed for rules 4765-15-04, 4765-16-04, and 4765-17-03 created a minimal need for additions to EMS provider training. A five-year lead time was scheduled to allow EMS training institutions to revise curricula over time, and the EMFTS Board, MOC, and state medical director provided training assistance at no cost. EMS organizations used the EMS training and assistance grant funds to purchase waveform capnography equipment.

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The Division of EMS staff determined that the amendments to rules 4765-15-04, 4765-16-04, and 4765-17-03 will enhance patient care with minimal costs of compliance to the provider.

**4765-19:** 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. Ohio is one of forty-six states that use the NREMT certification as a basis for licensure/certification. The NREMT EMS certification provides “a validated and legally defensible attestation of competency.”

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**

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

The regulations do not mandate an EMS organization to operate a training program or purchase any equipment. In addition, an EMS organization issued a certificate of accreditation or certificate of approval is not required to operate all levels of EMS training. Organizations holding certificates of accreditation and certificates of approval may borrow equipment or any educational resources necessary to meet the curriculum standards. Organizations holding certificates of accreditation may form a consortium to operate paramedic training programs under a single national certificate. Rule 4765-7-12 permits EMS training programs to offer online and/or distance learning delivery systems. Rule 4765-7-10 provides instructions for applying for reinstatement of a certificate of accreditation or certificate of approval that has been revoked.

Rule 4765-7-08 provides a process for the reinstatement of an expired certificate of accreditation or approval or provisional certificate of accreditation or approval that has been expired for less than three years.

Amendments to the scope of practice curriculum rules 4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04 were proposed by the Scope of Practice Ad Hoc Committee and approved by the Board to provide more flexibility in planning and delivering courses to EMS training programs. As set forth in the general provisions rule for EMT curriculum--rule 4765-6-02--an EMS training program for a certificate to practice as an emergency medical responder (EMR), emergency medical technician (EMT), advanced emergency medical technician (AEMT) is required to meet all knowledge and skill standards set forth in the corresponding curriculum rules. The amendment to the curriculum rules will establish required core competencies in each scope of practice and a set of additional competencies that may be taught at the discretion of each EMS training program.

Rule 4765-19-02 provides examination alternatives for providers in lieu of completing continuing education courses. Rule 4765-19-03 provides information for certificate-holders to request extension of time to comply with the CE required for renewal of a certificate. Rule 4765-19-04 provides information

for certificate-holders to request a complete or partial exemption from compliance from the CE requirements for renewal of a certificate.

**19. 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 4765-7, 4765-12, 4765-15, 4765-16, 4765-17, and 4765-19 do not directly impose penalties or sanctions. However, provisions in the RC section establish that the Board may investigate allegations of violation of RC 4765. and the rules adopted thereunder (RC 4765.101) and impose administrative sanctions up to and including:

- suspension and/or revocation of and other disciplinary actions against a certificate to practice or a certificate to teach (RC 4765.112, 4765.114, 4765.115, 4765.116, 4765.18, 4765.23, and 4765.33);
- revocation of a certificate of accreditation and certificate of approval for violations of Chapter 4765. of the ORC or any rule adopted under it (RC 4765.18).

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

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

As set forth in OAC rule 4765-7-07, the Division of EMS notifies each accredited institution no later than ninety days prior to its certificate expiration of its scheduled expiration date and the mechanism for renewal. It is the practice of the Division of EMS to notify all accredited and approved programs 120 days prior to their certificate expiration.

As set forth in rule 4765-7-03 of the OAC, the board may issue provisional certificates of accreditation or approval for initial applicants that are in substantial compliance with requirements of the ORC.

The Board administers grant awards set forth in RC section 4765.07, and as defined in section 4513.263 of the RC. First priority includes awards 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 web page can be found using the following link: <https://ems.ohio.gov/programs-services/ems-grants>.

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 programs (Ohio EMS & Fire Training Facilities). Other Webpages include: [certifications](#), [medical direction](#), [scope of practice questions and answers](#), [education and testing](#), and a [help center](#). The "Agency Directory" includes a toll free number, the names and titles of EMS staff, and the names and email addresses of the Division of EMS sections.

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The Division of EMS staff members also 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 Fire & Rescue Officer Development Conference (Ohio Fire Chiefs Conference).

Division of EMS staff are available via telephone and/or face-to-face meetings to assist institutions in the application process. Questions may be submitted via email to "[Ask EMS](#)" or directly to the [Division's education staff](#).

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