

Emergency Medical Services Regulatory Board

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EMSARB Establishment and Composition

Established in 1995 and began operating July 1, 1996. Prior to 1995, emergency medical services were regulated by the commissioner of health.

Composed of 17 members and 2 ex officio, nonvoting members:

Emergency physician

Representative of Minnesota hospitals

Representative of fire chiefs

Full-time firefighter who serves as an EMR

Volunteer firefighter who serves as an EMR

Paramedic or EMT

Director of an ambulance service

Representative of sheriffs

Member of a community health board

Two representatives of regional EMS programs

Registered nurse practicing in a hospital emergency department

Pediatrician with experience in emergency medical services

Family practice physician currently involved in emergency medical services

Member of the public

Commissioner of health or a designee

Commissioner of public safety or a designee

Ex officio members: one representative appointed by the Speaker of the House and one senator appointed by the Senate Committee on Rules and Administration

EMSARB Authority and Duties

Board authority and duties governed by Minnesota Statutes, chapter 144E and Minnesota Rules, chapter 4690

General duties include:

- Licensure of ambulance services
- Registration of medical response units
- Certification of ambulance service and medical response unit personnel
- Approval of education programs
- Administration of grant programs

Licensure of Ambulance Services

An ambulance service must be licensed in order to operate in the state.

Types of ambulance services:

- Basic life support: includes recognizing life-threatening situations and potentially serious injuries; providing basic treatment, basic airway management, and automatic defibrillation; and transporting patients to a medical facility for treatment. Medical director may authorize personnel to perform intravenous infusion and use equipment within the licensure level of the service
- Advanced life support: in addition to basic life support services, also includes providing advanced airway management, manual defibrillation, and administration of intravenous fluids and pharmaceuticals
- Part-time advanced life support: may provide advanced life support services less than 24 hours per day
- Specialized life support: provides basic or advanced life support and is restricted by the board to operating less than 24 hours per day, serving designated populations or persons with certain medical conditions, or providing air ambulance service

Licensure of Ambulance Services

In Minnesota, 264 licensed ambulance services operate 823 ground ambulances and 21 air ambulances.

There are currently 317 ambulance service licenses issued; some ambulance services hold more than one license.

An ambulance service may be staffed with paid personnel, with a combination of paid and volunteer personnel, or with volunteer personnel. 65% of ambulance services are staffed with either all volunteers or with a combination of paid personnel and volunteers.

Source: Emergency Medical Services Regulatory Board Agency Profile, 2022-23 Biennial Budget, November 2020

Licensure of Ambulance Services

Ambulance service license specifies the ambulance service's primary service area, defined as the geographic area that can reasonably be served by the ambulance service

Mutual aid agreements

Descriptions of the primary service areas for each ambulance service in the eight regions of the state may be found at mn.gov/emsr/ambulanceservices/primary-service-area-description.jsp

Licensure of Ambulance Services

An ambulance service must apply to the board to change its primary service area.

An ambulance service may:

- request to retract service from an area in its primary service area;
- request to provide service in an area that is part of the primary service area of another ambulance service; or
- request to provide service in an area where no primary ambulance service has been designated.

A temporary license may be issued to an ambulance service if a primary service area would be deprived of ambulance service coverage.

Registration of Medical Response Units

Board has authority to register medical response units and specialized medical response units

Statutes establish qualification requirements for medical response units, including staffing requirements

Certification of Ambulance Service Personnel

Ambulance services and medical response units must be staffed by certified personnel.

Types of personnel certified by the board:

- Emergency medical responders (EMRs)
- Emergency medical technicians (EMTs)
- Advanced emergency medical technicians (AEMTs)
- Paramedics
- Community emergency medical technicians (CEMTs)
- Community paramedics

Approval of Education Programs

All education programs for EMRs, EMTs, AEMTs, and paramedics must be approved by the board

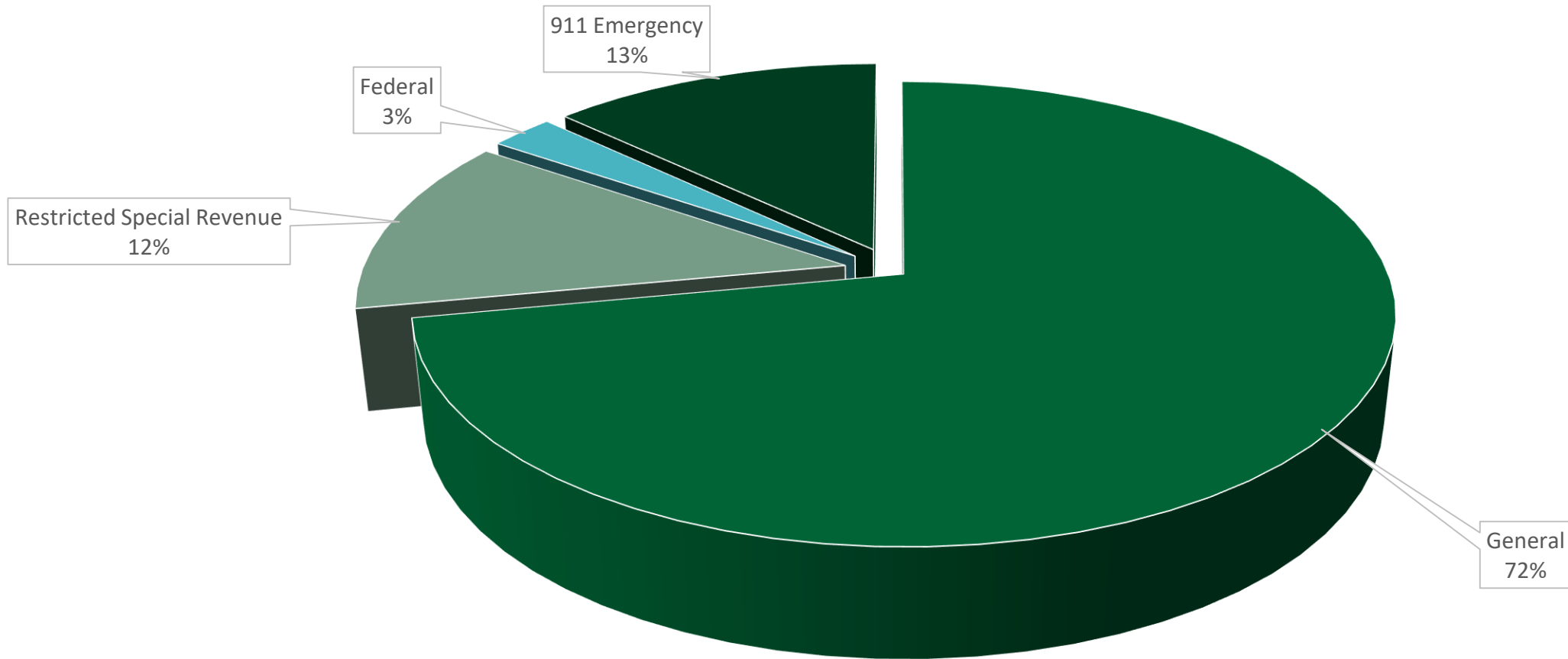
Education program instructors and test examiners must meet qualifications specified in statute

Grant Programs

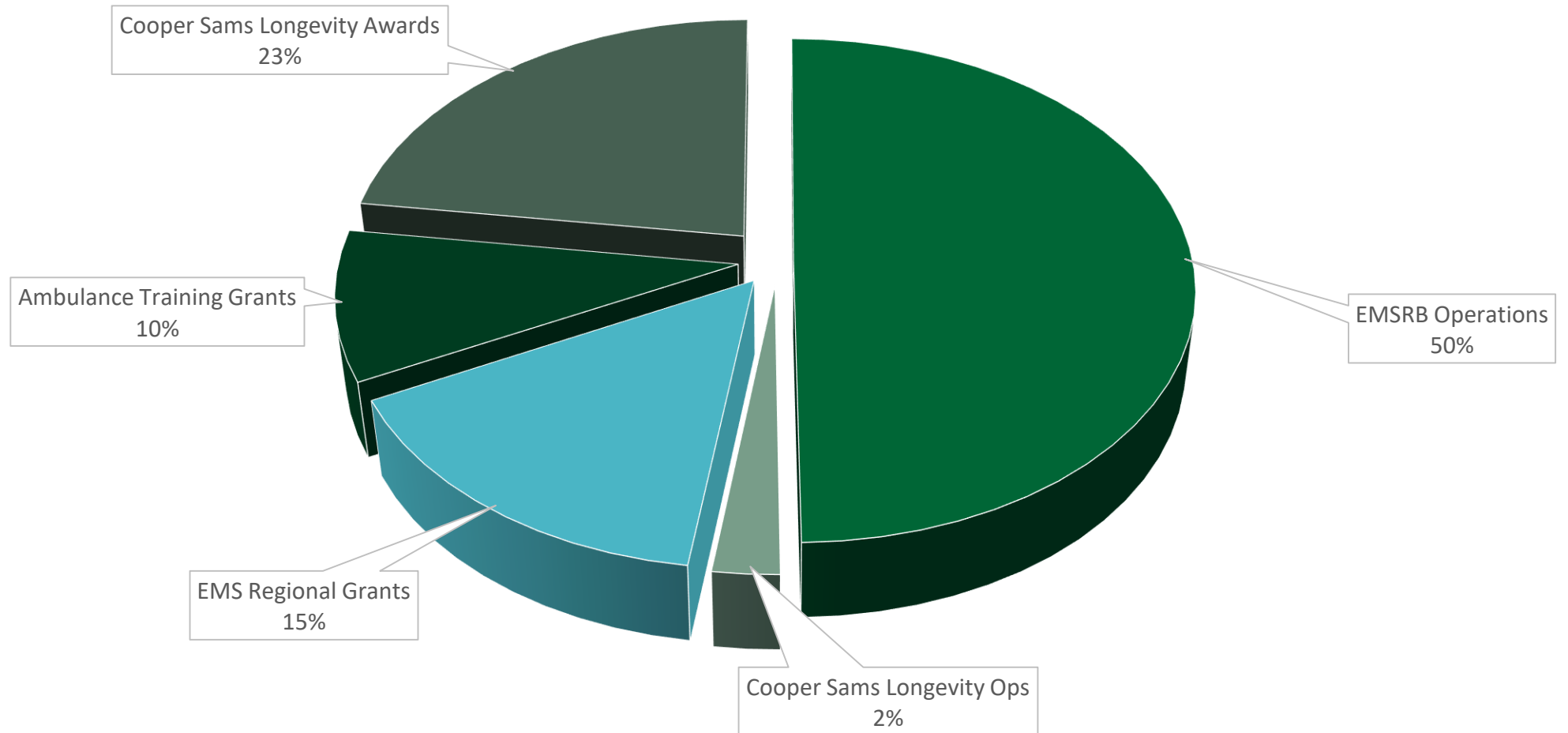
Grant programs administered by the board include:

- Reimbursing ambulance services for education costs of volunteer ambulance attendants
- Cooper/Sams volunteer ambulance program
- Funding to emergency medical services regions
- EMS for Children program

Emergency Medical Services Regulatory Board FY 2022-23 Biennial Base Budget by Fund All Funds Base = \$10.488 Million



Emergency Medical Services Regulatory Board FY 2022-23 Biennial General Fund Base by Expenditure Base = \$7.552 Million



Resources

For additional information, members may consult:

- Minnesota Statutes, chapter 144E
- Minnesota Rules, chapter 4690
- The Emergency Medical Services Regulatory Board website at mn.gov/emsrb/



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