

**Summary of EMS Provisions in S.124 As Recommended by SGO**

SGO's S.124 strike-all addresses EMS in Secs. 20-27 on pgs. 22-43. This document provides a high-level overview of those sections.

**Substituting Department of Health for State Board of Health**

Sec. 20 substitutes DoH for the State Board of Health so that it is the Department that divides the State into EMS districts and issues licenses for ambulance services and first responder services.

**Eliminating the Requirement for Credentialing by Affiliated Agencies**

Secs. 20 and 23 eliminate the requirement for EMS personnel to be credentialed by their affiliated agencies. (EMS personnel must still be licensed and, pursuant to DoH rules, licensure also requires certification by a national entity, the NREMT.)

**Ambulance Service License Eligibility Criteria**

Sec. 20, 24 V.S.A. § 2681 requires ambulance service license and renewal applicants to provide their services in a nondiscriminatory manner, similar to the requirement for home health services. DoH is required to adopt rules re: this issue.

**Extension of Ambulance License Terms from One to Three Years**

Sec. 20, 24 V.S.A. § 2683 extends ambulance license terms from one to three years.

**DFR Enforcement of Direct Ambulance Service Provider Insurance Reimbursement**

Sec. 20, 24 V.S.A. § 2689 requires the Dept. of Financial Regulation to enforce the current law provision that health insurers are to directly reimburse ambulance service providers.

**HRAP Addressing EMS Resources**

Sec. 21, 18 V.S.A. § 9405 requires the Green Mountain Care Board to identify priorities re: EMS resources and needs in the State's Health Resource Allocation Plan (HRAP), and Sec. 23, 18 V.S.A. § 909(f) requires the EMS Advisory Committee to identify those resources and needs and report them to the GMCB.

**Three Levels of EMS Instructors**

Sec. 23, 18 V.S.A. § 906(1) requires DoH to establish by rule at least three levels of EMS instructors and the education required for each level.

### **Eliminating NREMT Psychomotor Skills Testing for EMRs and EMTs**

Sec. 23, 18 V.S.A. § 906(10)(C)(i) allows for either demonstration of skills competencies or the NREMT psychomotor examination to test the psychomotor skills of EMRs and EMTs as a transitional provision until the 7/1/21 effective date of Sec. 24, which eliminates the NREMT psychomotor exam for those license levels (while maintaining the requirement to demonstrate those skills competencies).

### **New Entry-Level Vermont EMS First Responder Certification**

Sec. 23, 18 V.S.A. § 906(11) requires DoH to establish by rule an entry-level certification for Vermont EMS first responders.

### **DoH Sunset Reviews of EMS Continuing Competency Requirements**

Sec. 23, 18 V.S.A. § 906d requires DoH to conduct sunset reviews of the continuing competency requirements for EMS personnel.

### **EMS Education Council**

Sec. 23, 18 V.S.A. § 909(g) requires the existing EMS Advisory Committee to establish an EMS Education Council from among its members to sponsor or approve EMS training or education programs and to provide advice to DoH regarding the standards for licensure.

### **Adding Certified Vermont EMS First Responders and Licensed EMRs to Current Financial Allocations**

Sec. 25 amends the list of the EMS professionals for whom training programs are funded by adding this bill's new certified Vermont EMS First Responders and the existing licensed EMRs.

### **EMS Training Appropriations**

Sec. 26 appropriates \$450k from the EMS Special Fund and \$400k from the General Fund to DoH for EMS personnel training.