

Act 142 Commissioner's Advisory Group
Pre-read materials for:
April 18, 2011 2:00 P.M.

Meeting focus topic:

(a)shall develop a proposal for a statewide licensing mechanism for emergency medical services (EMS) providers and shall assess the state's EMS capabilities and training requirements.

(b) The commissioner of health shall prepare a proposal on a statewide licensing mechanism in the form of draft legislation and shall submit that proposal along with findings and recommendations related to the other topics itemized in subsection (a) of this section to the house committee on commerce and economic development and the senate committee on economic development, housing and general affairs no later than January 15, 2012.

Links to related documents:

www.ems.gov – for the *EMS Education Agenda for the Future: A System's Approach* and the *National EMS Scope of Practice Model*

http://www.nremt.org/nremt/about/Legal_Opinion.asp - for the National Registry of EMT's legal opinion on the difference between certification and licensure

http://findarticles.com/p/articles/mi_m0FSL/is_n2_v63/ai_19128838/?tag=content:coll - 1995 Pew Commission report on reforming health care workforce regulation.

The current VT Statute reads-

Title 18: Health

Chapter 17: EMERGENCY MEDICAL SERVICES

18 V.S.A. § 906. Emergency medical services division; responsibilities

8) Establishing, by rule, levels of *individual certification* and application forms for advanced emergency medical care. The commissioner shall use the guidelines established by the National Highway Traffic Safety Administration (NHTSA) in the U.S. Department of Transportation as a standard or other comparable standards, except that a felony conviction shall not necessarily disqualify an applicant. The rules shall also provide that:

(A) An individual may apply for and obtain one or more additional *certifications*, including certification as an advanced emergency medical technician or as a paramedic.

(B) An individual *certified by the commissioner* as an emergency medical technician, advanced emergency medical technician, or a paramedic, who is affiliated with a *licensed* ambulance service, fire department, or rescue service, shall be able to practice fully within the scope of practice for such level of *certification* as defined by NHTSA's *National EMS Scope of Practice Model* notwithstanding any law or rule to the contrary, and subject to the medical direction of the commissioner or designee.

(C) Unless otherwise provided under this section, an individual seeking any level of *certification* shall be required to pass an examination approved by the commissioner for that level of *certification*. Written and practical examinations shall not be required for recertification; however, to maintain *certification*, all individuals shall complete a specified number of hours of continuing education as established by rule by the commissioner.

(D) If there is a hardship imposed on any applicant for a *certification* under this section because of unusual circumstances, the applicant may apply to the commissioner for a temporary or permanent waiver of one or more of the certification requirements, which the commissioner may grant for good cause.

Nomenclature from the other New England States and NY for their EMS authorization to function:

NH- License
ME- License
MA- Certification
RI- License
CT- Certification
NY- Certification

The EMS Education Agenda for the Future: A Systems Approach (NHTSA, 2000) reads-

National EMS Certification (excerpts)

Certification is the process of verifying competency at a predetermined level of proficiency. *Licensure is the process of a state government agency granting official permission to practice* within that given state. Although there are distinct differences, the terms "licensure" and "certification" are often used interchangeably. In actuality,

licensure is the process of an agency making a declaration of competence to practice. The determination of eligibility for licensure is usually based on the completing of education requirements and the passing of an examination. Most licensure processes require some form of certification by either a state or national agency to ensure minimum competence.

In most professions, development of examinations is the responsibility of an independent national board. ***State governments then use the certification as part of their licensing process.*** In the EMS professions, state government frequently assumes the responsibility of certifying eligible individuals as competent to practice based upon either locally developed, state-developed or contractor- developed examinations. In these circumstances, state government assumes the responsibilities of both certification and licensure.

Where We Are

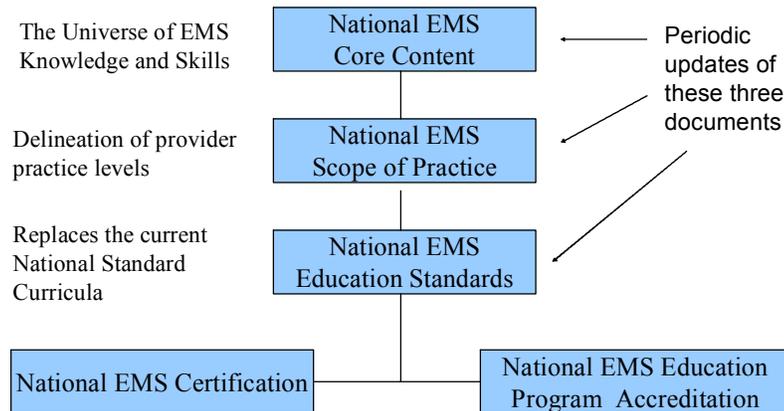
There is great confusion and inconsistency in the definition and application of the terms certification, licensure, and registration throughout the states. Some form of testing is one of the stages of granting licensure to EMS providers. Testing often includes both practical and written components. The quality and difficulty levels of these examinations vary widely. Because of these variations, reciprocity and standardized minimum entry level competencies have been difficult to achieve.

Where We Want To Be in 2010

National EMS Certification will be conducted by a single independent national agency under the leadership of a board of directors with multi-disciplinary representation. A single certification agency will provide a consistent evaluation of recognized EMS provider entry level competencies. ***National EMS Certification*** will be accepted by all state EMS offices as verification of entry level competency. ***National EMS Certification is one of the steps leading to licensure for levels of EMS providers specified in the National EMS Scope of Practice Model.*** In order to be eligible for National EMS Certification, candidates must graduate from a nationally accredited EMS education program.

Certification examinations are based on APA standards and a practice analysis. A nationally recognized, validated, and reliable examination is used by all state EMS agencies as a ***basis for state licensure.*** National EMS Certification would not replace states' rights to license, but would be used as one component of eligibility for ***licensure*** to practice within the state.

The EMS Education Agenda for the Future: A Systems Approach



The National EMS Scope of Practice Model (NHTSA, 2007) reads-

Executive Summary (excerpt):

The *National EMS Scope of Practice Model* supports a **system of EMS personnel licensure that is common in other allied health professions** and is a guide for States in developing their Scope of Practice legislation, rules, and regulation. States following the *National EMS Scope of Practice Model* as closely as possible will increase the consistency of the nomenclature and competencies of EMS personnel nationwide, facilitate reciprocity, improve professional mobility and enhance the name recognition and public understanding of EMS.

History of Occupational Regulation in EMS (excerpt):

One function of State EMS offices was to ensure the competence of the State's EMS personnel. States employed a number of strategies to help assure safe and effective EMS practice, including **licensure and certification**. Unfortunately, **these terms developed multiple connotations in EMS**. In some cases, the meanings differed from other disciplines, causing confusion and inconsistency at the national level.

The Role of State Government (excerpts):

Each State has the statutory authority and responsibility to regulate EMS within its

borders, and to determine the scope of practice of **State-licensed** EMS personnel. The *National EMS Scope of Practice Model* is a consensus-based document that was developed to improve the consistency of **EMS personnel licensure levels** and nomenclature among States; it does not have any regulatory authority.

The *National EMS Scope of Practice Model* identifies the psychomotor skills and knowledge necessary for the minimum competence of each nationally identified level of EMS provider. This model will be used to develop the National EMS Education Standards, **national EMS certification exams**, and national EMS educational program accreditation. Under this model, to be eligible for **State licensure**, EMS personnel must be verifiably competent in the minimum knowledge and skills needed to ensure safe and effective practice at that level. **This competence is assured by completion of a nationally accredited educational program and national certification.**

Definitions:

Certification—The issuing of certificates by a private agency based upon standards adopted by that agency that are usually based upon minimum competence.

Licensure—The act of a State granting an entity permission to do something that the entity could not legally do without such permission. Licensing is generally viewed by legislative bodies as a regulatory effort to protect the public from potential harm. In the health care delivery system, an individual who is licensed tends to enjoy a certain amount of autonomy in delivering health care services. Conversely, the licensed individual must satisfy ongoing requirements that ensure certain minimum levels of expertise. A license is generally considered a privilege and not a right.

The Relationship among education, certification, licensure, and credentialing.

