

Dear Senators HEIDER, Nuxoll, Bock, and
Representatives WOOD, Perry, Rusche:

The Legislative Services Office, Research and Legislation, has received the enclosed rules of the
Department of Health and Welfare - Emergency Medical Services (EMS):

IDAPA 16.01.01 - Rules Pertaining To Emergency Medical Services (EMS) - Advisory Committee
(EMSAC) (Docket No. 16-0101-1301);

IDAPA 16.01.02 - Rules Pertaining To Emergency Medical Services (EMS) - Rule Definitions
(Docket No. 16-0102-1301) (New Chapter);

IDAPA 16.01.03 - Rules Pertaining To Emergency Medical Services (EMS) - Agency Licensing
Requirements (Docket No. 16-0103-1301) (New Chapter);

IDAPA 16.01.07 - Rules Pertaining To Emergency Medical Services (EMS) - Personnel Licensing
Requirements (Docket No. 16-0107-1301);

IDAPA 16.01.12 - Rules Pertaining To Emergency Medical Services (EMS) - Complaints,
Investigations & Disciplinary Actions (Docket No. 16-0112-1301);

IDAPA 16.02.03 - Rules Pertaining To Emergency Medical Services (Docket No. 16-0203-1301).

Pursuant to Section 67-454, Idaho Code, a meeting on the enclosed rules may be called by the
cochairmen or by two (2) or more members of the subcommittee giving oral or written notice to Research
and Legislation no later than fourteen (14) days after receipt of the rules analysis from Legislative
Services. The final date to call a meeting on the enclosed rules is no later than 09/11/2013. If a meeting is
called, the subcommittee must hold the meeting within forty-two (42) days of receipt of the rules analysis
from Legislative Services. The final date to hold a meeting on the enclosed rules is 10/09/2013.

The germane joint subcommittee may request a statement of economic impact with respect to a
proposed rule by notifying Research and Legislation. There is no time limit on requesting this statement,
and it may be requested whether or not a meeting on the proposed rule is called or after a meeting has
been held.

To notify Research and Legislation, call 334-4845, or send a written request to the address on the
memorandum attached below.



Jeff Youtz
Director

Legislative Services Office Idaho State Legislature

Serving Idaho's Citizen Legislature

MEMORANDUM

TO: Rules Review Subcommittee of the Senate Health & Welfare Committee and the House Health & Welfare Committee
FROM: Senior Legislative Research Analyst - Ryan Bush
DATE: August 22, 2013
SUBJECT: Department of Health and Welfare - Emergency Medical Services (EMS)

IDAPA 16.01.01 - Rules Pertaining To Emergency Medical Services (EMS) - Advisory Committee (EMSAC) (Docket No. 16-0101-1301)

IDAPA 16.01.02 - Rules Pertaining To Emergency Medical Services (EMS) - Rule Definitions (Docket No. 16-0102-1301) (New Chapter)

IDAPA 16.01.03 - Rules Pertaining To Emergency Medical Services (EMS) - Agency Licensing Requirements (Docket No. 16-0103-1301) (New Chapter)

IDAPA 16.01.07 - Rules Pertaining To Emergency Medical Services (EMS) - Personnel Licensing Requirements (Docket No. 16-0107-1301)

IDAPA 16.01.12 - Rules Pertaining To Emergency Medical Services (EMS) - Complaints, Investigations & Disciplinary Actions (Docket No. 16-0112-1301)

IDAPA 16.02.03 - Rules Pertaining To Emergency Medical Services (Docket No. 16-0203-1301)

(1) 16.01.01 - Rules Pertaining To Emergency Medical Services (EMS) - Advisory Committee (EMSAC) (Docket No. 16-0101-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.01.01 - Rules Pertaining To Emergency Medical Services (EMS) - Advisory Committee (EMSAC). The Department states that changes are needed to align these rules with the new "EMS - Rule Definitions" being implemented under Docket No. 16-0102-1301. The Department further states that updated definitions are necessary to meet changing terminology and technology. Specifically, this rulemaking updates references to the chapter on definitions and renames the EMS Bureau as the Bureau of Emergency Medical Services and Preparedness.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1023, Idaho Code.

Mike Nugent, Manager
Research & Legislation

Cathy Holland-Smith, Manager
Budget & Policy Analysis

April Renfro, Manager
Legislative Audits

Glenn Harris, Manager
Information Technology

(2) IDAPA 16.01.02 - Rules Pertaining To Emergency Medical Services (EMS) - Rule Definitions (Docket No. 16-0102-1301) (New Chapter)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.01.02 - Rules Pertaining To Emergency Medical Services (EMS) - Rule Definitions (New Chapter). The Department states that this new chapter provides a new set of definitions for the EMS chapters of rules as well as authority, scope and references to the EMS chapters. This chapter also provides office hours and contact information and confidentiality of records and Public Records Act compliance.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1023, Idaho Code.

(3) IDAPA 16.01.03 - Rules Pertaining To Emergency Medical Services (EMS) - Agency Licensing Requirements (Docket No. 16-0103-1301) (New Chapter)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.01.03 - Rules Pertaining To Emergency Medical Services (EMS) - Agency Licensing Requirements (New Chapter). The Department states that this new chapter of rules ensures that EMS agencies meet minimum licensing, staffing and equipment requirements. The Department further states that this chapter reflects current technology and deployment models being used by EMS agencies in Idaho and will ensure compliance with rules that protect public health and safety. Specifically, this new chapter provides for the following:

- (1) Types of agency licensing models and requirements and air medical utilization requirements;
- (2) Personnel and equipment requirements for agency licensure;
- (3) Application requirements and processes for agency licensure and renewals;
- (4) Waivers for agency licensure;
- (5) EMS agency agreements, plans, policies and inspections;
- (6) Record retention and management of system data and submission requirements for agency licensure;
- (7) References to licensure requirements in other chapters.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1023, Idaho Code.

(4) IDAPA 16.01.07 - Rules Pertaining To Emergency Medical Services (EMS) - Personnel Licensing Requirements (Docket No. 16-0107-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.01.07 - Rules Pertaining To Emergency Medical Services (EMS) - Personnel Licensing Requirements. The Department states

that this rulemaking aligns this chapter with the new chapters of rules. Specifically, this rulemaking changes references to the EMS Bureau to the Bureau of Emergency Medical Services and Preparedness; and removes definitions and adds a reference to the new chapter on definitions. IDAPA 16.01.02.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1023, Idaho Code.

(5) IDAPA 16.01.12 - Rules Pertaining To Emergency Medical Services (EMS) - Complaints, Investigations & Disciplinary Actions (Docket No. 16-0112-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.01.12 - Rules Pertaining To Emergency Medical Services (EMS) - Complaints, Investigations & Disciplinary Actions. The Department states that this rulemaking aligns this chapter with the new chapters of rules. Specifically, this rulemaking changes references to the EMS Bureau to the Bureau of Emergency Medical Services and Preparedness; revises references to other rule chapters; and removes definitions and adds a reference to the new chapter on definitions. IDAPA 16.01.02.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1023, Idaho Code.

(6) IDAPA 16.02.03 - Rules Pertaining To Emergency Medical Services (Docket No. 16-0203-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.02.03 - Rules Pertaining To Emergency Medical Services. The Department states that this rulemaking is to bring this chapter into compliance with the new chapters for definitions (16.01.02) and agency licensure (16.01.03). Specifically, this rulemaking removes agency licensure requirements and air medical utilization requirements, removes definitions and updates references for the new chapters.

The Department states that negotiated rulemaking was conducted and the Notice of Intent to Promulgate Rules was published in Vol. 13-4, April 3, 2013, and Vol. 13-5, May 1, 2013, of the Idaho Administrative Bulletins. Public hearings are scheduled for August 22 in Coeur d'Alene, August 26 in Boise and August 28 in Pocatello. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections and 56-1023, Idaho Code.

cc: Department of Health and Welfare - Emergency Medical Services (EMS)
Tamara Prisock
Chris Stoker

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.01.01 - EMERGENCY MEDICAL SERVICES (EMS) - ADVISORY COMMITTEE (EMSAC)

DOCKET NO. 16-0101-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services (EMS) chapters of rules. The changes being made to this chapter are needed to align these rules with the new "EMS - Rule Definitions" chapter being implemented under Docket 16-0102-1301 in this Bulletin. This change updates definitions necessary to meet the ever-changing terminology and technology used to protect the health and safety of the public in emergency situations. There is a name change in the Department for the Bureau of Emergency Services and Preparedness that has also been included in this docket.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: NA

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 9th day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720

Boise, ID 83720-0036
phone: (208) 334-5564
fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0101-1301

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. (3-29-12)

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. (3-29-12)

03. Street Address. (3-29-12)

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (3-29-12)

b. The EMS Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. (~~3-29-12~~)(____)

04. Telephone. (3-29-12)

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (3-29-12)

b. The telephone number for the EMS Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free, phone number is 1-877-554-3367. (~~3-29-12~~)(____)

05. Internet Websites. (3-29-12)

a. The Department's internet website is found at <http://www.healthandwelfare.idaho.gov>. (3-29-12)

b. The Bureau of Emergency Medical Services ~~Bureau's~~ and Preparedness internet website is found at <http://www.idahoems.org>. (~~3-29-12~~)(____)

(BREAK IN CONTINUITY OF SECTIONS)

010. DEFINITIONS AND ABBREVIATIONS.

For the purposes of this chapter, ~~of rules the following terms~~ the definitions in IDAPA 16.01.02, "Emergency Medical Services (EMS) -- Rule Definitions" apply. (~~3-29-12~~)(____)

~~01.~~ **Emergency Medical Services Advisory Committee (EMSAC).** *The statewide advisory board of the EMS Bureau whose members are appointed by the Director of the Idaho Department of Health and Welfare to provide counsel to the Department on administering the EMS Act.* (3-29-12)

~~02.~~ **Third Service.** *An EMS agency that is neither fire nor law enforcement based.* (3-29-12)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.01.02 - EMERGENCY MEDICAL SERVICES (EMS) - RULE DEFINITIONS

DOCKET NO. 16-0102-1301 (NEW CHAPTER)

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services chapters of rules. This new chapter of rules is needed to align definitions for all EMS chapters of rule in order to meet the ever-changing terminology and technology used to protect the health and safety of the public in emergency situations. This new chapter will ensure that EMS chapters that are being implemented or updated will use the same definitions and keep other EMS chapters with current and consistent terminology to avoid confusion, and ensure compliance with licensing requirements.

This new chapter of rules provides the following:

1. Definitions for the EMS chapters of rules;
2. Authority, scope, and references to the EMS chapters to which these rules apply; and
3. Required sections to meet the requirements of the rules of the Office of the Administrative Rules Coordinator.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 1st day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5564; fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0102-1301

**IDAPA 16
TITLE 01
CHAPTER 02**

16.01.02 - EMERGENCY MEDICAL SERVICES (EMS) - RULE DEFINITIONS

000. LEGAL AUTHORITY.

The Idaho Board of Health and Welfare is authorized under Section 56-1023, Idaho Code, to adopt rules and standards concerning the administration of the Idaho Emergency Medical Services Act, Sections 56-1011 through 56-1023, Idaho Code. The Director is authorized under Section 56-1003, Idaho Code, to supervise and administer an emergency medical services program. ()

001. TITLE AND SCOPE.

01. Title. The title of these rules is IDAPA 16.01.02, "Emergency Medical Services (EMS) - Rule Definitions." ()

02. Scope. These rules contain the definitions used throughout the Emergency Medical Services chapters of rules adopted by the Department. Those chapters include: ()

- a.** IDAPA 16.01.01, "Emergency Medical Services (EMS) - Advisory Committee (EMSAC)"; ()
- b.** IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements"; ()
- c.** IDAPA 16.01.07, "Emergency Medical Services (EMS) - Personnel Licensing Requirements"; ()
- d.** IDAPA 16.01.12, "Emergency Medical Services (EMS) - Complaints, Investigations and

Disciplinary Actions”; and ()
e. IDAPA 16.02.03, “Emergency Medical Services.” ()

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, the Department may have written statements that pertain to the interpretation of this chapter. ()

003. ADMINISTRATIVE APPEALS.

Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, “Rules Governing Contested Case Proceedings and Declaratory Rulings.” ()

004. INCORPORATION BY REFERENCE.

There are no documents incorporated by reference in this chapter of rules. ()

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. ()

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. ()

03. Street Address. ()

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. ()

b. The Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. ()

04. Telephone. ()

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. ()

b. The telephone number for the Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free phone number is 1-877-554-3367. ()

05. Internet Websites. ()

a. The Department internet website is found at <http://www.healthandwelfare.idaho.gov>. ()

b. The Bureau of Emergency Medical Services and Preparedness internet website is found at <http://www.idahoems.org>. ()

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.

01. Confidentiality of Records. Any disclosure of confidential information used or disclosed in the course of the Department’s business is subject to the restrictions in state or federal law, federal regulation, and IDAPA 16.05.01, “Use and Disclosure of Department Records.” ()

02. Public Records Act. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when request for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure. ()

007. -- 009. (RESERVED)

010. DEFINITIONS AND ABBREVIATIONS A THROUGH B.

For the purposes of the Emergency Medical Services (EMS) chapters of rules, the following definitions apply:()

- 01. Advanced Emergency Medical Technician (AEMT).** An AEMT is a person who: ()
- a.** Has met the qualifications for licensure under Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.07, "Emergency Medical Services (EMS) - Personnel Licensing Requirements"; ()
 - b.** Is licensed by the Department under Sections 56-1011 through 56-1023, Idaho Code; ()
 - c.** Carries out the practice of emergency medical care within the scope of practice for AEMT determined by the Idaho Emergency Medical Services Physician Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission"; and ()
 - d.** Practices under the supervision of a physician licensed in Idaho. ()
- 02. Advanced Life Support (ALS).** The provision of medical care, medication administration and treatment with medical devices that correspond to the knowledge and skill objectives in the Paramedic curriculum currently approved by the State Health Officer and within the scope of practice defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission," by persons licensed as Paramedics by the Department. ()
- 03. Advanced Practice Professional Nurse.** A person who meets all the applicable requirements and is licensed to practice as an Advanced Practice Professional Nurse under Sections 54-1401 through 54-1418, Idaho Code. ()
- 04. Advertise.** Communication of information to the public, institutions, or to any person concerned, by any oral, written, graphic means including handbills, newspapers, television, radio, telephone directories, billboards, or electronic communication methods. ()
- 05. Affiliation.** The formal association that exists between an agency and those licensed personnel who appear on the agency's roster, which includes active participation, collaboration, and involvement. Affiliation can be demonstrated by the credentialing of licensed personnel by the agency medical director. ()
- 06. Affiliating EMS Agency.** The licensed EMS agency, or agencies, under which licensed personnel are authorized to provide patient care. ()
- 07. Air Ambulance.** Any privately or publicly owned fixed wing aircraft or rotary wing aircraft used for, or intended to be used for, the transportation of persons experiencing physiological or psychological illness or injury who may need medical attention during transport. This may include dual or multipurpose vehicles which otherwise comply with Sections 56-1011 through 56-1023, Idaho Code, and specifications established in IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements." ()
- 08. Air Medical Agency.** An agency licensed by the Department that responds to requests for patient care and transportation from hospitals and EMS agencies using a fixed wing aircraft or rotary wing aircraft. ()
- 09. Air Medical I.** A service type available to a licensed air medical EMS agency that meets the requirements in IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements." ()
- 10. Air Medical II.** A service type available to a licensed air medical EMS agency that meets the requirements in IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements." ()
- 11. Air Medical Response.** The deployment of an aircraft licensed as an air ambulance to an emergency scene intended for the purpose of patient treatment and transportation. ()

12. Ambulance. Any privately or publicly owned motor vehicle, or nautical vessel, used for, or intended to be used for, the transportation of sick or injured persons who may need medical attention during transport. This may include dual or multipurpose vehicles which otherwise comply with Sections 56-1011 through 56-1023, Idaho Code, and specifications established in IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements." ()

13. Ambulance-Based Clinicians. Licensed Professional Nurses and Advanced Practice Professional Nurses who are currently licensed under Sections 54-1401 through 54-1418, Idaho Code, and Physician Assistants who are currently licensed under Sections 54-1801 through 54-1841, Idaho Code. ()

14. Ambulance Agency. An agency licensed by the Department under Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements," operated with the intent to provide personnel and equipment for medical treatment at an emergency scene, during transportation or during transfer of persons experiencing physiological or psychological illness or injury who may need medical attention during transport. ()

15. Applicant. Any organization that is requesting an agency license under Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements," including the following: ()

- a. An organization seeking a new license; ()
- b. An existing agency that intends to: ()
 - i. Change the level of licensed personnel it utilizes; ()
 - ii. Change its geographic coverage area (except by agency annexation); or ()
 - iii. Begin or discontinue providing patient transport services. ()

16. Assessment. The evaluation of a patient by EMS licensed personnel intending to provide treatment or transportation to that patient. ()

17. Basic Life Support (BLS). The provision of medical care, medication administration, and treatment with medical devices which correspond to the knowledge and skill objectives in the EMR or EMT curriculum currently approved by the State Health Officer and within scope of practice defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission," by persons licensed as EMRs or EMTs by the Department. ()

18. Board. The Idaho Board of Health and Welfare. ()

011. DEFINITIONS AND ABBREVIATIONS C THROUGH E.

For the purposes of the Emergency Medical Services (EMS) chapters of rules, the following definitions apply:()

01. Call Volume. The number of requests for service that an agency either anticipated or responded to during a designated period of time. ()

02. Candidate. Any individual who is requesting an EMS personnel license under Sections 56-1011 through 56-1023, Idaho Code, IDAPA 16.01.07, "Emergency Medical Services (EMS) - Personnel Licensing Requirements." ()

03. Certificate of Eligibility. Documentation that an individual is eligible for affiliation with an EMS agency, having satisfied all requirements for an EMS Personnel Licensure except for affiliation, but is not licensed to practice. ()

04. Certification. A credential issued to an individual by the Department for a specified period of time indicating that minimum standards have been met. ()

- 05. Certified EMS Instructor.** An individual approved by the Department, who has met the requirements in IDAPA 16.02.03, "Emergency Medical Services," to provide EMS education and training. ()
- 06. Compensated Volunteer.** An individual who performs a service without promise, expectation, or receipt of compensation other than payment of expenses, reasonable benefits or a nominal fee to perform such services. This individual cannot be a part-time or full-time employee of the same organization performing the same services as a volunteer and employee. ()
- 07. Credentialing.** The local process by which licensed EMS personnel are authorized to provide medical care in the out-of-hospital, hospital, and medical clinic setting, including the determination of a local scope of practice. ()
- 08. Credentialed EMS Personnel.** Individuals who are authorized to provide medical care by the EMS medical director, hospital supervising physician, or medical clinic supervising physician. ()
- 09. Critical Care.** The treatment of a patient with continuous care, monitoring, medication, or procedures requiring knowledge or skills not contained within the Paramedic curriculum approved by the State Health Officer. Interventions provided by Paramedics are governed by the scope of practice defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." ()
- 10. Critical Care Agency.** An ambulance or air medical EMS agency that advertises and provides all of the skills and interventions defined as critical care in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." ()
- 11. Department.** The Idaho Department of Health and Welfare. ()
- 12. Director.** The Director of the Idaho Department of Health and Welfare or his designee. ()
- 13. Division.** The Division of Public Health, Idaho Department of Health and Welfare. ()
- 14. Emergency.** A medical condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the person's health in serious jeopardy, or in causing serious impairments of bodily function or serious dysfunction of any bodily organ or part. ()
- 15. Emergency Medical Care.** The care provided to a person suffering from a medical condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the person's health in serious jeopardy, or in causing serious impairments of bodily function or serious dysfunction of any bodily organ or part. ()
- 16. Emergency Medical Responder (EMR).** An EMR is a person who: ()
- a.** Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.07, "Emergency Medical Services - Personnel Licensing Requirements"; ()
 - b.** Is licensed by the Department under Sections 56-1011 through 56-1023, Idaho Code; ()
 - c.** Carries out the practice of emergency medical care within the scope of practice for EMR determined by the Idaho Emergency Medical Services Physician Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission"; and ()
 - d.** Practices under the supervision of a physician licensed in Idaho. ()
- 17. Emergency Medical Services (EMS).** The system utilized in responding to a perceived individual

need for immediate care in order to prevent loss of life, aggravation of physiological or psychological illness, or injury. ()

18. Emergency Medical Services Advisory Committee (EMSAC). The statewide advisory board of the Department as described in IDAPA 16.01.01, "Emergency Medical Services (EMS) - Advisory Committee (EMSAC)." EMSAC members are appointed by the Director of the Idaho Department of Health and Welfare to provide counsel to the Department on administering the EMS Act. ()

19. EMS Agency. Any organization licensed by the Department under Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.03, "Emergency Medical Services (EMS) - Agency Licensing Requirements," that operates an air medical service, ambulance service, or non-transport service. ()

20. EMS Bureau. The Bureau of Emergency Medical Services (EMS) & Preparedness of the Idaho Department of Health and Welfare. ()

21. EMS Medical Director. A physician who supervises the medical activities of licensed personnel affiliated with an EMS agency. ()

22. EMS Physician Commission (EMSPC). The Idaho Emergency Medical Services Physician Commission created under Section 56-1013A, Idaho Code, also referred to as "the Commission." ()

23. Emergency Medical Technician (EMT). An EMT is a person who: ()

a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.07, "Emergency Medical Services - Personnel Licensing Requirements"; ()

b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; ()

c. Carries out the practice of emergency medical care within the scope of practice for EMT determined by the Idaho Emergency Medical Services Physician Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission"; and ()

d. Practices under the supervision of a physician licensed in Idaho. ()

24. Emergency Scene. Any setting outside of a hospital, with the exception of the inter-facility transfer, in which the provision of EMS may take place. ()

012. DEFINITIONS AND ABBREVIATIONS F THROUGH N.
For the purposes of the Emergency Medical Services (EMS) chapters of rules, the following definitions apply:()

01. Full-Time Paid Personnel. Personnel who perform a service with the promise, expectation, or receipt of compensation for performing such services. Full-time personnel differ from part-time personnel in that full-time personnel work a more regular schedule and typically work more than thirty-five (35) hours per week. ()

02. Glasgow Coma Score (GCS). A scale used to determine a patient's level of consciousness. It is a rating from three (3) to fifteen (15) of the patient's ability to open his eyes, respond verbally, and move normally. The GCS is used primarily during the examination of patients with trauma or stroke. ()

03. Ground Transport Time. The total elapsed time calculated from departure of the ambulance from the scene to arrival of the ambulance at the patient destination. ()

04. Hospital. A facility in Idaho licensed under Sections 39-1301 through 39-1314, Idaho Code, and defined in Section 39-1301(a)(1), Idaho Code. ()

05. Intermediate Life Support (ILS). The provision of medical care, medication administration, and treatment with medical devices which correspond to the knowledge and skill objectives in the AEMT curriculum currently approved by the State Health Officer and within the scope of practice defined in IDAPA 16.02.02, "Rules of

the Idaho Emergency Medical Services (EMS) Physician Commission,” by persons licensed as AEMTs by the Department. ()

06. Investigation. Research of the facts concerning a complaint or issue of non-compliance which may include performing or obtaining interviews, inspections, document review, detailed subject history, phone calls, witness statements, other evidence, and collaboration with other jurisdictions of authority. ()

07. License. A document issued by the Department to an agency or individual authorizing specified activities and conditions as described under Sections 56-1011 through 56-1023, Idaho Code. ()

08. Licensed Personnel. Those individuals who are licensed by the Department as Emergency Medical Responders (EMR), Emergency Medical Technicians (EMT), Advanced Emergency Medical Technicians (AEMT), and Paramedics. ()

09. Licensed Professional Nurse. A person who meets all the applicable requirements and is licensed to practice as a Licensed Professional Nurse under Sections 54-1401 through 54-1418, Idaho Code. ()

10. Local Incident Management System. The local system of interagency communications, command, and control established to manage emergencies or demonstrate compliance with the National Incident Management System. ()

11. Medical Supervision Plan. The written document describing the provisions for medical supervision of licensed EMS personnel. ()

12. National Registry of Emergency Medical Technicians (NREMT). An independent, non-governmental, not for profit organization which prepares validated examinations for the state's use in evaluating candidates for licensure. ()

13. Non-transport Agency. An agency licensed by the Department, operated with the intent to provide personnel or equipment for medical stabilization at an emergency scene, but not intended to be the service that will actually transport sick or injured persons. ()

14. Non-transport Vehicle. Any vehicle operated by an agency with the intent to provide personnel or equipment for medical stabilization at an emergency scene, but not intended as the vehicle that will actually transport sick or injured persons. ()

15. Nurse Practitioner. An Advanced Practice Professional Nurse, licensed in the category of Nurse Practitioner, as defined in IDAPA 23.01.01, “Rules of the Idaho Board of Nursing.” ()

013. DEFINITIONS AND ABBREVIATIONS O THROUGH Z.

For the purposes of the Emergency Medical Services (EMS) chapters of rules, the following definitions apply:()

01. Out-of-Hospital. Any setting outside of a hospital, including inter-facility transfers, in which the provision of EMS may take place. ()

02. Paramedic. A paramedic is a person who: ()

a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.07, “Emergency Medical Services - Personnel Licensing Requirements”; ()

b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; ()

c. Carries out the practice of emergency medical care within the scope of practice for paramedic determined by the Idaho Emergency Medical Services Physician Commission (EMSPC), under IDAPA 16.02.02, “Rules of the Idaho Emergency Medical Services (EMS) Physician Commission”; and ()

d. Practices under the supervision of a physician licensed in Idaho. ()

- 03. Part-Time Paid Personnel.** Personnel who perform a service with the promise, expectation, or receipt of compensation for performing such services. Part-time personnel differ from the full-time personnel in that the part-time personnel typically work an irregular schedule and work less than thirty-five (35) hours per week. ()
- 04. Patient.** A sick, injured, incapacitated, or helpless person who is under medical care or treatment. ()
- 05. Patient Assessment.** The evaluation of a patient by EMS licensed personnel intending to provide treatment or transportation to that patient. ()
- 06. Patient Care.** The performance of acts or procedures under emergency conditions in responding to a perceived individual need for immediate care in order to prevent loss of life, aggravation of physiological or psychological illness, or injury. ()
- 07. Patient Movement.** The relatively short distance transportation of a patient from an off-highway emergency scene to a rendezvous with an ambulance or air ambulance. ()
- 08. Patient Transport.** The transportation of a patient by ambulance or air ambulance from a rendezvous or emergency scene to a medical care facility. ()
- 09. Physician.** A person who holds a current active license in accordance with Section 54-1803, Idaho Code, issued by the State Board of Medicine to practice medicine and surgery, osteopathic medicine and surgery, or osteopathic medicine in Idaho and is in good standing with no restrictions upon, or actions taken against, his license. ()
- 10. Physician Assistant.** A person who meets all the applicable requirements and is licensed to practice as a licensed physician assistant under Title 54, Chapter 18, Idaho Code. ()
- 11. Planned Deployment.** The deliberate, planned placement of EMS personnel outside of an affiliating agency's deployment model declared on the application under which the agency is currently licensed. ()
- 12. Prehospital.** Any setting outside of a hospital, with the exception of transfers, in which the provision of EMS may take place. ()
- 13. Response Time.** The total time elapsed from when the agency receives a call for service to when the agency arrives and is available at the scene. ()
- 14. Skills Proficiency.** The process overseen by an EMS agency medical director to verify competency in psychomotor skills. ()
- 15. State Health Officer.** The Administrator of the Division of Public Health. ()
- 16. Supervision.** The medical direction by a licensed physician of activities provided by licensed personnel affiliated with a licensed ambulance, air medical, or non-transport service, including: ()
- a. Establishing standing orders and protocols; ()
 - b. Reviewing performance of licensed personnel; ()
 - c. Providing instructions for patient care via radio or telephone; and ()
 - d. Other oversight. ()
- 17. Third Service.** A public EMS agency that is neither law-enforcement nor fire-department based. ()

()

18. Transfer. The transportation of a patient from one (1) medical care facility to another. ()

19. Uncompensated Volunteer. An individual who performs a service without promise, expectation, or receipt of any compensation for the services rendered. An uncompensated volunteer cannot be a part-time or full-time employee of the same organization performing the same services as a volunteer and employee. ()

014. -- 999. (RESERVED)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.01.03 - EMERGENCY MEDICAL SERVICES (EMS) -- AGENCY LICENSING REQUIREMENTS

DOCKET NO. 16-0103-1301 (NEW CHAPTER)

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services chapters of rules. This new chapter of rules is needed to ensure that EMS agencies meet minimum licensing, staffing, and equipment requirements. This chapter reflects current technology and deployment models being used by EMS agencies in Idaho and will ensure compliance with rules that protect the health and safety of the public in emergency situations.

This new chapter of rules provides the following:

1. Types of agency licensing models, licensing requirements, and air medical utilization requirements;
2. Personnel and equipment requirements for agency licensure;
3. Application requirements for agency licensure and renewals;
4. Record retention and management of system data and submission requirements for agency licensure;
5. References to licensure requirements in other chapters, such as personnel, investigations, disciplinary actions; and
6. Required sections to meet the requirements of the rules of the Office of the Administrative Rules Coordinator.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the “Minimum Equipment Standards for Licensed EMS Services”, edition 2014, version 1.0, is being incorporated by reference into these rules to give it the force and effect of law. The document is not being reprinted in this chapter of rules due to its length and format and because of the cost for republication.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 9th day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5564; fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0103-1301

**IDAPA 16
TITLE 01
CHAPTER 03**

16.01.03 - EMERGENCY MEDICAL SERVICES (EMS) - AGENCY LICENSING REQUIREMENTS

000. LEGAL AUTHORITY.

The Idaho Board of Health and Welfare is authorized under Section 56-1023, Idaho Code, to adopt rules and standards concerning the administration of the Idaho Emergency Medical Services Act, Sections 56-1011 through 56-1023, Idaho Code. The Director is authorized under Section 56-1003, Idaho Code, to supervise and administer an emergency medical service program. ()

001. TITLE AND SCOPE.

01. Title. The title of these rules is IDAPA 16.01.03, “Emergency Medical Services (EMS) - Agency Licensing Requirements.” ()

02. Scope. These rules include the categories of EMS agencies, eligibility requirements and standards for the licensing of EMS agencies, utilization of air medical services, and the initial application and renewal process for EMS agencies licensed by the state. ()

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, the Department may have written statements that pertain to the interpretation of this chapter, or to the documentation of compliance with these rules. ()

003. ADMINISTRATIVE APPEALS.

Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ()

004. INCORPORATION BY REFERENCE.

The Board of Health and Welfare has adopted the "Minimum Equipment Standards for Licensed EMS Services," edition 2014, version 01, as its standard for minimum equipment requirements for licensed EMS Agencies and incorporates it by reference. Copies of these standards may be obtained from the Department, as described in Section 005 of these rules, or online at: <http://www.idahoems.org>. ()

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. ()

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. ()

03. Street Address. ()

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. ()

b. The Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. ()

04. Telephone. ()

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. ()

b. The telephone number for the Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free phone number is 1-877-554-3367. ()

05. Internet Websites. ()

a. The Department internet website is found at <http://www.healthandwelfare.idaho.gov>. ()

b. The Bureau of Emergency Medical Services and Preparedness internet website is found at <http://www.idahoems.org>. ()

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.

01. Confidentiality of Records. Any disclosure of confidential information used or disclosed in the course of the Department's business is subject to the restrictions in state or federal law and must comply with IDAPA 16.05.01, "Use and Disclosure of Department Records." ()

02. Public Records Act. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure. ()

007. -- 009. (RESERVED)

010. DEFINITIONS.

For the purposes of this chapter, the definitions in IDAPA 16.01.02, "Emergency Medical Services (EMS) - Rule Definitions," apply. ()

011. -- 074. (RESERVED)

075. INVESTIGATION OF COMPLAINTS FOR EMS LICENSING VIOLATIONS.

Investigation of complaints and disciplinary actions for EMS agency licensing are provided under IDAPA 16.01.12, "Emergency Medical Services (EMS) - Complaints, Investigations, and Disciplinary Actions." ()

076. ADMINISTRATIVE LICENSE OR CERTIFICATION ACTION.

Any license or certification may be suspended, revoked, denied, or retained with conditions for noncompliance with any standard or rule. Administrative license or certification actions, including fines, imposed by the EMS Bureau for any action, conduct, or failure to act that is inconsistent with the professionalism, or standards, or both, are provided under Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.01.12, "Emergency Medical Services (EMS) - Complaints, Investigations, and Disciplinary Actions." ()

077. -- 099. (RESERVED)

**EMS AGENCY GENERAL LICENSURE REQUIREMENT
(SECTIONS 100-199)**

100. AGENCY LICENSE REQUIRED.

Any organization that advertises or provides ambulance, air medical, or non-transport emergency medical services in Idaho must be licensed as an EMS agency under the requirements in Sections 56-1011 through 56-1023, Idaho Code, and this chapter of rules. ()

101. EXEMPTION OF EMS AGENCY LICENSURE.

An organization, licensed without restriction to provide emergency medical services in another state and not restricted from operating in Idaho by the Department, may provide emergency medical services in Idaho within the limits of its license without an Idaho EMS license only when the organization meets one (1) of the following: ()

01. Interstate Compact with Idaho. The organization holds an EMS license in another state where an interstate compact specific to EMS agency licensure with Idaho is in effect. ()

02. Emergency, Natural, or Man-made Disaster. The organization is responding to an emergency, or a natural or man-made disaster, declared by federal, state, or local officials and the services of the organization are requested by an entity of local or state government in Idaho. ()

03. Transfer of Patient From Out-of-State Medical Facility. The organization is: ()

a. Transferring a patient from an out-of-state medical facility to a medical facility in Idaho. The organization may return the patient to the point of origin; or ()

b. Transferring a patient from an out-of-state medical facility through the state of Idaho. ()

04. Transport of Patient From Out-of-State Emergency Scene. The organization is: ()

a. Transporting a patient from an out-of-state emergency scene to a medical facility in Idaho; or ()

b. Transporting a patient to a rendezvous with another ambulance. ()

102. SERVICES PROVIDED BY A LICENSED EMS AGENCY.

An EMS agency can provide only those services that are within the agency's service type, clinical level, and operational declarations stated on the most recent license issued by the Department, except when the agency has a

planned deployment agreement described in Section 603 of these rules. ()

103. ELIGIBILITY FOR EMS AGENCY LICENSURE.

An entity is eligible for EMS agency licensure upon demonstrated compliance with the requirements in Idaho statutes and administrative rules in effect at the time the Department receives the application. ()

104. -- 199. (RESERVED)

**EMS AGENCY LICENSURE MODEL
(SECTIONS 200-299)**

200. EMS AGENCY-- LICENSING MODEL.

01. Licensing an EMS Agency. An eligible EMS agency in Idaho is licensed using a descriptive model that bases the agency licensure on the declarations made in the most recent approved initial or renewal application. An EMS agency must provide only those EMS services described in the most recent application on which the agency was issued a license by the Department. ()

02. EMS Agency License Models. An EMS agency license is based on the agency's service types, clinical levels, license duration, and operational declarations. Geographic coverage areas and resources may differ between the service types, clinical levels, and operational declarations under which an agency is licensed. ()

03. EMS Agency Providing Both Air Medical and Ground-Based EMS Services. An EMS agency that provides both air medical and ground-based EMS services must be licensed accordingly and meet all the requirements of an air medical and either an ambulance or non-transport agency, depending on the ground EMS services provided. ()

04. Multiple Organization EMS Agency. An EMS agency may be comprised of multiple organizations licensed under a single responsible authority to which the governing officials of each organization agree. The authority must establish a deployment strategy that declares in which areas and at what times within their geographical response area will be covered by each declared service type, clinical level, and operational declaration. ()

201. EMS AGENCY -- SERVICE TYPES.

An EMS agency may be licensed as one (1) or more service types. An agency that provides multiple service types must meet the minimum requirements for each service type provided. The following are the agency services types available for EMS agency licensure. ()

01. Ground Agency Service Types. ()

a. Non-transport. ()

b. Ambulance. ()

02. Air Medical Agency Service Types. ()

a. Air Medical I. ()

b. Air Medical II. ()

202. EMS AGENCY -- CLINICAL LEVELS.

An EMS agency is licensed at one (1) or more of the following clinical levels depending on the agency's highest level of licensed personnel and life support services advertised or offered. ()

01. Non-transport. ()

- a. EMR/BLS; ()
- b. EMT/BLS; ()
- c. AEMT/ILS; or ()
- d. Paramedic/ALS. ()
- 02. Ambulance.** ()
 - a. EMT/BLS; ()
 - b. AEMT/ILS; ()
 - c. Paramedic/ALS; or ()
 - d. Paramedic/ALS Critical Care. ()
- 03. Air Medical I.** ()
 - a. Paramedic/ALS; or ()
 - b. Paramedic/ALS Critical Care. ()
- 04. Air Medical II.** ()
 - a. EMT/BLS; or ()
 - b. AEMT/ILS. ()

203. EMS AGENCY -- LICENSE DURATION.

Each EMS agency must identify the license duration for each license type. License durations are: ()

01. Ongoing. The agency is licensed to provide EMS personnel and equipment for an ongoing period of time and plans to renew its license on an annual basis. ()

02. Limited. The agency is licensed to provide EMS personnel and equipment for the duration of a specific event or a specified period of time with no expectation of renewing the agency license. ()

204. GROUND EMS AGENCY -- OPERATIONAL DECLARATIONS.

An agency providing ground services is licensed with one (1) or more of the following operational declarations depending on the services that the agency advertises or offers. ()

01. Prehospital. The prehospital operational declaration is available to an agency with primary responsibility for responding to calls for EMS within their designated geographic coverage area. ()

02. Prehospital Support. The prehospital support operational declaration is available to an agency that provides support under agreement to a prehospital agency having primary responsibility for responding to calls for EMS within a designated geographic coverage area. ()

03. Community Health EMS. The community health EMS operational declaration is available to an agency with a prehospital operational declaration that provides personnel and equipment for medical assessment and treatment at a non-emergency scene or at the direction of a physician or independent practitioner. ()

04. Transfer. The transfer operational declaration is available to an ambulance agency that provides EMS personnel and equipment for the transportation of patients from one (1) medical care facility in their designated geographic coverage area to another. An agency with this operational declaration must declare which sending

facilities it routinely responds to if requested. ()

05. Standby. The standby operational declaration is available to an agency that provides EMS personnel and equipment to be staged at prearranged events within their designated geographic coverage area. ()

06. Non-Public. The non-public operational declaration is available to an agency that provides EMS personnel and equipment intended to treat patients who are employed or contracted by the license holder. An agency with a non-public operational declaration is not intended to treat members of the general public. A non-public agency must maintain written plans for patient treatment and transportation. ()

07. Rescue. The rescue operational declaration is available to an agency that provides EMS personnel and equipment to locate endangered persons at an emergency incident, treat the injured, and remove those persons from danger. ()

08. Extrication. The extrication operational declaration is available to an agency that provides EMS personnel and equipment intended to remove and support trapped persons from a vehicle or machinery. ()

205. AIR MEDICAL AGENCY -- OPERATIONAL DECLARATIONS.

An agency providing air medical services is licensed with one (1) or both of the following operational declarations depending on the services that the agency advertises or offers. Service levels, geographic coverage areas, and resources may differ between the operational declarations under which an agency is licensed. ()

01. Air Medical Transport. The air medical transport operational declaration is available to an air medical agency that provides transportation of patients by air ambulance from a rendezvous or emergency scene to a medical care facility within its designated geographic coverage area. ()

02. Air Medical Transfer. The air medical transfer operational declaration is available to an Air Medical I agency that provides transportation of patients by air ambulance from one (1) medical care facility in its designated geographic coverage area to another. An agency with this operational declaration must declare which sending facilities it routinely responds to if requested. ()

206. -- 209. (RESERVED)

210. AMBULANCE EMS AGENCY -- PATIENT TRANSPORT OR TRANSFER.

An agency that is licensed as an ambulance service is intended for patient transport or transfer. ()

01. Transport. An ambulance agency may provide transportation of patients from a rendezvous or emergency scene to a rendezvous or medical care facility when that agency is licensed with one (1) of the following operational declarations: ()

a. Prehospital; ()

b. Prehospital Support; ()

c. Standby; ()

d. Rescue; or ()

e. Extrication. ()

02. Transfer. An ambulance agency that provides the operational declaration of transfer can provide transportation of patients from one (1) medical care facility within their designated geographic coverage area to another. ()

211. AIR MEDICAL EMS AGENCY -- PATIENT TRANSPORT OR TRANSFER.

An agency that is licensed with an air medical service type is intended for patient transport or transfer. ()

01. Transport. An air medical agency that provides the operational declaration of air medical transport may provide transportation of patients from a rendezvous or emergency scene to a medical care facility. ()

02. Transfer. An air medical agency that provides the operational declaration of air medical transfer can provide transportation of patients from one (1) medical care facility within their designated geographic coverage area to another. ()

212. NON-TRANSPORT EMS AGENCY -- PATIENT MOVEMENT.

A non-transport agency is an agency that is not intended for patient transport and cannot advertise ambulance services. A non-transport agency can move a patient by vehicle only when: ()

01. Accessibility of Emergency Scene. The responding ambulance or air ambulance agency cannot access the emergency scene. ()

02. Licensed Personnel Level. Patient care is provided by EMS personnel licensed at: ()

a. EMT level or higher; or ()

b. EMR level only when the patient care integration agreement under which the non-transport agency operates addresses and enable patient movement. The agency must ensure that its personnel are trained and credentialed in patient packaging and movement. ()

03. Rendezvous with Transport EMS Agency. Movement of the patient is to rendezvous with an ambulance or air ambulance agency during which the EMS personnel must be in active communication with the ambulance or air ambulance with which they will rendezvous. ()

04. Report Patient Movement. A non-transport agency must report all patient movement events to the Department within thirty (30) days of the event. ()

213. -- 299. (RESERVED)

**PERSONNEL REQUIREMENTS FOR EMS AGENCY LICENSURE
(SECTIONS 300-399)**

300. EMS AGENCY -- GENERAL PERSONNEL REQUIREMENTS.

Personnel must be licensed according to IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements." ()

01. Personnel Requirements for EMS Agency Licensure. Each agency must ensure availability of affiliated personnel licensed and credentialed at or above the agency's highest clinical level for the entire anticipated call volume for each of the agency's operational declarations. ()

02. Personnel Requirements for an Agency Utilizing Emergency Medical Dispatch. An agency dispatched by a public safety answering point (PSAP) that uses an emergency medical dispatch (EMD) process to determine the clinical needs of the patient must ensure availability of personnel licensed and credentialed at clinical levels appropriate to the anticipated call volume for each of the clinical levels the agency provides. ()

03. Personnel Requirements for Prehospital ALS. A licensed Paramedic must be present whenever prehospital, prehospital support, or air medical transport ALS services are provided. ()

301. AMBULANCE EMS AGENCY -- PERSONNEL REQUIREMENTS.

Each ambulance agency must ensure that there are two (2) crew members on each patient transport or transfer. The crew member providing patient care, at a minimum, must be a licensed EMT. ()

302. AIR MEDICAL EMS AGENCY -- PERSONNEL REQUIREMENTS.

Each air medical agency must ensure that there are two (2) crew members, not including the pilot, on each patient transport or transfer. The crew member providing patient care, at a minimum, must be a licensed EMT. An air medical agency must also demonstrate that the following exists. ()

01. Personnel for Air Medical I Agency. An Air Medical I agency must ensure that each flight includes at a minimum, one (1) licensed professional nurse and one (1) Paramedic. Based on the patient's need, an exception for transfer flights may include a minimum of one (1) licensed respiratory therapist and one (1) licensed professional nurse, or two (2) licensed professional nurses. ()

02. Personnel for Air Medical II Agency. An Air Medical II agency must ensure that each flight includes at a minimum, two (2) licensed patient care providers with one (1) patient care provider licensed at or above the agency's highest clinical level of licensure. ()

303. CRITICAL CARE -- PERSONNEL REQUIREMENTS.

Each ambulance or air medical agency that advertises the provision of critical care clinical capabilities must affiliate and deploy EMS personnel trained and credentialed to provide all critical care skills described in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." ()

304. PLANNED DEPLOYMENT -- PERSONNEL REQUIREMENTS.

Planned deployment allows affiliated EMS personnel to act and provide predetermined services outside of their affiliating agency's geographic coverage area. It can allow EMS personnel licensed at a higher clinical level to provide patient care within their credentialed scopes of practice even when the agency into which the planned deployment occurs is licensed at a lower clinical level. A planned deployment agreement must be formally documented and meet all the requirements listed in Section 603 of these rules. ()

305. AMBULANCE-BASED CLINICIANS -- PERSONNEL REQUIREMENTS.

01. Ambulance-Based Clinician Certified by Department. An EMS agency that advertises or provides out-of-hospital patient care by affiliating and utilizing a currently licensed professional nurse, advanced practice professional nurse, or physician assistant, as defined in IDAPA 16.01.02, "Emergency Medical Services (EMS) - Rule Definitions," must ensure that those individuals maintain a current ambulance-based clinician certificate issued by the Department. See Section 306 of these rules for exceptions to this requirement. ()

02. Obtaining an Ambulance-Based Clinician Certificate. An agency, on behalf of an individual who desires an ambulance-based clinician certificate, must provide the following information on the Department's application for a certificate: ()

a. Documentation that the individual holds a current, unrestricted license to practice issued by the Board of Medicine or Board of Nursing; and ()

b. Documentation that the individual has successfully completed an ambulance-based clinician course; or ()

c. Documentation that the individual has successfully completed an EMT course. ()

03. Maintaining an Ambulance-Based Clinician Certificate. An ambulance-based clinician certificate is valid for as long as the holder of the certificate is continuously licensed by his respective licensing board. ()

04. Revocation of an Ambulance-Based Clinician Certificate. The Department may revoke an ambulance-based clinician certificate based on the procedures for administrative license actions described in IDAPA 16.01.12, "Emergency Medical Services (EMS) -- Complaints, Investigations, and Disciplinary Actions." ()

05. Currently Practicing Ambulance-Based Clinicians. In order to continue the utilization of an ambulance-based clinician, an EMS agency must ensure that its currently practicing clinicians have obtained the Department-issued ambulance-based clinician certificate by July 1, 2015. ()

06. Licensed Personnel Requirements and Ambulance-Based Clinicians. An EMR/BLS, EMT/BLS, or AEMT/ILS agency may use ambulance-based clinicians to meet the licensed personnel requirements for agency licensure. ()

07. Agency Responsibilities for Ambulance-Based Clinicians. The agency must verify that each ambulance-based clinician possess a current ambulance-based clinician certificate issued by the Department. The agency must ensure that any ambulance-based clinician meets additional requirements of the corresponding licensing board. ()

306. UTILIZING PHYSICIAN ASSISTANTS, LICENSED PROFESSIONAL NURSES OR ADVANCED PRACTICE PROFESSIONAL NURSES.

An AEMT/ILS ambulance agency may use a non-certified physician assistant, licensed professional nurse, or advanced practice professional nurse as the crew member who is providing ILS patient services, only when accompanied by a licensed EMT in the patient compartment of the transport vehicle. ()

307. -- 399. (RESERVED)

**EMS AGENCY VEHICLE REQUIREMENTS
(SECTIONS 400-499)**

400. EMS AGENCY -- VEHICLE REQUIREMENTS.

Not all EMS agencies are required to have emergency response vehicles. An agency's need for emergency response vehicles is based on the deployment needs of the agency that is declared on the most recent agency licensure application. An agency with a deployment pattern that requires emergency response vehicles must meet the following requirements: ()

01. Condition of Response Vehicles. Each of the agency's EMS response vehicles must be in sound, safe, working condition. ()

02. Quantity of Response Vehicles. Each EMS agency must possess a sufficient quantity of EMS response vehicles to ensure agency personnel can respond to the anticipated call volume of the agency. ()

03. Motor Vehicle Licensing Requirements. Each EMS agency's response vehicles must meet the applicable Idaho motor vehicle license and insurance requirements. ()

04. Configuration and Standards for EMS Response Vehicles. Each of the EMS agency's response vehicles must be appropriately configured in accordance with the declared capabilities on the most recent agency license. Each EMS response vehicle must meet the minimum requirements for applicable federal, state, industry, or trade specifications and standards for ambulance or air ambulance vehicles as appropriate. Uniquely configured EMS response vehicles must be approved by the Department prior to being put into service. ()

05. Location of Emergency Response Vehicles. Each agency's EMS response vehicles must be stationed or staged within the agency's declared geographic coverage area in a manner that allows agency personnel to effectively respond to the anticipated volume and distribution of requests for service. ()

401. NON-TRANSPORT EMS AGENCY -- VEHICLES.

A licensed non-transport EMS agency may use ambulance vehicles to provide non-transport services. ()

402. EMS AGENCY -- MINIMUM EQUIPMENT INSPECTION REQUIREMENTS.

Any newly acquired EMS response vehicle must be inspected by the Department for medical care supplies and devices as specified in the "Minimum Equipment Standards for Licensed EMS Services," before being put into service, except when the newly acquired vehicle is a replacement vehicle and all equipment and supplies are transferred from the vehicle being taken out of service. ()

403. EMS AGENCY -- GROUND VEHICLE SAFETY INSPECTION REQUIREMENTS.

Each EMS agency that deploys emergency vehicles titled and registered for use on roads and highways, with the

exception of all-terrain vehicles and utility vehicles, must meet the following inspection requirements. ()

01. New Vehicle Inspection. Each newly acquired, used EMS response vehicle must successfully pass a safety inspection conducted by an inspector authorized to perform Department of Transportation (DOT) vehicle safety inspections prior to the vehicle being put in service. ()

02. Response Vehicle Involved in a Crash. Each EMS response vehicle, that is involved in a crash that could result in damage to one (1) or more of the vehicle systems identified in Subsection 403.03 of this rule, must successfully pass a safety inspection conducted by an inspector authorized to perform DOT vehicle safety inspections prior to being put back in service. ()

03. Vehicle Inspection Standards. Each vehicle safety inspection must verify conformity to the fuel system, exhaust, wheels and tires, lights, windshield wipers, steering, suspension, brakes, frame, and electrical system elements of a DOT vehicle safety inspection defined in Appendix G to Subchapter B of Chapter III at 49 CFR Section 396.17. ()

04. Vehicle Inspection Records. Each EMS agency must keep records of all emergency response vehicle safety inspections. These records must be made available to the Department upon request. ()

404. -- 499. (RESERVED)

**EMS AGENCY REQUIREMENTS AND WAIVERS
(SECTIONS 500-599)**

500. EMS AGENCY -- GENERAL EQUIPMENT REQUIREMENTS AND MODIFICATIONS. Each EMS agency must meet the requirements of the "Minimum Equipment Standards for Licensed EMS Services," incorporated by reference in Section 004 of these rules, in addition to the following requirements: ()

01. Equipment and Supplies. Each EMS agency must maintain sufficient quantities of medical care supplies and devices specified in the minimum equipment standards to ensure availability for each response. ()

02. Safety and Personal Protective Equipment. Each EMS agency must maintain safety and personal protective equipment for licensed personnel and other vehicle occupants as specified in the minimum equipment standards. This includes equipment for body substance isolation and protection from exposure to communicable diseases and pathogens. ()

03. Modifications to an EMS Agency's Minimum Equipment List. An EMS agency's minimum equipment list may be modified upon approval by the Department. Requests for equipment modifications must be submitted to the Department and include clinical and operational justification for the modification and be signed by the EMS agency's medical director. Approved modifications are granted by the Department as either an exception or an exemption. ()

a. Exceptions to the agency's minimum equipment list requirements may be granted by the Department upon inspection or review of a modification request, when the circumstances and available alternatives assure that appropriate patient care will be provided for all anticipated incidents. ()

b. Exemptions that remove minimum equipment and do not provide an alternative may be granted by the Department following review of a modification request. The request must describe the agency's deployment model and why there is no anticipated need for the specified equipment to provide appropriate patient care. ()

04. Review of an Equipment Modification Request. Each request from an EMS agency for equipment modification may be reviewed by either the EMS Advisory Committee (EMSAC), or the EMS Physician Commission (EMSPC), or both. The recommendations from EMSAC and EMSPC are submitted to the Department which has the final authority to approve or deny the modification request. ()

a. A modification request of an operational nature will be reviewed by EMSAC; ()

- b. A modification request of a clinical nature will be reviewed by the EMSPC; and ()
- c. A modification request that has both operational and clinical considerations will be reviewed by both. ()

05. Denial of an Equipment Modification Request. An EMS agency may appeal the denial of an equipment modification request under the provisions in IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ()

06. Renewal of Equipment Modification. An EMS agency's equipment modification must be reviewed and reaffirmed as follows: ()

- a. Annually, with the agency license renewal application; or ()
- b. When the EMS agency changes its medical director. ()

501. AIR MEDICAL EMS AGENCY -- EQUIPMENT REQUIREMENTS AND MODIFICATIONS.
Each air medical agency must meet the requirements outlined in Section 500 of these rules, as well as the following: ()

01. FAA 135 Certification. The air medical agency must hold a Federal Aviation Administration 135 certification. ()

02. Configuration and Equipment Standards. Aircraft and equipment configuration that does not compromise the ability to provide appropriate care or prevent emergency care providers from safely performing emergency procedures, if necessary, while in flight. ()

502. -- 509. (RESERVED)

510. EMS AGENCY -- COMMUNICATION REQUIREMENTS.
Each EMS agency must meet the following communication requirements to obtain or maintain agency licensure. ()

01. Air Medical EMS Agency. Each air medical agency must have mobile radios of sufficient quantities to ensure that every aircraft and ground crew has the ability to communicate on the frequencies 155.340 MHZ and 155.280 MHZ, with continuous tone coded squelch system encoding capabilities to allow access to the Idaho EMS radio communications system. ()

02. Ambulance EMS Agency. Each ambulance EMS agency must have mobile radios of sufficient quantities to ensure that every vehicle crew has the ability to communicate on the frequencies 155.340 MHZ and 155.280 MHZ, with continuous tone coded squelch system encoding capabilities to allow access to the Idaho EMS radio communications system. ()

03. Non-transport EMS Agency. Each non-transport EMS agency must have mobile or portable radios of sufficient quantities to ensure that agency personnel at an emergency scene have the ability to communicate on the frequencies 155.340 MHZ and 155.280 MHZ, with continuous tone coded squelch system encoding capabilities to allow access to the Idaho EMS radio communications system. ()

511. EMS AGENCY -- DISPATCH REQUIREMENTS.
Each EMS agency must have a twenty-four (24) hour dispatch arrangement. ()

511. -- 519. (RESERVED)

520. EMS AGENCY -- RESPONSE REQUIREMENTS AND WAIVERS.
Each EMS agency must respond to calls on a twenty-four (24) hour a day basis within the agency's declared geographic coverage area unless a waiver exists.

521. NON-TRANSPORT EMS AGENCY -- WAIVER OF RESPONSE REQUIREMENT.

The controlling authority of a non-transport agency may petition the Department for a waiver of the twenty-four (24) hour response requirement if one (1) or more of the following conditions exist: ()

01. Not Populated on 24-Hour Basis. The community, setting, industrial site, or event being served by the agency is not populated on a twenty-four (24) hour basis. ()

02. Not on Daily Basis Per Year. The community, setting, industrial site, or event being served by the agency does not exist on a three hundred sixty-five (365) day per year basis. ()

03. Undue Hardship on Community. The provision of twenty-four (24) hour response would cause an undue hardship on the community being served by the agency. ()

04. Abandonment of Service. The provision of twenty-four (24) hour response would cause abandonment of the service provided by the agency. ()

522. NON-TRANSPORT EMS AGENCY -- PETITION FOR WAIVER.

01. Submit Petition for Waiver. The controlling authority of an existing non-transport agency desiring a waiver of the twenty-four (24) hour response requirement must submit a petition for waiver to the Department. ()

02. Waiver Declared on Initial Application. The controlling authority of an applicant non-transport agency desiring a waiver of the twenty-four (24) hour response requirement must declare the request for waiver on the initial application for agency licensure to the Department. ()

03. Not Populated on a 24-Hour or Daily Basis -- Petition Content. A non-transport agency with a service area with less than twenty-four (24) hours population or less than three-hundred sixty-five (365) days per year population must include the following information on the petition for waiver of the twenty-four (24) hour response requirement: ()

a. A description of the hours or days the geographic area is populated. ()

b. A staffing and deployment plan that ensures EMS response availability for the anticipated call volume during the hours or days of operation. ()

04. Undue Hardship or Abandonment of Service Waiver -- Petition Content. A non-transport agency must include the following information on the application for waiver of the twenty-four (24) hour response requirement when that provision would cause an undue hardship on the community being served by the agency or abandonment of service: ()

a. A description of the applicant's operational limitations to provide twenty-four (24) hour response. ()

b. A description of the initiatives underway or planned to provide twenty-four (24) hour response. ()

c. A staffing and deployment plan identifying the agency's response capabilities and back up plans for services to the community when the agency is unavailable. ()

d. A description of the collaboration that exists with all other EMS agencies providing services within the applicant's geographic response area. ()

05. Renewal of Waivers. The controlling authority of a non-transport agency desiring to renew a waiver of the twenty-four (24) hour response requirement must declare the request for renewal of the waiver on the annual renewal application for agency licensure to the Department. ()

523. -- 524. (RESERVED)

525. AMBULANCE OR AIR MEDICAL EMS AGENCY -- WAIVER OF RESPONSE REQUIREMENT. The controlling authority of a existing ambulance or air medical agency may petition the Board of Health and for a waiver of the twenty-four (24) hour response requirement if one (1) or more of the following conditions exist: ()

01. Undue Hardship on Community. The provision of twenty-four (24) hour response would cause an undue hardship on the community being served by the agency. ()

02. Abandonment of Service. The provision of twenty-four (24) hour response would cause abandonment of the service provided by the agency. ()

526. AMBULANCE OR AIR MEDICAL EMS AGENCY -- PETITION FOR WAIVER.

01. Submit Petition for Waiver. The controlling authority of an existing ambulance or air medical agency desiring a waiver of the twenty-four (24) hour response requirement must submit a petition for waiver to the Board. ()

02. Undue Hardship or Abandonment of Service Waiver -- Petition Content. An ambulance EMS agency must include the following information on the petition for waiver of the twenty-four (24) hour response: ()

a. A description of the petitioner's operational limitations to provide twenty-four (24) hour response. ()

b. A description of the initiatives underway or planned to provide twenty-four (24) hour response. ()

c. A staffing and deployment plan identifying the agency's response capabilities and back-up plans for services to the community when the agency is unavailable. ()

d. A description of the collaboration that exists with all other EMS agencies providing services within the petitioner's geographic response area. ()

527. -- 529. (RESERVED)

530. EMS AGENCY -- MEDICAL SUPERVISION REQUIREMENTS.

Each EMS agency must comply with medical supervision plan requirements and designate a physician as the agency medical director who is responsible for the supervision of medical activities defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." ()

531. -- 534. (RESERVED)

535. EMS AGENCY -- DATA COLLECTION AND SUBMISSION REQUIREMENTS.

Each EMS agency must comply with the data collection and submission requirements required in IDAPA 16.02.03, "Emergency Medical Services," Section 435. ()

536. -- 599. (RESERVED)

**EMS AGENCY AGREEMENTS, PLANS AND POLICIES
(SECTIONS 600-699)**

600. EMS AGENCY -- AGREEMENTS, PLANS, AND POLICIES.

When applicable, each EMS agency must make the following agreements, plans, and policies, described in Sections 600 through 699 of these rules, available to the Department upon request. ()

601. EMS AGENCY -- PATIENT CARE INTEGRATION.

01. Cooperative Agreements for Common Geographic Coverage Area. Each ground EMS agency that shares common geographic coverage areas with other EMS agencies must develop cooperative written agreements that address integration of patient care between the agencies. A ground agency can not provide a level of care that exceeds the clinical level of a prehospital agency receiving the patient, unless the written patient integration plan specifically addresses the continuation of the higher level of care throughout the patient transport. ()

02. Cooperative Agreement for Non-Transport Agency. Each non-transport EMS agency must have a cooperative written agreement with a prehospital agency that will provide patient transportation. The agreement must address integration of patient care between the agencies. A non-transport prehospital agency may not provide a level of care that exceeds the clinical level of the responding transport prehospital agency unless the integration plan specifically addresses the continuation of the higher level of care throughout the patient transport. ()

602. AIR MEDICAL EMS AGENCY -- PATIENT CARE INTEGRATION.

Each air medical agency must declare and make available its patient care integration policies to the Department upon request. ()

603. EMS AGENCY -- PLANNED DEPLOYMENT AGREEMENTS.

Each EMS agency that utilizes a planned deployment must develop a cooperative planned deployment agreement between the EMS agencies. The agreement must include the following: ()

01. Chief Administrative Officials. Approval of the chief administrative officials of each EMS agency entering into the agreement either as the receiver of the planned deployment or the provider of the planned deployment. ()

02. Medical Directors. Approval of the medical directors of each EMS agency entering into the agreement either as the receiver of the planned deployment or the provider of the planned deployment. ()

03. Geographic Locations and Services. The agreement must provide the geographic locations and the services to be provided by the planned deployment. ()

04. Shared Resources. The agreement must provide for any sharing of resources between each EMS agency covered by the planned deployment. ()

05. Equipment and Medication. The agreement must provide for the availability and responsibility of equipment and medications for each EMS agency covered by the planned deployment. ()

06. Patient Integration of Care. The agreement must provide patient integration of care by each EMS agency covered by the planned deployment. ()

07. Patient Transport. The agreement must provide for patient transport considerations by each EMS agency covered by the planned deployment. ()

08. Medical Supervision. The agreement must have provisions for medical supervision of each EMS agency covered by the planned deployment. ()

09. Quality Assurance. The agreement must provide for quality assurance and retrospective case reviews by each EMS agency covered by the planned deployment. ()

604. -- 649. (RESERVED)

650. AIR MEDICAL EMS AGENCY -- REQUIRED POLICIES.

Each air medical EMS agency must have the following policies on file with the Department: ()

01. Non-Discrimination Policy. Each air medical EMS agency must have written non-discrimination

policies to ensure that requests for service are not evaluated based on the patient's ability to pay. ()

02. Weather Turn Down Policy. Each air medical EMS agency must immediately notify other air medical agencies in common geographical areas and the Idaho EMS State Communications Center about any requests for services declined or aborted due to weather. Notification to other agencies of flights declined or aborted due to weather must be documented. ()

03. Patient Destination Procedure. Each air medical EMS agency must maintain written procedures for the determination of patient destination. These procedures must: ()

- a. Consider the licensed EMS agency destination protocol and medical supervision received; ()
- b. Be made available to licensed EMS agencies that utilize their services; ()
- c. Honor patient preference if: ()
 - i. The requested facility is capable of providing the necessary medical care; and ()
 - ii. The requested facility is located within a reasonable distance not compromising patient care or the EMS system. ()

04. Safety Program Policy. Each air medical EMS agency must maintain a safety program policy that includes: ()

- a. Designation of a safety officer; ()
- b. Designation of a multi-disciplinary safety committee that includes: pilot, medical personnel, mechanic, communication specialist, and administrative staff; ()
- c. Post-Accident Incident Plan; ()
- d. Fitness for Duty Requirements; ()
- e. Annual Air Medical Resource Management Training; ()
- f. Procedures for allowing a crew member to decline or abort a flight; ()
- g. Necessary personal equipment, apparel, and survival gear appropriate to the flight environment. Helmets must be required for each EMS crew member and pilot during helicopter operations; and ()
- h. A procedure to review each flight for safety concerns and report those concerns to the safety committee. ()

05. Training Policy. Each air medical EMS agency must have written documentation of initial and annual air medical specific recurrent training for air ambulance personnel. Education content must include: ()

- a. Altitude physiology; ()
- b. Stressors of flight; ()
- c. Air medical resource management; ()
- d. Survival; ()
- e. Navigation; and ()
- f. Aviation safety issues including emergency procedures. ()

651. -- 699. (RESERVED)

**EMS AGENCY UTILIZATION OF AIR MEDICAL SERVICES
(SECTIONS 700-799)**

700. EMS AGENCY -- CRITERIA TO REQUEST AN AIR MEDICAL RESPONSE.

Each ground EMS agency must establish written criteria for the agency's licensed EMS personnel that provides decision-making guidance for requesting an air medical response to an emergency scene. This criteria must be approved by the agency's medical director. The following conditions must be included in the criteria: ()

01. Clinical Conditions. Each licensed EMS agency must develop written criteria based on best medical practice principles for requesting an air medical response for the following clinical conditions: ()

- a. The patient has a penetrating or crush injury to head, neck, chest, abdomen, or pelvis; ()
- b. Neurological presentation suggestive of spinal cord injury; ()
- c. Evidence of a skull fracture (depressed, open, or basilar) as detected visually or by palpation; ()
- d. Fracture or dislocation with absent distal pulse; ()
- e. A glasgow coma score of ten (10) or less; ()
- f. Unstable vital signs with evidence of shock; ()
- g. Cardiac arrest; ()
- h. Respiratory arrest; ()
- i. Respiratory distress; ()
- j. Upper airway compromise; ()
- k. Anaphylaxis; ()
- l. Near drowning; ()
- m. Changes in level of consciousness; ()
- n. Amputation of an extremity; and ()
- o. Burns greater than twenty percent (20%) of body surface or with suspected airway compromise. ()

02. Complications to Clinical Conditions. Each licensed EMS agency must develop a written policy that provides guidance for requesting an air medical response when there are complicating conditions associated with the clinical conditions listed in Subsection 700.01 of this rule. The complicating conditions must include the following: ()

- a. Extremes of age; ()
- b. Pregnancy; and ()
- c. Patient "do not resuscitate" status as described in IDAPA 16.02.03, "Emergency Medical

Services,” Section 400. ()

03. Operational Conditions for Air Medical Response. Each licensed EMS agency must have written criteria to provide guidance to the licensed EMS personnel for the following operational conditions: ()

- a. Availability of local hospitals and regional medical centers; ()
- b. Air medical response to the scene and transport to an appropriate hospital will be significantly shorter than ground transport time; ()
- c. Access to time sensitive medical interventions such as percutaneous coronary intervention, thrombolytic administration for stroke, or cardiac care; ()
- d. When the patient's clinical condition indicates the need for advanced life support and air medical is the most readily available access to advanced life support capabilities; ()
- e. As an additional resource for a multiple patient incident; ()
- f. Remote location of the patient; and ()
- g. Local destination protocols. ()

701. EMS AGENCY -- EMS PERSONNEL REQUEST FOR AIR MEDICAL RESPONSE.
Licensed EMS personnel en route to or at the emergency scene have the primary responsibility and authority to request the response of air medical services using the local incident management system and licensed EMS agency written criteria described in Section 700 of these rules. ()

702. EMS AGENCY -- CANCELLATION OF AN AIR MEDICAL RESPONSE.
Following dispatch of air medical services, an air medical response may only be cancelled upon completion of a patient assessment performed by licensed EMS personnel. ()

703. EMS AGENCY -- ESTABLISHED CRITERIA FOR SIMULTANEOUS DISPATCH.
A ground EMS agency may establish criteria for simultaneous dispatch for air and ground medical response. Air medical services will not launch to an emergency scene unless requested in accordance with Subsection 720.01 of these rules. ()

704. EMS AGENCY-- SELECTION OF AIR MEDICAL AGENCY.
Each EMS agency has the responsibility to select an appropriate air medical service EMS agency. ()

01. Written Policy to Select Air Medical Agency. Each EMS agency must have a written policy that establishes a process to select an air medical service. ()

02. Policy for Patient Requests. The written policy must direct EMS personnel to honor a patient request for a specific air medical service when the circumstances will not jeopardize patient safety or delay patient care. ()

705. -- 719. (RESERVED)

720. EMS AGENCY -- COMMUNICATIONS WITH AIR MEDICAL SERVICES.

01. Responsibility to Request an Air Medical Response. In compliance with the local incident management system, each EMS agency must establish a uniform method of communication to request an air medical response. ()

02. Required Information to Request an Air Medical Response. Requests for an air medical response must include the following information as it becomes available: ()

- a. Type of incident; ()
- b. Landing zone location or GPS (latitude/longitude) coordinates, or both; ()
- c. Scene contact unit or scene incident commander, or both; ()
- d. Number of patients if known; ()
- e. Need for special equipment; ()
- f. Estimated weight of the patient; ()
- g. How to contact on scene EMS personnel; and ()
- h. How to contact the landing zone officer. ()

03. Notification of Air Medical Response. The air medical agency must notify the State EMS Communication Center within ten (10) minutes of launching an aircraft in response to a request for medical transport. Notification must include: ()

- a. The name of the requesting entity; ()
- b. Location of the landing zone; and ()
- c. Scene contact unit and scene incident commander, if known. ()

04. Estimated Time of Arrival at the Specified Landing Zone. Upon receipt of a request for air medical emergency services, the air medical agency must provide the requesting entity with an estimated time of arrival (ETA) at the location of the specified landing zone. All changes to that ETA must immediately be reported to the requesting entity. ETAs are to be reported in clock time, specific to the appropriate time zone. ()

05. Confirmation of Air Medical Response Availability. Upon receipt of a request for an air medical response, the air medical agency must inform the requesting entity whether the specified air medical unit is immediately available to respond. ()

721. -- 729. (RESERVED)

730. EMS AGENCY -- LANDING ZONE PROCEDURES FOR AIR MEDICAL RESPONSE.

01. Establish Landing Zone Procedures. A licensed ambulance or non-transport EMS agency in conjunction with an air medical agency must have written procedures for the establishment of a landing zone. These procedures must be compatible with the local incident management system. ()

02. Responsibilities of Landing Zone Officer. The procedures for establishment of a landing zone must include identification of a Landing Zone Officer who is responsible for the following: ()

- a. Landing zone preparation; ()
- b. Landing zone safety; and ()
- c. Communication between the ground EMS agency and the air medical agency. ()

03. Final Decision to Use Established Landing Zone. The air medical pilot may refuse the use of an established landing zone. In the event of a pilot's refusal to land, the landing zone officer must initiate communications to identify an alternate landing zone. ()

731. EMS AGENCY -- REVIEW OF AIR MEDICAL RESPONSES.

Each EMS agency must provide incident specific patient care related data identified and requested by the Department in the review of air medical response criteria. ()

732.-- 799. (RESERVED)

**EMS AGENCY INSPECTIONS
(SECTIONS 800-899)**

800. EMS AGENCY -- INSPECTIONS BY THE DEPARTMENT.

Representatives of the Department are authorized to enter an agency's facility at reasonable times to inspect an agency's vehicles, equipment, response records, and other necessary items to determine that the EMS agency is in compliance with governing Idaho statutes and administrative rules. ()

801. EMS AGENCY -- INSPECTION REQUESTS AND SCHEDULING.

An applicant eligible for agency inspection must contact the Department to schedule an inspection. In the event that the acquisition of capital equipment, hiring or licensure of personnel is necessary for the inspection process, the applicant must notify the Department when ready for the inspection. ()

802. EMS AGENCY -- INSPECTION TIMEFRAME AFTER NOTIFICATION OF ELIGIBILITY.

An applicant must schedule and have an inspection completed within six (6) months of notification of eligibility by the Department. An application without an inspection completed within six (6) months is void and must be resubmitted as an initial application. ()

803. -- 804. (RESERVED)

805. EMS AGENCY -- INITIAL AGENCY INSPECTION.

The Department will perform an initial inspection, which is an integral component of the application process, to ensure the EMS Agency applicant is in compliance regarding the following: ()

01. Validation of Initial Application. Physically validate the information contained in the application. ()

02. Verification of Compliance. Verify the applicant is in compliance with governing Idaho statutes and administrative rules. ()

03. Observations and Assistance. When requested by the applicant, the Department will provide observations and assistance where appropriate. ()

806. EMS AGENCY -- DEMONSTRATION OF CAPABILITIES DURING INSPECTION.

The Department will review historical and current information during the annual, random and targeted inspections whereas an applicant must demonstrate the following during the initial inspection process: ()

01. Validation of Ability to Submit Data. Each EMS agency applicant must demonstrate the ability to submit data described in Section 535 of these rules. ()

02. Validation of Ability to Communicate. Each EMS agency applicant must demonstrate the ability to communicate via radio with the state EMS communications center, local dispatch center, neighboring EMS agencies on which the applicant will rely for support, first response, air and ground patient transport, higher level patient care, or other purposes. ()

807. -- 809. (RESERVED)

810. EMS AGENCY -- ANNUAL AGENCY INSPECTION.

The Department will perform an annual inspection which is an integral component of the agency license renewal process that serves to: ()

01. Review EMS Agency History. Review the agency's history of compliance during the most recent licensure period. ()

02. Verification of Compliance. Verify current agency compliance with governing Idaho statutes and administrative rules. ()

03. Observations and Assistance. When requested by the applicant, the Department will provide observations and assistance where appropriate. ()

811. EMS AGENCY -- RANDOM AGENCY INSPECTION.
The Department will perform a random inspection serves to: ()

01. Verification of Compliance. Validate the agency's continual compliance with governing Idaho statutes and administrative rules. ()

02. Observations and Assistance. When requested by the applicant, the Department will provide observations and assistance where appropriate. ()

812. EMS AGENCY -- TARGETED AGENCY INSPECTION.
A targeted EMS agency inspection serves to answer specific concerns related to the agency's compliance with governing Idaho statutes and administrative rules. ()

813. -- 814. (RESERVED)

815. NON-TRANSPORT EMS AGENCY -- EQUIPMENT TO BE INSPECTED.
Each non-transport EMS agency must have the minimum equipment specified in the "Minimum Equipment Standards for Licensed EMS Services," incorporated by reference in Section 004 of these rules. ()

01. Access to Equipment. Licensed personnel must have access to the required equipment as specified in the agency minimum equipment standards. ()

02. Equipment Storage. The equipment must be stored on a dedicated response vehicle or be in the possession of licensed personnel. ()

816. AMBULANCE EMS AGENCY -- EQUIPMENT TO BE INSPECTED.
Each ambulance EMS agency must have the minimum equipment specified in the "Minimum Equipment Standards for Licensed EMS Services," incorporated by reference in Section 004 of these rules. ()

01. Medical Care Supplies. Each ambulance must be equipped with medical care supplies and devices as specified in the agency minimum equipment standards unless Subsection 816.02 or 816.03 of this rule applies. ()

02. Public Safety Answering Point Dispatch. An agency dispatched by a public safety answering point (PSAP) that uses an emergency medical dispatch (EMD) process to determine the clinical needs of the patient must ensure the availability of medical care supplies and devices as specified in the agency minimum equipment standards that are appropriate for each response. ()

03. Agency Transferring Patients. An agency transferring patients from one (1) medical care facility included in their designated geographic coverage area to another will be equipped with medical care supplies and devices appropriate for the patient identified by the sending facility. ()

817. AIR MEDICAL EMS AGENCY -- EQUIPMENT TO BE INSPECTED.
Each air medical EMS agency must have the medical equipment specified in the agency minimum equipment standards available for each response. ()

818. -- 819. (RESERVED)

820. EMS AGENCY -- VEHICLES TO BE INSPECTED.

01. Initial Agency Inspections. Each EMS response vehicle must be inspected for medical care supplies and devices specified in the "Minimum Equipment Standards for Licensed EMS Services," incorporated by reference in Section 004 of these rules during an initial agency inspection. ()

02. Annual Inspections. A random sample of vehicles may be selected for inspection during annual inspections provided the agency has a vehicle stockage and inventory plan that provides assurance that all response vehicles meet the minimum equipment standards. If vehicles selected for random sampling fail to demonstrate compliance with the minimum equipment standards, the entire fleet of EMS response vehicles may be inspected. ()

03. Targeted Inspections. A targeted inspection will focus on the specific elements of concern and may not include any vehicle inspections. ()

821. -- 824. (RESERVED)

825. EMS AGENCY -- MULTIPLE ORGANIZATION EMS AGENCY INSPECTIONS.

During an agency's renewal inspection, its deployment strategy will be reviewed for that point in time and the system's vehicles and equipment will be inspected accordingly. ()

826. -- 829. (RESERVED)

830. EMS AGENCY -- CONDITION THAT RESULTS IN VEHICLE OR AGENCY OUT OF SERVICE.

Upon discovery of a condition during inspection that could reasonably pose an immediate threat to the safety of the public or agency staff, the Department may declare the condition unsafe and remove the vehicle or agency from service until the unsafe condition is corrected. ()

831. -- 839. (RESERVED)

840. EMS AGENCY -- EXEMPTIONS FOR AGENCIES CURRENTLY ACCREDITED BY A NATIONALLY RECOGNIZED PROFESSIONAL EMS ACCREDITATION AGENCY.

Upon petition by the accredited agency, the Department will review the accreditation standards under which the accredited agency was measured and may waive specific duplicated annual inspection requirements where appropriate. If an external accreditation inspection is found to be more rigorous than that of the Department, the Department may elect to relax the frequency of Department annual inspections or waive Department annual inspections altogether. ()

841. -- 899. (RESERVED)

**EMS AGENCY LICENSURE PROCESS
(SECTIONS 900-999)**

900. EMS AGENCY -- APPLICATION FOR INITIAL LICENSURE.

To be considered for initial EMS agency licensure an organization seeking licensure must request, complete, and submit the standardized EMS agency initial license application form provided by the Department. ()

901. EMS AGENCY -- LICENSURE EXPIRATION.

01. Duration of Agency License. Each EMS agency license, unless otherwise declared on the license, is valid for one (1) year from the end of the month of issuance by the Department. ()

02. Agency License Expiration Dates. To the extent possible, each EMS agency license expiration date is established depending on the geographic location of the agency. The geographic distribution of expiration dates can be obtained from the Department. See Section 005 of these rules for contact information. ()

902. -- 909. (RESERVED)

910. EMS AGENCY -- INFORMATION REQUIRED ON INITIAL APPLICATION.

Each application for initial licensure must contain the required information listed in Sections 911 through 922 of these rules. The information must be submitted on the Department's standardized agency license application form. ()

911. CALL VOLUME.

Each applicant must submit a categorized breakdown of call volume projections for the first full year of operation in each of the following categories: ()

01. Operational Declarations. The total call volume for each operational declaration within the applicant's geographic coverage area. ()

02. Patient Transport Percentage. The percentage of patients requiring transport. ()

912. GEOGRAPHIC COVERAGE AREA.

Each applicant must provide a specific description of the Idaho jurisdictions that the applicant will serve using known geopolitical boundaries or geographic coordinates and a graphic representation of the same. ()

01. Declare Coverage Area for Service Types and Operations. Each applicant must declare a geographic coverage area for each requested service type and operational declaration. Each service type and operational declaration can have a different geographic coverage area. ()

02. Transfer or Air Medical Transfer Declarations. Each applicant with the operational declaration of transfer or air medical transfer will establish its geographic coverage area by declaring which sending facilities they routinely respond to if requested. ()

913. STAFFING.

Each applicant must submit staffing projections for the first full year of operation that includes the following. ()

01. Personnel Roster. The roster must identify all licensed personnel by name and licensure level. ()

02. Proof of Licensure. Applicant must provide documentation that ensures all licensed personnel are appropriately licensed and credentialed. ()

03. Identify Compensation Type. Identify each individual listed as: ()

a. Uncompensated volunteer; ()

b. Compensated volunteer; ()

c. Part-time paid; or ()

d. Full-time paid. ()

04. Staffing Pattern. Provide a description of how the staffing pattern will ensure appropriately licensed personnel are available to provide the required care. ()

914. VEHICLES AND EQUIPMENT.

Each applicant must submit a list of the agency's vehicles and equipment. ()

01. Shared Vehicles and Equipment. The applicant must declare all vehicles and equipment that are shared with another agency, other license category, or operational declaration. ()

02. Station and Use of Vehicles and Equipment. The applicant must describe how the vehicle or

equipment is stationed, used, and the frequency of use by each license category, operational declaration, and agency. ()

915. COMMUNICATIONS.

Each applicant must submit a list of the agency's communications equipment as provided in Section 510 of these rules. ()

916. DISPATCH AGREEMENT.

Each applicant must submit a copy of the dispatch agreement and include it in the agency's application. The dispatch agreement must be signed by an official from the dispatch organization and by the applicant. ()

917. EXTRICATION SERVICE PROVIDER.

Each applicant that intends to provide prehospital care, but does not plan to perform extrication services, must identify what organizations, if any, will perform extrication operations in its geographical response area. ()

918. AGENCY COSTS AND REVENUE.

For informational purposes, the applicant must submit a categorized breakdown of cost and revenue projections for the first full year of operation in each of the following categories: ()

- 01. Projected Operating Costs.** Operating costs specific to the EMS operation. ()
- 02. Projected Revenue.** Revenues specific to the EMS operation. ()
- 03. Projected Capital.** Capital resources and purchases specific to the EMS operation; ()
- 04. Projected Personnel Costs.** Personnel costs specific to the EMS operation; and ()
- 05. Projected Tax-Based Revenue.** Tax-based revenue and support specific to the EMS operation. ()

919. RESPONSE TIMES.

Each applicant must submit a statement of response time projections described below. ()

01. Projected Response Times with Data. An applicant in an area where response time data for a similar agency exists will describe how the model declared in the application will change known response times within the geographic coverage areas. Applicants will submit, on the agency application, declarations of the following: ()

a. The longest response time recorded in the preceding twenty-four (24) months by a similar agency within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours. The longest known response time declaration will include a description of the beginning and ending points of the response and a description of how the applicant will affect this response time. ()

b. The projected longest response time within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours. The longest projected response time declaration will include a description of the beginning and ending points of the response and the predicted frequency of calls to the area with the longest projected response time. ()

c. The average recorded response time in the preceding twenty-four (24) months by a similar agency within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours. ()

d. An applicant's projected average response time within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours and a description of how the applicant will achieve this average response time. ()

02. Projected Response Times with No Data. An applicant in an area where no response time data for a similar agency exists will only be required to submit response time projections. Applicants will submit, on the

agency application, declarations of the following: ()

a. The projected longest response time within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours. The longest projected response time declaration will include a description of the beginning and ending points of the response and the predicted frequency of calls to the area with the longest projected response time. ()

b. An applicant's projected average response time within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours and a description of how the applicant will achieve this average response time. ()

920. CLINICAL BENEFITS.

Each applicant must submit a narrative describing the projected clinical benefits that will result from licensure. The narrative must include the following: ()

01. Description from Medical Director for Change. An endorsement from the applicant's medical director that describes the rationale for change. ()

02. Description of Changes to Level of Care. A description of the projected change in the level of care provided for patients within the geographic coverage area. ()

03. Description of Changes to Response for Treatment. A description of the projected change in time to treatment for patients within the geographic coverage area. ()

04. Description of Planned Location of Resources. A description of the location of agency resources and equipment available to the applicant. ()

05. Description of Impact on Community. A description of the impact on other resources and the community. ()

06. Description of Personnel Training. A description of the process to train personnel. ()

921. MEDICAL SUPERVISION PLAN.

Each applicant must include a Medical Supervision Plan described in IDAPA 16.02.02, "Rules of the Emergency Medical Services (EMS) Physician Commission." ()

922. MEDICAL DIRECTOR AGREEMENT.

Each applicant must have a signed agreement with its medical director described in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." ()

923. -- 929. (RESERVED)

930. AGENCY APPLICATION REVIEW AND NOTIFICATIONS.

The Department will review the application for completeness upon receipt. The Department will make the following notifications following the review of an agency application: ()

01. Reply to Applicant. The Department will send a written reply to the applicant within fourteen (14) days of receipt verifying the application or any subsequent application material was received and found to be either complete or incomplete. ()

02. Notification of Incomplete Application. An applicant, whose application is determined to be incomplete, will be given the opportunity to address the findings of the Department's initial review and resubmit documentation needed to complete the application. ()

03. No Action After Notification of Incomplete Application. Any incomplete application having no action taken by the applicant within sixty (60) days of notification by the Department is considered void and will need to be resubmitted as an initial application. ()

04. Notification to Other Jurisdictions. Within fourteen (14) days of receipt of a completed application for agency licensure, which includes an ongoing license duration and operational declarations other than non-public, the Department will send a written notice to all cities, counties, and other units of local government that have any geographic coverage area in common with the applicant. ()

05. Content of Notification. The notice will provide the applicant's proposed licensure status that includes: ()

a. Geographic coverage area; ()

b. Agency type; ()

c. Clinical level of services; ()

d. Operational declarations; and ()

e. A summary of any declarations made by the applicant that assume knowledge, cooperation, or collaboration of any of the cities, counties, and other units of local government that have any geographic coverage area in common with the applicant. ()

06. Notification to EMS Agencies in Geographic Coverage Area. A notice will be sent to EMS agencies that share a geographic coverage area with applications requesting a license with limited duration. ()

931. -- 939. (RESERVED)

940. APPLICATION EVALUATION.

01. Department Evaluation. The Department evaluates the application for compliance with the standards established in governing Idaho statutes and administrative rules that are in effect at the time the application is submitted. ()

02. Actions Following Notification. An applicant, whose application is determined to be other than compliant, is given the opportunity to address the findings of the Department review and resubmit documentation needed to either bring the application into compliance or address the concerns found in the initial Department review. ()

03. Appeals for Refusal to License. Appeals for refusal to issue an agency license are processed according to IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ()

04. Compliant Application. An applicant, whose application is found to be in compliance with Sections 56-1011 through 56-1023, Idaho Code, and governing administrative rules in effect, will receive an acknowledgment of eligibility for an agency inspection with its notification of compliance. ()

941. -- 949. (RESERVED)

950. EMS AGENCY LICENSURE RENEWAL.

01. Request Renewal Application. Each EMS agency seeking to renew its license must request the most current standardized EMS license renewal application provided by the Department. The most current standardized renewal application can be obtained by contacting the Department. ()

02. Timeframe to Submit Renewal Application. Each EMS agency must submit a completed application for license renewal to the Department no earlier than ninety (90) days and no later than sixty (60) days prior to the expiration date of the current license. ()

951. INFORMATION REQUIRED ON THE AGENCY RENEWAL APPLICATION.

Each application for license renewal must contain the required information listed in Sections 952 through 960 of these rules on the Department's standardized agency license renewal application form. ()

952. HISTORICAL CALL VOLUME.

Each agency must submit a categorized breakdown of historical call volume for the preceding year of operation in each of the following categories:: ()

01. Total Call Volume. The total call volume for the applicant's geographic coverage area; and ()

02. Percentage Requiring Transport. The percentage of patients requiring transport. ()

953. CHANGES TO GEOGRAPHIC COVERAGE AREA.

Any changes made to the geographic coverage area made by agency annexation must be described on the renewal application. Any other changes to the geographic coverage area requires an initial license application. ()

954. CURRENT STAFFING PLAN.

Each agency must submit its current staffing plan that includes: ()

01. Current Personnel Roster. The roster must identify all current licensed personnel by name and license level. ()

02. Current Personnel Are Licensed. The agency must ensure that all licensed personnel are appropriately licensed and credentialed. ()

03. Current Compensation Identification. The agency must identify current individuals listed as: ()

a. Uncompensated volunteer; ()

b. Compensated volunteer; ()

c. Part-time paid; or ()

d. Full-time paid. ()

04. Description of Current Staffing Plan. The agency must describe how the staffing pattern continues to ensure appropriately licensed personnel are available to provide the required care. ()

955. VERIFICATION OF VEHICLES AND EQUIPMENT.

Each agency will verify on the renewal application a list of vehicles and equipment in use by the agency. ()

01. Current Shared Vehicles and Equipment. The agency must declare any vehicles and equipment that are shared with another agency or other license category. ()

02. How Currently Stationed and Used. The agency must describe how the vehicle or equipment is stationed, used, and the frequency of use by each license category and agency. ()

956. VERIFICATION OF COMMUNICATIONS.

Each agency must verify its list of communications equipment in use by the agency. ()

957. VERIFICATION OF DISPATCH AGREEMENT.

Each agency must verify that no changes have been made to the dispatch agreement included in its prior agency application. ()

958. HISTORICAL RESPONSE TIMES.

Each agency must submit a historical review of response times as described below. ()

- 01. Longest Response Time.** ()
- a.** The longest response time within the geographic coverage area, responding to an emergency call in ideal weather during daylight hours; and ()
- b.** The longest known response time declaration must include a description of the beginning and ending points of the response and the frequency of calls to the area with the longest projected response time. ()
- 02. Average Response Time.** The agency's average response time within the geographic coverage area when responding to an emergency call in ideal weather during daylight hours. ()
- 959. CHANGES TO MEDICAL SUPERVISION PLAN.** Each agency must include any changes made to its Medical Supervision Plan. ()
- 960. CHANGES TO EXTRICATION SERVICE PROVIDER.** Each agency must include any changes made to organizations providing extrication for the agency. ()
- 961. -- 964. (RESERVED)**
- 965. ADDITIONAL INFORMATION REQUIRED AFTER JULY 1, 2014.** After July 1, 2014, each agency that obtains a new license, changes the clinical level of licensed personnel it utilizes, changes its geographic coverage area (except by agency annexation), begins or discontinues providing patient transport services, or adds prehospital or transfer operational declarations must submit the following on the renewal application: ()
- 01. Costs and Revenue.** A categorized breakdown of costs and revenue in each of the categories listed on the initial agency renewal application. ()
- 02. Narrative of Clinical Benefits.** A narrative describing the actual clinical benefits that resulted from licensure that includes a review of the declarations made on the agency license application. ()
- 966. EVALUATION OF COMPLETED RENEWAL APPLICATIONS.**
- 01. Evaluation of Completed Renewal Application.** When an application is received, the Department will, within fourteen (14) days of receipt, evaluate the application for completeness and compliance with the standards in governing Idaho statutes and administrative rules that are in effect at the time of application submission. ()
- 02. Notification of Renewal Evaluation Findings.** The Department will notify the agency in writing that the evaluation found the application to be one of the following: ()
- a.** Compliant; ()
- b.** Incomplete; ()
- c.** Complete with concerns; or ()
- d.** Non-compliant. ()
- 03. Renewal Application Not in Compliance.** An agency whose renewal application is determined to be other than complete and compliant will be given the opportunity to address the findings of the Department's initial review and resubmit documentation needed to either bring the renewal application into compliance or address the concerns found in the Department's review. ()
- 967. INCOMPLETE OR NONCOMPLIANT APPLICATION AT LICENSE EXPIRATION.** If an application is not complete and compliant and is not resolved prior to the expiration date of the license, an agency license will not lapse while undergoing review by the Department provided the agency submitted a timely

application and takes action to meet licensure requirements within thirty (30) days of notification by the Department. ()

968. APPEALS PROCESS.

An appeal for refusal to grant renewal of an agency license will be processed under IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ()

969. COMPLETE AND COMPLIANT RENEWAL APPLICATION.

When a renewal application is found to be complete and in compliance, the Department will notify the agency and provide a list of not less than five (5) available dates and times within a thirty (30) day period in which to schedule the required renewal inspection. ()

970. TIMEFRAME FOR RENEWAL INSPECTIONS.

Each agency must successfully complete an annual inspection within the thirty (30) day period described in Sections 800 through 809 of these rules in order to obtain a renewed license. ()

971. LAPSED LICENSE.

01. Application Not Submitted Prior to Expiration of Current License. An agency that does not submit a complete application as prescribed in these rules will be considered lapsed. The license will no longer be valid. ()

02. Grace Period. No grace periods or extensions to an expiration date will be granted when an agency has not submitted a completed renewal application within the timeframes described in Section 950 of these rules. ()

03. Lapsed License. An agency that has a lapsed license cannot provide EMS services. ()

04. To Regain Agency Licensure. An agency with a lapsed license will be considered an applicant for initial licensure and is bound by the same requirements and processes as an initial applicant. ()

972. -- 979. (RESERVED)

980. EMS AGENCY LICENSE -- NONTRANSFERABLE.

An EMS agency license issued by the Department cannot be transferred or sold. ()

981. CHANGES TO A CURRENT LICENSE.

An agency's officials must submit an agency update to the Department within sixty (60) days of any of the following changes: ()

01. Changes Requiring Update to Department. An agency's officials must submit an agency update to the Department within sixty (60) days of any of the following changes: ()

a. Changes made to the geographic coverage area by agency annexation; ()

b. Licensed personnel added or removed from the agency affiliation roster. If licensed personnel are removed for cause, a description of the cause must be included; ()

c. Vehicles or equipment added or removed from the agency; ()

d. Changes to the agency communication plan or equipment; ()

e. Changes to the agency dispatch agreement; or ()

f. Changes to the agency Medical Supervision Plan. ()

02. Changes Requiring Initial Licensure Application. When an agency decides to make any of the

following changes, it must submit an initial agency application to the Department and follow the initial application process described in Sections 900 through 922 of these rules: ()

- a. Clinical level of licensed personnel it utilizes; ()
- b. Geographic coverage area changes, except by agency annexation; ()
- c. A non-transport agency that intends to provide patient transport or an ambulance agency that intends to discontinue patient transport and become a non-transport agency; or ()
- d. An agency that intends to add prehospital or transfer operational declarations. ()

982. -- 989. (RESERVED)

990. TRANSITION TO THE LICENSURE MODELS DESCRIBED IN THIS CHAPTER OF RULES.

01. Timeframe to Transition to the New Licensing Model. Each EMS agency licensed by the Department prior to July 1, 2014, will transition to a licensing model described in these rules at the expiration of its current agency license. A currently licensed agency must submit a licensure transition application, provided by the Department, in order to renew its agency license. ()

02. Review Process of Transition Applications. Each licensure transition application submitted by a currently licensed agency is subject to the same Department application evaluation process described in Section 966 of these rules. ()

991. -- 999. (RESERVED)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.01.07 - EMERGENCY MEDICAL SERVICES (EMS) -- PERSONNEL LICENSING REQUIREMENTS

DOCKET NO. 16-0107-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023 (Board), and 56-1003 (Director), Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services chapters of rules. The changes being made to this chapter align these rules with new EMS chapters being implemented to update definitions for the ever-changing technology used by emergency medical services providers across the state, and referencing the new EMS Agency Licensing chapter. These rules need to be amended to avoid confusion and ensure all EMS chapters use consistent terminology and are in compliance with statutes and rules.

These rules changes will align this chapter with the new chapters of rules by adding references to the new chapters and removing sections that are no longer needed or required to be in this chapter.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: NA

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 1st day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5564; fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0107-1301

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. (3-29-12)

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. (3-29-12)

03. Street Address. (3-29-12)

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (3-29-12)

b. The EMS Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. (~~3-29-12~~)(____)

04. Telephone. (3-29-12)

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (3-29-12)

b. The telephone number for the EMS Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free, phone number is 1-877-554-3367. (~~3-29-12~~)(____)

05. Internet Websites. (3-29-12)

a. The Department's internet website is found at <http://www.healthandwelfare.idaho.gov>. (3-29-12)

b. The Bureau of Emergency Medical Services Bureau's and Preparedness internet website is found at <http://www.idahoems.org>. (~~3-29-12~~)(____)

(BREAK IN CONTINUITY OF SECTIONS)

010. DEFINITIONS AND ABBREVIATIONS.

For the purposes of this chapter, ~~of rules, the following terms~~ the definitions in IDAPA 16.01.02, "Emergency Medical Services (EMS) -- Rule Definitions" apply. ~~(3-29-12)()~~

- ~~01. **Advanced Emergency Medical Technician (AEMT).** An AEMT is a person who: (3-29-12)~~
- ~~a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and these rules; (3-29-12)~~
- ~~b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; (3-29-12)~~
- ~~c. Carries out the practice of emergency medical care within the scope of practice for AEMT determined by the Idaho Emergency Medical Services Physicians Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physicians Commission;" and (3-29-12)~~
- ~~d. Practices under the supervision of a physician licensed in Idaho. (3-29-12)~~
- ~~02. **Affiliation.** The formal association that exists between an agency and those licensed personnel who appear on the agency's roster, which includes active participation, collaboration, and involvement. Affiliation can be demonstrated by the credentialing of licensed personnel by the agency medical director. (3-29-12)~~
- ~~03. **Agency - EMS.** Any organization required to be licensed under the provisions in IDAPA 16.02.03, "Emergency Medical Services," by the EMS Bureau that operates an air medical service, ambulance service, or nontransport service. (3-29-12)~~
- ~~04. **Board.** The Idaho Board of Health and Welfare. (3-29-12)~~
- ~~05. **Candidate.** Any individual who is requesting an EMS personnel license under Sections 56-1011 through 56-1023, Idaho Code. (3-29-12)~~
- ~~06. **Certificate of Eligibility.** Documentation that an individual is eligible for affiliation with an EMS agency, having satisfied all requirements for an EMS Personnel Licensure except for affiliation, but is not licensed to practice. (3-29-12)~~
- ~~07. **Commission.** The Idaho Emergency Medical Services Physician Commission. (3-29-12)~~
- ~~08. **Competency.** The expected behavior, skill performance and knowledge identified in the description of the profession and the allowable skills and interventions as defined by the scope of practice in the EMS Physicians Commissions Standards Manual incorporated in Section 004 of these rules. (3-29-12)~~
- ~~09. **Department.** The Idaho Department of Health and Welfare. (3-29-12)~~
- ~~10. **Emergency Medical Care.** The care provided to a person suffering from a medical condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the person's health in serious jeopardy, or in causing serious impairments of bodily function or serious dysfunction of any bodily organ or part. (3-29-12)~~
- ~~11. **Emergency Medical Responder (EMR).** An EMR is a person who: (3-29-12)~~
- ~~a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and these rules; (3-29-12)~~
- ~~b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; (3-29-12)~~
- ~~c. Carries out the practice of emergency medical care within the scope of practice for EMR~~

~~determined by the Idaho Emergency Medical Services Physicians Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physicians Commission"; and (3-29-12)~~

- ~~d. Practices under the supervision of a physician licensed in Idaho. (3-29-12)~~
- ~~12. **Emergency Medical Services (EMS).** The services utilized in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury. (3-29-12)~~
- ~~13. **EMS Bureau.** The Emergency Medical Services (EMS) Bureau of the Idaho Department of Health and Welfare. (3-29-12)~~
- ~~14. **Emergency Medical Technician (EMT).** An EMT is a person who: (3-29-12)
 - ~~a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and these rules; (3-29-12)~~
 - ~~b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; (3-29-12)~~
 - ~~e. Carries out the practice of emergency medical care within the scope of practice for EMT determined by the Idaho Emergency Medical Services Physicians Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physicians Commission"; and (3-29-12)~~~~
- ~~d. Practices under the supervision of a physician licensed in Idaho. (3-29-12)~~
- ~~15. **Licensed Personnel.** Those individuals who are emergency medical responders, emergency medical technicians, advanced emergency medical technicians, and paramedics. (3-29-12)~~
- ~~16. **National Registry of Emergency Medical Technicians (NREMT).** An independent, non-governmental, not for profit organization which prepares validated examinations for the state's use in evaluating candidates for licensure. (3-29-12)~~
- ~~17. **Paramedic.** A paramedic is a person who: (3-29-12)
 - ~~a. Has met the qualifications for licensure in Sections 56-1011 through 56-1023, Idaho Code, and these rules; (3-29-12)~~
 - ~~b. Is licensed by the EMS Bureau under Sections 56-1011 through 56-1023, Idaho Code; (3-29-12)~~
 - ~~e. Carries out the practice of emergency medical care within the scope of practice for paramedic determined by the Idaho Emergency Medical Services Physicians Commission (EMSPC), under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physicians Commission"; and (3-29-12)~~~~
- ~~d. Practices under the supervision of a physician licensed in Idaho. (3-29-12)~~
- ~~18. **Patient.** A sick, injured, incapacitated, or helpless person who is under medical care or treatment. (3-29-12)~~
- ~~19. **Patient Assessment.** The evaluation of a patient by EMS licensed personnel intending to provide treatment or transportation to that patient. (3-29-12)~~
- ~~20. **Patient Care.** The performance of acts or procedures under emergency conditions in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury. (3-29-12)~~
- ~~21. **Skills Proficiency.** The process overseen by an EMS agency medical director to verify competency in psychomotor skills. (3-29-12)~~

~~22. **Supervision.** The medical direction by a licensed physician of activities provided by licensed personnel affiliated with a licensed ambulance, air medical, or nontransport service, including: establishing standing orders and protocols, reviewing performance of licensed personnel, providing instructions for patient care via radio or telephone, and other oversight. (3-29-12)~~

~~23. **State Health Officer.** The Administrator of the Division of Public Health. (3-29-12)~~

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

**16.01.12 - EMERGENCY MEDICAL SERVICES (EMS) -- COMPLAINTS,
INVESTIGATIONS, AND DISCIPLINARY ACTIONS**

DOCKET NO. 16-0112-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023 (Board), and 56-1003 (Director), Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services chapters of rules. The changes being made to this chapter align these rules with new EMS chapters being implemented to update definitions for the ever-changing technology used by emergency medical services providers across the state. The amendments to this rule remove sections no longer needed and reference the new EMS Rule Definitions and EMS Agency Licensing chapters that have been published in this Bulletin under Docket No. 16-0102-1301 and Docket No. 16-0103-1301.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: NA

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 1st day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5564; fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0112-1301

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. (3-29-12)

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. (3-29-12)

03. Street Address. (3-29-12)

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (3-29-12)

b. The ~~EMS~~ Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. (3-29-12)

04. Telephone. (3-29-12)

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (3-29-12)

b. The telephone number for the ~~EMS~~ Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free, phone number is 1-877-554-3367. (~~3-29-12~~)(____)

05. Internet Websites. (3-29-12)

a. The Department's internet website is found at <http://www.healthandwelfare.idaho.gov>. (3-29-12)

b. The Bureau of Emergency Medical Services ~~Bureau's~~ and Preparedness internet website is found at <http://www.idahoems.org>. (~~3-29-12~~)(____)

(BREAK IN CONTINUITY OF SECTIONS)

010. DEFINITIONS AND ABBREVIATIONS.

For the purposes of this chapter, ~~of rules the following terms~~ the definitions in IDAPA 16.01.02, "Emergency Medical Services (EMS) - Rule Definitions" apply. ~~(3-29-12)~~ (____)

- ~~01. **Affiliating EMS Agency.** The licensed EMS agency, or agencies, under which licensed personnel are authorized to provide patient care. (3-29-12)~~
- ~~02. **Board.** The Board of Health and Welfare. (3-29-12)~~
- ~~03. **Certified EMS Instructor.** An individual approved by the EMS Bureau, who has met the requirements in IDAPA 16.02.03, "Emergency Medical Services," to provide EMS education and training. (3-29-12)~~
- ~~04. **Department.** The Idaho Department of Health and Welfare. (3-29-12)~~
- ~~05. **Emergency Medical Services (EMS).** The system utilized in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury. (3-29-12)~~
- ~~06. **EMS Agency.** An organization licensed by the EMS Bureau to provide air medical, ambulance, or non-transport services. (3-29-12)~~
- ~~07. **EMS Agency Medical Director.** A physician who supervises the medical activities of licensed personnel affiliated with an EMS agency. (3-29-12)~~
- ~~08. **EMS Bureau.** The Emergency Medical Services (EMS) Bureau of the Idaho Department of Health and Welfare. (3-29-12)~~
- ~~09. **EMS Physicians Commission (EMSPC).** The Idaho Emergency Medical Services Physician Commission as created under Section 56-1013A, Idaho Code, hereafter referred to as "the Commission." (3-29-12)~~
- ~~10. **Investigation.** Research of the facts concerning a complaint or issue of non-compliance which may include performing or obtaining interviews, inspections, document review, detailed subject history, phone calls, witness statements, other evidence and collaboration with other jurisdictions of authority. (3-29-12)~~
- ~~11. **National Registry of Emergency Medical Technicians (NREMT).** An independent, non-governmental, not for profit organization that prepares validated examinations for the state's use in evaluating candidates for licensure. (3-29-12)~~
- ~~12. **Personnel License or Certificate Holder.** Individuals who possess a valid license or certificate issued by the EMS Bureau. Includes individuals who are Emergency Medical Responders (EMR), Emergency Medical Technicians (EMT), Advanced Emergency Medical Technicians (AEMT), Paramedics, and Certified EMS Instructors. (3-29-12)~~
- ~~13. **Physician.** In accordance with Section 54-1803, Idaho Code, a person who holds a current active license issued by the State Board of Medicine to practice medicine and surgery, osteopathic medicine and surgery, or osteopathic medicine in Idaho and is in good standing with no restrictions upon, or actions taken against, his license. (3-29-12)~~

(BREAK IN CONTINUITY OF SECTIONS)

110. REPORTING SUSPECTED VIOLATION.

01. **Suspected Violations.** Any person ~~who~~ may report a suspected ~~a~~ violation of any law or rule governing EMS, including: (____)

- a.** Sections 56-1011 through 56-1023, Idaho Code;
 - b.** IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission";
 - c.** IDAPA 16.01.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements";
 - d.** IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements"; or
 - e.** IDAPA 16.02.03, "Emergency Medical Services;" ~~may report the violation to the EMS Bureau.~~
 ~~(3-29-12)~~
- 02. Report Violation.** To report a suspected violation, contact the EMS Bureau described in Section 005 of these rules.

(BREAK IN CONTINUITY OF SECTIONS)

200. EMS BUREAU INITIATES OFFICIAL INVESTIGATION.

An official investigation will be initiated when the any of the following occurs: (3-29-12)

01. Complaint with Allegations. A complaint with an allegation that, if substantiated, would be in violation of any law or rule governing EMS, including:

- a.** Sections 56-1011 through 56-1023, Idaho Code;
- b.** IDAPA 16.01.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements";
- c.** IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements";
- d.** IDAPA 16.01.12, "Emergency Medical Services (EMS) -- Complaints, Investigations, and Disciplinary Actions";
- e.** IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission"; or
- f.** IDAPA 16.02.03, "Emergency Medical Services." ~~(3-29-12)~~

02. Discovery of Potential Violation of Statute or Administrative Rule. EMS Bureau staff or other authorities discover a potential violation of any law or rule governing EMS, including:

- a.** Sections 56-1011 through 56-1023, Idaho Code;
- b.** IDAPA 16.01.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements";
- c.** IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements";
- d.** IDAPA 16.01.12, "Emergency Medical Services (EMS) -- Complaints, Investigations, and Disciplinary Actions";

e. IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission;" or ()

f. IDAPA 16.02.03, "Emergency Medical Services." (3-29-12)()

201. -- 209. (RESERVED)

210. VIOLATIONS THAT MAY RESULT IN ADMINISTRATIVE ACTIONS.

The EMS Bureau may impose an administrative action, such as denial, revocation, suspension, under conditions that include, but are not limited to, those specified in these rules. Administrative actions may be imposed on any of the following: the holder of a license or certificate, or on an applicant or candidate for an EMS license or certificate. Administrative actions may be imposed on any of the previously mentioned for any action, conduct, or failure to act that is inconsistent with the professionalism, standards, or both, established by statute or rule. (3-29-12)

01. Violation of Statute or Administrative Rules. (3-29-12)

a. Sections 56-1011 through 56-1023, Idaho Code; (3-29-12)

b. IDAPA 16.01.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements"; ()

~~c.~~ IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements"; ()

d. IDAPA 16.01.12, "Emergency Medical Services (EMS) -- Complaints, Investigations, and Disciplinary Actions"; ()

e. IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission;" and ()

f. IDAPA 16.02.03, "Emergency Medical Services," ~~and this chapter of rules.~~ (3-29-12)()

02. Unprofessional Conduct. Any act that violates professional standards required under IDAPA 16.01.07, "EMS -- Personnel Licensure Requirements." (3-29-12)

03. Failure to Maintain Standards of Knowledge, Proficiency, or Both. Failure to maintain standards of knowledge, or proficiency, or both, required under; ()

a. IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensure Requirements"; and ()

b. IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." (3-29-12)()

04. Mental Incompetency. A lawful finding of mental incompetency by a court of competent jurisdiction. (3-29-12)

05. Impairment of Function. Performance of duties pursuant to an EMS personnel license while under the influence of alcohol, illegal substance, or legal drug or medication causing impairment of function. (3-29-12)

06. Denial of Criminal History Clearance. Any conduct, action, or conviction that does or would result in denial of a criminal history clearance under IDAPA 16.05.06, "Criminal History and Background Checks." (3-29-12)

07. Discipline, Restriction, Suspension, or Revocation. Discipline, restriction, suspension, or

revocation by any other jurisdiction. (3-29-12)

08. Danger or Threat to Persons or Property. Any conduct, condition, or circumstance determined by the EMS Bureau that constitutes a danger or threat to the health, safety, or well-being of persons or property. (3-29-12)

09. Performing Medical Procedure or Providing Medication that Exceeds the Scope of Practice of the Level of Licensure. Performing any medical procedure or providing medication that deviates from or exceeds the scope of practice for the corresponding level of licensure established under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." (3-29-12)

10. Falsification of Applications or Reports. The submission of fraudulent or false information in any report, application, or documentation to the EMS Bureau. (3-29-12)

11. Attempting to Obtain a License by Means of Fraud. Misrepresentation in an application, or documentation, for licensure by means of concealment of a material fact. (3-29-12)

(BREAK IN CONTINUITY OF SECTIONS)

330. ADMINISTRATIVE ACTIONS IMPOSED FOR LICENSURE OR CERTIFICATION.
The EMS Bureau may impose the following administrative actions: (3-29-12)

01. Deny or Refuse to Renew EMS Personnel License or Certification. The EMS Bureau may deny an EMS personnel license or certification, or refuse to renew an EMS personnel license or certification: (3-29-12)

a. When the application for licensure or certification is not complete or the individual does not meet the eligibility requirements provided in Sections 56-1011 through 56-1023, Idaho Code, IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements," IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission," IDAPA 16.02.03, "Emergency Medical Services"; or (3-29-12)

b. Pending final outcome of an EMS investigation or criminal proceeding when criminal charges or allegations indicate an imminent danger or threat to the health, safety, or well being of persons or property. (3-29-12)

c. For any reason that would justify an administrative action according to Section 210 of these rules. (3-29-12)

d. Decisions to deny or refuse to renew an EMS license will be reviewed by the Idaho EMS Physicians Commission at the Commission's next available meeting. (3-29-12)

02. Deny or Refuse to Renew EMS Agency License. The EMS Bureau may deny an EMS agency license or refuse to renew a EMS agency license: (3-29-12)

a. When the application for licensure is not complete or does not meet the eligibility requirements provided in Sections 56-1011 through 56-1023, Idaho Code, and IDAPA 16.02~~1~~.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements"; or ~~(3-29-12)~~(____) (3-29-12)

b. Pending final outcome of an EMS investigation or criminal proceeding when criminal charges or allegations indicate an imminent danger or threat to the health, safety, or well-being of persons or property. (3-29-12)

c. For any reason that would justify an administrative action according to Section 210 of these rules. (3-29-12)

03. Retain with Probationary Conditions for Personnel License or Certification. The EMS Bureau

may allow an EMS personnel license or certificate holder to retain a license or certificate as agreed to in a negotiated resolution, settlement, or with conditions imposed by the EMS Bureau. Decisions to retain an EMS personnel license with probationary conditions will be reviewed by the Idaho EMS Physician Commission at the Commission's next available meeting. (3-29-12)

04. Retain with Probationary Conditions for Agency License. The EMS Bureau may allow an EMS agency to retain a license as agreed to in a negotiated resolution, settlement, or with conditions imposed by the EMS Bureau. (3-29-12)

05. Suspend EMS Personnel License or Certificate. The EMS Bureau may suspend an EMS personnel license or certificate for: (3-29-12)

a. A period of time up to twelve (12) months, with or without conditions; or (3-29-12)

b. Pending final outcome of an EMS investigation or criminal proceeding when criminal charges or allegations indicate an imminent danger or threat to the health, safety, or well-being of persons or property. (3-29-12)

c. Decisions to suspend an EMS personnel license will be reviewed by the Idaho EMS Physician Commission at the Commission's next available meeting. (3-29-12)

06. Revoke EMS Personnel License or Certificate. The EMS Bureau may revoke an EMS personnel license or certificate when: (3-29-12)

a. A peer review team recommends license or certificate revocation; or (3-29-12)

b. The license holder is found to no longer be eligible for criminal history clearance per IDAPA 16.05.06, "Criminal History and Background Checks." (3-29-12)

c. Decisions to revoke an EMS personnel license will be reviewed by the Idaho EMS Physician Commission at the Commission's next available meeting. (3-29-12)

07. Revoke EMS Agency License. The EMS Bureau may revoke an EMS agency license when: (3-29-12)

a. A peer review team recommends license revocation; (3-29-12)

b. The EMS Bureau will notify the city, fire district, hospital district, ambulance district, dispatch center, and county in which the EMS agency provides emergency prehospital response that the EMS Bureau is considering license revocation. (3-29-12)

331. -- 339. (RESERVED)

340. VIOLATIONS THAT MAY RESULT IN FINES BEING IMPOSED ON EMS AGENCY.

In addition to administrative license actions provided in Section 56-1022, Idaho Code, and these rules, a fine may be imposed by the EMS Bureau upon recommendation of a peer review team on a licensed EMS agency as a consequence of agency violations. Fines may be imposed for the following violations: (3-29-12)

01. Operating An Unlicensed EMS Agency. Operating without a license required in IDAPA 16.021.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements," including: ~~(3-29-12)~~()

a. Failure to obtain an initial license; (3-29-12)

b. Failure to obtain a license upon change in ownership; or (3-29-12)

c. Failure to renew a license and continues to operate as an EMS agency. (3-29-12)

02. Unlicensed Personnel Providing Patient Care. Allowing an unlicensed individual to provide

patient care without first obtaining an EMS personnel license required in IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements," at the appropriate level for the EMS agency. (3-29-12)

03. Failure to Respond. Failure of the EMS agency to respond to a 911 request for service within the agency primary response area in a typical manner of operations when dispatched to a medical illness or injury, under licensure requirements in IDAPA 16.021.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements," except when the responder reasonably determines that: (~~3-29-12~~)()

- a. There are disaster conditions; (3-29-12)
- b. Scene safety hazards are present or suspected; or (3-29-12)
- c. Law enforcement assistance is necessary to assure scene safety, but has not yet allowed entry to the scene. (3-29-12)

04. Unauthorized Response by EMS Agency. Responding to a request for service which deviates from or exceeds those authorized by the EMS agency license requirements in IDAPA 16.021.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements." (~~3-29-12~~)()

05. Failure to Allow Inspections. Failure to allow the EMS Bureau or its representative to inspect the agency facility, equipment, records, and other licensure requirements provided in IDAPA 16.02.03, "Emergency Medical Services." (3-29-12)

06. Failure To Correct Unacceptable Conditions. Failure of the EMS agency to correct unacceptable conditions within the time frame provided in a negotiated resolution settlement, or a warning letter issued by the EMS Bureau. Including the following: (3-29-12)

- a. Failure to maintain an EMS vehicle in a safe and sanitary condition; (3-29-12)
- b. Failure to have available minimum EMS Equipment; (3-29-12)
- c. Failure to correct patient or personnel safety hazards; or (3-29-12)
- d. Failure to retain an EMS agency medical director: (3-29-12)

07. Failure to Report Patient Care Data. Failure to submit patient care data as required in IDAPA 16.021.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements." (~~3-29-12~~)()

(BREAK IN CONTINUITY OF SECTIONS)

350. REINSTATEMENT OF EMS LICENSE FOLLOWING REVOCATION.

An application of any revoked EMS agency or personnel license may be filed with the EMS Bureau no earlier than one (1) year from the date of the license revocation. (3-29-12)

01. Peer Review for Reinstatement. The EMS Bureau will conduct a peer review to consider the reinstatement application. (3-29-12)

02. Recommendation of Peer Review Team. The peer review team will make a recommendation to the EMS Bureau to accept or reject the application for reinstatement. (3-29-12)

03. Reinstatement Determination. The EMS Bureau will accept or reject the reinstatement application based on the peer review team recommendation and other extenuating circumstances. (3-29-12)

- a. Reinstatement of a revoked EMS personnel license is subject to the lapsed license reinstatement

requirements in IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements."
(3-29-12)

b. Reinstatement of a revoked EMS agency license will be subject to an initial agency application requirements in IDAPA 16.02~~1~~.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements."
(~~3-29-12~~)(_____)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.02.03 - EMERGENCY MEDICAL SERVICES

DOCKET NO. 16-0203-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-1011 through 56-1023, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

Thursday, August 22, 2013 6:00 p.m. - 7:00 p.m.	Monday, August 26, 2013 3:30 p.m. - 4:30 p.m.	Wednesday, August 28, 2013 6:00 p.m. - 7:00 p.m.
Coeur d'Alene Public Library Community Room 702 E. Front Ave. Coeur d'Alene, ID 83814	EMS Bureau Conference Room 650 W. State St. B-25 Boise, ID 83702	Fire Station #2 Training Room 1539 N Hayes Pocatello, ID 83204

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Over the past several years, meetings have been held to negotiate and discuss the rewrite and update of the Emergency Medical Services chapters of rules. Sections in this chapter have been written and implemented in new chapters for Definitions and Agency Licensure published in this Bulletin under Docket 16-0102-1301 and Docket 16-0103-1301. In order to avoid confusion and ensure compliance with the new chapters, the following amendments to the rules:

1. Remove agency licensure requirements and air medical utilization requirements;
2. Remove definitions;
3. Add, remove, and update references to new chapters as needed; and
4. Update required sections to meet requirements of the Office of the Administrative Rules Coordinator rules.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The Emergency Medical Services (EMS) program is funded through dedicated funds. This rulemaking has no fiscal impact to those funds or to the state general fund. This rulemaking is intended to be cost-neutral.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the April 3, 2013, Vol. 13-4, page 13 and 14, and May 1, 2013, Vol. 13-5, page 75 and 76, Idaho Administrative Bulletins, under Docket No. 16-0203-1301, for "Emergency Medical Services."

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Chris Stoker at (208) 334-4000.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before August 28, 2013.

DATED this 9th day of July, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5564; fax: (208) 334-6558
e-mail: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 16-0203-1301

001. TITLE AND SCOPE.

01. Title. The title of these rules is IDAPA 16.02.03, "Emergency Medical Services." (3-29-12)

02. Scope. These rules include criteria for education programs, certification of instructors, ~~licensure of ambulance services and nontransport services including required agency personnel, licensure of ambulances and nontransport vehicles~~, establishment of fees for training, inspections, and certifications. (3-29-12)(____)

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, ~~this Bureau has an EMS Standards Manual that contains policy and interpretation of these rules and the documentation of compliance with these rules. Copies of the Standards Manual may be obtained from the EMS Bureau, 650 W. State Street, Suite B-17, Boise, Idaho 83702, P.O. Box 83720, Boise, Idaho 83720-0036~~ the Department may have written statements that pertain to the interpretation of this chapter, or to the documentation of compliance with these rules. (3-29-12)(____)

(BREAK IN CONTINUITY OF SECTIONS)

004. INCORPORATION BY REFERENCE.

~~The Board of Health and Welfare has adopted the Minimum Equipment Standards for Licensed EMS Services, 2011 edition, Version 1.0, as its standard on required EMS equipment and hereby incorporates the Equipment Standards by reference. Copies of the Equipment Standards may be obtained from the EMS Bureau, 650 W. State Street, Suite B-17, Boise, Idaho 83702, P.O. Box 83720, Boise, Idaho 83720-0036.~~ There are no documents incorporated by reference into this chapter of rules. (3-29-12)(____)

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. (4-6-05)

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. (4-6-05)

03. Street Address. (3-29-12)

a. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (4-6-05)

b. The EMS Bureau of Emergency Medical Services and Preparedness is located at 650 W. State Street, Suite B-17, Boise, Idaho 83702. (~~3-29-12~~)()

04. Telephone. (3-29-12)

a. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (4-6-05)

b. The telephone number for the EMS Bureau of Emergency Medical Services and Preparedness is (208) 334-4000. The toll-free, phone number is 1-877-554-3367. (~~3-29-12~~)()

05. Internet Websites. (4-6-05)

a. The Department's internet website is found at <http://www.healthandwelfare.idaho.gov>. (4-6-05)

b. The Emergency Medical Services Bureau's internet website is found at <http://www.idahoems.org>. (4-6-05)

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.

01. Confidentiality of Records. Any disclosure of confidential information used or disclosed in the course of the Department's business is subject to the restrictions in state or federal law, federal regulation, and Idaho Department of Health and Welfare Rules, IDAPA 16.05.01, "Use and Disclosure of Department Records." (4-6-05)

02. Public Records Act. ~~Individuals have a right to review and copy records maintained by the Department, subject to the provisions of the Idaho Public Records Act, Title 9, Chapter 3, Idaho Code, these rules, and state and federal laws that make records confidential. The Department's Administrative Procedures Section (APS) and designated custodians in Department offices receive and respond to public records requests. The APS can be reached at the mailing address for the Department's business office. Non-identifying or non-confidential information provided to the public by the Department in the ordinary course of business are not required to be reviewed by a public records custodian. Original records must not be removed from the Department by individuals who make public records requests. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure.~~ (4-6-05)()

007. -- 009. (RESERVED)

010. DEFINITIONS AND ABBREVIATIONS.

For the purposes of ~~these rules, the following terms and abbreviations will be used, as defined below:~~ this chapter, the definitions in IDAPA 16.01.02, "Emergency Medical Services (EMS) -- Rule Definitions" apply. (~~7-1-80~~)()

01- Advanced Emergency Medical Technician (AEMT). ~~A person who has met the qualifications for AEMT licensure defined in Section 56-1012, Idaho Code, and in IDAPA 16.01.07, "Emergency Medical Services-- Personnel Licensing Requirements."~~ (3-29-12)

02- Advanced Life Support (ALS). ~~The provision of medical care, medication administration and treatment with medical devices that correspond to the knowledge and skill objectives in the Paramedic curriculum currently approved by the State Health Officer in accordance with Subsection 201.04 of these rules and within the scope of practice defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician~~

~~Commission," by persons licensed as Paramedics by the EMS Bureau. (3-29-12)~~

~~03. **Advertise.** Communication of information to the public, institutions, or to any person concerned, by any oral, written, or graphic means including handbills, newspapers, television, radio, telephone directories, and billboards. (4-5-00)~~

~~04. **Agency.** Any organization required to be licensed by the EMS Bureau that operates an air medical service, ambulance service, or nontransport service. (3-29-12)~~

~~05. **Air Ambulance.** Any privately or publicly owned fixed wing aircraft or rotary wing aircraft used for, or intended to be used for, the transportation of persons experiencing physiological or psychological illness or injury who may need medical attention during transport. This may include dual or multipurpose vehicles that comply with Sections 56-1011 through 56-1023, Idaho Code. (3-29-12)~~

~~06. **Air Medical Response.** The deployment of an aircraft licensed as an air ambulance to an emergency scene intended for the purpose of patient treatment and transportation. (3-29-12)~~

~~07. **Air Medical Service.** An agency required to be licensed by the EMS Bureau that responds to requests for patient care and transportation from hospitals and EMS agencies using a fixed wing aircraft or rotary wing aircraft. (3-29-12)~~

~~08. **Ambulance.** Any privately or publicly owned motor vehicle or nautical vessel, used for, or intended to be used for, the transportation of sick or injured persons who may need medical attention during transport. This may include dual or multipurpose vehicles that comply with Sections 56-1011 through 56-1023, Idaho Code. (3-29-12)~~

~~09. **Ambulance Based Clinicians.** Licensed Professional Nurses, Advanced Practice Professional Nurses, and Physician Assistants with current licenses from the Board of Nursing or the Board of Medicine, who are personnel provided by licensed EMS services. (4-5-00)~~

~~10. **Ambulance Service.** An agency required to be licensed by the EMS Bureau operated with the intent to provide personnel and equipment for medical treatment at an emergency scene, during transportation, or during transfer of persons experiencing physiological or psychological illness or injury who may need medical attention during transport. (3-29-12)~~

~~11. **Applicant.** Any organization that is requesting an agency license under these rules and includes the following: (3-29-12)~~

~~a. An organization seeking a new license; (3-29-12)~~

~~b. An existing agency that intends to change the level of licensed personnel it utilizes; (3-29-12)~~

~~c. An existing agency that intends to change its geographic coverage area, except by agency annexation; (3-29-12)~~

~~d. An existing nontransport service that intends to provide ambulance service; and (3-29-12)~~

~~e. An existing ambulance service that intends to discontinue transport and become a nontransport service. (3-29-12)~~

~~12. **Board.** The Idaho Board of Health and Welfare. (3-29-12)~~

~~13. **Certification.** A credential issued to an individual by the EMS Bureau for a specified period of time indicating that minimum standards have been met. (3-29-12)~~

~~14. **Critical Care Transfer (CCT).** The transportation of a patient with continuous care, monitoring, medication or procedures requiring knowledge or skills not contained within the Paramedic curriculum approved by~~

~~the State Health Officer. Interventions provided by Paramedics are governed by the scope of practice defined in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physicians Commission."~~ (3-29-12)

- ~~15. **Commission.** The Idaho Emergency Medical Services Physician Commission (EMSPC). (3-29-12)~~
- ~~16. **Department.** The Idaho Department of Health and Welfare. (3-29-12)~~
- ~~17. **Director.** The Director of the Idaho Department of Health and Welfare or his designee. (3-29-12)~~
- ~~18. **Division.** The Idaho Division of Public Health, Department of Health and Welfare. (3-29-12)~~
- ~~19. **Emergency.** A medical condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the person's health in serious jeopardy, or in causing serious impairments of bodily function or serious dysfunction of any bodily organ or part. (4-5-00)~~
- ~~20. **Emergency Medical Responder (EMR).** A person who has met the qualifications for EMR licensure defined in Section 56-1012, Idaho Code, and in IDAPA 16.01.07, "Emergency Medical Services Personnel Licensing Requirements." (3-29-12)~~
- ~~21. **Emergency Medical Services (EMS).** The system utilized in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury. (3-29-12)~~
- ~~22. **Emergency Medical Technician (EMT).** A person who has met the qualifications for EMT licensure defined in Section 56-1012, Idaho Code, and in IDAPA 16.01.07, "Emergency Medical Services Personnel Licensing Requirements." (3-29-12)~~
- ~~23. **Emergency Scene.** Any setting (including standbys) outside of a hospital, with the exception of the inter-facility transfer, in which the provision of EMS may take place. (4-11-06)~~
- ~~24. **EMS Bureau.** The Emergency Medical Services (EMS) Bureau of the Idaho Department of Health and Welfare. (11-19-76)~~
- ~~25. **EMS Standards Manual.** A manual published by the EMS Bureau detailing policy information including EMS education, certification, licensure, and data collection. (3-29-12)~~
- ~~26. **Glasgow Coma Score (GCS).** A scale used to determine a patient's level of consciousness. It is a rating from three (3) to fifteen (15) of the patient's ability to open his eyes, respond verbally, and move normally. The GCS is used primarily during the examination of patients with trauma or stroke. (4-11-06)~~
- ~~27. **Ground Transport Time.** The total elapsed time calculated from departure of the ambulance from the scene to arrival of the ambulance at the patient destination. (4-11-06)~~
- ~~28. **Licensed EMS Services.** Air medical services, ambulance services, and nontransport services licensed by the EMS Bureau to function in Idaho. (3-29-12)~~
- ~~29. **Licensed Personnel.** Individuals licensed by the EMS Bureau who are Emergency Medical Responders (EMR), Emergency Medical Technicians (EMT), Advanced Emergency Medical Technicians (AEMT), and Paramedics. (3-29-12)~~
- ~~30. **Local Incident Management System.** The local system of interagency communications, command, and control established to manage emergencies or demonstrate compliance with the National Incident Management System. (4-11-06)~~
- ~~31. **National Emergency Medical Services Information System (NEMSIS) Technical Assistance**~~

~~**Center.** An organization that validates software for compliance with the EMS data set defined by the United States Department of Transportation National Highway Traffic Safety Administration. (3-29-12)~~

~~**32. National Registry of Emergency Medical Technicians (NREMT).** An independent, non-governmental, not for profit organization which prepares validated examinations for the state's use in evaluating candidates for licensure. (3-29-12)~~

~~**33. Nontransport Service.** An agency required to be licensed by the EMS Bureau that is operated with the intent to provide personnel or equipment for medical stabilization at an emergency scene, but that is not intended to be the service that will actually transport sick or injured persons. (3-29-12)~~

~~**34. Nontransport Vehicle.** Any vehicle that is operated by an agency with the intent to provide personnel or equipment for medical stabilization at an emergency scene, but that is not intended as the vehicle that will actually transport sick or injured persons. (3-29-12)~~

~~**35. Out of Hospital.** Any setting outside of a hospital, including inter-facility transfers, in which the provision of EMS may take place. (4-5-00)~~

~~**36. Paramedic.** A person who has met the qualifications for paramedic licensure defined in Section 56-1012, Idaho Code, and in IDAPA 16.01.07, "Emergency Medical Services—Personnel Licensing Requirements." (3-29-12)~~

~~**37. Patient Assessment.** The evaluation of a patient by EMS licensed personnel intending to provide treatment or transportation to that patient. (3-29-12)~~

~~**38. Patient Care.** The performance of acts or procedures under emergency conditions in responding to a perceived individual need for immediate care in order to prevent loss of life or aggravation of physiological or psychological illness or injury. (3-29-12)~~

~~**39. Physician.** In accordance with Section 54-1803, Idaho Code, a person who holds a current active license issued by the State Board of Medicine to practice medicine and surgery, osteopathic medicine and surgery, or osteopathic medicine in Idaho and is in good standing with no restrictions upon, or actions taken against, his license. (3-29-12)~~

~~**40. Pre-Hospital.** Any setting, including standbys, outside of a hospital, with the exception of the inter-facility transfer, in which the provision of EMS may take place. (3-29-12)~~

~~**41. State Health Officer.** The Administrator of the Division of Public Health. (3-29-12)~~

~~**42. Supervision.** The medical direction by a licensed physician of activities provided by licensed personnel affiliated with a licensed ambulance, air medical, or nontransport service, including: (3-29-12)~~

~~**a.** Establishing standing orders and protocols; (3-29-12)~~

~~**b.** Reviewing performance of licensed personnel; (3-29-12)~~

~~**c.** Providing instructions for patient care via radio or telephone; and (3-29-12)~~

~~**d.** Other oversight. (3-29-12)~~

~~**43. Transfer.** The transportation of a patient from one (1) medical care facility to another. (3-29-12)~~

011. -- 0745. (RESERVED)

~~**075. INVESTIGATION OF COMPLAINTS FOR EMS LICENSING VIOLATIONS.** Investigation of complaints and disciplinary actions for EMS agency licensing are provided under IDAPA 16.01.12, "Emergency Medical Services (EMS)—Complaints, Investigations, and Disciplinary Actions." (3-29-12)~~

(BREAK IN CONTINUITY OF SECTIONS)

204. INSPECTION.

Representatives of the EMS Bureau are authorized to enter the training facility at reasonable times, for the purpose of assuring that the training program meets or exceeds the provisions of these rules ~~and the EMS Standards Manual.~~

(7-1-97)(____)

(BREAK IN CONTINUITY OF SECTIONS)

300. ~~AMBULANCE SERVICE STANDARDS REQUIRED RECORDS.~~

~~To qualify for licensing as an ambulance service under Section 56-1016, Idaho Code, the applicant must demonstrate compliance with the following:~~ The following records must be maintained by EMS Agencies as required in IDAPA 16.01.03, "Emergency Medical Services (EMS) -- Agency Licensing Requirements. (4-6-05)(____)

~~01. Ambulance Vehicles. All ambulance and air ambulance vehicles must meet one (1) of the following conditions to be licensed: (3-29-12)~~

~~a. The vehicle meets or exceeds any federal, industry, or trade specifications or standards for ambulance and air ambulance vehicles as identified by the applicant. (3-29-12)~~

~~b. The vehicle has been uniquely configured or modified to meet specialized needs and has been inspected and approved by the EMS Bureau. (7-1-97)~~

~~02. Required Ambulance and Air Ambulance Equipment. Each ambulance must be equipped with the following: (3-29-12)~~

~~a. Medical care supplies and devices as specified in the Minimum Equipment Standards for Licensed EMS Services. Exceptions to the minimum equipment requirements may be granted by the EMS Bureau upon inspection, when the circumstances and available alternatives assure that appropriate patient care will be provided for all foreseeable incidents. (7-1-97)~~

~~b. Mobile radio on 155.340 MHZ and 155.280 MHZ frequencies with encoding capabilities to allow access to the Idaho EMS radio communications system; and (11-19-76)~~

~~c. Safety equipment and personal protective supplies for licensed personnel and other vehicle occupants as specified in the Minimum Equipment Standards, including materials to provide for body substance isolation and protection from exposure to communicable diseases and pathogens under Section 56-1017, Idaho Code. (3-29-12)~~

~~03. Ambulance Personnel. The ambulance service must demonstrate that a sufficient number of personnel are affiliated with the service to accomplish a twenty four (24) hour a day, seven (7) day a week response capability in accordance with Section 56-1016, Idaho Code. The service must describe its anticipated staffing patterns per vehicle and shift on the application supplied by the EMS Bureau. The annual inspection by the EMS Bureau must include a review of the ambulance service personnel staffing configuration. (4-6-05)~~

~~041. Records to be Maintained by Ambulance and Air Medical Agencies. The ambulance service agencies must maintain records of each ambulance and air ambulance response and submit them to the EMS Bureau at least quarterly in a form approved by the EMS Bureau. These records must include at least the following information: (3-29-12)(____)~~

~~a. Name of ambulance service; (3-29-12)~~

- b. Date of response; (3-29-12)
- c. Time call received; (3-29-12)
- d. Time en route to scene; (3-29-12)
- e. Time arrival at scene; (3-29-12)
- f. Time service departed scene; (3-29-12)
- g. Time arrival at hospital; (3-29-12)
- h. Location of incident; (3-29-12)
- i. Description of illness/injury; (3-29-12)
- j. Description of patient management; (3-29-12)
- k. Patient destination; (3-29-12)
- l. Ambulance unit identification; (3-29-12)
- m. Identification and licensure level of each ambulance crew member on the response; and (3-29-12)
- n. Response outcome. (7-1-97)

~~**05. Communications.** Ambulance service dispatch must be in accordance with Section 56-1016, Idaho Code. The application for licensure must describe the radio, telephonic, or other electronic means by which patient care instructions from an authorized medical source will be obtained. The annual inspection by the EMS Bureau will include a review of the ambulance service dispatch and communications configuration. (4-6-05)~~

~~**06. Medical Control Plan.** The ambulance service must describe the extent and type of supervision by a licensed physician that is available to licensed personnel. The annual inspection by the EMS Bureau will include a review of the ambulance service medical control configuration. (3-29-12)~~

~~**07. Medical Treatment Protocols.** The ambulance service must submit a complete copy of the medical treatment protocols and written standing orders under which its licensed personnel will function with the application for licensure. (3-29-12)~~

~~**08. Training Facility Access.** The applicant must describe the arrangements which will provide access to clinical and didactic training locations, in the initial application for service licensure. (4-6-05)~~

~~**09. Geographic Coverage Description.** Each application for initial licensure must contain a specific description of the Idaho jurisdiction(s) that the ambulance service will serve using known geopolitical boundaries or geographic coordinates. (4-6-05)~~

~~**10. Required Application.** The applicant must submit a completed application to the EMS Bureau to be considered for licensure. The most current standardized form will be available from the EMS Bureau. An additional application may be required prior to subsequent annual inspection by the EMS Bureau. (4-6-05)~~

~~**11. Inspection.** Representatives of the EMS Bureau are authorized to enter the applicant's facility or other location as designated by the applicant at reasonable times, for the purpose of inspecting the ambulance services' vehicle(s) and equipment, ambulance and air ambulance response records, and other necessary items to determine eligibility for licensing by the state of Idaho in relation to the minimum standards in Section 56-1016, Idaho Code. (3-29-12)~~

~~**12. License.** Ambulance services must be licensed on an annual basis by the EMS Bureau. (7-1-97)~~

301. ~~NONTRANSPORT SERVICE STANDARDS.~~

~~In order to qualify for licensing as a nontransport service under Section 56-1016, Idaho Code, the applicant must demonstrate compliance with the following:~~ (4-6-05)

~~01. **Vehicles.** All vehicles must meet one (1) of the following conditions to be licensed:~~ (7-1-97)

~~a. The vehicle meets or exceeds standards for that type vehicle, including federal, industry, or trade specifications, as identified by the applicant and recognized and approved by the EMS Bureau.~~ (7-1-97)

~~b. The vehicle has been uniquely configured or modified to meet specialized needs and has been inspected and approved by the EMS Bureau.~~ (7-1-97)

~~02. **Required Equipment for Nontransport Services.** Licensed personnel must have access to required equipment. The equipment must be stored on a dedicated response vehicle, or in the possession of licensed personnel. The application for licensure as a nontransport service must include a description of the following:~~ (3-29-12)

~~a. Medical care supplies and devices as specified in the Minimum Equipment Standards for Licensed EMS Services. Exceptions to the minimum equipment requirements may be granted by the EMS Bureau upon inspection, when the circumstances and available alternatives assure that appropriate patient care will be provided for all foreseeable incidents.~~ (7-1-97)

~~b. Mobile or portable radio(s) on 155.340 MHz and 155.280 MHz frequencies with encoding capabilities to allow access to the Idaho EMS radio communications system; and~~ (7-1-97)

~~c. Safety equipment and personal protective supplies for licensed personnel and other vehicle occupants as specified in the Minimum Equipment Standards for Licensed EMS Services, including materials to provide for body substance isolation and protection from exposure to communicable diseases under Section 56-1023, Idaho Code.~~ (3-29-12)

~~03. **Nontransport Service Personnel.** The nontransport service must demonstrate that a sufficient number of licensed personnel are affiliated with the service to accomplish a twenty four (24) hour a day, seven (7) day a week response capability. Exceptions to this requirement may be granted by the EMS Bureau when strict compliance with the requirement would cause undue hardship on the community being served, or would result in abandonment of the service. The annual inspection by the EMS Bureau will include a review of the personnel staffing configuration.~~ (3-29-12)

042. Records to Be Maintained by Non-Transport Agencies. The non-transport service agencies must maintain records of each EMS response in a form approved by the EMS Bureau. All applicant non-transport services who submit an application to the EMS Bureau after July 1, 2009, must submit records of each EMS response to the EMS Bureau at least quarterly in a form approved by the EMS Bureau. These records must include at least the following information: (3-29-12)(_____)

- a. Identification of nontransport service; (3-29-12)
- b. Date of response; (3-29-12)
- c. Time call received; (3-29-12)
- d. Time en route to scene; (3-29-12)
- e. Time arrival at scene; (3-29-12)
- f. Time service departed scene; (3-29-12)
- g. Location of incident; (3-29-12)

- h.** Description of illness/injury; (3-29-12)
- i.** Description of patient management; (3-29-12)
- j.** Patient destination; (3-29-12)
- k.** Identification and licensure level of nontransport service personnel on response; and (3-29-12)
- l.** Response outcome. (7-1-97)

~~**05. Communications.** The application for licensure must describe the radio, telephonic, or other electronic means by which patient care instructions from an authorized medical source will be obtained. The annual inspection by the EMS Bureau will include a review of the nontransport service dispatch and communications configuration. (4-6-05)~~

~~**06. Medical Control Plan.** The nontransport service must describe the extent and type of supervision by a licensed physician that is available to licensed personnel. The annual inspection by the EMS Bureau will include a review of the nontransport service medical control configuration. (3-29-12)~~

~~**07. Medical Treatment Protocols.** The nontransport service must submit a complete copy of the medical treatment protocols and written standing orders under which its licensed personnel will function with the initial application for licensure. (3-29-12)~~

~~**08. Training Facility Access.** The applicant must describe the arrangements which will provide access to clinical and didactic training locations in the initial application for service licensure. (4-6-05)~~

~~**09. Geographic Coverage Description.** Each application for initial licensure must contain a specific description of the Idaho jurisdiction(s) that the nontransport service will serve using known geopolitical boundaries or geographic coordinates. (4-6-05)~~

~~**10. Required Application.** The applicant must submit a completed application to the EMS Bureau to be considered for licensure. The most current standardized form is available from the EMS Bureau. An additional application may be required prior to subsequent annual inspection by the EMS Bureau. (4-6-05)~~

~~**11. Inspection.** Representatives of the Department are authorized to enter the applicant's facility or other location as designated by the applicant at reasonable times, for the purpose of inspecting the nontransport services' vehicle(s) and equipment, nontransport response records, and other necessary items to determine eligibility for licensing by the state of Idaho. (7-1-97)~~

~~**12. License.** Nontransport services must be licensed on an annual basis by the EMS Bureau. (7-1-97)~~

~~**302.—319. (RESERVED)**~~

~~**320. DESIGNATION OF CLINICAL CAPABILITY.**~~

~~All ambulance and nontransport licenses issued by the EMS Bureau must indicate the clinical level of service which can be provided by the ambulance or nontransport service after verification of compliance with Section 300 or Section 301 of these rules. Agencies which provide licensed personnel at the EMR or EMT level will be designated as Basic Life Support services. Agencies which provide licensed personnel at the AEMT level will be designated as Intermediate Life Support services. Agencies which provide licensed personnel at or above the paramedic level will be designated as Advanced Life Support services under Section 340 of these rules. Licensed EMS Services may function at one (1) or more ALS levels corresponding to the designation issued by the EMS Bureau as a result of the application and inspection process required in Sections 300 and 301 of these rules. (3-29-12)~~

~~**321.—324. (RESERVED)**~~

~~**325. PRE-HOSPITAL ADVANCED LIFE SUPPORT (ALS) STANDARDS.**~~

~~Pre-hospital ALS designation of an agency by the EMS Bureau is required for any agency which will advertise or~~

~~supply clinical personnel and equipment capabilities which are within the scope of practice established for ALS under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission," for the purposes of responding to emergencies in any 911 service area, standby, or other area on an emergency basis. Designation is for the same duration as the license issued to the EMS agency. An agency which has demonstrated compliance with Section 300 or Section 301 of these rules may qualify for Pre-hospital ALS designation if the following criteria are met:~~ (3-29-12)

~~**01- Personnel.** The agency must have a sufficient number of Paramedics to assure availability of such personnel corresponding to the anticipated call volume of the agency. The agency is specifically prohibited from utilizing other licensed health care providers for pre-hospital and emergency responses to requests for EMS unless they are accompanied by or cross trained and licensed as a Paramedic. (3-29-12)~~

~~**a-** Paramedic personnel must hold a current paramedic license issued by the EMS Bureau under IDAPA 16.01.07, "Emergency Medical Services (EMS) — Personnel Licensing Requirements." (3-29-12)~~

~~**b-** An agency may use Ambulance-Based Clinicians who function with a Paramedic or are cross-trained and licensed as a Paramedic. The agency must verify that all Ambulance-Based Clinicians have successfully completed a formal education program of pre-hospital medical care which meets or exceeds the objectives of the curriculum approved by the State Health Officer. The agency must assure that any Ambulance-Based Clinicians meet additional requirements of the corresponding licensing board. (3-29-12)~~

~~**e-** Personnel must initiate advanced life support as authorized by the physician designated as the Medical Director of the agency, and other physicians providing on-line medical supervision as specified in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." (3-29-12)~~

~~**02- Required Documentation.** The employment status and ongoing proficiency maintenance of the licensed personnel and Ambulance-Based Clinicians associated with the agency must be documented on a periodic basis to the EMS Bureau. (3-29-12)~~

~~**a-** The agency must submit a roster of all licensed personnel and Ambulance-Based Clinicians with the application for licensure. Any change in the roster due to attrition or hiring must be documented to the EMS Bureau in writing within sixty (60) calendar days of the change. (3-29-12)~~

~~**b-** The agency must maintain documentation of continuing education, refresher courses, and proficiency assurance of all licensed personnel and Ambulance-Based Clinicians in accordance with the EMS Standards Manual in effect at the time of designation and any EMS Standards Manual which takes effect during the designation period. (3-29-12)~~

~~**03- Required Equipment.** The agency vehicle(s) must be equipped with the Minimum Required Equipment listed in the ALS section of the Minimum Equipment Standards incorporated in these rules. The agency must disclose all additional medical equipment routinely carried on the agency vehicle(s) not included in the Minimum Equipment Standards in the application provided by the EMS Bureau. (4-6-05)~~

~~**04- Administrative License Action.** A pre-hospital ALS designation may be revoked under IDAPA 16.01.12, "Emergency Medical Services (EMS) — Complaints, Investigations, and Disciplinary Actions." The agency is specifically prohibited from advertising as or responding to requests for critical care transfer service unless the agency also holds a Critical Care Transfer Service designation under Section 335 of these rules. (3-29-12)~~

~~326.—329. (RESERVED)~~

~~**330. ADVANCED LIFE SUPPORT (ALS) TRANSFER STANDARDS.**~~

~~ALS Transfer designation of an agency by the EMS Bureau is required for any agency which will advertise or supply clinical personnel and equipment capabilities which are within the scope of practice established for ALS under IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission," for the purposes of providing medical care and transportation between medical care facilities. Designation is for the same duration as the license issued to the EMS agency. An agency which has demonstrated compliance with Section 300 or Section 301 of these rules may qualify for ALS Transfer designation if the following criteria are met: (3-29-12)~~

~~01. Personnel. The agency must have a sufficient number of personnel to assure availability corresponding to the anticipated call volume of the agency. (4-5-00)~~

~~a. Paramedic personnel must hold a current paramedic license issued by the EMS Bureau under IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements." (3-29-12)~~

~~b. An agency which will advertise or provide ALS transfer of patients may use Ambulance Based Clinicians as the medical care provider for those patients. The agency must verify that all Ambulance Based Clinicians have successfully completed a formal education program of out-of-hospital medical care which meets or exceeds the objectives of the curriculum approved by the State Health Officer. The agency must assure that any Ambulance Based Clinicians meet additional requirements of the corresponding licensing board. (3-29-12)~~

~~c. Personnel will initiate advanced life support as authorized by the physician designated as the Medical Director of the agency, and other physicians providing on-line medical supervision as specified in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." (3-29-12)~~

~~02. Required Documentation. The employment status and ongoing proficiency maintenance of the licensed personnel and Ambulance Based Clinicians associated with the agency must be documented on a periodic basis to the EMS Bureau. (3-29-12)~~

~~a. The agency must submit a roster of all licensed personnel and Ambulance Based Clinicians with the application for licensure. Any change in the roster due to attrition or hiring must be documented to the EMS Bureau in writing within sixty (60) calendar days of the change. (3-29-12)~~

~~b. The agency must maintain documentation of continuing education, refresher courses, and proficiency assurance of all licensed personnel and Ambulance Based Clinicians in accordance with the EMS Standards Manual in effect at the time of designation and any EMS Standards Manual which takes effect during the designation period. (3-29-12)~~

~~03. Required Equipment. The agency vehicle(s) must be equipped with the Minimum Required Equipment listed in the ALS section of the Minimum Equipment Standards incorporated in these rules. The agency must disclose all additional medical equipment routinely carried on the agency vehicle(s) not included in the Minimum Equipment Standards in the application provided by the EMS Bureau. (4-6-05)~~

~~04. Administrative License Action. An ALS Transfer designation may be revoked under IDAPA 16.01.12, "Emergency Medical Services (EMS) -- Complaints, Investigations, and Disciplinary Actions." The agency is specifically prohibited from advertising or responding to pre-hospital and emergency requests for ALS unless the agency also holds a pre-hospital ALS designation in accordance with Section 325 of these rules. The agency is specifically prohibited from advertising as or responding to requests for critical care transfer service unless the agency also holds a Critical Care Transfer (CCT) Service designation in accordance with Section 335 of these rules. (3-29-12)~~

~~331. — 334. (RESERVED)~~

335. CRITICAL CARE TRANSFER (CCT) SERVICE STANDARDS.

Critical Care Transfer (CCT) Service designation of an agency by the EMS Bureau is required for any agency which will advertise or supply clinical personnel and equipment capabilities requiring knowledge or skills not contained within the Paramedic curriculum approved by the State Health Officer. Designation will be for the same duration as the license issued to the EMS agency. An agency which has demonstrated compliance with Section 300 of these rules may qualify for Critical Care Transfer (CCT) Service designation if the following criteria are met: (3-29-12)

~~01. Personnel. The agency must have a sufficient number of personnel to assure availability corresponding to the anticipated call volume of the agency. (4-5-00)~~

~~a. Paramedic personnel must hold a current paramedic license issued by the EMS Bureau under IDAPA 16.01.07, "Emergency Medical Services (EMS) -- Personnel Licensing Requirements." Paramedics who will~~

~~be the primary or the only care provider during critical care transfers must have successfully completed a formal education program in critical care transport which meets or exceeds the objectives of the curriculum approved by the State Health Officer. (3-29-12)~~

~~**b.** An agency which will advertise or provide CCT transfer of patients may use Ambulance Based Clinicians as the medical care provider for those patients. The agency must verify that all Ambulance Based Clinicians have successfully completed a formal education program of out-of-hospital medical care which meets or exceeds the objectives of the curriculum approved by the State Health Officer. The agency must assure that any Ambulance Based Clinicians meet additional requirements of the corresponding licensing board. (3-29-12)~~

~~**e.** Personnel will initiate critical care as authorized by the physician designated as the Medical Director of the agency, and other physicians providing on-line medical supervision as specified in IDAPA 16.02.02, "Rules of the Idaho Emergency Medical Services (EMS) Physician Commission." (3-29-12)~~

~~**02. Required Documentation.** The employment status and ongoing proficiency maintenance of the licensed personnel and Ambulance Based Clinicians associated with the agency must be documented on a periodic basis to the EMS Bureau. (3-29-12)~~

~~**a.** The agency must submit a roster of all licensed personnel and Ambulance Based Clinicians with the application for licensure. Any change in the roster due to attrition or hiring must be documented to the EMS Bureau in writing within sixty (60) calendar days of the change. (3-29-12)~~

~~**b.** The agency must maintain documentation of continuing education, refresher courses, and proficiency assurance of all licensed personnel and Ambulance Based Clinicians in accordance with the EMS Standards Manual in effect at the time of designation and any EMS Standards Manual which takes effect during the designation period. (3-29-12)~~

~~**03. Required Equipment.** The agency vehicle(s) must be equipped with the Minimum Required Equipment listed in the ALS section of the Minimum Equipment Standards incorporated in these rules. The agency must disclose all additional medical equipment routinely carried on the agency vehicle(s) not included in the Minimum Equipment Standards in the application provided by the EMS Bureau. (4-6-05)~~

~~**04. Administrative License Action.** A Critical Care Transfer Service designation may be revoked under IDAPA 16.01.12, "Emergency Medical Services (EMS) — Complaints, Investigations, and Disciplinary Actions." The agency is specifically prohibited from advertising or responding to pre-hospital and emergency requests for ALS unless the agency also holds pre-hospital ALS designation under Section 325 of these rules. (3-29-12)~~

~~336.—339. (RESERVED)~~

~~**340. ADVANCED LIFE SUPPORT (ALS) DESIGNATION CATEGORIES.**~~

~~Licensed EMS services are permitted to hold any combination of designations achieved by meeting the standards in Sections 325, 330, and 335 of these rules. Licenses or the designations associated with them can not be assigned or transferred. A standard system of designation must be used by the EMS Bureau to define which combination of clinical capabilities has been demonstrated by each ALS licensed EMS service. (4-6-05)~~

~~**01. An ALS Level I.** An ALS Level I license must be issued by the EMS Bureau to any applicant who meets the requirements in Sections 325, 330 and 335 of these rules. (4-6-05)~~

~~**02. An ALS Level II.** An ALS Level II license must be issued by the EMS Bureau to any applicant who meets the requirements in Sections 325 and 330 of these rules. (4-6-05)~~

~~**03. An ALS Level III.** An ALS Level III license must be issued by the EMS Bureau to any applicant who meets the requirements in Sections 330 and 335 of these rules. (4-6-05)~~

~~**04. An ALS Level IV.** An ALS Level IV license must be issued by the EMS Bureau to any applicant who meets the requirements in Section 330 of these rules. (4-6-05)~~

~~05. An ALS Level V. An ALS Level V license must be issued by the EMS Bureau to any applicant who meets the requirements in Section 325 of these rules. (4-6-05)~~

~~3401. -- 399. (RESERVED)~~

400. ADVANCE DO NOT RESUSCITATE (DNR) DIRECTIVES.

01. Protocols. (11-10-94)

a. The EMS Advisory Committee described in IDAPA 16.01.01, "Emergency Medical Services (EMS) -- Advisory Committee." will establish standard protocols for EMS personnel to respond to advance DNR directives. ~~(11-10-94)(____)~~

b. The protocol will be reviewed at least annually by the EMS Advisory Committee to determine if changes in protocol should be made to reflect technological advances. (11-10-94)

c. The Department will notify Idaho EMS personnel of DNR protocols and any subsequent changes. (3-29-12)

02. Do Not Resuscitate (DNR) Order. (3-29-12)

a. A standard DNR form will be made available to physicians by the Department or its designee. (11-10-94)

b. One (1) copy will be maintained in the patient's file and one (1) copy will be kept by the patient. (11-10-94)

03. Do Not Resuscitate (DNR) Identification. (3-29-12)

a. Only a physician signed DNR order or a Department approved bracelet or necklace will be honored by EMS personnel. (11-10-94)

b. The bracelet or necklace will have an easily identifiable logo that solely represents a DNR code. (11-10-94)

c. The Department will advise EMS personnel of what constitutes an acceptable identification. (11-10-94)

d. No DNR identification may be issued without a valid DNR order in place. (11-10-94)

e. Only vendors authorized by the Department may sell or distribute DNR identifications. (11-10-94)

~~401. -- 404. (RESERVED)~~

~~**405. STANDARDS FOR THE APPROPRIATE USE OF AIR MEDICAL EDUCATION AND TRAINING AGENCIES BY LICENSED EMS PERSONNEL AT EMERGENCY SCENES.**~~

~~**01. Who Establishes Education Curricula and Continuing Education Requirements for Air Medical Criteria?** The EMS Bureau will incorporate education and training regarding ~~the~~ air medical criteria established in Subsection 4205.02 of ~~these~~ this rules into initial training curricula and required continuing education of licensed EMS personnel. ~~(3-29-12)(____)~~~~

~~**02. Who Must Establish Written Criteria Guiding Decisions to Request an Air Medical Response?** Each licensed EMS service must establish written criteria, approved by the EMS service medical director, to guide the decisions of the service's licensed EMS personnel to request an air medical response to an emergency scene. The criteria will include patient conditions found in Section 415 of these rules. ~~(3-29-12)~~~~

~~03. **What Written Criteria is Required for EMS Service Licensure?** Written criteria guiding decisions to request an air medical response will be required for all initial and renewal applications for EMS service licensure for licenses effective on November 1, 2006, or later. (4-11-06)~~

~~04. **Who Is Responsible for Requesting an Air Medical Response?** Licensed EMS personnel en route to or at the emergency scene have the primary responsibility and authority to request the response of air medical services using the local incident management system and licensed EMS service written criteria. (3-29-12)~~

~~05. **When Can Licensed EMS Personnel Cancel an Air Medical Response?** Licensed EMS personnel must complete a patient assessment prior to their cancellation of an air medical response. (3-29-12)~~

~~06. **Who May Establish Criteria for Simultaneous Dispatch?** The licensed EMS service may establish criteria for simultaneous dispatch for air and ground medical response. Air medical services will not respond to an emergency scene unless requested. (4-11-06)~~

~~07. **Who Is Responsible for Selecting an Appropriate Air Medical Service?** Selection of an appropriate air medical service is the responsibility of the licensed EMS service. (4-11-06)~~

~~a. The licensed EMS service, through written policy, will establish a process of air medical selection. (4-11-06)~~

~~b. The written policy must direct EMS personnel to honor a patient request for a specific air medical service when the circumstances will not jeopardize patient safety or delay patient care. (4-11-06)~~

~~406.—414. (RESERVED)~~

~~415. **AIR MEDICAL RESPONSE CRITERIA.**~~

~~The need for an air medical request will be determined by the licensed EMS service licensed personnel based on their patient assessment and transport time. Each licensed EMS service must develop written criteria based on best medical practice principles. The following conditions must be included in the criteria: (3-29-12)~~

~~01. **What Clinical Conditions Require Written Criteria?** The licensed EMS service written criteria will provide guidance to the licensed EMS personnel for the following clinical conditions: (3-29-12)~~

~~a. The patient has a penetrating or crush injury to head, neck, chest, abdomen, or pelvis; (4-11-06)~~

~~b. Neurological presentation suggestive of spinal cord injury; (4-11-06)~~

~~c. Evidence of a skull fracture (depressed, open, or basilar) as detected visually or by palpation; (4-11-06)~~

~~d. Fracture or dislocation with absent distal pulse; (4-11-06)~~

~~e. A Glasgow Coma Score of ten (10) or less; (4-11-06)~~

~~f. Unstable vital signs with evidence of shock; (4-11-06)~~

~~g. Cardiac arrest; (4-11-06)~~

~~h. Respiratory arrest; (4-11-06)~~

~~i. Respiratory distress; (4-11-06)~~

~~j. Upper airway compromise; (4-11-06)~~

~~k. Anaphylaxis; (4-11-06)~~

- ~~l.~~ Near drowning; (4-11-06)
 - ~~m.~~ Changes in level of consciousness; (4-11-06)
 - ~~n.~~ Amputation of an extremity; and (4-11-06)
 - ~~o.~~ Burns greater than twenty percent (20%) of body surface or with suspected airway compromise. (4-11-06)
- ~~02. What Complicating Conditions Require Written Criteria? When associated with clinical conditions in Subsection 415.01 of these rules, the following complicating conditions require written guidance for EMS personnel: (4-11-06)~~
- ~~a.~~ Extremes of age; (4-11-06)
 - ~~b.~~ Pregnancy; and (4-11-06)
 - ~~e.~~ Patient “do not resuscitate” status as described in Section 400 of these rules. (4-11-06)
- ~~03. What Operational Conditions Require Written Guidance for an Air Medical Response? The licensed EMS service written criteria will provide guidance to the licensed EMS personnel for the following operational conditions: (3-29-12)~~
- ~~a.~~ Availability of local hospitals and regional medical centers; (4-11-06)
 - ~~b.~~ Air medical response to the scene and transport to an appropriate hospital will be significantly shorter than ground transport time; (4-11-06)
 - ~~e.~~ Access to time sensitive medical interventions such as percutaneous coronary intervention, thrombolytic administration for stroke, or cardiac care; (4-11-06)
 - ~~d.~~ When the patient's clinical condition indicates the need for advanced life support and air medical is the most readily available access to advanced life support capabilities; (4-11-06)
 - ~~e.~~ As an additional resource for a multiple patient incident; (4-11-06)
 - ~~f.~~ Remote location of the patient; and (4-11-06)
 - ~~g.~~ Local destination protocols. (4-11-06)
- ~~416. 419. (RESERVED)~~
- ~~420. COMMUNICATIONS.~~
- ~~01. Who Is Responsible for Requesting an Air Medical Response? The licensed EMS service will establish a uniform method of communication, in compliance with the local incident management system, to request air medical response. (4-11-06)~~
- ~~02. What Information Must Be Given When Requesting an Air Medical Response? Requests for an air medical response must include the following information as it becomes available: (4-11-06)~~
- ~~a.~~ Type of incident; (4-11-06)
 - ~~b.~~ Landing zone location or GPS (latitude/longitude) coordinates, or both; (4-11-06)
 - ~~e.~~ Scene contact unit or scene incident commander, or both; (4-11-06)

- ~~d. Number of patients if known; (4-11-06)~~
- ~~e. Need for special equipment; (4-11-06)~~
- ~~f. How to contact on scene EMS personnel, and (4-11-06)~~
- ~~g. How to contact the landing zone officer. (4-11-06)~~
- ~~03. Who Is Notified of a Request for an Air Medical Response? The air medical service will notify the State EMS Communication Center within ten (10) minutes of launching an aircraft in response to a request for emergency services. Notification will include: (4-11-06)~~
- ~~a. The name of the requesting entity; (4-11-06)~~
- ~~b. Location of the landing zone; and (4-11-06)~~
- ~~e. Scene contact unit and scene incident commander, if known. (4-11-06)~~
- ~~04. Who Is Provided the Estimated Time of Arrival at the Specified Landing Zone? Upon receipt of a request for emergency services, the air medical service will provide the requesting entity with an estimated time to arrival in hours and minutes at the location of the specified landing zone and any changes to that estimated time. (4-11-06)~~
- ~~05. Who Must Confirm Availability of an Air Medical Response? Upon receipt of a request, the air medical service will inform the requesting entity if the air medical service is not immediately available to respond. (4-11-06)~~
- ~~421. 424. (RESERVED)~~
- ~~425. LANDING ZONE AND SAFETY.~~
- ~~01. Who Is Responsible for Setting Up Landing Zone Procedures? The licensed EMS service in conjunction with the air medical service(s) must have written procedures for establishment of landing zones. Such procedures will be compatible with the local incident management system. (4-11-06)~~
- ~~02. What Are the Responsibilities of Landing Zone Officers? The procedures for establishment of landing zones must include identification of Landing Zone Officers with responsibility for the following: (4-11-06)~~
- ~~a. Landing zone preparation; (4-11-06)~~
- ~~b. Landing zone safety; and (4-11-06)~~
- ~~e. Communication between ground and air agencies. (4-11-06)~~
- ~~032. What Training Is Required for Landing Zone Officers? The Each licensed EMS service agency will assure that EMS licensed personnel, designated as Landing Zone Officers, have completed training in establishing an air medical landing zone based on the following elements: (3-29-12)(____)~~
- ~~a. The required size of a landing zone; (4-11-06)~~
- ~~b. The allowable slope of a landing zone; (4-11-06)~~
- ~~c. The allowable surface conditions; (4-11-06)~~
- ~~d. Hazards and obstructions; (4-11-06)~~

- e. Marking and lighting; (4-11-06)
- f. Landing zone communications; and (4-11-06)
- g. Landing zone safety. (4-11-06)

~~04. What Is the Deadline for Obtaining Training as Landing Zone Officers? Current EMS licensed personnel, designated as Landing Zone Officers, must complete the required training described in Subsection 425.03 of this rule by June 30, 2007. (3-29-12)~~

~~05. What Is the Deadline for Training as a Landing Zone Officer for EMS License Renewal? All EMS certified personnel will complete training described in Subsection 425.03 of this rule as a component of required continuing education for license renewal not later than September 30, 2010. (3-29-12)~~

~~06. Who Has the Final Decision to Use an Established Landing Zone? The air medical pilot may refuse the use of an established landing zone. In the event of pilot refusal, the landing zone officer will initiate communications to identify an alternate landing zone. (4-11-06)~~

~~426. -- 429. (RESERVED)~~

~~430. PATIENT DESTINATION.~~

~~The air medical service must have written procedures for determination of patient destination. (4-11-06)~~

~~01. Procedures for Destination Protocol and Medical Supervision. The air medical service written procedure will consider the licensed EMS service destination protocol and medical supervision received. (3-29-12)~~

~~02. Availability of Written Procedures. The air medical service must make the written procedures available to licensed EMS services that utilize their services. (4-11-06)~~

~~03. Determination of Destination Will Honor Patient Preference. The air medical procedures for determination of destination will honor patient preference if the requested facility is capable of providing the necessary medical care and if the requested facility is located within a reasonable distance not compromising patient care or the EMS system. (4-11-06)~~

~~43106. -- 434. (RESERVED)~~

435. PERIODIC REVIEW OF EMS SYSTEM DATA.

The Department of Health and Welfare, EMS Bureau, will periodically review service response data with other EMS system data such as those found in the Trauma Registry maintained in accordance with Title 57, Chapter 20, Idaho Code. (4-11-06)(____)

~~01. How Often Will the Department Conduct a Review of Air Medical Criteria? Every Three Years. The ~~Idaho~~ EMS Bureau will review the rules, utilization and effectiveness of air medical criteria every three (3) years with the first review being completed no later than June 30, 2009. (4-11-06)(____)~~

~~02. What May Be Included During the Review of Air Medical Criteria? to be Reviewed. The EMS Bureau review of air medical criteria may include the following: (4-11-06)(____)~~

- a. Licensed EMS service response data; (4-11-06)
- b. Licensed EMS service guidelines; (4-11-06)
- c. Patient treatment and outcome information; and (4-11-06)
- d. Trauma Registry data. (4-11-06)

~~03. What Information Must Be Provided During the Review of Air Medical Response Criteria?~~

Licensed EMS services must provide incident specific patient care related data identified and requested by the EMS Bureau in the review of air medical response criteria. (4-11-06)

043. ~~To Whom Will the~~ EMS Bureau Report ~~the~~ of Aggregate Data and Findings². The EMS Bureau will report the aggregate data and findings from the review of air medical criteria to all licensed EMS ~~services~~ agencies, hospitals, county commissioners, and EMS medical directors. (4-11-06)(_____)

436. -- 999. (RESERVED)