

Dear Senators MARTIN, Souza, Jordan, and  
Representatives WOOD, Wagoner, Chew:

The Legislative Services Office, Research and Legislation, has received the enclosed rules of  
the Department of Health and Welfare:

IDAPA 16.02.02 - Rules of the Idaho Emergency Medical Services (EMS) Physician Commission -  
Proposed Rule (Docket No. 16-0202-1901).

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 11/21/2019. 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 12/20/2019.

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 334-4854, or send a written request to the address on the  
memorandum attached below.



Eric Milstead  
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:** Principal Legislative Drafting Attorney - Elizabeth Bowen

**DATE:** November 01, 2019

**SUBJECT:** Department of Health and Welfare

IDAPA 16.02.02 - Rules of the Idaho Emergency Medical Services (EMS) Physician Commission - Proposed Rule (Docket No. 16-0202-1901)

#### Summary and Stated Reasons for the Rule

This proposed rule incorporates by reference the most recent edition of the Idaho EMS Physician Commission Standards Manual.

#### Negotiated Rulemaking / Fiscal Impact

Negotiated rulemaking was not conducted. However, the updates to the Standards Manual reflect stakeholder feedback gathered at meetings of the EMS Physician Commission. There is no anticipated negative fiscal impact on the state general fund.

#### Statutory Authority

This rulemaking appears to be within the Department's statutory authority.

cc: Department of Health and Welfare  
Frank Powell and Trinette Middlebrook

#### \*\*\* PLEASE NOTE \*\*\*

Per the Idaho Constitution, all administrative rules may be reviewed by the Legislature during the next legislative session. The Legislature has 3 options with this rulemaking docket: **1)** Approve the docket in its entirety; **2)** Reject the docket in its entirety; or **3)** Reject the docket in part.

**IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**  
**16.02.02 – RULES OF THE IDAHO EMERGENCY MEDICAL SERVICES**  
**(EMS) PHYSICIAN COMMISSION**

**DOCKET NO. 16-0202-1901**

**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 56-1013A and 56-1023, Idaho Code.

**PUBLIC HEARING SCHEDULE:** Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 16, 2019.

The hearing site(s) 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:

To best protect the public's health and safety, the document incorporated in this chapter, "Idaho Emergency Medical Services (EMS) Physician Commission Standards Manual," is being revised and updated. Edition 2020-1 of this Standards Manual will become effective July 1, 2020. The revision to these rules will ensure that the most recent edition of the manual has the force and effect of law.

**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.

There is no anticipated fiscal impact to the state general fund related to this rulemaking.

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted and deemed not feasible because the content of the proposed updates to the EMS Physician Commission Standards Manual already represents extensive input from stakeholders gathered on an ongoing basis throughout the year and at the quarterly meetings of the EMS Physician Commission.

**INCORPORATION BY REFERENCE:** Pursuant to Section 67-5229(2)(a), Idaho Code, the "Idaho Emergency Medical Services (EMS) Physician Commission Standards Manual," Edition 2020-1, is being incorporated by reference into these rules to give it the force and effect of law. This will replace the currently incorporated document, Edition 2019-1. The document is not being published in this chapter of rules due to its length and format, but it is available upon request from Idaho EMS. Once the docket has been finalized and adopted, the manual will be available online at: [www.emspc.dhw.idaho.gov](http://www.emspc.dhw.idaho.gov).

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed rule, contact Wayne Denny 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 October 23, 2019.

Dated this 19th day of August, 2019.

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](mailto:dhwrules@dhw.idaho.gov)

**THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 16-0202-1901**  
**(Only Those Sections With Amendments Are Shown.)**

**004. INCORPORATION BY REFERENCE.**

The Idaho Emergency Medical Services (EMS) Physician Commission has adopted the Idaho Emergency Medical Services (EMS) Physician Commission Standards Manual, edition 20~~19~~<sup>20</sup>-1, and hereby incorporates this Standards Manual by reference. Copies of the manual may be obtained on the Internet at [www.emspc.dhw.idaho.gov](http://www.emspc.dhw.idaho.gov) or from the Bureau of Emergency Medical Services and Preparedness located at 2224 East Old Penitentiary Road, Boise, ID, 83712-8249, whose mailing address is P.O. 83720, Boise, Idaho 83720-0036. ~~(7-1-19)~~(    )

## INCORPORATION BY REFERENCE SYNOPSIS

In compliance with Section 67-5223(4), Idaho Code, the following is a synopsis of the differences between the materials previously incorporated by reference in this rule that are currently in full force and effect and newly revised or amended versions of these same materials that are being proposed for incorporation by reference under this rulemaking.

The following agency of the State of Idaho has prepared this synopsis as part of the proposed rulemaking for the chapter cited here under the docket number specified:

**DEPARTMENT OF HEALTH AND WELFARE**  
**IDAPA 16.02.02 – RULES OF THE EMERGENCY MEDICAL SERVICES (EMS) PHYSICIAN**  
**COMMISSION**  
**Docket No. 16-0202-1901**

*(Include a brief description that explains the differences between the version of the materials or documents that are currently incorporated by reference and the materials or documents that are being proposed for adoption in this rulemaking.)*

*(You may use the following table or write a brief summary of the differences)*

Incorporated Document Version/URL	IDAPA Section Number	Current Version of Incorporated Document	Substantive Changes in New Incorporation by Reference Version
<a href="#"><u>EMSPC Standards Manual Edition 2019-1</u></a>	16.02.02.004	Idaho Emergency Medical Services (EMS) Physician Commission Standards Manual, Edition 2019-1 <b><i>(NOTE: the Standards Manual approved by the 2019 Legislature (edition 2019-1) went into effect on July 1, 2019. Edition 2020-1, if approved by the 2020 Legislature, will go into effect July 1, 2020.)</i></b>	<p>A summary of the changes to the Idaho EMS Physician Commission “Scope of Practice” Standards Manual incorporated by reference in Section 004 of IDAPA 16.02.02, “Rules of the EMS Physician Commission,” follows this coversheet.</p> <p>The changes for this incorporated manual have been negotiated throughout the year with stakeholders and finalized in the November 2019 meeting of the EMS Physician Commission. The full text of the updated Standards Manual (<b><i>Edition 2020-1</i></b>) is now available.</p> <p>If you have further questions, please contact Wayne Denny, EMS Bureau Chief at (208) 334-4000.</p>

## Summary of Changes

### EMS Physician Commission Standards Manual 2019-1 to 2020-1

*Effective date of new standards manual and scope of practice (page 15): July 1, 2020*

#### *Appendix A Removals:*

- *Line 3: Cricoid Pressure (Sellick) removed*
- *Line 48: Cricoid Pressure (Sellick) removed*
- *Line 136: Cricoid Pressure (Sellick) removed*
- *Line 219: Cricoid Pressure (Sellick) removed*
- *Line 322: Cricoid Pressure (Sellick) removed*
- *Line 8: Modified Chin Lift removed*
- *Line 55: Modified Chin Lift removed*
- *Line 143: Modified Chin Lift removed*
- *Line 226: Modified Chin Lift removed*
- *Line 339: Modified Chin Lift removed*
- *Line 49: Demand Valve – Manually triggered, flow restricted, ventilation removed*
- *Line 137: Demand Valve – Manually triggered, flow restricted, ventilation removed*
- *Line 220: Demand Valve – Manually triggered, flow restricted, ventilation removed*
- *Line 325: Demand Valve – Manually triggered, flow restricted, ventilation removed*
- *Line 353: PEEP – Therapeutic (>6cm H<sub>2</sub>O pressure) removed*
- *Line 165: Hemorrhage Control – Pressure Point removed*
- *Line 249: Hemorrhage Control – Pressure Point removed*
- *Line 371: Hemorrhage Control – Pressure Point removed*
- *Line 89: MAST/PASG for Pelvis Immobilization only removed*
- *Line 177: MAST/PASG for Pelvis Immobilization only removed*
- *Line 261: MAST/PASG for Pelvis Immobilization only removed*
- *Line 389: MAST/PASG for Pelvis Immobilization only removed*
- *Line 122: Inhaled Beta Agonist (SVN) removed*
- *Line 208: Inhaled Beta Agonist (SVN) removed*
- *Line 301: Inhaled Beta Agonist (SVN) removed*
- *Line 381: Pacing – Permanent/ICD removed*
- *Line 336: Intubation – Retrograde removed*
- *Line 422: Arterial Blood Sampling, Radial Site – Obtaining removed*

#### *Appendix A Edits/Additions:*

- *Appendix A reference numbers updated to reflect changes*
- *Line 47 (EMT): CPAP 2X*
- *Line 218 (AEMT2011): CPAP 2X*
- *Line 32: Oxygen Therapy – High Flow Nasal Cannula X*
- *Line 13(EMT): End Tidal CO<sub>2</sub> Capnography*
- *Line 13 (AEMT85): End Tidal CO<sub>2</sub> Capnography*
- *Line 13 (AEMT2011): End Tidal CO<sub>2</sub> Capnography*
- *Line 13 (Paramedic): End Tidal CO<sub>2</sub> Capnography*

- *Line 46 (EMT): EKG – 12-lead ~~data~~ acquisition & transmission – X*
- *Line 46 (AEMT85): EKG – 12-lead ~~data~~ acquisition & transmission – X*
- *Line 46 (AEMT2011): EKG – 12-lead ~~data~~ acquisition & transmission – X*
- *Line 46 (Paramedic): EKG – 12-lead ~~data~~ acquisition & transmission*
- *Line 65 (EMT): Telemetric monitoring & telemedicine – X*
- *Line 65 (AEMT2011): Telemetric monitoring & telemedicine – X*
- *Line 65 (Paramedic): Telemetric monitoring & telemedicine – X*
- *Line 24 (EMR): Cervical Stabilization – Cervical collar – X*
- *Line 140 (EMT): Inhaled Beta Agonist (MDI) – X*
- *Line 141 (EMT): Inhaled Beta Agonist (SVN) - X*
- *Line 136 (AEMT85) Inhaled Beta Agonist (SVN) – X\*\**
- *Line 136 (EMT): Inhaled Beta Agonist (~~MDI~~) - X*
- *Line 136 (AEMT85): Inhaled Beta Agonist (~~MDI~~) – X\*\**
- *Line 136 (AEMT2011): Inhaled Beta Agonist (~~MDI~~) - X*
- *Line 135 (EMT): Inhaled Anticholinergic – X*
- *Line 135 (AEMT85): Inhaled Anticholinergic – X\*\**
- *Line 135 (AEMT2011): Inhaled Anticholinergic – X*
- *Line 88 (Paramedic): Intradermal – X*
- *Line 90 (EMR): Intranasal – X*
- *Line 90 (EMT): Intranasal – X*
- *Line 90 (AEMT): Intranasal – X*
- *Line 104 (EMT): Subcutaneous/Mucosal – X*
- *Line 106 (paramedic): Transdermal – X*
- *Line 152 (EMR): Vaccinations –*
  
- *Line 152 (EMT): Vaccinations –*
  
- *Line 152 (AEMT85): Vaccinations –*
  
- *Line 152 (AEMT2011): Vaccinations –*
  
- *Line 152 (Paramedic): Vaccinations –*
  
- *Line 147 (EMR): Opioid Antagonist – X*
- *Line 147 (EMT): Opioid Antagonist - X*
- *Line 147 (AEMT85): Opioid Antagonist - X*
- *Line 147 (AEMT2011): Opioid Antagonist - X*
- *Line 147 (Paramedic): Opioid Antagonist - X*
- *Line 112 (EMR): Blood Glucose Monitoring – Automatic – 2, OM*
- *Line 112 (EMT): Blood Glucose Monitoring – Automatic – X*
- *Line 124 (AEMT2011): Venous Blood Sampling – Obtaining – X*
- *Line 148 (EMT): OTC Pain Analgesics (Ibuprophen, Acetaminophen)*