

## **NASEMSO COVID-19 1<sup>st</sup> Query (Results as of 3/17/20)**

### **What is your EMS personnel license expiration date in 2020?**

GA: 3/31/20

LA: 3/31/20

MD: June 30 & December 30

MI: MI EMS providers have licenses that expire every three years from the date the license was issued.

MN: March 31, 2020

NE: December 31, 2020: Paramedic, AEMT, EMT Intermediates and EMRs; December 31, 2020: EMT

NM: March 31.

TX: We have about 1300 people that expire each month.

### **Is your state planning on following suit with the NREMT and extending the expiration date or waiving CEU requirements?**

GA: Have not decided on this yet.

LA: Yes extending to 06/30/2020.

MD: June expirations will be extended (probably 6 months but not yet official)

MI: MI is not waiving requirements. There is already a 60 day grace period built into the system. Most CEs can be obtained online.

MN: EMSRB Staff have recommended, we do. We are currently working with our Governor's office to follow the NREMT.

NE: Not at this time, although it could change.

NM: No; in our state all CE's must be completed by December 31 of – in this case – 2019. And the vast majority of renewals have been received, as the rate paid for renewal increases on March 1. Most folks try to avoid that. Should anyone have a valid reason for delayed renewal, we will deal with that individually.

TX: Still under review.

**If your state has rules about the minimum staffing of licensed personnel on an ambulance, are you planning/thinking about waiving those requirements or modifying them?**

GA: We do have rules requiring 2 licensed EMS personnel on an ambulance, but we are not to the point of needing to waive that.

LA: NO not regarding minimum staffing. We have asked the Governor for a proclamation to waive state licensure as long as the practitioner is in good standing in their home state (another reason why we need REPLICA).

MD: Floated that balloon; no action yet

MI: Yes we have requested statutory waivers for staffing and for level of license for the vehicle.

MN: Yes we have rules requiring minimum staffing. These requirements are waived under a Governor's declared Emergency, which went into effect in MN on March 13th.

NE: Yes, we do have minimum staffing. Waiving them has not been discussed at this time but all regulations are on the table for temporary modification.

NM: Yes, we will be working with the entity that oversees the business aspects of ambulance companies for exceptions to required personnel.

TX: Yes and yes.

**Is your state modifying the clinical or field internship requirements for initial education EMT/AEMT/Paramedic programs?**

GA: We are not modifying the minimum number of hours, but we are saying that the Program Director and Program Medical Director can decide to supplement patient contacts with simulation. They still have to do field internship, but they can use the simulation to supplement the patient contacts that they get in EMS.

LA: Haven't been asked to consider this.

MD: No.

MI: Basic EMTs will be allowed to substitute ambulance clinical time for hospital clinical time, as some hospitals are not allowing students to do clinical time.

MN: No, per MN Statute, we did not find this necessary, as we allow for the use of mannequins and actors.

NE: Currently no; however, we are exploring this option

NM: We will accept for licensure anyone that receives a certificate from an approved institution. We do not have specific requirements in rule/statute.

TX: As of now we are giving them more time to complete the process

## **Does your state have a plan in place for notification to the state of positive COVID -19 patients transported?**

GA: Yes – they call our Medical Epidemiology phone number.

LA: No. Louisiana has dropped this ball for EMS.

MD: Yes, by executive order that we crafted.

MI: MI is using BioSpatial and MI EMSIS data to identify trends of individuals who may have been transported from nursing homes to hospitals that meet a case definition for COVID 19. EMS is an integral part of the COVID 19 response in the MI Community Health Emergency Coordination Center and are working closely with the Bureau of Epidemiology related to identified EMS issues.

MN: We don't, hospitals and the Department of Health would hold this information

NE: With EMS not currently. Receiving hospitals have it in place.

NM: Yes. The COVID Hotline for our state has been made available to PSAPs and EMS agencies statewide, and their guidance is to call with any suspected patient. If it is a confirmed positive patient being transferred to or between the hospitals, the DOH is already aware, and is probably participating in the arranging of the transfer.

TX: Yes.

## **ADDITIONAL COMMENTS**

### **MICHIGAN**

MI is also implementing several COVID 19 emergency protocols that may be adopted by Medical Control Authorities to support the response, including use of telehealth to treat in place or transfer to alternate destinations.

Protocol to facilitate CP programs or other EMS providers to assist with obtaining np swabs for testing in collaboration with some hospitals.

MI has also included EMS in the request process for obtaining PPE from the SNS allocation that was sent to the State.

Other proposed legislation that has been proposed relates to utilizing technology such as Skype or FaceTime for life support agencies and vehicles.

Arrangements have been made to hold any administrative disciplinary hearings using available technology to avoid in person hearings.

Advisory committees are being held in the virtual environment.

Staff are going to be allowed to work from home to facilitate continuity of operations and government.