



Oregon

Theodore R. Kulongoski., Governor

Department of Human Services

Health Services

800 NE Oregon Street

Portland, OR 97232-2162

971-673-0520

FAX: 971-673-0555

December 15, 2008

MEMORANDUM

TO: EMS Agencies and Ambulance Services

FROM: Bob Leopold, Director
EMS & Trauma Systems

SUBJECT: Instructions for Recertification of EMTs by Agencies
Please forward this information to the appropriate staff member.

The EMS and Trauma Systems Program is making Agency Recertification available at the request of some of the EMS agencies in Oregon. To make this option effective, please be thorough and conscientious in completing the procedures. Failure to comply with **any** of these instructions will result in the entire recertification package being returned to your agency **unprocessed**.

1. Only employees whose **EMS affiliation** is with your agency may be submitted with your agency recertification package.
2. A group recertification roster in the format of the attached roster must be submitted.
*NOTE: An alphabetized computer generated list may be attached (including all information requested on the roster **in the same format, layout, and field order**) to this signed roster in lieu of listing the personnel on the DHS/EMS form.*
3. An application for EMT recertification must be completed for each employee/person. These must be attached, in alphabetical order consistent with the roster submitted. The recertification form must be completed by the EMT. **The application for EMT recertification will be sent directly to the EMT at their home address in March 2009. If an EMT does not have a current address on file with DHS/EMS they may not receive their recertification packet.**

To ensure that recertification packets are sent to the correct mailing address, please review the enclosed list of EMTs affiliated with your agency. If there are any changes, please have the EMT submit a completed E-4 form to DHS/EMS, PO Box 14450, Portland OR 97293 or send a fax to: 971-673-0555; or e-mail to veronica.seymour@state.or.us.

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4. There must be a completed EMT Recertification Questionnaire (Page 3/4) portion of the recertification form for each EMT. They may submit their recertification questionnaire (*in a sealed envelope*) along with their application for recertification to the employer, to be submitted to DHS/EMS with the group recertification packet.
5. Signature of the primary medical director and the primary EMS agency chief officer is not required on each applicant's recertification form when recertifying as an agency. However, these signatures **must** be on the master roster form for all personnel in the agency submission.
6. Submit **one** check (made payable to the "DHS Health Services@). The check must be in the exact amount required for the personnel listed on the roster. (*The required EMT recertification fee is EMT-Basic - \$40; EMT-Intermediate - \$65; and EMT-Paramedic - \$120*)
7. All EMT applicants will have criminal background checks performed. If a recertification applicant has lived or worked outside the state of Oregon for 60 or more consecutive days since their last recertification, they will need to include a fingerprint sample. There is an additional fee for conducting this check of \$47.25. This must be included with the application.
8. **The packet will be returned unprocessed if all the materials are not submitted in a complete and accurate manner.** If it is not possible for your entire agency to comply with these requirements, individuals will need to apply separately.
9. An agency may submit **only one** group recertification package. Recertification packages must be postmarked on or before **May 1, 2009**. This process may take 4-6 weeks. Individual EMT applications postmarked by May 31, 2009, will be processed and issued prior to June 30, 2009. **Early application is strongly encouraged and appreciated. Late group recertification packets will NOT be permitted.**
10. Please mail or hand deliver to the address below, **NOT** to the address listed on the individual recertification form.

DHS/EMS & Trauma Systems
Agency EMT Recertification
800 NE Oregon Street, Suite 465
Portland, OR 97232

Agency recertification packages must be postmarked on or before:

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If you have any questions regarding the agency group recertification, please call Nancy Gillen at 971-673-0526 or e-mail at nancy.j.gillen@state.or.us.

For frequently asked questions and other information regarding EMT recertification, please refer to our web site at <http://oregon.gov/DHS/ph/ems/certific/recert.shtml> or call our office at 971-673-0520.