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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 333
OREGON HEALTH AUTHORITY
PUBLIC HEALTH DIVISION

FILED

08/31/2023 12:58 PM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Licensing Requirements for Paramedics and Military Service Members and their Spouse or Domestic Partner

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 09/25/2023 5:00 PM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

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Filed By:
Public Health Division
Rules Coordinator

HEARING(S)

Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.

DATE: 09/20/2023
TIME: 1:00 PM
OFFICER: Staff

HEARING LOCATION

ADDRESS: Remote via Microsoft Teams, Video/teleconference call, Portland, OR 97232

REMOTE MEETING DETAILS

MEETING URL: [Click here to join the meeting](#)

PHONE NUMBER: 971-277-2343

CONFERENCE ID: 8388105

SPECIAL INSTRUCTIONS:

This hearing is being held remotely via Microsoft Teams. To provide oral testimony during this hearing, please contact publichealth.rules@odhsoha.oregon.gov to register and receive the link for the Microsoft Teams video conference. Alternatively, you may dial 971-277-2343, Phone Conference ID 838 810 5# for audio only.

Accessibility Statement: For individuals with disabilities or individuals who speak a language other than English, OHA can provide free help. Some examples are: sign language and spoken language interpreters, real-time captioning, braille, large print, audio, and written materials in other languages. If you need help with these services, please contact the Public Health Division at 971-673-1222, 711 TTY or publichealth.rules@odhsoha.oregon.gov at least 48 hours before the meeting. All relay calls are accepted. To best ensure our ability to provide a modification please contact us if you are considering attending the meeting and require a modification. The earlier you make a request the more likely we can meet the need.

NEED FOR THE RULE(S)

The Oregon Health Authority, Public Health Division, EMS and Trauma Systems Program is proposing to permanently adopt and amend Oregon Administrative Rules in chapter 333, divisions 250 and 265 relating to requirements to license a Paramedic and requirements to issue a license to a military service member or the spouse or domestic partner of a service member who is licensed in another state. In order to address concerns raised by community partners regarding the Paramedic workforce shortage, the proposed amendments modify associate degree requirements for a person seeking to be licensed as a Paramedic, replacing the paramedic provisional license with a transitional paramedic license. Persons currently licensed as a Provisional Paramedic will still be required to comply with the provisional rule but may apply for a Transitional Paramedic license. A person who does not have an associate degree may obtain a Transitional Paramedic license if currently certified by the National Registry of Emergency Medical Technicians (NREMT) as a Paramedic and is sponsored by a licensed ambulance service and meets specified requirements. The Transitional Paramedic license would be valid for 24 months, and may be renewed, allowing an individual time to obtain an associate degree and to apply for a Paramedic license. A Transitional Paramedic may submit a request for hardship status which may provide an additional 12 months to obtain the associate degree for a total of 60 months. Work experience substitution for the education requirement for persons applying for reciprocity has been modified from three of five years, to allow proof of having at least two of the last five years of advanced life support, first response Paramedic experience. Rules are being adopted to comply with ORS 670.400 and ORS 676.308, and new federal legislation allowing the program to issue a license to a service member or the spouse or domestic partner of a service member that is stationed in Oregon, and who has a license or certificate to practice as an EMS provider in another state. Rules specify documentation and other requirements necessary.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

- ORS chapter 682: https://www.oregonlegislature.gov/bills_laws/ors/ors682.html
- ORS chapter 676: https://www.oregonlegislature.gov/bills_laws/ors/ors676.html
- ORS chapter 670: https://www.oregonlegislature.gov/bills_laws/ors/ors670.html
- Proposed SB 60 (2023): <https://olis.oregonlegislature.gov/liz/2023R1/Measures/Overview/SB60>
- Proposed SB 183A (2023): <https://olis.oregonlegislature.gov/liz/2023R1/Measures/Overview/SB183>
- H.R. 7939 §19: <https://www.congress.gov/bill/117th-congress/house-bill/7939/text>
- Strengthening Military Families, September 2021, Matching their Devotion: Deepening our Commitment to the Families, Caregivers, and Survivors of Service Members and Veterans – A report of the joining forces interagency policy committee – The White House: https://www.whitehouse.gov/wp-content/uploads/2021/09/Strengthening_Americas_Military_Families.pdf
- William J. Leggio, Tom Grawey, Joshua Stillely, Maia Dorsett & on behalf the Education Committee of the National Association of EMS Physicians (2021) EMS Curriculum Should Educate Beyond a Technical Scope of Practice: Position Statement and Resource Document, *Prehospital Emergency Care*, 25:5, 724-729, DOI: 10.1080/10903127.2021.1925793. <https://www.tandfonline.com/doi/full/10.1080/10903127.2021.1925793>. Sean M. Caffrey, Leaugeay C. Barnes & David J. Olvera (2018): Joint Position Statement on Degree Requirements for Paramedics, *Prehospital Emergency Care*, DOI: 10.1080/10903127.2018.1519006. <https://www.tandfonline.com/doi/full/10.1080/10903127.2018.1519006>
- Meriem Perona, Muhammad Aziz Rahman and Peter O'Meara (2019): Paramedic Judgement, Decision Making and Cognitive Processing: A Review of the Literature, *Australasian Journal of Paramedicine*. <https://journals.sagepub.com/doi/epdf/10.33151/ajp.16.586>
- Sahaj Khalsa, Leaugeay Barnes, Robert Audet, Michele Sweeney, William Leggio, Lawrence Linder, Jane MacArthur, Diane C. Flint, Dwayne Cottell & Jonathan L. Epstein (2020) The Impact of Cultural Humility in Prehospital Healthcare Delivery and Education a Position Paper from the National Association of EMS Educators (NAEMSE), *Prehospital Emergency Care*, 24:6, 839-843, DOI: 10.1080/10903127.2019.1709001.

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

Recent testimony during a public hearing on SB 60 (2023) noted the significant impact to rural communities, specifically on the border between Idaho and Oregon, seeking to recruit and retain Paramedics. It was reported during a Rule Advisory Committee meeting that given the different requirements for licensure for Paramedics between states, ambulance service agencies operating in rural Oregon may have difficulty in recruiting and hiring Paramedics due to differences in licensing and education requirements and therefore may not be sufficiently staffed to meet the needs of the community.

There are currently 4,509 Paramedics licensed in Oregon (85.6% White, 11% Hispanic or Latino, 8.6% Native American/American Indian/Alaska Native, 8.2% Asian, 7.3% Black or African American, 7.3 % Native Hawaiian or Other Pacific Islander, 8.8% Other, 13.1% Not recorded, 8.3% Not applicable.) Important context for the demographic composition, includes that providers may identify as more than one race, resulting in a total demographic percentage of less than exactly 100%. A large number of providers selected "Not recorded" and "Not applicable" which means these percentages may not be accurate. Additionally, there are a large number of providers who selected both the "Not recorded" category, as well as one or more of the other categories. The EMS and Trauma Systems program is working on how to ensure more accurate data reporting on provider race and ethnicity data.

In the September 2021, Report of the Joining Forces Interagency Policy Committee, "Strengthening America's Military Families-Matching their Devotion: Deepening our Commitment to the Families, Caregivers, and Survivors of Service Members and Veterans," the rate of military spouse unemployment in 2019 was 22 percent (page 9). Military spouses and/or domestic partners face unique challenges in finding career options that easily transition, given the mobile lifestyle of military members. Many military spouses and/or domestic partners may need to find other employment while seeking licensure in their profession with every move. In jobs that require licenses or certificates, many of these spouses and/or domestic partners still face career portability barriers as each state sets its own licensing requirements. These barriers may impose significant administrative and financial burdens on licensed professionals moving across state lines. The proposed rules seek to clarify the licensing requirements for service members and their spouses or domestic partners and the documentation required to support their EMS provider license application.

FISCAL AND ECONOMIC IMPACT:

The EMS & Trauma Systems Program has oversight over the following licensed agencies and providers that may be affected by these proposed rules:

- 131 ambulance service agencies
- 1,289 EMRs
- 6,203 EMTs
- 242 Advanced EMTs
- 669 EMT-Intermediates
- 4,509 Paramedics

Since mid-2022, the EMS and Trauma Systems Program issued 19 provisional licenses:

- 9 completed the degree requirement and obtained an Oregon Paramedic license;
- 4 did not complete the degree; and
- 6 are currently in progress.

The proposed rule amendments require that a Transitional Paramedic must be sponsored by an ambulance service agency and requires submission of accurate, annual reports on progress towards obtaining degree. The rule further removes requirement that an applicant for a transitional license must be licensed or certified in another state. It eliminates prerequisite requirements relating to credit hours and lengthens the time a licensee must obtain an associate degree from one year to four years, and allows an additional year for hardship. These changes will spread out the costs associated with obtaining a degree over a longer period of time making it easier for individuals to both work and obtain the necessary education courses to obtain the degree.

A licensed ambulance service is not required to sponsor applicants for Transitional Paramedic licenses, however, should they choose to sponsor an applicant, the ambulance service will be required to have a policy and procedure in place and will need to monitor and collect annual reports from any Transitional Paramedic that is sponsored by the agency and retain documentation in each sponsored Transitional Paramedic personnel file.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) Local governments that operate a licensed ambulance service may be able to increase their Paramedic workforce while these individuals are given a longer period of time to obtain an associate degree. In turn, the workforce may be depleted if persons do not follow through with obtaining the associate degree. The EMS and Trauma System program will have costs associated with staff time to develop new licensing forms, policies and processes for a Transitional Paramedic license. Additional costs are anticipated in order to update the electronic licensing system. There is no change to the current fees. The costs associated with obtaining an associate degree for a transitional licensee may be spread out over time as the transitional licensee will have up to four years to obtain the license, and if experiencing a hardship, will have up to five years. Persons seeking a temporary EMS provider license given their status as a military spouse or domestic partner will pay the same licensing fee as other persons seeking an EMS provider license: EMR - \$45; EMT - \$110; AEMT - \$125; and Paramedic - \$290.

(2)(a) The EMS and Trauma Systems program does not collect data on the number of staff each ambulance service agency employs and therefore cannot estimate with accuracy how many agencies may be small business. It is assumed that several agencies in rural Oregon would employ 50 or fewer persons and would be impacted by these rules.

(b) An ambulance service agency will be expected to develop a policy relating to sponsoring a person who holds a Transitional Paramedic license, monitor the progress of a Transitional Paramedic to obtain an associate degree and retaining annual progress reports in the personnel file.

(c) No additional equipment, supplies, labor or increased administration is necessary to comply with the proposed rules.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

Rural ambulance service agencies, providers from rural communities, and the Oregon State Ambulance Association who represent rural agencies were included on the Rule Advisory Committee.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:

333-250-0205, 333-250-0265, 333-250-0270, 333-250-0280, 333-265-0000, 333-265-0025, 333-265-0027, 333-265-0028, 333-265-0030, 333-265-0050, 333-265-0060, 333-265-0080, 333-265-0085, 333-265-0090, 333-265-0110

AMEND: 333-250-0205

RULE SUMMARY: Amend 333-250-0205

A definition for "these rules" was added to clarify which rules are being referred to.

CHANGES TO RULE:

333-250-0205

Definitions ¶¶

- (1) "Advertise" means to communicate information to the public, or to any person concerned, by any oral, written, or graphic means including, but not limited to, pamphlets, newspapers, television, billboards, radio, Internet and telephone directories.¶¶
- (2) "Agent" has the same meaning given that term in OAR 847-035-0001.¶¶
- (3) "Ambulance" or "ambulance vehicle" means any privately or publicly owned motor vehicle, aircraft, or watercraft that is regularly provided or offered to be provided for the emergency transportation of persons who are ill or injured or who have disabilities.¶¶
- (4) "Ambulance-based clinician":¶¶
 - (a) Means a registered nurse, physician, or physician assistant who:¶¶
 - (A) Has an active license in Oregon and is in good standing with the Oregon Board of Nursing or the Oregon Medical Board; and¶¶
 - (B) Staffs an ambulance for a licensed ambulance service.¶¶
 - (b) Includes an EMS medical director or agent that staffs an ambulance.¶¶
- (5) "Ambulance service" means a person, governmental unit, or other entity that operates ambulance(s) and that holds itself out as providing prehospital care or medical transportation to persons who are ill or injured or who have disabilities.¶¶
- (6) "Ambulance service administrator" means an individual responsible for the professional, supervisory and administrative work in the operation of the ambulance service and its staff.¶¶
- (7) "Ambulance service area (ASA)" means a geographic area served by one ground ambulance service provider, and may include all or portion of a county, or all or portions of two or more contiguous counties.¶¶
- (8) "Ambulance service license" means the documents issued by the Authority to the owner of an ambulance service when the service is found to be in compliance with ORS chapter 682; OAR chapter 333, division 255 and these rules.¶¶
- (9) "Authority" means the Emergency Medical Services and Trauma Systems Program, within the Oregon Health Authority.¶¶
- (10) "Business day" means Monday through Friday when the Authority is open for business, excluding holidays.¶¶
- (11) "Emergency care" means the performance of acts or procedures under emergency conditions in the observation, care and counsel of persons who are ill or injured or who have disabilities; in the administration of care or medications as prescribed by a licensed physician, insofar as any of these acts is based upon knowledge and application of the principles of biological, physical and social science as required by a completed course utilizing an approved curriculum in prehospital emergency care. However, "emergency care" does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.¶¶
- (12) "EMS" means Emergency Medical Services.¶¶
- (13) "EMS medical director" has the same meaning as "supervising physician" in ORS 682.025.¶¶
- (14) "Emergency medical services provider (EMS provider)" has the meaning given that term in ORS 682.025.¶¶
- (15) "Employee" means any full-time paid or part-time paid person acting within the scope of ~~his or her~~their duties and for or on behalf of an ambulance service.¶¶
- (16) "Fraud or deception" means the intentional misrepresentation or misstatement of a material fact, concealment of or failure to make known any material fact or any other means by which misinformation or false impression is knowingly given.¶¶
- (17) "NEMSIS" means the National EMS Information System.¶¶
- (18) "Non-emergency care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24-hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician

licensed under ORS chapter 677, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board in the course of providing prehospital care as defined in this rule.¶

(19) "Outcome data" means the data collected by an Oregon trauma center on a trauma patient and identified in Appendix 2 of OAR 333-250-0315.¶

(20) "OREMSIS" means the Oregon Emergency Medical Services Information System.¶

(21) "OTR" means the Oregon Trauma Registry data system.¶

(22) "Owner" means the person having all the incidents of ownership in an ambulance service or an ambulance or where the incidents of ownership are in different persons, the person, other than a security interest holder or lessor, entitled to the possession of an ambulance vehicle or operation of an ambulance service under a security agreement or a lease for a term of 10 or more successive days.¶

(23) "Non-transporting emergency medical services (EMS) agency" means any individual, partnership, corporation, association, governmental agency or unit or other entity that uses licensed EMS providers to provide emergency care or non-emergency care in the out-of-hospital environment to persons who are ill or injured, but does not transport patients.¶

(24) "Paramedic" means a person who is licensed by the Authority as a Paramedic.¶

(25) "Patient" means a person who is ill or injured or who has a disability and who receives emergency or nonemergency care from an EMS provider.¶

(26) "Patient care report (PCR)" means an Authority-approved paper form or an electronic field data format (ePCR) that is completed by an EMS provider or ambulance-based clinician for all patients receiving prehospital assessment, care or transportation to a medical facility.¶

(27) "Patient encounter data" means the prehospital data collected by an EMS provider responding to a scene where patient contact is initiated and identified in Appendix 1 of OAR 333-250-0315.¶

(28) "Person" has the meaning given that term in ORS 174.100.¶

(29) "Physician" means a person licensed under ORS chapter 677, actively registered and in good standing with the Oregon Medical Board as a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO).¶

(30) "Prehospital care" means care rendered by EMS providers as an incident of the operation of an ambulance and care rendered by EMS providers as incidents of other public or private safety duties, and includes, but is not limited to "emergency care" as defined in this rule.¶

(31) "Procedure" means a written, dated and signed course of action to carry out a directive. A procedure must be able to answer the questions; who, what, why, when and where.¶

(32) "Qualified driver" means someone who is not licensed by the Authority and who meets Authority requirements to operate a ground ambulance.¶

(33) "These rules" means OAR 333-250-0200 through OAR 333-250-0410. ¶

(34) "Volunteer" means a person who is not compensated for their time to staff an ambulance or EMS agency, but who may receive reimbursement for personal expenses incurred.

Statutory/Other Authority: ORS 682.017

Statutes/Other Implemented: ORS 682.017 - 682.117, 682.991

AMEND: 333-250-0265

RULE SUMMARY: Amend 333-250-0265

Policies and procedures for a licensed ambulance service agency was amended to clarify that if a licensed ambulance service agency sponsors a Transitional Paramedic, the agency must adopt a policy regarding the requirements necessary to sponsor a Transitional Paramedic including providing necessary information to the Oregon Health Authority; submission of accurate, annual reports; notification requirements; and any additional steps or resources that will be taken to ensure the success of a Transitional Paramedic to obtain a Paramedic license.

CHANGES TO RULE:

333-250-0265

Policies and Procedures ¶

- (1) ~~The~~^A licensed ambulance service must have written policies and procedures to carry out daily ambulance service operations including, but not limited to:¶
- (a) Work practice controls for bloodborne pathogens in compliance with OAR chapter 437, division 2, subdivision Z;¶
 - (b) Storage and security of medications including controlled substances if authorized by the EMS medical director that meet the requirements of the Oregon Board of Pharmacy in OAR chapter 855 and the US Drug Enforcement Administration found in 21 CFR 1301.75(b);¶
 - (c) Identification, storage and security of all medications, fluids and controlled substances that are deteriorated, outdated, misbranded, adulterated or otherwise unfit for use that are readily identified as defective and stored in a separate location from usable products. Security procedures must be the same as for usable supplies;¶
 - (d) Destruction of outdated medications including controlled substances if authorized by the~~¶~~ EMS medical director that meets the requirements of the Oregon Board of Pharmacy in OAR chapter 855 and the US Drug Enforcement Administration found in 21 CFR 1307.21;¶
 - (e) Identification and storage of malfunctioning patient care equipment clearly marked "out-of-service" to assure that defective equipment will not be used, if applicable;¶
 - (f) Employee, volunteer or ambulance-based clinician notification requirements to the licensed ambulance service when an employee, volunteer or ambulance-based clinician is impaired by excessive fatigue, illness, injury or other factors that may reasonably be anticipated to constitute a threat to the health and safety of patients or the public;¶
 - (g) Reporting of suspected child abuse as required in ORS 419B.005 through 419B.050;¶
 - (h) Reporting of suspected elder abuse as required in ORS 124.050 through 124.095;¶
 - (i) Patient rights in accordance with OAR 333-250-0330;¶
 - (j) Providing secure transport for patients in custody in accordance with OAR 309-033-0435, if the licensed ambulance service has been authorized to perform this service;¶
 - (k) Operation of an ambulance for both emergency and non-emergency situations;¶
 - (l) Vehicle cleanliness standards including frequency of cleaning and cleaning required after each patient transport;¶
 - (m) Removal of an ambulance from service when the mechanical condition of an ambulance is sufficiently unreliable so as to endanger or potentially endanger the health, safety, or welfare of a patient or crew member;¶
 - (n) Managing a mechanical breakdown including repairing or replacing a damaged tire or wheel when the ambulance is in operation;¶
 - (o) Actions necessary when an ambulance is involved in an accident, including the submission of a legible copy of the Department of Motor Vehicles Accident Report to the ~~Authority~~^{Oregon Health Authority (Authority)} within 10 business days of the accident;¶
 - (p) Release of continuing education records completed by an EMS provider or employee through the licensed ambulance service in a verifiable format to a requesting party within five business days of the request; ~~and~~¶
 - (q) Release and destruction of patient care reports (PCRs) in accordance with OAR 333-250-0310; ~~and~~¶
 - (r) If the agency sponsors an EMS provider seeking licensure as a Transitional Paramedic, requirements necessary for the agency to sponsor the Transitional Paramedic applicant including but not limited to:¶
 - (A) Providing the necessary information prescribed by the Authority and specified under OAR 333-265-0027 to the Transitional Paramedic applicant; ¶
 - (B) Requiring a Transitional Paramedic to submit accurate, annual reports to the ambulance service on the status of meeting the requirements under OAR 333-265-0025(7)(a)(C);¶
 - (C) Requiring a Transitional Paramedic to notify the ambulance service of any request to the Authority seeking

hardship status in accordance with OAR 333-265-0027 and the Authority's approval if applicable; and¶
(D) Steps that will be taken or resources given to ensure the success of a Transitional Paramedic in obtaining a Paramedic license. ¶

(2) The licensed ambulance service must have a process in place to assure that employees, volunteers, ambulanced-based clinicians, agents and EMS medical directors:¶

(a) Have access to current policies and procedures;¶

(b) Have access to state, federal and local rules and regulations governing the operation of a licensed ambulance service; and¶

(c) Are informed of changes to policies or procedures.

Statutory/Other Authority: ORS 682.017, 682.068

Statutes/Other Implemented: ORS 682.017 - 682.117, 682.991

AMEND: 333-250-0270

RULE SUMMARY: Amend 333-250-0270

Reporting requirements were amended specifying that a licensed ambulance service that sponsors a Transitional Paramedic must report to the Oregon Health Authority within ten calendar days if there is a separation from employment or if the ambulance service no longer wants to sponsor the Paramedic.

CHANGES TO RULE:

333-250-0270

Personnel ¶¶

(1) The licensed ambulance service must ensure that the service, employees, volunteers, ambulance-based clinicians, agents and EMS medical directors comply with all of the requirements of these rules, ORS chapter 682, ORS 820.300 through 820.380, OAR division 333, chapter 255, and other applicable federal, state and local laws and regulations governing the operation of a licensed ambulance service.¶¶

(2) Prior to an employee, volunteer, or ambulance-based clinician being allowed to staff an ambulance, the licensed ambulance service shall:¶¶

(a) Provide and require that each employee, volunteer, and ambulance-based clinician complete an initial orientation program that includes but is not limited to:¶¶

(A) Ambulance service standing orders;¶¶

(B) Ambulance service policies and procedures;¶¶

(C) Driving and operating requirements for ambulance vehicles; and¶¶

(D) Operations of equipment.¶¶

(b) Ensure that each employee, volunteer, and ambulance-based clinician has successfully completed the following training:¶¶

(A) Bloodborne pathogen and infectious disease training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision Z;¶¶

(B) Hazardous materials awareness training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision H;¶¶

(C) Emergency vehicle operator's course of instruction prior to independently operating an ambulance. The course must meet or be equivalent to the National Safety Council for Emergency Vehicle Operators Course (EVOC 3) or National Fire Protection Agency (NFPA) Fire and Emergency Service Vehicle Operations Training standards;¶¶

(D) Air medical crew training in accordance with chapter 333, division 255 when operating an air ambulance; and¶¶

(E) Proper operation of all ambulances and equipment that they are authorized to use, and are physically capable, and have the ability to lift and move patients, and assist in extrication of patients when necessary, if authorized to do so.¶¶

(3) In addition to the initial orientation program described in subsection (2)(a) of this rule, a licensed ambulance service shall ensure and document in the personnel file that all EMS providers and ambulance-based clinicians receive training on:¶¶

(a) The proper use of any new equipment, procedure or medication prior to being placed into operation on an ambulance; and¶¶

(b) Secure transportation of patients in custody in accordance with OAR 309-033-0437, if the licensed ambulance service has been authorized to perform this service.¶¶

(4) If a licensed ambulance service contracts with or employs an ambulance-based clinician for the purpose of providing advanced level care, the licensed ambulance service shall ensure that the ambulance-based clinician meets all of the applicable training requirements in sections (2) and (3) of this rule and have documentation that the clinician has completed the following:¶¶

(a) A current AHA, Advanced Cardiac Life Support course or equivalent and a current AHA, Pediatric Advanced Life Support course or equivalent; and either¶¶

(b) A current Prehospital Trauma Life Support course;¶¶

(c) A current Basic Trauma Life Support course;¶¶

(d) A current Trauma Emergency Assessment Management (TEAM) course; or¶¶

(e) A Trauma Nurse Core Course (TNCC).¶¶

(5) The TEAM and TNCC courses referenced in section (4) of this rule must include a supplemental prehospital rapid extrication training session.¶¶

(6) In order to operate a ground ambulance vehicle, the licensed ambulance service must:¶¶

(a) Ensure the licensed ambulance service and its employees, volunteers or ambulance-based clinicians:¶¶

(A) Comply with all applicable Oregon Motor Vehicle Code statutes relating to motor vehicle and emergency

vehicle operations, ORS 820.300 through 820.380 and ORS chapter 445;¶

(B) Complete an emergency ground ambulance vehicle operator's training in accordance with subsection (2)(b) of this rule; and¶

(C) Comply with all applicable policies and procedures.¶

(b) Ensure the driver of a ground ambulance vehicle is a licensed EMS provider in accordance with OAR chapter 333, division 265 and has a valid driver's license or if the driver is not a licensed EMS provider, ensure that the driver:¶

(A) Has a valid driver's license;¶

(B) Has a current Basic Life Support (BLS) Provider card or proof of course completion that meets or exceeds the 2015 American Heart Association (AHA) Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC) guidelines;¶

(C) Has completed the following training:¶

(i) Emergency ground ambulance vehicle operator's training in accordance with subsection (2)(b) of this rule;¶

(ii) Bloodborne pathogen and infectious disease training that meets or exceeds standards found in OAR chapter 437, division 2, subdivision Z; and¶

(iii) Hazardous materials awareness training that meets or exceeds the Oregon Occupational Safety and Health Division standards found in OAR chapter 437, division 2, subdivision H;¶

(D) Signs a statement that the driver:¶

(i) Is not addicted to alcohol or controlled substances and is free from any physical or mental condition that might impair their ability to operate or staff an ambulance; and¶

(ii) Is physically capable of assisting in the extrication, lifting and moving of a patient at the direction of an EMS provider; and¶

(E) Had a criminal background check conducted by the licensed ambulance service that determined the driver was suitable to operate a ground ambulance vehicle; or¶

(F) Has been certified by the Department of Public and Safety Standards and Training within the last 365 days.¶

(c) Have a certified copy of the qualified driver's driving record completed through the Oregon Department of Motor Vehicles, Automated Reporting System (ARS) Program or equivalent. If the driver has an out-of-state driver's license, the licensed ambulance service must obtain an equivalent certified copy driving record from that state, if available and if not available, conduct an annual driving record check. The latest copy must be kept in the driver's personnel file.¶

(7) A licensed ambulance service may not permit an employee, volunteer or ambulance-based clinician to operate an ambulance, equipment, or have contact with a patient if the employee, volunteer or ambulance-based clinician:¶

(a) Is taking any medication that could impair safe operation and handling of the ambulance, equipment, or patient; or¶

(b) Has consumed any alcoholic beverages within the last eight hours.¶

(8) In order to provide air ambulance service, the licensed ambulance service must ensure that the licensed ambulance service, employee, volunteer or ambulance-based clinician:¶

(a) Comply with the Federal Aviation Regulation (FAR), 14 CFR Part 135; and¶

(b) Successfully complete the 2004 Association of Air Medical Services (AAMS) Guidelines or equivalent. There must also be an annual review of the Air Medical Crew course material, the length of which must be established by the EMS medical director.¶

(9) Prior to independently staffing an ambulance, an employee, volunteer or ambulance-based clinician must begin the Hepatitis-B immunization series or have a signed statement of declination.¶

(10) The licensed ambulance service must submit a completed service reportable action form to the ~~Authority~~ Oregon Health Authority (Authority), within 14 business days for any of the following actions:¶

(a) Terminating or suspending an employee or volunteer for cause; and¶

(b) Disciplinary action taken by the licensed ambulance service or the EMS medical director for unprofessional conduct as defined in OAR 333-265-0000.¶

(11) A licensed ambulance service that sponsors a Transitional Paramedic in accordance with OAR 333-250-0265 must notify the Authority within 10 calendar days of the Paramedic's separation from employment or if the service otherwise elects to no longer sponsor the Paramedic.¶

(12) A licensed ambulance service must reflect any change to staffing, including addition or separation of, in the electronic licensing management system roster, within 30 calendar days.¶

(123) A licensed ambulance service must not schedule or allow an employee, volunteer or ambulance-based clinician to serve on an ambulance who is impaired by excessive fatigue, illness, injury or other factors that may reasonably be anticipated to constitute a threat to the health and safety of patients or the public.

Statutory/Other Authority: ORS 682.017, 682.068

Statutes/Other Implemented: ORS 682.017 - 682.117, 682.991

AMEND: 333-250-0280

RULE SUMMARY: Amend 333-250-0280

Personnel file documentation requirements was amended to include reference to the form required by the Oregon Health Authority when a person is seeking a license as a Transitional Paramedic.

CHANGES TO RULE:

333-250-0280

Personnel File Documentation ¶¶

The licensed ambulance service must maintain a complete and current personnel file for each employee, volunteer, ambulance-based clinician, agent and EMS medical director including but not limited to, the following information:¶¶

- (1) Full name;¶¶
- (2) Current home mailing address;¶¶
- (3) Affiliation status, listed as either an employee full-time paid, employee part-time paid, contractor or volunteer;¶¶
- (4) Verifiable written documentation that the employee, volunteer or ambulance-based clinician has completed required training including when and where training was obtained;¶¶
- (5) Copies of:¶¶
 - (a) Reportable action forms as required under OAR 333-250-0270(10);¶¶
 - (b) Applicable professional certificates or licenses;¶¶
 - (c) A current driver's license;¶¶
 - (d) A current pilot's license if the employee or volunteer operates an air ambulance;¶¶
 - (e) A certified driving record in accordance with OAR 333-250-0270(6)(c);¶¶
 - (f) A current BLS Provider card or proof of course completion that meets or exceeds the 2015 American Heart Association (AHA) ECC and CPR guidelines or equivalent;¶¶
 - (g) Training records that identify completion of an initial orientation program and training requirements specified in these rules;¶¶
 - (h) For an EMS provider licensed as a Transitional Paramedic, material required under OAR 333-265-0027(1)(d);¶¶
 - (i) Health records documenting:¶¶
 - (A) Initial tuberculosis (TB) screening and any subsequent screenings in accordance with OAR 333-019-0041; and¶¶
 - (B) Hepatitis-B immunizations or a signed statement of declination; and¶¶
 - (ij) Qualified driver statement in accordance with OAR 333-250-0270(6)(b)(D).

Statutory/Other Authority: ORS 682.017, 682.068

Statutes/Other Implemented: ORS 682.017 - 682.117, 682.991

AMEND: 333-265-0000

RULE SUMMARY: Amend 333-265-0000

Definitions added for the terms "Transitional Paramedic license" and "These rules."

CHANGES TO RULE:

333-265-0000

Definitions ¶¶

- (1) "Advanced Emergency Medical Technician (AEMT or Advanced EMT)" means a person who is licensed by the ~~Authority~~ Oregon Health Authority (Authority) as an Advanced Emergency Medical Technician.¶¶
- (2) "Ambulance service" means any person, governmental unit, or other entity that operates ambulances and holds itself out as providing prehospital care or medical transportation to persons who are ill or injured or who have disabilities.¶¶
- (3) "Authority" means the Emergency Medical Services and Trauma Systems Program, within the Oregon Health Authority, Public Health Division.¶¶
- (4) "Business day" means Monday through Friday when the Authority is open for business, excluding holidays.¶¶
- (5) "Candidate" means an applicant that has completed training in an emergency medical services provider course and has not yet been licensed by the Authority.¶¶
- (6) "Clinical experience (Clinical)" means those hours of the curriculum that synthesize cognitive and psychomotor skills and are performed under a preceptor.¶¶
- (7) "Continuing education" means education required as a condition of licensure under ORS chapter 682 to maintain the skills necessary for the provision of competent prehospital care. Continuing education does not include attending EMS related business meetings, EMS exhibits or trade shows.¶¶
- (8) "Criminal records check" means obtaining and reviewing criminal records and includes any or all of the following:¶¶
 - (a) A check of criminal offender information and driving records conducted through use of the Law Enforcement Data System (LEDS) maintained by the Oregon State Police (OSP), in accordance with the rules adopted and procedures established by OSP;¶¶
 - (b) A check of Oregon or other state criminal offender information, including through fingerprint identification or other means, conducted by OSP at the Authority's request; or¶¶
 - (c) A nationwide check of federal criminal offender information, including through fingerprint identification, conducted by OSP through the Federal Bureau of Investigation (FBI).¶¶
- (9) "Didactic instruction" means the delivery of primarily cognitive material through lecture, video, discussion, and simulation by program faculty or through web or Internet-based communication.¶¶
- (10) "Direct visual supervision" means that a person qualified to supervise is at the patient's side to monitor the emergency medical services provider in training.¶¶
- (11) "Educational institution" means a degree granting community college, college or university or a licensed vocational school that is authorized or licensed by the Higher Education Coordinating Commission.¶¶
- (12) "Emergency care" means the performance of acts or procedures under emergency conditions in the observation, care and counsel of persons who are ill or injured or who have disabilities; in the administration of care or medications as prescribed by a licensed physician, insofar as any of these acts is based upon knowledge and application of the principles of biological, physical and social science as required by a completed course utilizing an approved curriculum in prehospital emergency care. However, "emergency care" does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.¶¶
- (13) "EMS" means Emergency Medical Services.¶¶
- (14) "EMS licensing officer" is a person approved by the Authority in accordance with OAR 333-265-0026 to conduct an Emergency Medical Technician (EMT) or EMT-Intermediate psychomotor examination in a manner consistent with the standards of the National Registry or the Authority.¶¶
- (15) "EMS Medical Director" has the same meaning as "Supervising Physician" in ORS 682.025.¶¶
- (16) "Emergency Medical Responder (EMR)" means a person who is licensed by the Authority as an Emergency Medical Responder.¶¶
- (17) "Emergency Medical Services (EMS) agency" means any person, governmental agency or unit, or other entity that utilizes emergency medical services providers to provide prehospital emergency or non-emergency care. An emergency medical services agency may be either an ambulance service or a nontransporting service.¶¶
- (18) "Emergency Medical Services provider (EMS provider)" means a person who has received formal training in prehospital and emergency care, and is licensed to attend to any person who is ill or injured or who has a disability. Police officers, fire fighters, funeral home employees and other persons serving in a dual capacity, one of which meets the definition of "emergency medical services provider" are "emergency medical services providers" within

the meaning of ORS chapter 682.¶

(19) "Emergency Medical Technician (EMT)" means a person who is licensed by the Authority as an Emergency Medical Technician.¶

(20) "EMT-Intermediate" means a person who is licensed by the Authority as an EMT-Intermediate.¶

(21) "Governmental unit" means the state or any county, municipality or other political subdivision or any department, board or other agency of any of them.¶

(22) "In good standing" means a person who is currently licensed and who does not have any restrictions placed on his or their license, or who is not on probation with a licensing agency or the National Registry for any reason.¶

(23) "Key party" means immediate family members and others who would be reasonably expected to play a significant role in the health care decisions of the patient or client and includes, but is not limited to, the spouse, domestic partner, sibling, parent, child, guardian and person authorized to make health care decisions of the patient or client.¶

(24) "National Registry" means the National Registry of Emergency Medical Technicians.¶

(25) "Non-emergency care" means the performance of acts or procedures on a patient who is not expected to die, become permanently disabled or suffer permanent harm within the next 24-hours, including but not limited to observation, care and counsel of a patient and the administration of medications prescribed by a physician licensed under ORS chapter 677, insofar as any of those acts are based upon knowledge and application of the principles of biological, physical and social science and are performed in accordance with scope of practice rules adopted by the Oregon Medical Board in the course of providing prehospital care as defined by this rule.¶

(26) "Paramedic" means a person who is licensed by the Authority as a Paramedic.¶

(27) "Patient" means a person who is ill or injured or who has a disability and who receives emergency or nonemergency care from an EMS provider.¶

(28) "Person" has the meaning give that term in ORS 174.100.¶

(29) "Prehospital care" means care rendered by EMS providers as an incident of the operation of an ambulance and care rendered by EMS providers as incidents of other public or private safety duties, and includes, but is not limited to "emergency care" as defined in this rule.¶

(30) "Preceptor" means a person approved by an educational institution and appointed by the EMS agency, who supervises and evaluates the performance of an EMS provider student during the clinical and field internship phases of an EMS provider course. A preceptor must be a physician, physician assistant, registered nurse, or EMS provider with at least two years field experience in good standing at or above the level for which the student is in training.¶

(31) "Protocols" has the same meaning as standing orders.¶

(32) "Reciprocity" means the manner in which a person may obtain Oregon EMS provider licensure when that person is licensed in another state and certified with the National Registry.¶

(33) "Regional EMS Instructor" is a person approved by the Authority in accordance with OAR 333-265-0026 and under an established agreement with the Authority:¶

(a) Conducts an Emergency Medical Technician (EMT) or EMT-Intermediate psychomotor examination in a manner consistent with the standards of the National Registry or the Authority; and¶

(b) Provides oversight to a rural or frontier non-educational institution's EMT or EMT-Intermediate initial course when a rural or frontier non-educational institution is unable to comply with OAR 333-265-0010(5).¶

(c) The Regional EMS Instructor may provide continuing education courses to rural or frontier EMS agencies at the request of the Authority.¶

(34) "Scope of practice" means the maximum level of emergency or non-emergency care that an EMS provider may provide as set forth in rules adopted by the Oregon Medical Board.¶

(35) "Skills examiner" means a person who attends an EMS provider psychomotor examination and who objectively observes and records each student's performance consistent with the standards of the National Registry.¶

(36) "Skills instruction" means providing direct practical experience in the operation or function of specific tasks or equipment through active, hands-on participation by the student.¶

(37) "Standing orders" means the written protocols that an EMS provider follows to treat patients when direct contact with a physician is not maintained.¶

(38) "Successful completion" means having attended 85 percent of the didactic and skills instruction hours (or makeup sessions) and 100 percent of the clinical and field internship hours, and completing all required clinical and internship skills and procedures and meeting or exceeding the academic standards for those skills and procedures.¶

(39) "These rules" means OAR 333-265-0000 through OAR 333-265-0170.¶

(40) "Transitional Paramedic license" means a license issued to an individual who is currently certified by the National Registry of Emergency Medical Technicians as a Paramedic and who is working towards obtaining an associate degree or higher to obtain a Paramedic license.¶

(41) "Unprofessional conduct" means conduct unbecoming a person licensed to perform emergency care, or detrimental to the best interests of the public and includes:¶¶

(a) Any conduct or practice contrary to recognized standards of ethics of the medical profession or any conduct or practice which does or might constitute a danger to the health or safety of a patient or the public or any conduct, practice or condition which does or might impair an emergency medical services provider's ability safely and skillfully to practice emergency or nonemergency care;¶¶

(b) Willful performance of any medical treatment which is contrary to acceptable medical standards; and¶¶

(c) Willful and consistent utilization of medical service for treatment which is or may be considered inappropriate or unnecessary.¶¶

(402) "Volunteer" means a person who is not compensated for their time to staff an ambulance or EMS agency, but who may receive reimbursement for personal expenses incurred.

Statutory/Other Authority: ORS 682.017

Statutes/Other Implemented: ORS 682.017 - 682.991

AMEND: 333-265-0025

RULE SUMMARY: Amend 333-265-0025

Language has been amended for readability. The term "shall" has been removed and replaced with the term "must." Licensing requirements for a Paramedic have been separated from other EMS provider classification licensing requirements and clarifies that a person applying for a Paramedic license who does not have an associate degree may submit an application for a Transitional Paramedic license. Removes outdated language.

CHANGES TO RULE:

333-265-0025

Application Process to Obtain an EMS Provider License ¶

(1) For any person to act as an EMS provider, a license must be obtained from the ~~Authority~~Oregon Health Authority (Authority).¶

(2) All applicants for initial licensure:¶

(a) Must submit a completed electronic application in a manner prescribed by the Authority along with the applicable fees;¶

(b) Hold a current American Heart Association Basic Life Support (BLS) Provider or equivalent CPR course completion document (this course must include a practical skills evaluation); and¶

(c) Consent to a criminal records check by fingerprint identification in accordance with ORS 181A.195, ORS 181A.200 and OAR chapter 125, division 7.¶

(3) All applicants for license renewal shall comply with subsections (2)(a) and (b) of this rule and consent to a criminal records check in accordance with ORS 181A.195, ORS 181A.200 and OAR chapter 125, division 7 if required by the Authority.¶

(4) The Authority may use information obtained through criminal history records to determine suitability for licensure in accordance with OAR 125-007-0200 through 125-007-0330.¶

(a) If the Authority determines the information contained in the criminal history record may result in denial of the application or impose sanctions on the licensee, the applicant will be afforded reasonable time to complete, challenge, or correct the accuracy of the record before a final disposition or sanction is imposed.¶

(b) Procedures for obtaining a change, correction, or updating of an FBI identification record are set forth in Title 28, C.F.R., 16.34. Procedures for obtaining a change, correction, or updating of an Oregon criminal history record are set forth in OAR 257-010-0035.¶

(5) An applicant for EMR must:¶

(a) Be at least 16 years of age;¶

(b) Submit proof of successfully completing an approved course, including completion of all clinical and internship requirements, if applicable;¶

(c) Submit proof of passing the required cognitive and psychomotor examinations;¶

(d) Submit the electronic application for licensure within 12 months from the date that the applicant successfully passed the examinations described in subsection (5)(c) of this rule; and¶

(e) Provide authorization for the release of information, as necessary, from any persons or entities, including but not limited to educational institutions, employers, hospitals, treatment facilities, institutions, organization, governmental or law enforcement agencies.¶

~~(6) An individual who wishes to become licensed as an EMT, AEMT, or EMT-Intermediate, or Paramedic shall an applicant must:~~¶

(a) Be at least 18 years of age;¶

(b) Submit proof of passing the required cognitive and psychomotor examinations;¶

~~(c) For an EMT, AEMT or EMT-Intermediate applicant, s~~Submit proof that the applicant:¶

(A) Received a high school diploma;¶

(B) Passed a general education development test (GED); or¶

(C) Has a degree from an accredited institution of higher learning;¶

~~(d) For a Paramedic applicant, submit proof that the applicant has received an associate's degree or higher from an accredited institution of higher learning; and¶~~

~~(e)~~ Provide an authorization for the release of information, as necessary, from any persons or entities, including but not limited to educational institutions, employers, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to complete the review of the application.¶

~~(7) Any fee for a criminal records check shall be the responsibility of the~~(a) To become licensed as a Paramedic, an applicant: must:¶

~~(8A) An applicant for an initial license as an EMS provider, who completed training in a program outside Oregon~~

and has never been licensed in another state, must:

(a) Meet all requirements for that level; Be at least 18 years of age;

(B) Submit proof of current certification with the National Registry as a Paramedic;

(C) Submit proof that the applicant has received as established in these rules;

(b) Demonstrate proof of current National Registry certification, an associate degree or higher from an accredited institution of higher learning; and

(c) Make application within 24 months from the date that their training course was completed.

(9) Notwithstanding subsection (8)(c) of this rule, an applicant that has been on active duty in the military within the last four years may submit the application within 48 months from the date the training course was

completed. Provide an authorization for the release of information, as necessary, from any persons or entities, including but not limited to educational institutions, employers, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to complete the review of the application.

(10) An initial license must not exceed 30 months.

(11) If an applicant has been on active duty in the military within the past applicant for a Paramedic license who meets the requirements in paragraphs (7)(a)(A), (B) and (D) but who does not meet the requirement specified in paragraph (7)(a)(C) may submit an application four years and the applicant can demonstrate proof of current National Registry certification for the level of license desired, current licensure in another state is not mandatory. Transitional Paramedic license. The applicant for a Transitional Paramedic license must provide proof of a high school diploma or GED.

(8) Any fee for a criminal records check must be paid by the applicant.

(9) An initial license must not exceed 30 months.

(12) The Authority may reject any application that is incomplete or is not accompanied by the appropriate fees.

Statutory/Other Authority: ORS 682.017, 682.208, 682.216

Statutes/Other Implemented: ORS 682.017, 682.204, 682.208, 682.212, 682.216, 682.218

RULE SUMMARY: Adopt 333-265-0027

This new rule outlines the requirements for a person to apply for a new Transitional Paramedic license which will replace the Provisional Paramedic license under OAR 333-265-0060. A person who receives a Transitional Paramedic license will be allowed 48 months to obtain an associate degree to be eligible to apply for a Paramedic license. A person may request an additional 12 months to extend the time frame by applying to the Oregon Health Authority for a hardship status. The rule requires that a person applying for a Transitional Paramedic license must be sponsored and employed by a licensed ambulance service and the sponsoring agency's EMS medical director will serve as the applicant's EMS medical director while licensed as a Transitional Paramedic. The Transitional Paramedic applicant must agree to obtain an associate degree or higher from an accredited educational institution within the time period specified. The Transitional Paramedic license will be good for 24 months and may be renewed if all continuing education requirements and required annual progress reports are submitted. A Transitional Paramedic will be allowed to revert to a lower-level license.

CHANGES TO RULE:

333-265-0027

Transitional Paramedic License

- (1) The Oregon Health Authority (Authority) may issue a Transitional Paramedic license to an individual who:
- (a) Submits an application in accordance with OAR 333-265-0025 and pays the applicable fee under OAR 333-265-0030;
 - (b) Satisfies the requirements of OAR 333-265-0025(7)(a)(A), (B), and (D) and has a GED or high school diploma;
 - (c) Is currently certified by the NREMT as a Paramedic; and
 - (d) Submits on a form prescribed by the Authority, information that demonstrates:
 - (A) The applicant is sponsored by a licensed ambulance service in Oregon that will immediately employ or has conditionally offered employment, whether in a paid or volunteer capacity;
 - (B) The sponsoring licensed ambulance service's EMS medical director will serve as the applicant's EMS medical director while the applicant is licensed as a Transitional Paramedic;
 - (C) The applicant agrees to obtain an associate degree or higher from an accredited institution of higher learning within the time period specified in this rule; and
 - (D) Any other information required by the Authority.
- (2) The Authority will review an application for a Transitional Paramedic license in accordance with OAR 333-265-0040.
- (3) A Transitional Paramedic licensee must obtain an associate degree or higher from an accredited institution of higher learning and submit proof of the degree to the Authority within 48 months from the date of initial Transitional Paramedic licensure.
- (4) An initial Transitional Paramedic license is valid for no more than 24 consecutive months from the date the license was issued.
- (a) A Transitional Paramedic license may be renewed one time upon completion and Authority approval of a renewal application in accordance with OAR 333-265-0045.
 - (b) The renewal application must be submitted no later than 30 days prior to the expiration of the license.
 - (c) A Transitional Paramedic must comply with the continuing education requirements for Paramedics under OAR 333-265-0110.
 - (d) A Transitional Paramedic license is not eligible for reinstatement.
- (5) A Transitional Paramedic shall provide accurate annual progress reports, on a form prescribed by the Authority, to the Authority and the sponsoring licensed ambulance service, that identify the number of credits obtained during the year by the Transitional Paramedic from an accredited institution of higher learning and the number of credits remaining to obtain an associate degree or higher.
- (6) A Transitional Paramedic may only provide emergency and non-emergency care as allowed under the scope of practice specified under OAR 847-035-0030 while sponsored by a licensed ambulance service. A Transitional Paramedic that is separated from employment or otherwise no longer sponsored by the licensed ambulance service may not provide services until the Transitional Paramedic meets the requirements in section (1) of this rule.
- (7) The Authority may discipline, including suspend or revoke, a Transitional Paramedic license in accordance with OAR 333-265-0087 including for failure to comply with the provisions in this rule.
- (8) A Transitional Paramedic who wishes to revert to a lower-level license must:

- (a) Submit a new application for the license level sought in accordance with OAR 333-265-0025; and¶
- (b) Be currently certified by the NREMT.¶
- (c) A person registered with NREMT may request licensure at a lower level than their National Registry certification if the person has previously been certified by the National Registry at the level of licensure for which the person is applying.¶
- (d) A Transitional Paramedic who reverts to a lower-level license is not eligible for a new Transitional Paramedic license.¶
- (9) Notwithstanding sections (3) and (4) of this rule, the Authority may extend the time limit for a Transitional Paramedic to meet the requirements in OAR 333-265-0025(7)(a)(C) based on hardship status.¶
- (a) A Transitional Paramedic seeking a hardship status must submit a written request to the Authority, on a form prescribed by the Authority, no later than 30 days prior to the expiration of the renewed Transitional Paramedic license that includes the following information:¶
 - (A) A detailed description of the hardship:¶
 - (B) A current transcript of courses taken from an educational institution; and¶
 - (C) The number of credits remaining to obtain an associate degree.¶
- (b) The Authority's EMS Director or designee has the discretion to grant or deny a hardship status.¶
- (c) A hardship status is valid for no more than 12 months.¶
- (10) A Transitional Paramedic license may not exceed a total of 60 months from the date the initial Transitional Paramedic license was issued. There are no grace periods, extensions, waivers or exceptions for extending a Transitional Paramedic license beyond 60 months.¶
- (11) As used in this rule, "hardship status" means a status or condition that prevents a licensee from being able to work or take an online or in person education course.

Statutory/Other Authority: ORS 682.017, ORS 682.208, ORS 682.216

Statutes/Other Implemented: ORS 682.017, ORS 682.204, ORS 682.208, ORS 682.212, ORS 682.216, ORS 682.218

ADOPT: 333-265-0028

RULE SUMMARY: Adopt 333-265-0028

This new rule creates a license pathway for persons who are licensed in another state and are a service member, or the spouse or domestic partner of an active service member of the US Armed Forces. The rule defines terms including 'service member,' 'military spouse,' and 'domestic partner.' Specifies licensing requirements as well as documentation requirements that must be submitted and clarifies that the Oregon Health Authority may deny, suspend or revoke, and take disciplinary action in the same manner that it would for other licensed EMS providers.

CHANGES TO RULE:

333-265-0028

Application for Licensure by Service Member, Military Spouse or Domestic Partner

(1) A person licensed under this rule to practice as an EMR, EMT, Advanced EMT or Paramedic as those terms are defined in these rules may perform services in accordance with the scope of practice designated by the Oregon Medical Board under OAR 847-035-0030.¶

(a) A license issued under this rule is valid for the period described in OAR 333-265-0045.¶

(b) A license issued under this rule may be renewed in accordance with OAR 333-265-0045.¶

(c) A person licensed under this rule is subject to all applicable rules and requirement in OAR chapter 333, division 265 including but not limited to OAR 333-265-0080 to OAR 333-265-0087 and OAR 333-265-0110 to OAR 333-265-0170.¶

(2) For the purposes of this rule, the following definitions apply:¶

(a) "Domestic partner" means a domestic partner of an active member of the Armed Forces of the United States who is the subject of a military transfer to Oregon.¶

(b) "Military spouse " means a spouse of a service member. ¶

(c) "Servicemember" means a member of the Army, Navy, Air Force, Marine Corps, Space Force, Coast Guard; the commissioned corps of the National Oceanic and Atmospheric Administration; and the commissioned corps of the Public Health Service who is the subject of a military transfer to Oregon. ¶

(3) A servicemember, domestic partner, or military spouse applying for a license to practice under this rule section must submit the following to the Oregon Health Authority (Authority):¶

(a) An electronic application in the form and manner prescribed by the Authority and pay the applicable licensing fee in OAR 333-265-0030 for the license type sought;¶

(b) An attestation that the applicant has actively used the license from another state for a similar scope of practice during the two years immediately preceding relocation to Oregon;¶

(c) A marriage certificate, or any legal document showing domestic partnership, with the name of the applicant and the name of the servicemember;¶

(d) Copy of military orders for military service to a duty station located in Oregon by official active duty military order for the servicemember named in the marriage certificate; and¶

(e) Copy of a current license from the state or territory in which the applicant is authorized to practice as an EMR, EMT, AEMT or Paramedic, and evidence that the applicant is in good standing and not subject to any disciplinary action in that state or territory nor in any other jurisdiction where the applicant has a license for a similar scope of practice.¶

(4) The Authority will review and act on the application in accordance with OAR 333-265-0040 and this rule. In addition, for any application submitted under this rule, the Authority may:¶

(a) Review and investigate the applicant to determine whether the applicant meets the requirements of the rules, including but not limited to confirming the veracity of submitted documentation or requesting additional documentation. ¶

(b) Deny an application if the applicant fails to meet the minimum requirements or if the Authority is unable to authenticate submitted documents.¶

(5) The Authority may deny, suspend, or revoke a license issued under this rule for any reason that it may deny, suspend, or revoke an EMS provider license in OAR chapter 333, division 265. The Authority may take disciplinary action as described in OAR 333-265-0087 against a person licensed under this rule for any reason that it may take disciplinary action against a licensed EMS provider in OAR chapter 333, division 265.

Statutory/Other Authority: ORS 670.400, ORS 676.308, ORS 682.017, ORS 682.208

Statutes/Other Implemented: ORS 670.400, ORS 676.308, ORS 682.017 - 682.991, 50 USC 402a

AMEND: 333-265-0030

RULE SUMMARY: Amend 333-265-0030

The rule has been amended by removing reference to Provisional Paramedic license fee and replaces with Transitional Paramedic license fee. The reference to an expired date has been removed.

CHANGES TO RULE:

333-265-0030

Fees for Licensure and License Renewal of an EMS Provider ¶

(1) The following fees apply:¶

(a) The initial application fee for EMS providers:¶

(A) EMR - \$45¶

(B) EMT - \$110;¶

(C) AEMT - \$125;¶

(D) EMT-Intermediate - \$125; and¶

(E) Paramedic - \$290.¶

(b) Psychomotor re-examination fees:¶

(A) AEMT - \$85; and¶

(B) Paramedic - \$100.¶

(c) Reciprocity licensure fees:¶

(A) EMR - \$50;¶

(B) EMT - \$140;¶

(C) AEMT - \$165¶

(D) EMT-Intermediate - \$165; and¶

(E) Paramedic - \$300.¶

(d) ~~Provisional~~Transitional Paramedic licensure fee is an additional \$50.¶

(e) License renewal fees:¶

(A) EMR - \$23;¶

(B) EMT - \$55;¶

(C) AEMT - \$85¶

(D) EMT-Intermediate - \$85; and¶

(E) Paramedic - \$150.¶

(f) Reinstatement fees, ~~effective July 1, 2020~~:¶

(A) An EMS provider whose license has been expired for 12 months or less shall pay 100 percent of the renewal fee based on the provider's license level specified in subsection (1)(e) plus the late fee specified in section (3).-¶

(B) An EMS provider whose license has been expired greater than 12 months to 15 months shall pay 50 percent of the initial fee based on the provider's license level specified in subsection (1)(a).-¶

(C) An EMS provider whose license has been expired greater than 15 months to 18 months shall pay 25 percent of the initial fee based on the provider's license level specified in subsection (1)(a).-¶

(D) An EMS provider whose license has been expired greater than 18 months to 24 months shall pay 100 percent of the initial fee based on the provider's license level specified in subsection (1)(a).¶

(2) ~~Effective July 1, 2020, a~~An applicant for initial licensure or licensure by reciprocity shall pay the following prorated fee based on the license level and fee specified in subsection (1)(a) or (1)(c) of this rule and the time the application is submitted:-¶

(a) Greater than 12 months to 24 months until the date of scheduled expiration: 100 percent of the initial or reciprocity fee.¶

(b) Greater than 9 months to 12 months until the date of scheduled expiration: 50 percent of the initial or reciprocity fee.¶

(c) Greater than 6 months to 9 months until the date of scheduled expiration: 25 percent of the initial or reciprocity fee.¶

(3) As authorized by ORS 682.216, a license renewal application submitted after June 1 of the license renewal year must include a \$40 late fee in addition to the license renewal fee.¶

(4) If an EMS provider has been on active military duty for more than six months of a license renewal period which prevented the EMS provider from accessing continuing education, the ~~Authority~~Oregon Health Authority (Authority) may approve an extension of the current license to permit obtaining the required educational hours.¶

(5) The Authority may waive the EMS provider license renewal fee for an ambulance service or non-transport EMS agency which utilizes volunteers to provide a majority of its services. The ambulance service or non-transport

EMS agency may only request one waiver per renewal period on a form prescribed by the Authority.¶
(6) All fees established in this rule are nonrefundable. The Authority may waive a subsequent examination fee for a person who fails to appear for an examination due to circumstances that are beyond the control of the candidate.¶
(7) The fees established in section (1) of this rule apply to any application submitted on or after the effective date of these rules.
Statutory/Other Authority: ORS 682.017, 682.212, 682.216
Statutes/Other Implemented: ORS 682.017, 682.212, 682.216

AMEND: 333-265-0050

RULE SUMMARY: Amend 333-265-0050

The experience requirement in lieu of education for purposes of obtaining a Paramedic license by reciprocity has been changed from three years out of proceeding five years to at least two years of proceeding five years with advanced life support, first response experience. The revised rule clarifies that a person seeking a Paramedic licensure by reciprocity who does not have an associate degree may apply for a Transitional Paramedic license.

CHANGES TO RULE:

333-265-0050

Licensure by Reciprocity ¶¶

- (1) A person registered with the National Registry as an EMR, EMT, AEMT, or Paramedic may apply to the ~~Authority~~Oregon Health Authority (Authority) for licensure by reciprocity.¶¶
- (2) A person registered with the National Registry may request licensure at a lower level than their National Registry certification if the person has previously been certified by the National Registry at the level of licensure for which the person is applying.¶¶
- (3) A person applying for Oregon EMS provider licensure by reciprocity shall:¶¶
 - (a) Submit a completed electronic application in a manner prescribed by the Authority along with the applicable nonrefundable fee;¶¶
 - (b) Submit documentation of the EMS provider training which meets or exceeds the requirements for Oregon EMS provider licensure at the level of licensure for which the person is applying;¶¶
 - (c) If applying for Paramedic licensure by reciprocity, ~~s:~~¶¶
 - (A) Submit proof of having received an associate's degree or higher from an accredited institution of higher learning approved by the Authority; or s¶¶
 - (B) Submit proof of having worked for at least ~~three~~two years out of the last five years as a paramedic of advanced life support, first response Paramedic experience in either another state or in the United States military at the National Registry Paramedic level;¶¶
 - (C) An applicant who does not meet the requirement in paragraph (3)(c)(A) or (B) may apply for a Transitional Paramedic license in accordance with OAR 333-265-0027.¶¶
 - (d) If licensed in another state, be in good standing with that state's licensing agency and with the National Registry; and¶¶
 - (e) Consent to a criminal records check in accordance with OAR 333-265-0025.¶¶
- (4) The Authority shall review an application for licensure by reciprocity and shall conduct a criminal records check.¶¶
- (5) If there are no issues that arise during the review of the application and the applicant meets all the applicable requirements of ORS chapter 682 and these rules, the Authority shall grant the applicant a license by reciprocity.¶¶
- (6) If the applicant does not meet the standards for licensure, or there are criminal history or personal history issues that call into question the ability of the applicant to perform the duties of a licensed EMS provider, in accordance with ORS chapter 682 or these rules, the Authority may deny the application on the basis of the information provided, or conduct an investigation in accordance with OAR 333-265-0085. Following such an investigation the Authority may take any action as specified in OAR 333-265-0040.¶¶
- (7) The Authority shall be the sole agency authorized to determine equivalency of EMS provider course work presented from an out-of-state accredited institution of higher learning.¶¶
- (8) The Authority shall be the sole agency authorized to determine equivalency of work experience in lieu of the associate degree requirement for ~~p~~Paramedics.¶¶
- (9) The Authority shall return any application that is incomplete, cannot be verified or does not include the appropriate fee.

Statutory/Other Authority: ORS 682.017, 682.208, 682.218

Statutes/Other Implemented: ORS 682.017, 682.204, 682.208, 682.212, 682.216, 682.218, 682.220

AMEND: 333-265-0060

RULE SUMMARY: Amend 333-265-0060

The Oregon Health Authority will discontinue issuing a Paramedic Provisional license upon adoption of OAR 333-265-0027 and the rule text is amended to clarify that persons currently licensed as a Provisional Paramedic must continue to meet requirements specified in the rule. This rule has been further amended allowing a provisional licensee who has not obtained an associate degree to apply for a Transitional Paramedic license.

CHANGES TO RULE:

333-265-0060

Paramedic Provisional Licensure ¶¶

~~(1) As authorized by ORS 682.216, the Authority may issue a provisional Paramedic license to a Paramedic licensed in another state who meets the requirements in OAR 333-265-0050, except for the educational or employment experience requirements in OAR 333-265-0050(3)(c) and is in the process of obtaining an associate's degree or higher from an accredited institution for higher learning.¶¶~~

~~(2) The Authority may approve a provisional license if an applicant has twelve or fewer credits remaining to obtain an associate's degree or higher, and the credits can be completed within one year of provisional license approval. The Oregon Health Authority (Authority) shall discontinue issuing provisional licenses under this rule effective [insert effective date of rule.]¶¶~~

~~(3) A provisional license may only be approved one time per applicant.¶¶~~

~~(4) An applicant shall comply with the application requirements in OAR 333-265-0050 and shall submit:¶¶~~

~~(a) A letter of sponsorship from an EMS agency in Oregon that states the applicant shall be immediately employed or has a conditional offer of employment, whether in a paid or volunteer capacity, and that the agency plans to sponsor the applicant throughout the duration of their provisional license if approved; and¶¶~~

~~(b) A letter from the applicant's sponsoring EMS agency's EMS medical director stating that the EMS medical director will serve as his or her EMS medical director while being provisionally licensed.¶¶~~

~~(5) The Authority may return any application that is incomplete, cannot be verified, or is not accompanied by the appropriate fee. Notwithstanding section (1) of this rule, any Paramedic with a current, active provisional license must continue to meet the requirements in this rule.¶¶~~

~~(6) A Paramedic with a provisional license issued under these rules shall enter into an agreement with the Authority and shall submit quarterly reports to the Authority describing the license holder's progress in obtaining an associate's degree or higher from an accredited institution for higher learning.¶¶~~

~~(7) A Paramedic provisional license shall be revoked if the person:¶¶~~

~~(a) Ceases active involvement with the sponsoring EMS agency;¶¶~~

~~(b) Fails to meet the conditions set forth in the agreement;¶¶~~

~~(c) Fails to cooperate or actively participate in a request from the Authority in order to obtain more information or required materials;¶¶~~

~~(d) Has his or their EMS provider scope of practice revoked or restricted by his or her their EMS medical director; or¶¶~~

~~(e) Does not submit written documentation of the successful completion of any of the educational requirements set out in this rule.¶¶~~

~~(5) A Provisional Paramedic license expires on the date specified in the agreement and on the license.¶¶~~

~~(6) A Provisional Paramedic who has not obtained an associate degree in accordance with this rule may apply for a Transitional Paramedic license in accordance with OAR 333-265-0027.~~

Statutory/Other Authority: ORS 682.017, 682.216

Statutes/Other Implemented: ORS 682.017, 682.216

AMEND: 333-265-0080

RULE SUMMARY: Amend 333-265-0080

This rule has been amended to require that a Transitional Paramedic report to the Oregon Health Authority within ten calendar days any separation from employment from the sponsoring licensed ambulance service.

CHANGES TO RULE:

333-265-0080

Reporting Obligations ¶

(1) In accordance with ORS 676.150 and using a written or electronic form prescribed by the ~~Authority~~Oregon Health Authority (Authority), an EMS provider must notify the Authority within 10 calendar days of any action or event listed in sections (2) or (3) of this rule. Failure to comply with the reporting requirements of this rule may result in disciplinary action against the EMS provider.¶

(2) An EMS provider who has reasonable cause to believe another EMS provider has engaged in prohibited, dishonorable or unprofessional conduct as defined in ORS 676.150, 682.025, 682.220, and OAR 333-265-0083 shall report that conduct to the Authority after the EMS provider learns of the conduct unless state or federal laws relating to confidentiality or the protection of health information prohibit such a disclosure.¶

(3) An EMS provider shall report to the Authority the following:¶

(a) Conviction of a misdemeanor or felony;¶

(b) A felony arrest;¶

(c) A disciplinary restriction placed on a scope of practice of the license holder by the EMS medical director;¶

(d) A legal action being filed against the license holder alleging medical malpractice or misconduct;¶

(e) A physical disability that affects the ability of the license holder to meet the applicable Functional Job Analysis of the National Standard Curriculum and the license holder continues to respond to calls and is providing patient care; ~~or~~¶

(f) A change in mental health which may affect a license holder's ability to perform as a licensed EMS provider; ~~or~~¶

(g) If a Transitional Paramedic, separation of employment from the sponsoring licensed ambulance service.¶

(4) State or federal laws relating to confidentiality or the protection of health information that might prohibit an EMS provider from reporting prohibited or unprofessional conduct include but are not limited to:¶

(a) Public Law 104-191, 45 CFR Parts 160, 162, and 164 (The Health Insurance Portability and Accountability Act, HIPAA);¶

(b) 42 CFR Part 2 (federal law protecting drug and alcohol treatment information);¶

(c) ORS 192.553 through 192.581 (state law protecting health information); and¶

(d) ORS 179.505 (written accounts by health care providers).¶

(5) After receiving a report described in sections (2) and (3), the Authority may conduct an investigation in accordance with OAR 333-265-0085.

Statutory/Other Authority: ORS 682.017

Statutes/Other Implemented: ORS 682.017, 682.220, 682.224

AMEND: 333-265-0085

RULE SUMMARY: Amend 333-265-0085

The rule has been amended to clarify that a Transitional Paramedic who fails to submit accurate, annual progress reports may be investigated by the Oregon Health Authority. The term 'division' was updated to 'Authority.'

CHANGES TO RULE:

333-265-0085

Investigations ¶

- (1) The ~~Authority~~ Oregon Health Authority (Authority) may conduct an investigation of an EMS provider if:¶
- (a) The Authority receives a report in accordance with ORS 676.150 or complaint concerning an EMS provider;¶
 - (b) Personal or criminal history questions arise during a review of an application that raise questions about the EMS provider's ability to safely perform the duties of an EMS provider;¶
 - (c) A reportable action is received pursuant to OAR 333-265-0080; ¶
 - (d) An EMS provider licensed as a Transitional Paramedic has failed to submit accurate annual progress reports; or¶
 - (~~e~~) The Authority receives information in any manner that indicates an EMS provider:¶
 - (A) Has violated ORS chapter 682 or these rules;¶
 - (B) May be medically incompetent;¶
 - (C) May be guilty of prohibited, unprofessional or dishonorable conduct; or¶
 - (D) May be mentally or physically unable to safely function as an EMS provider.¶
- (2) The Authority may investigate the off-duty conduct of an EMS provider to the extent that such conduct may reasonably raise questions about the ability of the EMS provider to perform the duties of an EMS provider in accordance with the standards established by ~~this division~~ Authority.¶
- (3) Upon receipt of a report or complaint about an EMS provider or applicant, the Authority may conduct an investigation as described under ORS 676.165 and 682.220. Investigations shall be conducted in accordance with ORS 676.175, ORS 682.224, and this rule.¶
- (4) The fact that an investigation is conducted by the Authority does not imply that disciplinary action will be taken.¶
- (5) During an investigation the Authority may do any of the following:¶
- (a) Request additional information from the EMS provider;¶
 - (b) Conduct a phone or in-person interview; or¶
 - (c) Request or order that the EMS provider undergo a psychological, physical, psychiatric, alcohol or chemical dependency assessment.¶
- (6) Information obtained during an investigation shall be kept confidential and not disclosed to the public.¶
- (7) In determining the appropriate disciplinary action, the Authority shall consider the following:¶
- (a) The nature of the violation and relevant facts;¶
 - (b) The number of repeated or related offenses;¶
 - (c) Any other discipline or corrective action taken by an employer or supervising physician; and¶
 - (d) Letters of support, recommendation or concern if offered by the licensee or other party.¶
- (8) Prior to taking any disciplinary action the Authority must determine if the EMS provider has been disciplined for the questioned conduct by the EMS provider's employer or supervising physician. The authority shall consider any such discipline or any other corrective action in deciding whether additional discipline or corrective action by the Authority is appropriate.

Statutory/Other Authority: ORS 682.017

Statutes/Other Implemented: ORS 676.165, 676.175, 682.017, 682.220, 682.224

AMEND: 333-265-0090

RULE SUMMARY: Amend 333-265-0090

Rule text was amended to clarify that a person licensed as a Transitional Paramedic or Provisional Paramedic may revert to a lower level of licensure at any time during the license period.

CHANGES TO RULE:

333-265-0090

Reverting to a Lower Level of EMT Licensure ¶¶

(1) An EMT, AEMT, EMT-Intermediate, or Paramedic may revert to a lower level of licensure at any time during a license period if the EMT, AEMT, EMT-Intermediate, or Paramedic:¶¶

(a) Submits a written request to the ~~Authority~~ Oregon Health Authority (Authority) specifying the reason for the change in the licensure level;¶¶

(b) Submits an application for license renewal for the lower level of licensure sought with the appropriate fee;¶¶

(c) Surrenders ~~his or her~~ their current EMT, AEMT, EMT-Intermediate, or Paramedic license to the Authority;¶¶

(d) Is in good standing with the Authority;¶¶

(e) Adequately documents appropriate continuing education hours and courses for the licensure level the individual would revert to; and¶¶

(f) Receives written approval from the Authority for a change in licensure level.¶¶

(2) A Transitional Paramedic or Provisional Paramedic may revert to a lower level of licensure at any time during a license period in accordance with OAR 333-265-0027(8).¶¶

(3) If an EMT, AEMT, EMT-Intermediate, or Paramedic requests reinstatement of the higher level of licensure after reverting to a lower level of licensure, the EMT, AEMT, EMT-Intermediate, or Paramedic must complete the following requirements:¶¶

(a) Submit a written request to the Authority specifying the reason for the request for reinstatement;¶¶

(b) Submit an application for license renewal for the higher level of licensure requested for reinstatement;¶¶

(c) Consent to a criminal records check in accordance with OAR 333-265-0025;¶¶

(d) Provide an authorization for the release of information to the Authority, as necessary, from any persons or entities, including but not limited to employers, educational institutions, hospitals, treatment facilities, institutions, organizations, governmental or law enforcement agencies in order for the Authority to make a complete review of the application; and¶¶

(e) Submit the required fee specified in OAR 333-265-0030.¶¶

~~(34)~~ In order to be considered for reinstatement in accordance with section (2) of this rule, the EMT, AEMT, EMT-Intermediate or Paramedic must be in good standing with the Authority and must have maintained required continuing education for the highest level of licensure requested for reinstatement as specified in OAR 333-265-0110.¶¶

~~(45)~~ The continuing education required pursuant to section (3) of this rule must be maintained in accordance with OAR 333-265-0140 for the entire time period the EMS provider was reverted to a lower level.¶¶

~~(56)~~ The Authority shall conduct an audit in accordance with OAR 333-265-0150 in order to verify compliance with sections (3) and (4) of this rule. If continuing education has not been maintained for the required time frame and at the level of licensure requested for reinstatement, the Authority shall deny reinstatement.

Statutory/Other Authority: ORS 682.017, 682.208

Statutes/Other Implemented: ORS 682.017, 682.204, 682.208, 682.212, 682.216

AMEND: 333-265-0110

RULE SUMMARY: Amend 333-265-0110

Continuing education requirements were amended to clarify that a Transitional Paramedic and Provisional Paramedic must comply with the same continuing education requirements as a Paramedic.

CHANGES TO RULE:

333-265-0110

Continuing Education Requirements for License Renewal ¶¶

- (1) All licensed EMS providers must maintain current CPR certification as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements, complete continuing education requirements as specified in sections (4) through (8) of this rule and maintain and submit records in accordance with OAR 333-265-0140. Continuing education credits shall be completed between the date of the license holder's last successful application to the date of the license holder's current license renewal application.¶¶
- (2) The following standards shall apply to the continuing education requirements identified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements:¶¶
- (a) Hour for hour credit shall be granted for:¶¶
- (A) Attending training seminars, educational conferences, and continuing education classes within the license holder's scope of practice;¶¶
- (B) Attending a live, webinar, or interactive online course for the same or higher level of licensure. For purposes of this rule, a webinar or interactive online course must have the ability to give, receive, and discuss information in real time;¶¶
- (C) Online continuing education that provides a certificate of completion and is approved by the CAPCE;¶¶
- (D) Attending an accredited college course relating to medical and EMS-related topics. For purposes of this rule, hour for hour credit shall only be granted if a course syllabus is provided to the Authority that specifies the number of hours on a specific topic; or¶¶
- (E) Teaching any of the topics listed in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements, if the license holder is qualified to teach the subject.¶¶
- (b) No more than 50 percent of the total hours needed for each topic area may be obtained by:¶¶
- (A) Self-study of medical journals, video or other media that is not CAPCE approved and is not facilitated by a live instructor. For purposes of this rule, each session of self-study must be approved by the agency training officer, EMS medical director or the Authority; or¶¶
- (B) Being a psychomotor skills examiner, if the license holder is qualified as such.¶¶
- (3) An EMS medical director may require additional continuing education requirements and skill competency.¶¶
- (4) An EMR is required to:¶¶
- (a) Complete 12 hours of continuing education as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements; or¶¶
- (b) Complete all requirements of the National Registry for EMR recertification.¶¶
- (5) An EMT is required to:¶¶
- (a) Complete 24 hours of continuing education as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements; or¶¶
- (b) Complete all requirements of the National Registry for Emergency Medical Technician recertification.¶¶
- (6) An AEMT is required to:¶¶
- (a) Complete 36 hours of continuing education as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements; or¶¶
- (b) Complete all requirements of the National Registry for AEMT recertification.¶¶
- (7) An EMT-Intermediate is required to obtain at least 36 hours of continuing education as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements.¶¶
- (8) A Paramedic, including a Paramedic with a Transitional Paramedic license or provisional license, is required to:¶¶
- (a) Complete all requirements of the National Registry for Paramedic recertification; or¶¶
- (b) Obtain at least 48 hours of continuing education as specified in Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements.¶¶
- (9) When an EMR or EMT-I license holder obtains an initial license and there is less than 24 months before the license expires, the EMR or EMT-Intermediate license holder shall complete the continuing education credits specified in Appendix 2: Oregon Licensed EMR & EMT-Intermediate Providers Minimum Continuing Education Requirements when Initial Licensure is Less than 24 Months.¶¶

(10) In addition to the hours of continuing education required in this rule, any affiliated licensed EMS provider must, as specified in section 2 of Appendix 1: Oregon Licensed EMS Providers Minimum Continuing Education Requirements, demonstrate clinical skills competency through a hands-on evaluation supervised by the EMS medical director or ~~his or her~~ their designee. An EMS medical director may require successful performance in a minimum number of clinical skills in these areas on either a human subject or a training mannequin (for example venipuncture or endotracheal intubation).¶

(11) It shall be the responsibility of each license holder to ensure the hours obtained meet the Authority's license renewal requirements.

Statutory/Other Authority: ORS 682.208, ORS 682.216, ORS 682.017, ORS 676.850

Statutes/Other Implemented: ORS 682.017, ORS 682.208, ORS 682.216, ORS 676.850

RULE ATTACHMENTS DO NOT SHOW CHANGES. PLEASE CONTACT AGENCY REGARDING CHANGES.

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APPENDIX 1

OAR 333-265-0105, 333-265-0110 and 333-265-0160 Oregon Licensed Emergency Medical Services Providers Minimum Continuing Education Requirements

Section 1 – Continuing Education Topics	Two-Year Licensing Cycle				Notes/Comments
	EMR	EMT	AEMT/ EMT-I	Paramedic	
Trauma Emergencies	2	3	5	6	
Medical Emergencies	2	3	6	8	
Pediatric and Obstetric Emergencies	2	3	6	8	
Airway, Breathing and Cardiology	2	4	6	9	
Culture, Race, Gender and Ethnicity	1	2	2	2	Training opportunities to focus on cultural factors that may influence provider and patient's behaviors resulting in disparities in healthcare.
Miscellaneous EMS Topics (Related Topics)	3	9	11	15	Subjects represented by the National EMS Education Standards.
Total Hours for the Licensing Cycle	12	24	36	48	
CPR certification required for all levels					Current AHA Basic Life Support (BLS) Provider or equivalent CPR course. This course must include a practical skills evaluation.
Section 2 – Clinical Skills Competency for Affiliated EMSPs	At least once during licensing cycle				Notes/Comments
Airway Management & Adjuncts	Yes	Yes	Yes	Yes	Proficiency within scope of practice
Cardiac Arrest Management	Yes	Yes	Yes	Yes	Proficiency within scope of practice
Splinting & Immobilization	Yes	Yes	Yes	Yes	
Vascular Access	No	No	Yes	Yes	
Chest Decompression & Cricothyroidotomy	No	No	No	Yes	

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APPENDIX 2

OAR 333-265-0110

Oregon Licensed EMR & EMT-Intermediate Providers

Minimum Continuing Education Requirements when Initial Licensure is Less than 24 Months

Provider Level	EMR			EMT-I			Notes/Comments
Months Until Scheduled Expiration Date	6-12 months	12-18 months	18-24 months	6-12 months	12-18 months	18-24 months	
							Hours reflected are based on a percentage from the continuing education required in Appendix 1. 6-12 months = 50% 12-18 months = 75% 18-24 months = 100%
Trauma Emergencies	1	1.5	2	2.5	3.75	5	
Medical Emergencies	1	1.5	2	3	4.5	6	
Pediatric and Obstetric Emergencies	1	1.5	2	3	4.5	6	
Airway, Breathing and Cardiology	1	1.5	2	3	4.5	6	
Culture, Race, Gender and Ethnicity	0.5	0.75	1	1	1.5	2	Training opportunities to focus on cultural factors that may influence provider and patient's behaviors resulting in disparities in healthcare.
Miscellaneous EMS Topics (Related Topics)	1.5	2.25	3	5.5	8.25	11	Subjects represented by the National EMS Education Standards.
Total Hours for the Remainder of Licensing Cycle	6	9	12	18	27	36	
CPR certification required for all levels							Current AHA Basic Life Support (BLS) Provider or equivalent CPR course. This course must include a practical skills evaluation.
Clinical Skills Competencies for Affiliated EMSPs (see Appendix 1, Section 2)							At least once during licensing cycle