

Reciprocal Emergency Medical Technician Certification Requirements

Effective date: 7/6/16

Pursuant to the authority vested in the New York State Emergency Medical Services Council and subject to the approval of the Commissioner of Health by section 3002 of the Public Health Law, Section 800.12 of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York is hereby amended to be effective upon publication of a Notice of Adoption in the New York State Register, to read as follows:

Section 800.12 of Part 800 is amended to read as follows:

800.12 Reciprocal Certification Requirements

(a) To qualify for New York State certification based on out-of-state emergency medical responder, emergency medical technician[-basic], advanced emergency medical technician [-intermediate], emergency medical technician-critical care, [or] emergency medical technician-paramedic, emergency medical services instructor certification or emergency medical services training credentials, a person must be currently certified or licensed by another state, the United States Military, or the National Registry of Emergency Medical Technicians, based on an out-of-state training program. The out-of-state [other state's] training must be equivalent to or more stringent than New York State training and examination requirements.

(b) The applicant must:

(1) demonstrate a need for certification, such as New York State residence or employment opportunity;

(2) have successfully completed a course that meets or exceeds a curriculum based on the current department EMS certification guidelines;

(3) have successfully completed

(i) an out-of-state recognized or National Registry of Emergency Medical Technicians practical skills and written examination within 18 months of the date the application is received by the department; or

(ii) if a member or veteran of the United States Military, an approved medical training program from the Army, Navy, Air Force, Marines or Coast Guard that meets or exceeds current national emergency medical services education guidelines within three (3) years of the date the application is received by the department;

[(2)] (4) submit a [written request for New York State certification, including a copy of the out-of-state credentials and complete an application for certification on a form to be] complete application for reciprocal certification on forms provided by the department;

[(3)] (5) [pay in advance a] submit the filing fee of \$25 dollars for [certified first responder] emergency medical responder or emergency medical technician[-basic] certification or \$50 for [any other level] all other levels of certification;

[(4) not have any convictions for any crime or crimes related to murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs or currently be under charges for such a crime unless the department finds that such conviction or charges do not demonstrate a present risk or danger to patients; and]

(6) if the applicant has been convicted of one or more criminal offenses, as defined in section 800.3(ak) of this part, be found eligible after a balancing of the factors set out in Article 23-A of the Correction Law. In accordance with that Article, no application for a license shall be denied by reason of the applicant having been previously convicted of one or more criminal offenses unless (i) there is a direct relationship between one or more of the previous criminal offenses and duties required of this certificate or (ii) certifying the applicant would involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public. In determining these questions, the department will look at all factors listed under New York State Correction Law Section 753;

(7) not have been found guilty or in violation, in any jurisdiction, of any other non-criminal offense or statutory and/or regulatory violation, as those terms are defined in section 800.3 of this Part, relating to patient safety unless the department determines such applicant would not involve an unreasonable risk to property or the safety or welfare of a specific individual or the general public; and

[(5)] (8) be at least eighteen years of age.

REGULATORY IMPACT STATEMENT

Statutory Authority:

The authority for the promulgation of this regulation is contained in Public Health Law (PHL) Article 30 (Emergency Medical Services), section 3002. Section 3002 sets forth the provisions creating the New York State Emergency Medical Services Council and specifies that it shall have the power, by an affirmative vote of a majority of those present, subject to approval by the Commissioner, to enact, and from time to time, amend and repeal, rules and regulations establishing minimum standards for ambulance services, ambulance service certification, advanced life support first response services, the provision of prehospital emergency medical care, public education, the development of a statewide emergency medical services system, the provision of ambulance services outside of the primary territory specified in the ambulance services' certificate and the training, examination, and certification of certified first responders, emergency medical technicians, and advanced emergency medical technicians; provided, however that such minimum standards must be consistent with the staffing standards established by the ambulance services and advanced life support first response services provisions outlined in PHL section 3005-a.

Legislative Objectives:

The purpose of PHL Article 30 is to promote the public health, safety and welfare by providing certification for pre-hospital care providers and all advanced life support first response and ambulance services.

Needs and Benefits:

Section 800.12 sets forth the requirements for out-of-state reciprocal certification. This revision considerably expands and improves how New York State recognizes EMS training, certification and licensure from other states, government departments and the United States Military. This revision specifically recognizes United States Military training and National Registry of Emergency Medical Technicians (NREMT) certification and training, as well as the expertise of out-of-state trained EMS instructors. By recognizing the extensive training and experience gained by such individuals, these revisions will improve job opportunities for returning military veterans with emergency medical training and help fill an on-going need for highly trained staff in EMS agencies across the state. At present, NREMT is the primary certification used by forty-seven (47) states in the United States. All of those states accept the NREMT for direct reciprocal certification or licensure. Additionally, NREMT is the training, examination and certification program used for the U.S. Government for personnel working in the National Park Service, Department of Defense, Homeland Security, the Supreme Court as well as in American Islands and Territories. According to NREMT, approximately 3,784 (6%) of the 59,755 certified EMS providers in New York State hold NREMT certification in conjunction with the NYS EMT certification (2014).

Section 800.12 is also revised to ensure the Correction Law Article 23-A's balancing test will be used when reviewing applicants and existing providers who have criminal convictions, consistent with recent revisions to sections 800.6, 800.8, 800.9 and 800.16.

Costs for the Implementation of and Continuing Compliance with these Regulations to the Regulated Entity:

There will be no cost to the regulated parties (EMS agencies) for changes to section 800.12 – Reciprocal Certification Requirements.

Cost to State and Local Government:

There will be no cost to the general public, state and local government. These regulations are directed at individuals seeking reciprocal EMS certification in New York State.

Cost to the Department of Health:

The Department will not incur any additional costs.

Local Government Mandates:

These provisions do not add any additional mandates to local governments.

Paperwork:

It is currently required that an application for reciprocity be submitted to the Department of Health. This requirement will continue under the amended regulations.

Duplication:

This measure does not duplicate, overlap or conflict with a State or federal statute or rule.

Alternative Approaches:

There are no other viable alternative approaches. Current provisions are outdated and must be updated to reflect appropriate EMS standards and practice.

Federal Requirements:

This regulatory amendment does not exceed any minimum standards of the federal government for the same or similar subject areas. This proposal is intended to update outdated Part 800 provisions with language appropriate and applicable to the modern EMS system.

Compliance Schedule:

This proposal will go into effect upon a Notice of Adoption in the New York *State Register*.

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REGULATORY FLEXIBILITY ANALYSIS
FOR SMALL BUSINESS AND LOCAL GOVERNMENTS

A Regulatory Flexibility Analysis for Small Business and Local Governments is not included in accordance with section 202-b of the State Administrative Procedure Act (SAPA). This regulation does not impose an adverse economic impact, nor reporting, recordkeeping or other compliance requirements on small businesses or local governments. This rule pertains only to individual persons who are certified by the Department to provide pre-hospital emergency care and treatment to sick or injured persons.

Cure Period

A cure period was not included in this rule. This proposal amends standards for reciprocal certification that would protect the public health, safety and well-being of the patients served. A cure period would not be appropriate.

RURAL AREA FLEXIBILITY ANALYSIS

Pursuant to section 202-bb of the State Administrative Procedure Act (SAPA), a rural area flexibility analysis is not required. These provisions apply uniformly throughout New York State, including all rural areas.

The proposed rule will not impose an adverse economic impact on rural areas, nor will it impose any additional reporting, record keeping or other compliance requirements on public or private entities in rural areas.

JOB IMPACT STATEMENT

A Job Impact Statement is not included in accordance with section 201-a (2) of the State Administrative Procedure Act (SAPA), because it will not have a substantial adverse effect on jobs and employment opportunities.