
Health Care & Wellness Committee

HB 2462

Brief Description: Recognizing the emergency medical services personnel licensure interstate compact.

Sponsors: Representatives Dye, Schmick and Chambers.

Brief Summary of Bill

- Establishes the Recognition of Emergency Medical Services Personnel Licensure Interstate Compact in Washington.

Hearing Date: 1/21/20

Staff: Kim Weidenaar (786-7120).

Background:

Recognition of Emergency Medical Services Personnel Licensure Interstate Compact.

The Recognition of Emergency Medical Services (EMS) Personnel Licensure Interstate Compact (EMS Compact), also known as REPLICA, is a national multistate compact for EMS professionals. Once the EMS Compact is operational, which is anticipated in 2020, qualified EMS professionals licensed in a home state would be extended a privilege to practice in remote states for qualified circumstances. There are currently 18 states in the compact.

Emergency Medical Services Personnel.

Emergency medical services personnel are certified by the Department of Health (DOH), which is also responsible for their discipline in cases involving unprofessional conduct. There are four primary categories of EMS personnel: paramedics, advanced emergency medical technicians (EMTs), EMTs, and first responders. Emergency medical services personnel may only provide services within the scope of care established in the curriculum of the person's level of certification or any specialized training. In addition, the services must be included in the protocols of each county's medical program director.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

An applicant with military training or experience satisfies the training or experience requirements for EMS personnel certification unless the Secretary of Health determines that the military training or experience is not substantially equivalent to the licensing standards. To the extent resources are available, the DOH must expedite the issuance of a license or certificate to a military spouse that is licensed or credentialed in another state and left employment in another state because of the spouse's military transfer to Washington.

Emergency Management Assistance Compact.

The Emergency Management Assistance Compact (EMAC) is a mutual aid agreement between states and territories. It enables states to share resources during natural and man-made disasters. All 50 states have joined the EMAC and Washington joined in 2001. When a disaster occurs, and a Governor declares a state of emergency, the state assesses its resource needs and identifies shortfalls for which assistance will be requested. States with available resources negotiate costs with the affected state through the EMAC network and assisting states that commit to an agreement then mobilize and deploy the agreed-upon resources. The EMAC provides for interstate recognition of licenses held by professionals responding to an emergency in the state, but only applies to professionals deployed through the EMAC.

Summary of Bill:

The Recognition of Emergency Medical Services Personnel Licensure Interstate Compact (EMS Compact) is established in Washington. Member states of the EMS Compact create and establish the Interstate Commission for Emergency Medical Services Personnel Practice (Commission), the entity responsible for creating rules and bylaws for the EMS Compact.

Licensure and Privilege to Practice.

A home state's license authorizes an individual to practice in a remote state under the privilege to practice only if the home state:

- conditions initial licensure for EMTs and paramedics on the National Registry of Emergency Medical Technicians examination;
- has a mechanism in place for receiving and investigating complaints about individuals;
- notifies the Commission of any adverse action or significant investigatory information regarding an individual;
- no later than five years after activation of the EMS Compact, requires a criminal background check of all applicants for initial licensure, including the use of the results of fingerprint or other biometric data checks; and
- complies with the rules of the Commission.

To exercise the privilege to practice under the EMS Compact, an individual must:

- be at least 18 years of age;
- possess a current unrestricted license in a member state as an EMT, advanced EMT, or paramedic; and
- practice under the supervision of a medical director.

If an individual's privilege to practice in any remote state is restricted, suspended, or revoked, the individual may not practice in any remote state until the individual's privilege to practice is restored.

An individual providing patient care in a remote state under the EMS Compact must act within the home state's scope of practice unless and until modified by an appropriate authority in the remote state.

An individual may practice in a remote state under a privilege to practice only in the performance of the individual's EMS duties as assigned by an appropriate authority and under the following circumstances:

- the individual originates a patient transport in a home state and transports the patient to a remote state;
- the individual originates in the home state and enters a remote state to pick up a patient and provide care and transport of the patient to the home state;
- the individual enters a remote state to provide patient care or transport within that remote state;
- the individual enters a remote state to pick up a patient and provide care and transport to a third member state; and
- other conditions as determined by commission rules.

Upon a member state's Governor's declaration of a state of emergency or disaster that activates the EMAC, all relevant terms and provisions of EMAC prevail over any conflicting provisions of the EMS Compact.

Member states must consider a veteran, active military service member, or member of the national guard and reserves separating from an active duty tour, and a service member's spouse, who holds a valid and unrestricted National Registry of Emergency Medical Technicians certification at or above the level of the state licensure being sought as satisfying the minimum training and examination requirements for such licensure. Member states must expedite the processing of licensure applications for veterans, active military service members, or members of the national guard and reserves separating from an active duty tour, and a service member's spouse.

Adverse Actions.

A home state has the exclusive authority to impose adverse actions against an individual's license issued by the home state.

A member state's EMS authority is authorized to:

- issue subpoenas for hearings and investigation that require the attendance and testimony of witnesses and the production of evidence; and
- issue cease and desist orders to restrict, suspend, or revoke an individual's privilege to practice in the state.

An individual currently subject to adverse action in the home state may only practice in a remote state with prior written authorization from both the home state and remote state's EMS authority.

Interstate Commission.

The responsible official of the state EMS authority, or their designee, shall be a member of the Commission. The Commission may promulgate rules and bylaws for the EMS Compact and each member shall have one vote. The Commission must pay for reasonable establishment and

ongoing operation expenses of the Commission. It may levy and collect an annual assessment from each party state to cover these costs.

The Commission must develop and maintain a coordinated database and reporting system containing licensure, adverse action, and significant investigatory information on all licensed individuals in the state. Member states must submit certain information on all individuals to whom the EMS Compact is applicable. The coordinated database administrator must promptly notify all member states of any adverse action taken against or significant investigatory information on any individual in a member state.

If a majority of the legislatures of the member states rejects a rule adopted by the Commission through enacting a statute or resolution, then the rule will not have any effect in any member state. The EMS Compact may be amended by member states, however, the amendment is not effective or binding on any member state until it is enacted into the laws of all member states.

A party state may withdraw from the EMS Compact by enacting a statute repealing the EMS Compact, which must not take effect until six months after the enactment of the repealing statute.

Appropriation: None.

Fiscal Note: Requested on January 15, 2020.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.