Definition of "EMS Agency"

The current regulatory definition of "EMS Agency" is:

"EMS Agency" means: an organization that is authorized by a state EMS authority to operate an ambulance service, or non-transport service.

We believe this definition should be revised. Not all EMS agencies are an organization. For example, we do not consider a county or other political subdivision that provides EMS to be an organization. "Entity" is a more appropriate and much broader term than "organization". We recommend substituting "an entity" for "an organization" in the definition to include as EMS Agencies entities other than just organizations that are authorized to provide EMS.

Also, the definition includes the operation of a "non-transport service" without specifying the type of non-transport service. We recommend that the definition be revised to state "non-transport EMS service".

Finally, the definition limits an EMS agency to an entity authorized by a state EMS authority. "State EMS Authority" is defined in the Compact as follows:

"State EMS Authority" means the board, office, or other agency with the legislative mandate to license EMS personnel.

We expect that some states may have a government entity other than a State EMS Authority (which by definition licenses "EMS personnel) to separately license an EMS agency. Therefore, we also suggest that the definition of "EMS Agency" be revised to accommodate that. Based upon these considerations, we suggest that the Bylaws and Rules Committee consider revising the definition of "EMS Agency" as follows:

"EMS Agency" means: an organization entity that is authorized by a state EMS authority or other state government body to operate an ambulance service, or non-transport EMS service.

Definition of "Appropriate Authority"

The term "appropriate authority" appears in Section 1. Purpose, Section 4.4. Scope of Practice, and Section 5. Conditions of Practice. In our opinion, based upon how it is used in these provisions the term does not have only one meaning, but rather a meaning applicable to each provision based upon context in which it is used in that provision.

Section 1. Purpose

The Purpose section states:

This Compact is intended to facilitate the day to day movement of EMS personnel across state boundaries in the performance of their EMS duties as assigned by an appropriate authority

We believe "appropriate authority", as used here, means the EMS agency that assigns EMS duties to the EMS provider under a privilege to practice or other entity if authorized by a remote state's law to assign EMS duties to an EMS provider with the privilege to practice. The EMS agency could be an EMS agency in a home state if the EMS provider operating under the privilege to practice conducts an ambulance transport into a remote state that originates in the home state, or the EMS agency could be an EMS agency in a remote state if the EMS provider licensed in a home state, operating under the privilege to practice, provides patient care services in a remote state for an EMS agency in the remote state. The other entity could be an entity authorized by a remote state's law to call upon EMS providers with the privilege to practice to provide patient care services in the remote state in an extraordinary situation other than pursuant to a mobilization of EMS personnel under the Emergency Management Assistance Compact.

Section 4.C. Scope of Practice

Section 4.C of the Compact states:

An individual providing patient care in a remote state under the privilege to practice shall function within the scope of practice authorized by the home state unless and until modified by an appropriate authority in the remote state as may be defined in the rules of the commission.

We believe "appropriate authority", as used here, means an entity in a remote state that has authority under the Compact, its regulations, or state law in the remote state to modify the scope of practice of an EMS provider who provides patient care services in the remote state under the privilege to practice. One such entity could be the Statewide EMS Authority in the remote state. Commission Rule 4.4(a) provides:

4.4 Scope of practice. An individual providing patient care in a remote state under the privilege to practice shall function within the scope of practice authorized by his or her home state unless or until modified by the appropriate authority in the remote state.

(a) Each member state EMS authority that chooses to modify the scope of practice of individuals who are functioning in the state under a privilege to practice must report the specific modifications to the Commission for publication as described in these rules.¹

Another such entity could be an EMS agency in the remote state for which an EMS provider is providing patient care services. Subsection (b) of Commission Rule 4.4 provides:

(b) If the statutes and rules in the remote state allows further modification of the scope of practice, an EMS agency may further modify an individual's scope of practice.²

However, it is possible that a third entity in a remote state, under the laws of the remote state, perhaps a regional EMS council, could have authority to modify the scope of practice of an EMS provider providing patient care services in the remote state under the privilege to practice.³

Section 5. Conditions of Practice

Section 5 of the Compact provides:

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, as defined in the rules of the Commission....

We believe "appropriate authority" as used here should be interpreted to mean the same thing as "appropriate authority" is interpreted to mean in Section 1. Purpose, as both sections employ the same language "EMS duties assigned by an appropriate authority". We recognize that in a remote state the State EMS Authority and perhaps another entity could modify the duties of an EMS provider by modifying the scope of practice in that state. Nevertheless, we believe it is the responsibility of an EMS agency, or other entity if authorized under a remote state's law to call upon EMS providers with the privilege to practice to provide patient care services in the remote state under extraordinary circumstances, to keep abreast of such modification and assign EMS duties to the EMS provider consistent with such modification should it be imposed.

Recommended Definition of "Appropriate Authority"

Consequently, a regulation defining "appropriate authority" could be drafted to state:

"Appropriate authority" means:

- (1) As used in Sections 1 and 5 of the Compact, an EMS agency in a remote state for which the EMS provider is providing patient care under the privilege to practice, or an EMS agency in a home state for which the EMS provider, under the privilege to practice, is providing patient care during transport of a patient from the home state to the remote state, or other entity if authorized by a remote state's law to assign EMS duties to an EMS provider with the privilege to practice.
- (2) As used in Section 4.C of the Compact:
 - (a) the State EMS Authority of the remote state,

(b) if the statute and rules of a remote state permit the modification of scope of practice by an EMS agency in the remote state, an EMS agency in the remote state for which the EMS provider is providing patient care under a privilege to practice, and

(c) any other entity, such as a regional EMS council, county EMS oversight agency or similar entity that may be empowered by the remote state's law to modify the scope of practice of an EMS provider practicing in the remote state under the privilege to practice.

¹Pursuant to this regulation, the State EMS Authority of the remote state would have authority to modify the scope of practice of an EMS provider practicing in the remote state under the privilege to practice only if that State EMS Authority reports the specific modifications to the Commission under Commission Rule 4.5.

²Pursuant to this provision, an EMS agency in that remote state is allowed to modify the scope of practice of an EMS provider providing patient care in that state under the privilege to practice only if the statutes or rules of the remote state permit it to do so.

³Because the laws of a remote state may authorize such entity to modify the scope of practice of an EMS provider providing patient care in that state under the privilege to practice, the Bylaws and Rules Committee should consider amending Rule 4.4(a) to also mention such entity and apply the reporting responsibility to such entity.