



**EMERGENCY MEDICAL SERVICES
COMMISSION MEETING MINUTES**

DATE: April 16, 2021
TIME: 10:00am
LOCATION: Brownsburg Fire Territory Headquarters
470 E. Northfield Dr.
Brownsburg, IN 46112

MEMBERS PRESENT: G. Lee Turpen II (Private Ambulance)
Myron Mackey (EMTs)
John Zartman (Training Institution)
Andrew Bowman (RN)
Joel Thacker (State Fire Marshal)

MEMBERS PRESENT VIA

TELECONFERENCE: Darin Hoggatt (Paramedics)
Charles Valentine (Municipal Fire)
Sara Brown (Trauma Physician)
Melanie Jane Craigin (Hospital EMS)
Thomas A Lardaro (Air Medical Services)
Terri Hamilton (Volunteer EMS)
Matthew McCullough (Volunteer Fire and EMS)
John P. Ryan (General Public)

Ex-Officio Members: Kraig Kinney (Indiana State EMS Director)
(non-voting) Dr. Michael Kaufmann (Indiana State EMS Medical Director)

OTHERS PRESENT OR PRESENT BY TELECONFERENCE: Don Watson, Jason Smith, Mikel Fort, Tony Pagano, Stan Frank, Candice Pope, Lisabeth Handt, and other EMS Community members.

Complete video of this meeting can be viewed at the following link:
<https://acadisportal.in.gov/acadisviewer/Registration/ListOfAvailableTraining>

CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:01am by Chairman Lee Turpen. Mrs. Candice Pope called roll and announced quorum. Everyone stood for the Pledge of Allegiance.

ADOPTION OF MINUTES

a. Adoption of minutes from the February 19, 2021 session.

A motion was made by Commissioner Zartman to approve the minutes as written. The motion was seconded by Commissioner Hoggatt. Roll call vote taken:

John Zartman <u>Yes</u>	John Ryan <u>Yes</u>	Melanie Jane Craigin <u>Yes</u>
Charles Valentine <u>Yes</u>	Lee Turpen <u>Yes</u>	Myron Mackey <u>Yes</u>
Darrin Hoggatt <u>Yes</u>	Sara Brown <u>Yes</u>	Thomas Lardaro <u>Yes</u>
Andrew Bowman <u>Yes</u>	Joel Thacker <u>Yes</u>	Matthew McCullough <u>Yes</u>
Terri Hamilton <u>Yes</u>		

The motion passed. Minutes were adopted.

HONORARY CERTIFICATES

a. Retirement (staff reviewed and granted) –

Greg VanHook

b. Emeritus (staff reviewed and granted) –

Rod Bosley, and Greg VanHook

c. Certificate of Appreciation (staff reviewed and granted) –

Lee Algia, William Branham, Robert Early, Helen J. Mudd, and Jeff Webb

d. EMS Star of Life

Robert Craig, Martin "Marty" Meyers, and Kelly Lee Mikesell

e. State EMS Director's Award

Steve Brock and David DeGroot

RECOVERY OF AMERICA

Mr. Jason Howard explained about Recovery of America and how their program worked. They are developing addiction treatment programs tailored for Fire and EMS personnel.

INDIANA DEPARTMENT OF HEALTH

Mrs. Kate Hokanson stated that Community Hospital is up for their 1 year review for their Trauma Center accreditation.

EMS FOR CHILDREN

Dr. Kaufmann presented for Ms. Margo Knefelkamp. Dr. Kaufmann thanked everyone for participating in the IEMSC survey and encouraged everyone to respond to the survey every year.

INDIANA FIRE CHIEF'S ASSOCIATION

Mr. Doug Randall briefly spoke about the upcoming IERC. The Indiana Emergency Response Conference will be held on September 15 -18, 2021.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

Director Kinney announced that the Siren Awards banquet will be held on May 1st.

EMS EDUCATION WORKING GROUP

Director Kinney told the Commission that the education working group has been working on exam writing process with the National Registry.

MOBILE INTERGRATED HEALTH COMMITTEE

Director Kraig Kinney reported the committee is still looking at training/education for Mobile Integrated Health and funding for Mobile Integrated Health. Director Kinney gave an overview of the meeting. Director Kinney brought the recommendation from the committee to the Commission the approval process to be an approved Mobile Integrated Health program.

A motion was made by Commissioner Zartman to approve the recommendation from the Committee. The motion was seconded by Commissioner Bowman. Roll call vote taken:

John Zartman <u>Yes</u>	John Ryan <u>Yes</u>	Melanie Jane Craigin <u>Yes</u>
Charles Valentine <u>Yes</u>	Lee Turpen <u>Yes</u>	Myron Mackey <u>Yes</u>
Darrin Hoggatt <u>Abstained</u>	Sara Brown <u>Yes</u>	Thomas Lardaro <u>Yes</u>
Andrew Bowman <u>Yes</u>	Joel Thacker <u>Yes</u>	Matthew McCullough <u>Yes</u>
Terri Hamilton <u>Yes</u>		

The motion passed. Minutes were adopted.

NEW BUISNESS

- Legislative update- Director Kinney presented the updates. (See attachment #1)
- Provider Organization late submission non-rule policy – Director Kinney explained to the Commission members that staff has had continued issues with getting applications in for approval in a timely manner. (see attachment #2 for the non-rule policy).

A motion was made by Commissioner Zartman to approve the recommendation from staff. The motion was seconded by Commissioner Hoggatt. Roll call vote taken:

John Zartman <u>Yes</u>	John Ryan <u>Yes</u>	Melanie Jane Craigin <u>Yes</u>
Charles Valentine <u>Yes</u>	Lee Turpen <u>Yes</u>	Myron Mackey <u>Yes</u>
Darrin Hoggatt <u>Yes</u>	Sara Brown <u>Yes</u>	Thomas Lardaro <u>Yes</u>
Andrew Bowman <u>Yes</u>	Joel Thacker <u>Yes</u>	Matthew McCullough <u>Yes</u>
Terri Hamilton <u>Yes</u>		

The motion passed with a request to add a text to the certification that states the 60 day renewal requirement and the date. Minutes were adopted.

- c. EMS Scope of Practice – Consideration of permanent addition of Nasal Swabs and EMT Vaccinations – Director Kinney presented the updated to the Scope of practice. The Commission decided not to take action at this time.

OLD BUSINESS

No old business for this meeting.

ASSIGNMENTS

- a. Past Assignments
 - i. Commissioner Zartman to look at the continuing education hours for ACLS, CPR and similar classes.
- b. Today's Assignments

ADMINISTRATIVE PROCEEDINGS – INFORMATION ONLY

- a. Waiver Orders
 - i. Provider Organization Waivers
 - 1. 836 IAC 2-2-1 (g) - 24 hour/ 7 day requirement – granted
 - a. Batesville FD
 - b. Fountaintown Community Volunteer Fire Department
 - c. St. Vincent Health - Indianapolis
 - d. St. Vincent Health – Warrick Co.
 - e. Wayne Township Volunteer Fire Department of Hamilton County
 - 2. 836 IAC 3-2-6– allowing air ambulance to remove adult equipment during pediatric transports - granted
 - a. Air Methods Kentucky
- b. Disciplinary Orders
 - i. Personnel
 - 1. Rescinding Order – Paramedic License
 - a. Eaton, Brittany Nicole
 - 2. Letter of Reprimand and \$100.00 fine (Continuing education Sanctions)
 - a. Strecher, Robert D.
 - 3. \$500.00 Civil penalty fine and 90 day suspension
 - a. Jackson, Tyrone L, Jr.
 - 4. \$500.00 civil penalty fine, and 30 day suspension followed by a 2 year probation
 - a. Braniff, Joseph
 - 5. Emergency Suspension
 - a. Curry-Varner, Brandon Kyle
 - 6. 4 year revocation
 - a. Curry-Varner, Brandon Kyle

STAFF REPORTS

- a. Data Registry – Mr. Mikel Fort reported that we are currently sitting at 93% reporting for data.
- b. Operations Report – Mr. Mikel Fort reported that staff is working at the Gary Vaccine site.
- c. Compliance Report – Mrs. Candice Pope talked about some of the issues from the last certification cycle (see attachment #3)
 - i. Personnel – No report at this meeting
 - ii. Providers – (see attachment #4) report submitted for information only. No action taken. None required.

d. Training Report – (see attachment #5 for the training report) report submitted for information only.

STATE EMS DIRECTORS REPORT – Director Kinney acknowledged all the providers that have assisted with the vaccine administration site. Director Kinney gave an updated on the fogger distributions and process. Thanked everyone for competing the IEMSC survey. He also thanked Lisabeth Handt for her service as she is leaving the office staff. Director Kinney also gave updated on the Board of Pharmacy rule, the Mobile Integrated Health position, the National Registry, and the EMS Compact. Director Kinney also announced the passing of Sherri Crane.

STATE MEDICAL DIRECTORS REPORT - Dr. Michael Kaufmann gave updates on several topics including EMT vaccine administration, data, and Homebound Hoosier program.

CHAIRMAN'S REPORT AND DIRECTION- Chairman Turpen encouraged everyone attend if possible, EAGLES Conference will be June 17 and 18 but to attend in person you have to have proof of having your Covid – 19 vaccine. The IERC will be in September, the IEMSA conference will be held in December.

NEXT MEETING

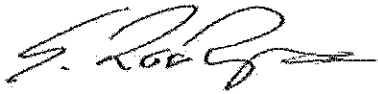
June 11, 2021 at 10:00am

Plan as of this meeting is for in person and virtual meeting

ADJOURNMENT

A motion was made by Commissioner Zartman. The motion was seconded by Commissioner Bowman. The meeting was adjourned at 12:09pm.

Approved _____



G Lee Turpen, Chairman

Attachment #1



Tuesday, April 6, 2021

To: EMS Commission Members
From: Kraig Kinney, Director and Counsel of EMS
Re: Pending Legislation Report-2021 Session

Pursuant to the request of EMS Commission members that I provide a written list of bills that I note could have EMS impacts, here is a current report.

As a reminder, a bill must be passed by Committee and then have a Second and Third reading during which amendments may be made. Once a third reading is done, the bill would be eligible to be transferred to the opposite branch of the legislature for consideration. Many bills will have a First Reading and be assigned to Committee to not be heard there.

BLACK indicates that the bill was introduced but is pending in initial committee status.

BLUE indicates the bill has passed the first house and has been referred to the other House of the Indiana legislature.

Looking Ahead

- A Second Reading must pass for all remaining bills in BOTH houses by April 12 and then Third Reading must pass by April 13.
- Conference Committee is where both Houses approved a bill but different versions and they attempt to reconcile or reach an agreement on a final bill that both Houses would then approve. Conference Committee lasts until April 21.

Here is a quick link to all the bills from the 2021 session, you can either check updated status or more information of any of these below by clicking the bill number or name:

<http://iga.in.gov/legislative/2021/bills/>

HB1002 **CIVIL IMMUNITY RELATED TO COVID-19.** (TORR J) Protects health care providers from professional discipline for certain acts or omissions arising from a disaster emergency unless the act or omission constitutes gross negligence, willful or wanton misconduct, or intentional misrepresentation. Provides that a health care provider is not protected from professional discipline for actions that are outside the skills, education, and training of the health care provider, unless certain circumstances apply. Specifies that orders and recommendations issued by local, state, and federal government agencies and officials during a state disaster emergency do not create new causes of action or new legal duties. Specifies that the orders and recommendations are presumed irrelevant to the issue of the existence of a duty or breach of a duty. Specifies that the orders and recommendations are inadmissible at trial to establish that a new cause of action has been created or proof of a duty or a breach of a duty. Prohibits filing a class action lawsuit against a defendant in a civil action allowed by the statute. Specifies

that a governmental entity or employee is not liable if a loss results from an act or omission arising from COVID-19 unless the act or omission constitutes gross negligence, willful or wanton misconduct, or intentional misrepresentation. Provides that a person is not liable to a claimant for loss, damage, injury, or death arising from COVID-19 unless the claimant proves by clear and convincing evidence that the person caused the loss, damage, injury, or death by an act or omission constituting gross negligence, willful or wanton misconduct, or intentional misrepresentation. Provides immunity from civil liability to certain persons, entities, and facilities providing health care and other services for certain acts or omissions related to the provision of health care services and other services during a state disaster emergency.

Status: Passed the House—Senate First Reading and assigned to Judiciary Committee. Passed Committee. Second Reading passed in the Senate Awaiting Third Reading.

HB1032 **NEWBORN SAFETY DEVICES.** (FRYE R) Provides for placement of a newborn safety device at any facility that is staffed by an emergency medical services provider on a 24 hour per day, seven day per week basis, provided the newborn safety device: (1) is located in an area that is conspicuous and visible to staff; and (2) includes a dual alarm system that is connected to the facility and is tested at least one time per month to ensure the alarm system is in working order. Provides for placement of a newborn safety device at any fire department, including a volunteer fire department, that is located within the jurisdiction of a city or town law enforcement agency, provided the newborn safety device is equipped with an alert system that: (1) when the newborn safety device is opened, automatically connects to the 911 system and transmits a request for immediate dispatch of an emergency medical services provider to the location of the newborn safety device; and (2) is tested at least one time per month to ensure the alert system is in working order. Provides that a person who in good faith voluntarily leaves a child in a newborn safety device located at such a facility or fire station is not obligated to disclose the parent's name or the person's name. Makes conforming amendments.

Interpretation/Comment: This just cleans up the existing statute.

Status: Passed the House – Senate: Passed Committee and Second Reading. Awaiting Third

SERVIC
Reading
INTEGRITY
RESPECT

Indiana Department of Homeland Security
302 W. Washington St. Room E208 • Indianapolis, IN 46204

317.232.2222
dhs.in.gov

HB1057 **EMS IMMUNITY. (TORR J).**

Interpretation/Comment: This is a Professional Fire Fighters' Union of Indiana initiative that IDHS was consulted on with correcting the negligence standard in that the civil liability statute for EMS does needs amended as it currently protects acts to the negligence standard which is the lowest standard so gross negligence would add further protections to EMS providers. This version also clarifies all level of EMS as it is arguable that the EMR level may not have liability protections under the current immunity standards.

Status: DEAD BILL – failed to advance by deadline.

HB 1118 **Mobile Integrated Healthcare Programs and Safety Plans**

Provides that an individualized mental health safety plan includes information concerning a patient's physical health. Provides that an emergency medical services provider agency with an approved mobile integrated healthcare program shall be operated by a city, town, or township in accordance with the rules and under the guidance of the Indiana emergency medical services commission. Provides that upon disclosure of a patient's individualized mental health safety plan, a mobile integrated healthcare program or a mental health community paramedicine program may provide certain services to help facilitate the patient's safe transition back into the community. Provides that a representative of a mobile integrated healthcare program or a representative of a mental health community paramedicine program may request a patient's individualized mental health safety plan from a psychiatric crisis center, psychiatric inpatient unit, or psychiatric residential treatment provider if certain conditions are met.

Status: Passed the House – Passed the Senate with amendments. Returned to the House.

** Tracking Concern: The bill appeared to limit MIH to municipal-based EMS and would exclude county, regional, or private EMS. A Senate amendment removed this questionable language.

HB1141 **TRANSPORTATION FOR MEDICAID PRESUMPTIVE ELIGIBLE. (CAMPBELL C)**

Status: DEAD BILL – failed to advance by deadline

HB1201 **EMERGENCY TRANSPORT OF INJURED OPERATIONAL CANINE.** (MCNAMARA W)

Provides that if there is not an individual requiring medical attention or transport, a paramedic, advanced emergency medical technician, or emergency medical technician may use emergency ambulance services to transport an operational canine injured in the line of duty to a veterinary hospital or clinic. Specifies the care that may be provided to the operational canine. Specifies who is responsible for the transportation and treatment cost of an injured operational canine. Provides that a paramedic, advanced emergency medical technician, or emergency medical technician who in the performance of their duties and in good faith renders care or transportation to an injured operational canine is not liable: (1) for any act or omission when rendering the care or transportation; or (2) to the veterinary hospital or clinic for expenses incurred for emergency care provided to the injured operational canine.

Status: Passed and signed by both the House and the Senate. Sent to the Governor for consideration.

HB1259 **INTERIM TRAUMA CARE STUDY.** (VERMILION A) Urges the legislative council to assign the study of Indiana's trauma care system to a study committee during the 2021 legislative interim.

Status: DEAD BILL – failed to advance by deadline

HB1230 **SAFE HAVEN 911.** (LAUER R) Provides that due to extenuating circumstances, if a child's parent or a person is unable to give up custody of a child under the procedure set forth in Indiana's safe haven law, the child's parent or the person may request that an emergency medical services provider (provider) take custody of the child by: (1) dialing the 911 emergency call number; and (2) staying with the child until a provider arrives to take custody of the child. Provides that the emergency medical dispatch agency or the provider shall inform the child's parent or the person giving up custody of the child concerning the ability to remain anonymous.

Interpretation/Comment: This is similar to Baby Box laws but could impact EMS by receiving a 911 call and then having to take "custody" of a child from a scene.

Status: Passed and signed by both the House and the Senate. Sent to the Governor for consideration.

HB1425 **LIABILITY FOR EMERGENCY MEDICAL SERVICES.** (LYNESS R)

Status: DEAD BILL – failed to advance by deadline

SERVICE INTEGRITY RESPECT

Indiana Department of Homeland Security
302 W. Washington St. Room E208 • Indianapolis, IN 46204

317.232.2222
dhs.in.gov

HB1446 **AMBULANCE ASSESSMENT FEE AND FUND.** (SLAGER H)

Status: DEAD BILL – failed to advance by deadline

HB1454 **NONEMERGENCY AMBULANCE SERVICE AND PHYSICIAN ORDER.** (BAIRD B) Prohibits a health carrier, the office of the secretary of family and social services, and contractors of the office from: (1) denying payments for nonemergency ambulance services when provided according to a properly executed physician order or certification statement; and (2) making reimbursement for nonemergency ambulance services contingent upon receipt of a physician's order. Requires hospital boards to establish protocols concerning issuing orders for nonemergency transportation. Requires physicians to issue orders for nonemergency ambulance services and specifies contents of the order. Prohibits a health carrier from requiring a covered individual to make greater cost sharing payments for ambulance services that were provided by an out of network ambulance provider. Allows an out of network provider of ambulance services to directly bill a health carrier and specifies determination of reimbursement amount.

Interpretation/Comment: This is an EMS Association supported proposed legislation addressing billing matters.

Status: Passed the House --Senate passed Committee and Second Reading. Awaiting Third Reading.

Amendment #3 keeps the Medicaid reimbursement provisions about matching the physician's order but drops the balanced billing provisions while requiring that BLS and ALS providers that utilize FSSA (Medicaid) provide costs data from 2020 to FSSA by July 1, 2021. FSSA will provide feedback and questions by September 1, 2021, with the EMS provider to respond by November 1, 2021. FSSA will then collate by county and report to the legislative council by December 1, 2021.

SB83 **LAW ENFORCEMENT DOGS.** (CRIDER M) Provides that if there is not an individual requiring medical attention or transport, a paramedic, advanced emergency medical technician, or emergency medical technician may use emergency ambulance services to transport a law enforcement dog injured in the line of duty to a veterinary hospital or clinic. Increases the penalties for cruelty to a law enforcement animal and a search and rescue dog.

Status: DEAD BILL – failed to advance by deadline

SERVICE **INTEGRITY** **RESPECT**

Indiana Department of Homeland Security
302 W. Washington St. Room E208 • Indianapolis, IN 46204

317.232.2222
dhs.in.gov

SB232 EXPOSURE RISK DISEASES. (FORD J) Adds any variant of severe acute respiratory syndrome (SARS), including coronavirus disease (COVID-19), to the list of diseases considered an exposure risk disease for purposes of emergency and public safety employee death and disability presumed in the line of duty.

Status: Passed the House – Passed the Senate with amendments. Returned to the House.

SB 369 ELECTRONIC MEETINGS AND SIGNATURES. Allows a member of a governing body of a political subdivision to participate in a meeting electronically subject to the following: (1) Requires the governing body to adopt a written policy establishing procedures for electronic participation. (2) Requires the technology to permit simultaneous communication between members and the public to attend and observe the proceedings. (3) Requires at least 50% of the members to be physically present at the meeting site. (4) Allows a member participating electronically to be counted for quorum purposes. (5) Provides that a member participating electronically may participate in a final action taken by the governing body only if the member can be seen and heard. Exempts governing bodies of state agencies that have a majority of members with disabilities from certain attendance requirements. Provides that if a statute requires a manual signature for attesting or authenticating an obligation issued by certain state and local public entities, an electronic signature has the same force and effect as a manual signature. Adds provisions applicable to state and local public agencies when a state or local disaster emergency is declared. Allows the governing body of a school corporation or charter school (school employer) may allow governing body members and the public to participate electronically in a public hearing required under the law for purposes of collective bargaining. Makes stylistic changes.

Status: Passed the Senate. In the House, it has cleared committee and is adopted, awaiting a Second Hearing.

SERVICE INTEGRITY RESPECT

Indiana Department of Homeland Security
302 W. Washington St. Room E208 • Indianapolis, IN 46204

317.232.2222
dhs.in.gov

Attachment #2



Indiana EMS Commission
Non-Rule Policy
Provider organization Late Applications

Background of Policy:

This policy addresses all organization certifications for EMS

836 IAC 1-2-2 Application for certification; renewal

(d) Application for **ambulance service provider organization** certification renewal shall be made not less than sixty (60) days prior to the expiration date of the current certificate to assure continuity of certification. Application for renewal shall be made on forms as provided by the agency

836 IAC 1-11-2 Application for certification; renewal

(d) Application for emergency medical services **nontransport provider organization** certification renewal shall be made not less than sixty (60) days prior to the expiration date of the current certificate to assure continuity of certification.

LSA Document #12-393(E) Advanced EMT Emergency Rule

Section 15(b)(4) An applicant shall complete and submit the required forms to the agency at least sixty (60) days before the requested effective date of the certificate.

836 IAC 2-2-2 Application for certification; renewal

(e) Application for **paramedic provider organization** certification renewal should be made not less than sixty (60) days prior to the expiration date of the current certification.

836 IAC 2-4.1-1 Certification as a supervising hospital; renewal

(b) Application for certification shall be submitted to the commission not less than sixty (60) days prior to the date for which approval is requested and made on forms provided by the agency.

836 IAC 4-2-1 General requirements for training institutions; staff

(f) A certified **training institution** shall submit an application for recertification to the agency at least sixty (60) days prior to the date of certification expiration.

Individual EMS certifications are due on the final date of a certification cycle and are subject to random audit.

Provider organization certifications, including training institutions, are submitted on paperwork approved by the Department and are personally reviewed by IDHS EMS staff. A review takes time to determine that all requirements have been met and that the provider organization is complying with the rules in its operations. Therefore, the rules require submission of an application for approval at least sixty (60) days prior to expiration.

The problem is that provider organizations are generally ignoring the 60 day advance renewal application and applying for recertification just a week or days before the expiration. Not only does this create an unnecessary burden on the EMS staff to try to review at the last minute, it impairs the ability to fully review the application and, often, there are unresolved issues from the application that require the provider organization to submit additional information which can push the provider organization into an expired certification.

Currently, the EMS section is just sending notifications to the provider that their status is approaching or has become expired. There are no repercussions for a provider organization that fails to submit within either the 60 days advance window or even right at or after expiration of the current certification period.

Non-Rule Policy

The Indiana EMS Commission adopts this non-rule policy to reinforce the 60-days in advance recertification requirement for provider organizations and to define the sanctions that IDHS should issue when violations occur.

IC 16-31-3-14(a)(7) permits disciplinary sanctions for a certified or licensed EMS provider organization that "fails to comply and maintain compliance with or violates any applicable provision, standard, or other requirement of this article or rules adopted under this article."

IC 16-31-3-14(b) permits IDHS to issue an administrative order on behalf of the EMS Commission that includes "one (1) or more of the following sanctions" if there is a rule violation such as (a)(7). The sanctions include:

- (3) Censure of a certificate holder or license holder; and/or
- (5) Assessment of a civil penalty against the certificate holder or license holder in accordance with the following:
 - (A) The civil penalty may not exceed five hundred dollars (\$500) per day per violation.

(B) If the certificate holder or license holder fails to pay the civil penalty within the time specified by the department of homeland security, the department of homeland security may suspend the certificate holder's certificate or license holder's license without additional proceedings.

While the EMS Commission authorizes IDHS to adjust these guidelines for noted cause in an administrative Order, the following sanctions apply to provider organizations for failure to comply with the advance renewal for a certification renewal should be standard:

1. A renewal date is always when IDHS, on behalf of the EMS Commission, has APPROVED a renewal application. It is not the date that the application was submitted. IDHS is not permitted by law to backdate an application.
2. Application submitted between 30-60 days prior to the certification expiration date
 - a. Sanction: First offense is Censure. Second offense is a Censure with a \$50.00 civil penalty.
3. Application submitted between 8-29 days prior to the certification expiration date
 - a. Sanction: Censure with a \$50.00 civil penalty.
4. Application submitted between 7 days or less prior to the certification expiration date
 - a. Sanction: Censure with a \$100.00 civil penalty.
5. Application submitted after the expiration date
 - a. Provider organization is not certified and may not provide either emergency medical services or EMS education (if a training institution). Any EMS functions by a provider organization during an expired period are not legally authorized. IDHS to notify the expired provider organization as soon as possible.
 - i. Note that operating or providing EMS or even EMS education during an expired period will subject a provider organization to sanctions separate from this policy.
 - b. Sanction: When renewed (if within 60 days of expiration), the provider organization shall receive a Censure with a \$250.00 civil penalty.

Adopted by the Indiana EMS Commission on TBD

Attachment #3

Attachment #4

Emergency Medical Services Provider Certification Report

Date : April 7, 2021

April 16, 2021

In compliance with the Rules and Regulations for the operation and administration of Emergency Medical Services, this report is respectfully submit to the Commission at the April 16, 2021 Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

<u>Provider Level</u>	<u>Counts</u>
Rescue Squad Organization	1
Basic Life Support Non-Transport	487
Ambulance Service Provider	98
EMT Basic-Advanced Organization	4
EMT Basic-Advanced Organization non-transport	1
EMT Intermediate Organization	9
EMT Intermediate Organization non-transport	0
Paramedic Organization	203
Paramedic Organization non-transport	15
Rotorcraft Air Ambulance	14
Fixed Wing Air Ambulance	3

Total Count: 835

New Providers Since 01-FEB-21

AROUND THE CLOCK TRANSPORTATION

**Paramedic Certification:
01/15/2023**

**Emergency Medical Services
Provider Certification Report**

Date : April 7, 2021

April 16, 2021

In compliance with the Rules and Regulations for the operation and administration of Emergency Medical Services, this report is respectfully submit to the Commission at the **April 16, 2021** Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

WHITE RIVER TWP FIRE DEPARTMENT	Basic Certification: 03/01/2021
--	--

Attachment #5

April 2021 EMS Training Report

NREMT pass rates are enclosed in this report. These statistics are for courses ending between March 30, 2020 and March 30, 2021. Paramedic pass rates are for two years since most course last between 18 and 24 months. The EMT courses are broken down into three separate categories. The top category represents those training institutions whose graduates' average at least 70% after the first attempt which is the standard set by the Commission: 24 programs. This is an increase in 4 programs since the last reporting period which ended in January. The programs in the next category (60% -70%) are near meeting the standard set by the Commission: 12 programs. Those in the bottom category are below standard; 39 programs. Unfortunately, we have more programs under 50% than over.

We have implemented site visits to assist struggling programs. We are concentrating on visiting those programs who have between a 60 - 69% pass rate over the past 3 years. In the last 6 months we have visited ten training institutions giving them support and advice as well as checking to see how they are implementing the skills portfolios into their training programs.

National Registry Pass Rates, March 30, 2020 to March 30, 2021

National or State	Level of Certification	Initial	3d Attempt	6 th Attempt	Total Attempts
National	EMT	68%	78%	78%	63,435
State	EMT	58%	70%	71%	999
National	Adv EMT	58%	71%	72%	4475
State	Adv EMT	68%	73%	73%	59
National	Paramedic	71%	85%	87%	22,690
State	Paramedic	67%	82%	84%	383

National Registry Pass Rates, March 30, 2018 to March 30, 2021

National or State	Level of Certification	Initial	3d Attempt	6 th Attempt	Total Attempts
National	EMT	68%	80%	80%	229,868
State	EMT	56%	69%	71%	4128
National	Adv EMT	60%	74%	76%	15,900
State	Adv EMT	59%	73%	75%	226
National	Paramedic	71%	86%	88%	34,729
State	Paramedic	66%	81%	85%	627

Emergency Medical Technician

Program Name	Program Code	Attempt	First Att	total pass	ELIG	First Pass %	Total Pass %
Hancock Regional Hospital	IN-4577	1	1	1	0	100%	100%
IU Lifeline	IN-6509	6	6	6	0	100%	100%
Memorial Hospital Jasper	IN-5271	1	1	1	0	100%	100%
Central Nine Career Center	IN-5026	3	3	3	0	100%	100%
J. Everett Light Career Center	IN-6480	2	2	2	0	100%	100%
City of Lawrence Fire Dept	IN-6625	3	3	3	0	100%	100%
Superior Ambulance	IN-4082	3	3	3	0	100%	100%
White County EMS Education	IN-5834	4	4	4	0	100%	100%
Union Hosp Health Group	IN-4431	1	1	1	0	100%	100%
Indianapolis Fire Dept	IN-5751	35	31	34	1	89%	97%
IU Arnett Hospital EMS Program	IN-5936	7	6	6	1	86%	86%
St Mary Medical Center/Hobart	IN-4943	6	5	6	0	83%	100%
Carmel Fire Department	IN-5989	18	15	18	0	83%	100%
Parkview Regional Medical Center	IN-5296	12	10	10	2	83%	83%
Wells Co Ambulance Service	IN-4913	6	5	5	1	83%	83%
Hendricks Regional Health	IN-4380	11	9	10	1	82%	91%
Ivy Tech Community College Madison	IN-4542	5	4	4	1	80%	80%
Indianapolis Emergency Medical Services	IN-4083	25	19	23	2	76%	92%
Deaconess Hospital	IN-4516	21	16	18	3	76%	86%
Franciscan St Elizabeth Health	IN-4068	12	9	10	2	75%	83%
Richmond Fire Department	IN-5707	4	3	3	1	75%	75%
Parkview Whitley Hospital	IN-5023	7	5	6	1	71%	86%
Indiana University	IN-4495	7	5	5	2	71%	71%
Ivy Tech Community College - Valparaiso	IN-5747	17	12	12	5	71%	71%
					23		

Emergency Medical Technician

Franciscan Saint Anthony Health Crown Point	IN-4079	22	15	18	4	68%	82%
Ivy Tech Community College South Bend	IN-4070	22	15	16	6	68%	73%
New Castle Career Center	IN-5718	15	10	10	5	67%	67%
St Joseph Regional Medical Center	IN-5775	6	4	4	2	67%	67%
Elkhart Area Career Center	IN-5816	3	2	2	1	67%	67%
Winchester Fire Dept	IN-6460	9	6	7	2	67%	78%
Franciscan St. Margaret Health EMS Acade	IN-5267	24	15	18	6	63%	75%
Otter Creek Fire Department	IN-5929	13	8	10	3	62%	77%
Goshen Hospital	IN-4162	13	8	9	4	62%	69%
Peiham Training	IN-4668	122	74	92	30	61%	75%
Elkhart General Hospital	IN-4067	5	3	5	0	60%	100%
Clay Fire Territory	IN-4756	5	3	4	1	60%	80%
STAR Ambulance	IN-6003	7	4	6	1	57%	86%
Methodist Hospitals	IN-4072	28	16	20	8	57%	71%
Gas City Rescue Squad	IN-6386	7	4	4	3	57%	57%
Illiana EMS	IN-6529	9	5	7	2	56%	78%
Ivy Tech Community College - Bloomington	IN-4071	16	9	12	4	56%	75%
Ivy Tech Community College - Evansville	IN-4141	32	18	21	11	56%	66%
Columbus Regional Hospital	IN-4355	20	11	14	6	55%	70%
Ivy Tech Community College Sellersburg	IN-4864	12	6	8	4	50%	67%
Lutheran EMS Training Center	IN-6351	11	6	7	4	55%	64%
Scott County EMS	IN-4078	4	2	3	1	50%	75%
Greenfield Fire Territory	IN-5732	10	5	6	4	50%	60%
Hands Helping Hearts	IN-6558	16	8	9	7	50%	56%
St Mary of the Woods College	IN-6538	2	1	1	1	50%	50%
DeKalb Memorial Hospital	IN-4446	10	5	5	5	50%	50%
LaPorte Co Career and Tech Ed	IN-5994	4	2	2	2	50%	50%

Emergency Medical Technician

Emergency Services Education Center	IN-4960	44	21	32	12	48%	73%
Franciscan Health Indianapolis	IN-4080	25	12	16	9	48%	64%
Ivy Tech Community College Northeast	IN-4169	32	15	21	11	47%	66%
Harrison County Hospital/EMS	IN-4336	15	7	9	6	47%	60%
IU Ball Memorial Hospital	IN-4369	28	13	14	14	46%	57%
Heartland Ambulance	IN-6320	9	4	6	3	44%	67%
Community Howard Regional Health	IN-5804	8	5	6	2	43%	60%
Ivy Tech Community College Indianapolis	IN-6506	23	9	12	11	43%	57%
Ivy Tech Community College Terre Haute	IN-4612	13	5	5	8	38%	38%
Scott Township Fire and EMS	IN-6442	16	5	6	10	38%	38%
Ascension Health Indianapolis	IN-4081	33	12	17	16	36%	52%
Redline EMS	IN-6495	6	2	3	3	33%	50%
Clinton Co EMS	IN-5863	9	3	4	5	33%	44%
Ivy Tech Community College Kokomo	IN-4362	15	5	6	9	33%	40%
Benton Co EMS	IN-6548	9	3	3	6	33%	33%
St. Joseph Regional Med Center Plymouth	IN-5001	9	3	5	4	33%	56%
St. Vincent Anderson	IN-4588	6	2	3	3	33%	50%
Crawfordsville Fire Department	IN-5990	3	1	1	2	33%	33%
Hooster Hills Career Center	IN-6346	4	1	1	3	25%	25%
Franciscan Alliance Crawfordsville	IN-6002	8	1	5	2	13%	63%
Vincennes University	IN-4153	9	1	3	6	11%	33%
Vincennes University Jasper Center	IN-4478	1	0	1	0	0%	100%
Parkview Huntington Hospital	IN-5269	2	0	1	1	0%	50%
Hands on Instruction LLC	IN-6017	1	0	0	1	0%	0%

Emergency Medical Technician

Advanced EMT

Program Name	Program Co	Attempt	First Att	Cumulative	Eligible	First Pass %	Third Pass %	Total Pass %
Columbus Regional Hospital	IN-4355	4	4	4	4	100%	100%	100%
Fort Wayne Fire Dept	IN-5955	23	20	23	23	87%	100%	100%
IU Ball Hospital	IN-4369	6	4	4	4	67%	67%	67%
Memorial Hospital South Bend	IN-4157	10	6	6	4	60%	60%	60%
New Castle Career Center	IN-5718	14	5	6	8	43%	43%	43%
Highpoint Health	IN-4065	1	0	0	1	0%	0%	0%

Paramedic

Program Name	Program Co	Attempt	First	Att	Cumuli	Cumula	Eligible	For	First	Pass %	Third	Pass %	Total	Pass %
Harrison County Hospital	IN-4336	9	9	9	9	9	0	0	100%	100%	100%	100%	100%	100%
Community Health Network EMS	IN-4063	13	13	13	13	13	0	0	100%	100%	100%	100%	100%	100%
Indianapolis EMS	IN-4083	73	64	68	69	69	4	4	88%	93%	93%	93%	95%	95%
Scott Co EMS	IN-4078	6	5	5	5	5	1	1	83%	83%	83%	83%	87%	87%
St Vincent Hospital	IN-4081	24	18	24	24	24	0	0	75%	100%	100%	100%	100%	100%
Ivy Tech Community College South Bend	IN-4070	24	16	19	19	19	5	5	75%	88%	88%	88%	88%	88%
Franciscan Health Crown Point	IN-4079	14	10	12	13	13	1	1	71%	86%	86%	86%	93%	93%
Pelham Training	IN-6266	34	24	29	31	31	3	3	71%	85%	85%	85%	91%	91%
Franciscan Health Indianapolis	IN-4080	37	26	35	35	35	2	2	70%	95%	95%	95%	95%	95%
Hendricks Regional Health	IN-4380	10	7	8	8	8	2	2	70%	80%	80%	80%	80%	80%
Goshen Health	IN-4162	25	16	19	20	20	5	5	64%	76%	76%	76%	80%	80%
Ivy Tech Community College Terre Haute	IN-4612	35	21	29	30	30	4	4	60%	83%	83%	83%	86%	86%
Ivy Tech Community Northeast	IN-4169	35	20	26	27	27	8	8	57%	74%	74%	74%	77%	77%
Methodist Hospitals	IN-4072	17	9	10	10	10	7	7	55%	59%	59%	59%	59%	59%
Ivy Tech Community college Evansville	IN-4141	15	8	12	13	13	2	2	53%	80%	80%	80%	87%	87%
Ivy Tech Community College Valparaiso	IN-5747	9	4	5	5	5	4	4	44%	56%	56%	56%	56%	56%
Ivy Tech Bloomington	IN-4071	12	4	5	5	5	7	7	33%	42%	42%	42%	42%	42%
St Mary Medical Center Hobart	IN-4943	7	2	3	3	3	4	4	29%	43%	43%	43%	43%	43%
Ivy Tech Community College Kokomo	IN-4362	15	4	9	12	12	3	3	27%	60%	60%	60%	80%	80%