

**PUBLIC HEALTH DEPARTMENT[641]**

**Notice of Intended Action**

**Proposing rulemaking related to emergency medical services  
and providing an opportunity for public comment**

The Department of Health and Human Services hereby proposes to amend Chapter 131, “Emergency Medical Services—Providers—Initial Certification—Renewal and Reactivation—Authority—Complaints and Investigations,” Iowa Administrative Code.

*Legal Authority for Rulemaking*

This rulemaking is proposed under the authority provided in Iowa Code chapters 147A and 147D and section 272C.4.

*State or Federal Law Implemented*

This rulemaking implements, in whole or in part, Iowa Code chapters 147A and 147D and section 272C.4.

*Purpose and Summary*

This proposed rulemaking updates and streamlines Iowa’s certification, renewal, and continuing education requirements for Iowa emergency medical services (EMS) workers. Key changes include modernizing the continuing education hours (CEHs) structure, reactivation pathways, and background check process, as well as an updated scope of practice. These proposed amendments will help ensure compliance with national EMS standards, reduce administrative complexity, and reinforce consistent statewide practice expectations. Adoption of updated rules will support a more competent and better-prepared EMS workforce.

Specifically, this proposed rulemaking:

- Modernizes the continuing education structure by adding pediatric CEH requirements and allowing half-hour CEHs.
- Updates the background check process by reflecting the use of digital fingerprints and removing the outdated card-based system.
- Updates references to the Iowa Emergency Medical Care Provider Scope of Practice for EMS workers to the most current version.
- Restructures reactivation pathways, eliminating the 25- to 48-month reactivation option and redirecting impacted individuals to the National Registry of Emergency Medical Technicians (NREMT) knowledge assessment for reactivation.
- Updates the fee for returned payments from \$15 to \$40 to align with the ongoing Department of Inspections, Appeals, and Licensing (DIAL) alignment initiative.
- Updates the continuing education audit documentation deadlines from 45 days to 30 days to align with the ongoing DIAL alignment initiative.
- Updates language pertaining to certification denial or sanctions based upon feedback received from an administrative law judge regarding fraud.

*Regulatory Analysis*

A Regulatory Analysis for this rulemaking was published in the Iowa Administrative Bulletin on May 27, 2026. A public hearing was held on the following date(s):

- June 16, 2026

#### *Fiscal Impact*

Although the returned check fee is increasing from \$15 to \$40, in calendar year 2025, there were no returned checks. As such, the Department does not expect a fiscal impact from this change.

#### *Jobs Impact*

After analysis and review of this rulemaking, no impact on jobs has been found.

#### *Waivers*

Any person who believes that the application of the discretionary provisions of this rulemaking would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 441—Chapter 2504.

#### *Public Comment*

Any interested person may submit written or oral comments concerning this proposed rulemaking, which must be received by the Department no later than 4:30 p.m. on July 28, 2026. Comments should be directed to:

Victoria L. Daniels  
Department of Health and Human Services  
Lucas State Office Building  
321 East 12th Street  
Des Moines, Iowa 50319  
Phone: 515.829.6021  
Email: [compliance.rules@hhs.iowa.gov](mailto:compliance.rules@hhs.iowa.gov)

#### *Public Hearing*

A public hearing at which persons may present their views orally or in writing will be held as follows:

July 28, 2026	Microsoft Teams
10 to 10:30 a.m.	Meeting ID: 291 340 678 349 357
	Passcode: LT7oc32E

Persons who wish to make oral comments at the public hearing may be asked to state their names for the record and to confine their remarks to the subject of this proposed rulemaking.

Any persons who intend to attend the public hearing and have special requirements, such as those related to hearing or mobility impairments, should contact the Department and advise of specific needs.

#### *Review by Administrative Rules Review Committee*

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rulemaking by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rulemaking at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rulemaking action is proposed:

ITEM 1. Amend rule **641—131.1(147A,147D,272C)**, definitions of “CEH” and “Core continuing education,” as follows:

“CEH” means continuing education hour, which is based upon ~~a minimum of~~ 50 minutes of training per hour. Fifty minutes equals one CEH, and 30 minutes equals one-half CEH.

“Core continuing education” means education obtained during a certification period to renew certification. Core continuing education will have an assigned sponsor number from CAPCE, an authorized EMS training program, the board of nursing, the board of medicine or the department.

ITEM 2. Amend subrule 131.2(1) as follows:

**131.2(1)** An individual who has successfully completed the training program requirements at the EMR, EMT, AEMT or paramedic level and has a valid certification with NREMT shall submit the following to the department for initial Iowa emergency medical care provider certification:

- a. A completed EMS certification application.
- b. An NREMT active certification number.
- c. Payment of the initial application fee.
- d. ~~Two completed fingerprint cards for background checks.~~ A completed background check.
- e. ~~Payment of the background check fee.~~

ITEM 3. Amend subrule 131.4(2) as follows:

**131.4(2)** *Scope of practice.*

- a. No change.
- b. The Iowa Emergency Medical Care Provider Scope of Practice (~~September 2019~~) as amended to September 1, 2026, is hereby incorporated and adopted by reference for emergency medical care providers. For any differences that may occur between the scope of practice adopted by reference and these rules, the rules prevail. The Iowa Emergency Medical Care Provider Scope of Practice as amended to September 1, 2026, is available on the department’s website.

~~e. The Iowa Emergency Medical Care Provider Scope of Practice (September 2019) is available on the department’s website.~~

~~c.~~ c. The department may grant a waiver for changes to the scope of practice that have not yet been adopted by reference in these rules pursuant to 441—Chapter 2504.

ITEM 4. Amend subrule 131.5(4) as follows:

**131.5(4)** *Reactivation of an inactive certification.*

a. *Certification inactive up to 24 months.* An emergency medical care provider may apply to reactivate an inactive certification up to 24 months after the certification became inactive.

(1) No change.

(2) If the department approves the application, the individual must submit ~~an audit report form with 36 core continuing education hours prorated per lapsed year by core topic area based upon the table in paragraph 131.5(7)“a” for the level of EMS certification requested for reactivation, a completed background check, and the reactivation fee.~~ The core CEHs and the background check shall be completed after the department receives and approves the reactivation application.

(3) No change.

(4) An emergency medical care provider who fails to complete the reactivation process within 12 months from the date of application approval ~~must reapply for reactivation of the inactive certification will not be eligible for reactivation.~~

~~b. Certification inactive from 25 months to 48 months. An emergency medical care provider may apply to reactivate an inactive certification that has been inactive for 25 months but no more than 48 months.~~

~~(1) An individual will submit to the department an EMS certification reactivation application, which is available from the department upon request.~~

~~(2) If the department approves the application, the individual must submit documentation of successful completion of an approved EMS refresher course that includes successful completion of department or NREMT testing requirements. In addition, the individual must:~~

~~1. Complete fingerprint requirements.~~

~~2. Submit reactivation and background check fees.~~

~~3. Upon receipt and approval of the items required in subparagraphs 131.5(4)“b”(1) and (2), the department may issue a new certification.~~

4. ~~An emergency medical care provider who fails to complete the reactivation process within 12 months from the date of application approval must reapply for reactivation of the inactive certification.~~

~~e. b. Certification inactive for more than 48 24 months. An emergency medical care provider may not cannot apply to reactivate a certification that has been inactive for more than 48 24 months. An emergency medical care provider who has been inactive for more than 24 months may complete the NREMT reentry requirements and apply for certification in accordance with subrule 131.2(1).~~

ITEM 5. Amend subrule 131.5(6) as follows:

**131.5(6) Fees.** The nonrefundable fees are as follows:

- a. to g. No change.
- h. Returned payment due to insufficient funds: \$15 ~~\$40~~.
- i. No change.

ITEM 6. Amend subrule 131.5(7) as follows:

**131.5(7) Continuing education renewal.**

a. The table below illustrates the minimum number of core ~~continuing education hours (CEHs)~~ by topic area for each level of emergency medical care provider to renew an Iowa EMS certification.

Core Topics	EMR/FR	EMT/EMT-D	AEMT	PM
Airway, Respirations, Ventilations	<del>1</del> <u>1.5</u>	<del>1</del> <u>4</u>	<del>2</del> <u>5</u>	<del>3</del> <u>6</u>
Cardiology	2	<del>6</del> <u>5</u>	<del>7</del> <u>6</u>	<del>9</del> <u>7</u>
Trauma	1	<del>2</del> <u>3</u>	<del>3</del> <u>4</u>	<del>3</del> <u>5</u>
Medical	<del>3</del> <u>2.5</u>	6	<del>8</del> <u>7</u>	<del>9</del> <u>8</u>
Operations	1	<del>5</del> <u>2</u>	<del>5</del> <u>3</u>	<del>6</del> <u>4</u>
<u>Pediatric</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
<b>Totals</b>	<b><del>8</del> <u>9</u></b>	<b><del>20</del> <u>22</u></b>	<b><del>25</del> <u>28</u></b>	<b><del>30</del> <u>34</u></b>

b. All core continuing education hours ~~issued by an Iowa EMS training program, the department, or CAPCE~~ used to renew an Iowa EMS certification must have a sponsor number ~~by an authorized Iowa training program, the department, the board of nursing, the board of medicine, or CAPCE~~ before the emergency medical care provider attends the offering.

c. to e. No change.

f. A group of emergency medical care providers will be audited for each certification period. Emergency medical care providers to be audited will be chosen in a random manner or at the discretion of the department. Falsifying reports or failure to comply with the audit request may result in formal disciplinary action. ~~Those audited must submit a department-provided audit report form within 45 days of the request.~~ If audited, within 30 days from the date of request for audit, the emergency medical care provider must provide a copy of the course completion certification or other verifying documentation that contains the following information at a minimum:

- (1) No change.
- (2) Program sponsor number (if applicable).
- (3) and (4) No change.

ITEM 7. Amend subrule 131.5(8) as follows:

**131.5(8) Continuing education approval.** The following standards apply for approval of continuing education:

a. CEHs issued by CAPCE, an authorized EMS training program, or the department will have an assigned sponsor number ~~from CAPCE, an authorized EMS training program, the board of nursing, the board of medicine or the department~~ before the emergency medical care provider attends the offering.

b. No change.

c. Courses must be, at a minimum, 30 minutes in duration (one-half CEH). Multi-hour courses are granted credit in half-hour increments (e.g., one hour and 30 minutes = one and one-half CEHs).

d. Continuing education courses that are accepted by the board of nursing and the board of medicine that are directly related to EMS patient care and apply to the core continuing education topics will be accepted.

ITEM 8. Amend paragraph **131.6(4)“e”** as follows:

e. ~~Fraud~~ Misrepresentation in procuring certification or renewal, including but not limited to:

- (1) ~~An intentional~~ A perversion of the truth in making application for a certification to practice in this state;
- (2) and (3) No change.