Regulatory Analysis

Notice of Intended Action to be published: 641—Chapter 139
"Emergency Medical Services—Training Programs—Students—Complaints and Investigations"

Iowa Code section(s) or chapter(s) authorizing rulemaking: 147A.4
State or federal law(s) implemented by the rulemaking: Iowa Code section 147A.4

Public Hearing

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

November 6, 2024 10 a.m.	Microsoft Teams Meeting ID: 268 876 122 100 Passcode: QXqezE

Public Comment

Any interested person may submit written or oral comments concerning this Regulatory Analysis, which must be received by the Department of Health and Human Services no later than 4:30 p.m. on the date of the public hearing. Comments should be directed to:

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Purpose and Summary

This proposed chapter establishes the standards and requirements for authorization of emergency medical care training programs in the state of Iowa; establishes the requirements of the training program related to preparing students for emergency medical provider certification in the state of Iowa, and describes the authority of the Department to impose disciplinary sanctions against a training program.

Analysis of Impact

1. Persons affected by the proposed rulemaking:

- Classes of persons that will bear the costs of the proposed rulemaking:

Emergency medical care training programs may incur costs associated with maintaining compliance.

- Classes of persons that will benefit from the proposed rulemaking:

Iowans served by emergency medical care providers will benefit.

2. Impact of the proposed rulemaking, economic or otherwise, including the nature and amount of all the different kinds of costs that would be incurred:

- Quantitative description of impact:

There are 20 emergency medical services (EMS) training programs in Iowa.

- Qualitative description of impact:

The rulemaking helps ensure the quality and integrity of emergency medical care training programs in Iowa.

3. Costs to the State:

- Implementation and enforcement costs borne by the agency or any other agency:

Personnel and other administrative costs are borne by the agency.

- Anticipated effect on state revenues:

There is no impact on state revenues.

4. Comparison of the costs and benefits of the proposed rulemaking to the costs and benefits of inaction:

Without regulation and standards, emergency medical care training programs could provide substandard instruction to students, which could lead to unprepared providers and diminish the quality of care to trauma patients.

5. Determination whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rulemaking:

The rulemaking is both appropriate and required by law.

6. Alternative methods considered by the agency:

- Description of any alternative methods that were seriously considered by the agency:

None were considered.

- Reasons why alternative methods were rejected in favor of the proposed rulemaking:

The rulemaking is both appropriate and required by law.

Small Business Impact

If the rulemaking will have a substantial impact on small business, include a discussion of whether it would be feasible and practicable to do any of the following to reduce the impact of the rulemaking on small business:

- Establish less stringent compliance or reporting requirements in the rulemaking for small business.
- Establish less stringent schedules or deadlines in the rulemaking for compliance or reporting requirements for small business.
- Consolidate or simplify the rulemaking's compliance or reporting requirements for small business.
- Establish performance standards to replace design or operational standards in the rulemaking for small business.
- Exempt small business from any or all requirements of the rulemaking.

If legal and feasible, how does the rulemaking use a method discussed above to reduce the substantial impact on small business?

There is no impact on small business.

Text of Proposed Rulemaking

ITEM 1. Rescind 641—Chapter 139 and adopt the following **new** chapter in lieu thereof:

CHAPTER 139
EMERGENCY MEDICAL SERVICES—TRAINING PROGRAMS—STUDENTS—COMPLAINTS AND INVESTIGATIONS

641—139.1(147A) Definitions.

"Advanced emergency medical technician" or *"AEMT"* means the same as defined in rule 641—131.1(147A,147D,272C).

"CAPCE" means the same as defined in rule 641— 131.1(147A,147D,272C).

"CEH" means the same as defined in rule 641— 131.1(147A,147D,272C).

"Certification" or *"certificate"* means the same as defined in rule 641—131.1(147A,147D,272C).

"Certified" means the same as defined in rule 641— 131.1(147A,147D,272C).

"CoAEMSP" means Committee on Accreditation for the EMS Professions.

"Core continuing education" means the same as defined in rule 641— 131.1(147A,147D,272C).

"Course completion date" means the date of the final classroom session of an emergency medical care provider course.

"Course coordinator" means an individual who has been assigned by the training program to coordinate the activities of an emergency medical care provider course.

"Critical care paramedic" or *"CCP"* means the same as defined in rule 641—131.1(147A,147D,272C).

"Emergency medical care" means any medical procedure authorized by Iowa Code chapter 147A and 641—Chapter 131.

"Emergency medical care provider" means the same as defined in Iowa Code section 147A.1.

"Emergency medical care student" or *"student"* means any individual enrolled in an EMS training program.

"Emergency medical responder" or *"EMR"* means an individual who has successfully completed a course of study based on the U.S. Department of Transportation's National Emergency Medical Services Education Standards (December 2021), has passed the department or NREMT testing requirements for the EMR, and is currently certified by the department as an EMR.

"Emergency medical services" or *"EMS"* means the same as defined in Iowa Code section 147A.1.

"Emergency medical technician" or *"EMT"* means the same as defined in rule 641—131.1(147A,147D,272C).

"EMS evaluator" or *"EMS-E"* means an individual who has successfully completed an EMS evaluator curriculum approved by the department and is currently endorsed by the department as an EMS-E.

"EMS instructor" or *"EMS-I"* means the same as defined in rule 641— 131.1(147A,147D,272C).

"EMS training program" or *"training program"* means a program offered by an Iowa college approved by the Higher Learning Commission, an Iowa hospital, or a service program that has received authorization from the department to conduct emergency medical care training.

"Endorsement" or *"endorsed"* means the same as defined in rule 641— 131.1(147A,147D,272C).

"Higher Learning Commission" means the independent corporation which accredits degree-granting postsecondary institutions in the north central region of the United States.

"NREMT" means the same as defined in rule 641— 131.1(147A,147D,272C).

"Out-of-state student" means any individual participating in clinical or field experience as a student in an approved out-of-state training program.

"Out-of-state training program" means an EMS training program located outside the state of Iowa that is approved by the authorizing agency of the program's home state to conduct initial EMS training for EMR, EMT, AEMT, paramedic or other levels certified by the department.

"Outreach course coordinator" means an individual assigned by the training program to coordinate the activities of an emergency medical care provider course held outside the training program facilities.

"Paramedic" or *"PM"* means the same as defined in rule 641— 131.1(147A,147D,272C).

"Physician" means an individual licensed under Iowa Code chapter 148.

"Physician assistant" or *"PA"* means an individual licensed pursuant to Iowa Code chapter 148C.

"Preceptor" means an individual assigned by the training program, clinical facility or service program to supervise EMS students while the students are completing their classroom, clinical or field experience. A preceptor shall be an emergency medical care provider certified at the level at which the preceptor is providing supervision or at a higher level or be licensed as a physician, physician assistant or registered nurse.

"Primary instructor" means an individual who is responsible for teaching the majority of an emergency medical care provider course.

"Registered nurse" or *"RN"* means an individual licensed pursuant to Iowa Code chapter 152.

"Service program" or *"service"* means the same as defined in Iowa Code section 147A.1.

"Training program director" means a health care professional (full-time educator or practitioner of emergency or critical care) assigned by the training program to direct the operation of the training program.

"Training program medical director" means a physician licensed under Iowa Code chapter 148 who is responsible for providing medical oversight to an EMS training program.

641—139.2(147A) Initial application, renewal application, inspection and approval.

139.2(1) *Initial application, inspection and approval.*

a. An applicant seeking initial authorization as an EMS training program shall complete and submit to the department an Iowa EMS training program self-assessment application. The application is available from the department upon request.

b. The department will perform an on-site inspection of the applicant's facilities and clinical resources. The purpose of the inspection is to examine educational objectives, patient care practices, facilities and administrative practices.

c. A training program's initial authorization is for one year.

d. No person shall interfere with the inspection activities of the department or its agents. Interference with or failure to allow an inspection may be cause for denial of authorization.

139.2(2) *Renewal application, inspection and approval.*

a. A training program seeking renewal as an EMS training program shall complete and submit to the department the Iowa EMS training program self-assessment renewal application. The application is available from the department upon request.

b. EMS training program renewal applications will be submitted at least 90 days before the end of the current authorization period.

c. The department will complete an on-site inspection and review the self-assessment prior to the end of the current authorization period.

d. Following the on-site inspection, the department will provide the training program a renewal application report detailing the status of the application.

e. The department will authorize the training program or determine timelines for the correction of deficiencies in the renewal application.

f. If the deficiencies are not corrected within the time period established by the department, the training program is subject to disciplinary action as described in rule 641—139.8(147A).

g. A training program's approved renewal authorization will not exceed four years.

h. No person shall interfere with the inspection activities of the department or its agents. Interference with or failure to allow an inspection may be cause for denial of authorization.

641—139.3(147A) Training program standards, student requirements and waivers.

139.3(1) *Education standards.* A training program shall:

a. Have a sponsoring institution that has received authorization from the department to conduct emergency medical care services training.

b. Use the U.S. Department of Transportation's National Emergency Medical Services Education Standards (December 2021) for any courses leading to Iowa certification.

c. Use the Iowa CCP curriculum (January 2024) for courses leading to the CCP endorsement.

d. Be accredited by, or have submitted a letter of review self-study to, CoAEMSP if graduating students are at the paramedic certification level.

e. Document equivalent training and what portions of any course have been waived for equivalency. A training program may waive portions of the required emergency medical care provider training for students currently certified as emergency medical care providers or licensed in other health care professions, including but not limited to physician, nursing, physician assistant, respiratory therapist, dentistry, and military.

139.3(2) *Clinical or field experience resources.* Training programs shall:

a. Have a mechanism to clearly identify students in the clinical or field setting, or both.

b. Ensure that clinical experiences available are consistent with the needs of the curriculum and adequate for the number of students enrolled.

c. Ensure that clinical affiliations that are outside of the sponsoring training program are established and confirmed in written agreements with institutions or agencies that provide clinical experience under appropriate medical direction and clinical supervision.

d. Only allow students to perform skills and procedures in the classroom, clinical or field setting for which the students have received training with direct supervision by a preceptor designated and approved by the training program.

139.3(3) *Staff.* Training programs shall:

a. Have a training program director who is a health care professional (full-time educator or practitioner of emergency or critical care) assigned by the training program to direct the operation of the training program.

b. Have a training program medical director who shall, at a minimum, review the educational content of each training program curriculum, evaluate the quality of medical instruction, and supervise delivery of the curriculum by the faculty members.

c. Have qualified faculty through academic preparation, training, and experience to teach and evaluate the courses or topics to which they are assigned. At a minimum, each course coordinator, outreach course coordinator, and primary instructor utilized by the training program shall be endorsed as an Iowa EMS instructor.

139.3(4) *Student eligibility.* Training programs shall ensure that emergency medical care students meet the following requirements:

a. Be at least 17 years of age on the date of enrollment.

b. Have a high school diploma or its equivalent if enrolling in an AEMT or paramedic course.

c. Be able to speak, write and read English.

d. Be able to meet the minimum requirements for the department- or NREMT-approved testing requirements with reasonable and appropriate accommodations for those persons with documented disabilities, as required by the Americans with Disabilities Act (ADA) as amended to August 1, 2024.

e. Be currently certified, at a minimum, as an EMT if enrolling in an AEMT or paramedic course.

f. Be a current emergency medical care provider, RN, PA, or physician.

139.3(5) *Students.* Training programs shall:

a. Have defined processes for review of academic history, criminal history, and health-related issues for the admission of students.

b. Have a process to evaluate students on a recurring basis and with sufficient frequency to provide both the student and training program faculty with valid and timely indicators of the student's progress and achievement of the competencies and objectives stated within the program's curriculum.

c. Have student guidance procedures that include documentation of regular and timely discussions with qualified faculty or counselors.

d. Maintain student records for each student enrolled in each program.

e. Notify the NREMT of each student's successful completion of a training course to ensure NREMT cognitive examination eligibility.

f. Verify that a student completes all training program requirements before being eligible to attempt the department- or NREMT-approved testing requirements.

g. Verify that a student completes all training program coursework and completes the department- or NREMT-approved testing requirements before applying to the department for an initial Iowa emergency medical care provider certification.

h. Ensure that students only perform skills or procedures learned in the training program until an Iowa emergency medical care provider certification is obtained.

i. Ensure that a student is not substituted for the regular personnel of any affiliated medical facility or service program but may be employed while enrolled in the training program.

139.3(6) *Financing and administration.* Training programs shall:

a. Have sufficient equipment and supplies to be used in the provision of instruction. The equipment and supplies shall be available and consistent with the needs of the curriculum and adequate for the number of students enrolled.

b. Have sufficient classrooms, laboratories, and administrative offices and facility design to accommodate the number of students in the program and the supporting faculty.

c. Notify the department, in writing, of any change in ownership or control of the training program.

d. Have liability insurance or offer liability insurance to enrolled students.

641—139.4(147A) Out-of-state training programs.

139.4(1) *Application, inspection and approval.*

a. An out-of-state training program shall complete and submit to the department for review and approval the out-of-state training program self-assessment application. The application is available from the department upon request.

b. An out-of-state training program's approval by the department shall not exceed four years.

c. An out-of-state training program seeking initial or renewal approval and graduating students at the paramedic level must also be accredited by, or have submitted a letter of review self-study to, CoAEMSP.

d. An out-of-state training program shall be limited to utilization of clinical sites or field sites, or both, within Iowa.

e. An authorized out-of-state training program shall provide the department with a current roster of students who will be participating in the clinical or field experience within the state of Iowa and, for each program, the sites where the students will be participating. This roster will be provided prior to commencement of any clinical or field experience.

f. An out-of-state training program shall provide documentation of liability insurance for each student participating in the clinical or field setting within the state of Iowa.

g. Failure to comply with these requirements may lead to disciplinary action or denial of utilization of clinical or field sites in Iowa.

h. The department may perform an on-site inspection of the out-of-state training program's facilities and clinical and field resources as part of the initial or renewal review process.

i. The department, without prior notification, may make inspections at times, at places and under such circumstances as it deems necessary to ensure compliance with Iowa Code chapter 147A and these rules.

j. No person shall interfere with the inspection activities of the department or its agents. Interference with or failure to allow an inspection may be cause for disciplinary action regarding training program approval.

k. Representatives of the training program may be required to meet with the department at the time the application and inspection report are discussed.

l. A written report of department action and the department inspection report will be sent to the training program.

m. A training program shall notify the department, in writing, of any change in ownership or control within 30 days.

139.4(2) Reserved.

641—139.5(147A) Failure to comply with rules. Failure of a training program to comply with these rules may result in disciplinary action according to rule 641—139.8(147A).

641—139.6(147A) Temporary waivers. If during a period of authorization there is some occurrence that temporarily causes a training program to be in noncompliance with these rules, the department may grant a temporary waiver.

139.6(1) Waivers of these rules may be granted by the department to a currently authorized training program.

139.6(2) Requests for waivers apply only to the training program requesting the waiver and apply only to those requirements and standards for which the department is responsible.

139.6(3) A training program can apply for a waiver in accordance with 441—Chapter 6.

641—139.7(147A) Continuing education providers—approval, recordkeeping and inspection.

139.7(1) A training program may conduct continuing education courses utilizing training program instructors.

139.7(2) Each training program shall assign a sponsor number to each core continuing education course using an assignment system approved by the department.

139.7(3) Course approval shall be completed prior to the course being offered.

139.7(4) Each training program shall maintain a participant record that includes, at a minimum, each participant's:

a. Name.

b. Address.

c. Certification number.

d. Course sponsor number.

e. Course instructor.

f. Date of course.

g. CEHs awarded.

139.7(5) The department may request additional information or inspect the records of any continuing education provider who is currently approved or who is seeking approval.

641—139.8(147A) Discipline—denial, citation and warning, probation, suspension, or revocation of training program approval or renewal.

139.8(1) This rule is not subject to waiver pursuant to 441—Chapter 6 or any other provision of law.

139.8(2) Method of discipline. The department has the authority to impose the following disciplinary sanctions against a training program:

a. Issue a citation and warning.

b. Impose a period of probation under specific conditions.

c. Prohibit permanently, until further order of the department, or for a specific period, a program's ability to engage in specific procedures, methods, acts or activities incident to the practice of the profession.

d. Suspend an authorization until further order of the department or for a specific period.

e. Deny an application for authorization.

f. Revoke an authorization.

g. Impose such other sanctions as allowed by law and as may be appropriate.

139.8(3) The department may impose any of the disciplinary sanctions provided in subrule 139.8(2) when it finds that the training program or applicant has failed to meet the applicable provisions of these rules or has committed any of the following acts or offenses:

a. Fraud in procuring approval or renewal.

b. Falsification of training or continuing education records or failure to document training or continuing education.

c. Suspension or revocation of approval to provide emergency medical care training or other disciplinary action taken pursuant to Iowa Code chapter 147A. A certified copy of the record or order of suspension, revocation or disciplinary action is conclusive or prima facie evidence.

d. Engaging in any conduct that subverts or attempts to subvert a department investigation.

e. Failure to respond within 30 days of receipt of communication from the department that was sent by registered or certified mail.

f. Failure to comply with a subpoena issued by the department or failure to cooperate with an investigation of the department.

g. Failure to comply with the terms of a department order or the terms of a settlement agreement or consent order.

h. Submission of a false report of continuing education or failure to submit the quarterly report of continuing education.

i. Knowingly aiding, assisting or advising a person to unlawfully practice EMS.

j. Representing itself as an approved training program or continuing education provider when approval has been suspended or revoked or when approval has lapsed or has been placed on inactive status.

k. Using an unqualified individual as an instructor or evaluator.

l. Allowing verbal or physical abuse of a student or staff.

m. Failing to verify registration of a student with the department within the timeline established by the department or allowing an unregistered student to function in a clinical environment.

n. Sexually harassing a patient, student or coworker. Sexual harassment includes sexual advances, sexual solicitation, requests for sexual favors, and other verbal or physical conduct of a sexual nature communicated in person, in writing, via a third person or through electronic communication.

o. Betrayal of a professional confidence.

p. Engaging in a professional conflict of interest.

q. Discrimination. A training program or continuing education provider shall not practice, condone, or facilitate discrimination against a patient, student, or supervisee on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, mental or physical disability, diagnosis, or social or economic status.

r. Failure to comply with the 2015 Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions published by the Commission on Accreditation of Allied Health Education Programs.

641—139.9(147A) Complaints, investigations and appeals.

139.9(1) All complaints regarding an emergency medical care student, training programs or continuing education providers or those purporting to be or operating as the same shall be reported to the department in writing.

139.9(2) Any emergency medical care provider, emergency medical care student, training program or continuing education provider who has knowledge of an emergency medical care provider or service program that has violated Iowa Code chapter 147A, 641—Chapter 132 or these rules shall report such information to the department.

139.9(3) Complaint investigations may result in the department's issuance of a notice of denial, citation and warning, probation, suspension or revocation.

139.9(4) A determination of mental incompetence by a court of competent jurisdiction automatically suspends a certificate for the duration of the certificate unless the department orders otherwise.

139.9(5) Notice of denial, issuance of a citation and warning, probation, suspension or revocation shall be effected in accordance with the requirements of 441—Chapter 7.

These rules are intended to implement Iowa Code chapter 147A.