

**Minutes of the November 27, 2017  
Board of Emergency Medical Services Conference Call Meeting**

Dr. James Smith, Chairperson, called the meeting of the Board of Emergency Medical Services to order at 3:02 p.m. on Monday, November 27, 2017 in the Licensure Unit 1st Floor Conference Room, Nebraska State Office Building, 301 Centennial Mall South, Lincoln, Nebraska. The meeting was duly publicized by distribution of the Notice of Meeting and Agenda at least ten (10) days prior to the meeting and posting the agenda at the entrance of the Department of Health and Human Services Division of Public Health at least twenty-four (24) hours prior to the meeting.

Dr. Smith announced that this is a public meeting and the Open Meetings Law is posted.

The following Board members were present at the meeting: Mike Bailey, Randy Boldt, Karen Bowlin, Joel Cerny, Ann Fiala, Troy Hiemer, Linda Jensen, Dr. Mike Miller, Carl Rennerfeldt, and Dr. James Smith.

Dr. John Bonta, Dr. Thomas Deegan, Don Harmon, Charles LaFollette, and Scott Wiebe were absent from the meeting.

Also present were: Claire Covert-ByBee, Program Manager; Tim Wilson, Program Manager; Sue Medinger, Administrator, Jacye LaFayette-Dymacek, Health Licensing Coordinator; Lisa Anderson, Assistant Attorney General; and Teresa Hampton, Department Legal Counsel.

Dr. Miller moved, seconded by Mr. Boldt to adopt the agenda. Voting aye: Bailey, Boldt, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, and Smith. Voting nay: None. Absent: Bonta, Deegan, Harmon, LaFollette, and Wiebe. Motion carried.

After discussion, Mr. Rennerfeldt moved, seconded by Dr. Miller to approve the minutes from the September 25, 2017 meeting correcting the spelling of "opioid" on page 2. Voting aye: Bailey, Boldt, Bowlin, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, and Smith. Voting nay: None. Abstaining: Cerny. Absent: Bonta, Deegan, Harmon, LaFollette, and Wiebe. Motion carried.

After discussion, Mr. Boldt moved, seconded by Mr. Rennerfeldt to approve the proposed changes to the EMS Practice Act removing numbers 9 and 17. Voting aye: Bailey, Boldt, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, and Smith. Voting nay: None. Absent: Bonta, Deegan, Harmon, LaFollette, and Wiebe. Motion carried.

There being no further business, the meeting was adjourned at 3:57 p.m.

Respectfully submitted,

Ann Fiala, Vice-Chairperson

EMS Practice Act  
EMS Board Review  
November, 2017

1. Eliminate the term "out-of-hospital emergency care provider" and use "emergency care provider".
2. Eliminate temporary licenses for emergency care providers. 38-1217 (2)
3. Sunset Emergency Medical Technician -Intermediate (EMT-I) licenses. Add to statute
4. Add Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT), and Paramedic definitions to the statutes. To be added after 38-1204
5. Eliminate the need for services to renew. Instead, require biennial or triennial inspections. 38-1217 (10).
6. Potential creation of a new license level, Critical Care Paramedic. Add to statute
7. Integrate Recognition of EMS Personnel Licensure Interstate CompAct (REPLICA) model legislation to join the EMS Compact. Add to statute
8. Allow for Mobile Integrated Health Care Provider/Community Paramedicine. Add to statute
9. Clarify that regulations are adopted by the Department. 38-1203 (2); 38-1217; 38.-1237.
10. Eliminate reference to first responder and EMT-Paramedic throughout the Act because they are no longer a license category. LB 195, 2009
11. Eliminate funeral coaches and hearses from the definition of Ambulance. 38-1205.
12. Add that one of the three physicians on the Board shall specialize in pediatrics. 38-1215 (2) (b)
13. Eliminate Board duty to review and comment on state agency proposals and applications that seek funding for emergency medical care because this may interfere with short deadlines to apply for grants. 38-1216 (3)
14. Eliminate the requirement to establish criteria for deployment and use of automated external defibrillators because there is a statute covering these devices, 71-51, 102. 38-1217 (11)
15. Eliminate criteria in rules and regulations regarding EMS licensees working in hospitals and clinics. 38-1217 (13)
16. Eliminate 38-1219 (2) Provide for curricula which will allow out-of-hospital emergency care providers and users of automated external defibrillators as defined in section 71-51, 102 to be trained for the delivery of practices and procedures in units of limited subject matter which will encourage continued development of abilities and use of such abilities through additional authorized practices and procedures.
17. Allow students who attend an EMS educational program in another state to qualify for a student exception for licensing to complete their field experience in Nebraska and to ensure direct supervision of those students. 38-1220 (7)
18. Remove wording that licenses expire the second year after issuance because EMS professional licenses expire on a fixed date. 38-1221 (2)
19. Add wording that the Physician Medical Director for each service is responsible for the oversight of all medical decisions and practices. 38-1223