

March 2, 2018

Thomas L. Williams, M.D.
Chief Medical Officer
Director, Division of Public Health
Nebraska Department of Health and Human Services
301 Centennial Mall South
Lincoln, NE 68509

Dear Dr. Williams,

The Nebraska Emergency Medical Services Association, Children's Hospital & Medical Center, Nebraska State Volunteer Firefighters Association, Nebraska Flight Association, Medics At Home, the Board of Emergency Medicine and the Office of Emergency Health Systems intends to submit a proposal for three things: (1) the recognition of the Scope of Practice for Community Paramedicine, (2) the removal of "out-of-hospital" in reference to "out-of-hospital emergency care providers and (3) expansion of the locations where licensed EMS providers may work under an EMS provider license to include all licensed health care facilities.

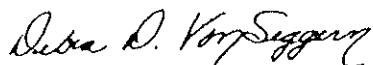
Community Paramedicine, which can be practiced by Emergency Medical Technicians, Advanced Emergency Medical Technicians, EMT-Intermediates, and Paramedics, is the provision of healthcare using patient-centered, mobile resources in the out-of-hospital environment. Community Paramedicine (CP) is one or more services provided by EMS agencies and practitioners that are administratively or clinically integrated with other healthcare entities. Community Paramedicine may include, but is not limited to, services such as increasing access to care in underserved areas, provision of telephone advice to 9-1-1 callers with approved clinical protocols and algorithms, primary care, public education, chronic disease management, prevention and wellness, post-discharge follow ups, home assessment, health teaching and consultation and wound management. Community Paramedicine is performed under medical direction and oversight. Additional and ongoing education and training with certification could be a consideration for these EMS Providers.

Statutes and regulations identify licensed EMS providers as "out-of-hospital emergency care providers". The National EMS Scope of Practice references the term "out-of-hospital" as a location where EMS providers work and not as part of the Scope of Practice. The group requests a review of current emergency medical provider practices that will show current EMS practice occurs in a variety of locations and the term "out-of-hospital" should be removed from statutes and regulations.

Finally, the applicant group asks for a review to expand the locations where licensed EMS Providers may work. The expansion will include all licensed health care facilities. Currently, Advanced Emergency Medical Technicians (AEMT), Emergency Medical Technician-Intermediates (EMT-I) and Paramedics are allowed by statute to work in hospitals and health clinics licensed in the State of Nebraska. LB 924, if passed, will allow Emergency Medical Technicians (EMT) to work in hospitals and health clinics. Expanding the location that these licensed professionals (EMT, EMT-I, AEMT and Paramedic) may work will help fill jobs and may promote more individuals to volunteer if they are able find employment and use their EMS provider license to provide for their family.

The applicant group is asking for a waiver of the \$500.00 fee associated with the filing. The applicant group is composed of The Board of Emergency Medical Services and professional associations with limited funding and the Office of Emergency Health Systems.

Sincerely,



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