

PARAMEDIC TRAINING AND EXAMINATIONS

Phone: (517) 373-8080
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Senate Bill 249 as passed by the Senate
Sponsor: Sen. Kevin Hertel
1st House Committee: Health Policy
2nd House Committee: Government Operations
Senate Committee: Health Policy
Complete to 2-29-24

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

Senate Bill 249 would amend the Public Health Code to change examination requirements for a person to be licensed as a paramedic. Currently, among other things, a candidate for licensure must pass written and practical evaluations that are approved or developed by the National Registry of Emergency Medical Technicians or another organization approved by the Department of Health and Human Services (DHHS). The bill would keep this path as a option, but would also require DHHS to develop or prescribe, by two years after the bill takes effect, a different written and practical examination to be allowed for licensure. The bill also would modify provisions concerning the accreditation of entities that provide paramedic education programs.

Under the bill, a person would have to pass either of the following (in addition to meeting other requirements) to become licensed as a paramedic in Michigan:

- The written *examination* proctored by DHHS or a designee of DHHS and a practical *examination* proctored by DHHS or a designee of DHHS.¹ An individual taking these examinations would have to pay the fee for it directly to the National Registry of Emergency Medical Technicians or another organization approved by DHHS. [These exam requirements are identical to those that now apply.]
- A written and practical examination developed or prescribed by DHHS other than the examination described above. DHHS would have to develop or prescribe this examination within two years after the bill takes effect. DHHS could charge a fee for this examination that does not exceed the fee for the examination described above.

In addition, the code requires DHHS to review and approve entities called education program sponsors that conduct training for licensed emergency medical services professions. An education program sponsor that conducts education programs for paramedics is considered to be approved by DHHS if it receives accreditation from the Joint Review Committee on Educational Programs for the EMT-Paramedic or an equivalent organization approved by DHHS, verifies the accreditation to DHHS, and maintains the accreditation.²

¹ As used here, *examination* would mean an evaluation approved or developed by the National Registry of Emergency Medical Technicians or another organization with equivalent national recognition and expertise that is approved by DHHS. Note that, to makes the changes described above concerning examinations for paramedics, the bill would remove a definition for *examination* that now applies to several professions at once and instead define that term for each profession separately. But the bill would not change current licensure examination requirements or options for any profession other than paramedics.

² The Joint Review Committee on Educational Programs for the EMT-Paramedic was renamed the Committee on Accreditation of Emergency Medical Services Professions in 2000. See <https://coaemsp.org/>

The bill would require an education program sponsor that conducts education programs for paramedics and is not accredited as described above to notify an individual seeking licensure as a paramedic that the sponsor is not accredited before offering an education program to that individual.

MCL 333.20904 et seq.

BACKGROUND:

The bill is identical to House Bill 6086 of the 2021-22 legislative session as that bill was passed by the House.

FISCAL IMPACT:

Senate Bill 249 would have an indeterminate fiscal impact on state expenditures to the Department of Health and Human Services and have no fiscal impact on local units of government. Under the provisions of the bill, the department would be obligated to develop or prescribe a new written and practical examination option for paramedics and could charge and collect a fee. Currently paramedic examination fees are paid directly to the National Registry of Emergency Medical Technicians, a non-state examination entity.

In previous fiscal years, it has been estimated that establishing an examination program would have a cost of \$2.0 million, with annual costs of \$1.6 million per year, including 15.0 FTEs to implement, support, and maintain the examination program. It is likely that a fee would be charged to take the examination, producing revenue which would help to offset the costs of the examination program. The fee must not exceed the fee charged by the National Registry of Emergency Medical Technicians, which is currently \$152. In previous fiscal years, the department has estimated that a fee similar to the current non-state exam of \$152 would produce revenue of \$152,000.

Legislative Analysts: Rick Yuille
Josh Roesner
Fiscal Analyst: Sydney Brown

■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.