

**STATE OF KANSAS
BOARD OF EMERGENCY MEDICAL SERVICES
NOTICE OF HEARING ON PROPOSED ADMINISTRATIVE REGULATIONS**

A public hearing will be conducted on Thursday, October 5, 2023 at 10:00 a.m. in Room 509 of the Landon State Office Building, 900 S.W. Jackson, Topeka, Kansas to consider the revocation of and adoption of proposed administrative regulations of the Board of Emergency Medical Services on a permanent basis. The hearing will also be held via GoToMeeting conferencing. Remote access information will be provided upon request to any person wishing to observe, participate in, or listen to the hearing. Request for access must be submitted prior to Friday, September 29, 2023 at 4:30 p.m. via email to joseph.house@ks.gov.

This 60-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed amendments to the regulations. All interested parties may submit written comments prior to the hearing to the Board of Emergency Medical Services, Landon State Office Building, 900 S.W. Jackson, Room 1031, Topeka, Kansas 66612 or by email to joseph.house@ks.gov. All interested parties will be given a reasonable opportunity to present their views orally on the adoption of the proposed revocations and amendments to the regulations during the public hearing. In order to provide all parties an opportunity to present their views, it may be necessary to request that each participant limit any oral presentations to five minutes.

Any individual with a disability may request an accommodation in order to participate in the public hearing and may request the proposed regulations and economic impact statement in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting Suzette Smith at 785-296-7296 (or TTY 1-800-766-3777). Handicapped parking is located in front of and to the north of the Landon State Office Building.

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The following group of regulations are being amended or revoked to eliminate reference of instructor-coordinator, an occupational license eliminated as a result of the successful passage of HB 2014 during the 2023 Kansas Legislative session and that went into effect on July 1, 2023. Unless noted, the proposed revisions simply remove the references to this occupational license.

K.A.R. 109-1-1, Definitions.

K.A.R. 109-5-1, Continuing education.

K.A.R. 109-6-2, Renewal of EMS provider and instructor-coordinator certificates.

K.A.R. 109-7-1, Schedule of fees.

K.A.R. 109-8-1, Examination.

K.A.R. 109-10-4, Student transfers – revisions change responsibility from instructor-coordinator to the listed primary instructor for the course.

K.A.R. 109-11-8, Successful completion of a course of instruction.

K.A.R. 109-16-1, Graduated sanctions.

The Board is proposing the revocation of the following regulations in their entirety:

K.A.R. 109-5-1e, Instructor-coordinator (I-C) continuing education.

K.A.R. 109-9-1, Instructor-coordinator certification.

K.A.R. 109-9-4, Requirements for acceptance into an instructor-coordinator initial course of instruction.

K.A.R. 109-10-1e, Approved instructor-coordinator standards.

K.A.R. 109-11-7, Instructor-coordinator course approval.

There is no anticipated economic impact to any governmental agency or unit or to the general public in the adoption of these amended regulations or from the proposed revocations.

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It is anticipated that there will be a reduction in revenue to the Emergency Medical Services Board of less than \$3,000 annually.

Copies of the complete regulations and the complete economic impact statement may be obtained from the Board of Emergency Medical Services at the contact information above or can be accessed at www.ksbems.org.

Joseph House

Executive Director

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109-1-1. Definitions. Each of the following terms, as used in the board's regulations, shall have the meaning specified in this regulation:

(a) "AEMT" means advanced emergency medical technician.

(b) "Advanced life support" and "ALS" mean the statutorily authorized activities and interventions that may be performed by an advanced emergency medical technician or paramedic.

(c) "Air ambulance" means a fixed-wing or rotor-wing aircraft that is specially designed, constructed or modified, maintained, and equipped to provide air medical transportation and emergency care of patients.

(d) "Air medical director" means a physician as defined by K.S.A. 65-6112, and amendments thereto, who meets the following requirements:

(1) Is trained and experienced in care consistent with the air ambulance service's mission statement; and

(2) is knowledgeable in altitude physiology and the complications that can arise due to air medical transport.

(e) "Air medical personnel" means the EMS providers listed on the EMS provider roster, health care personnel identified on the service health care personnel roster of the air ambulance service, specialty patient care providers specific to the mission, and the pilot or pilots necessary for the operation of the aircraft.

(f) "Airway maintenance," as used in K.S.A. 65-6121 and amendments thereto and as applied to the authorized activities of an advanced emergency medical technician, means the use of any invasive oral equipment and procedures necessary to ensure the adequacy and quality of ventilation and oxygenation.

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(g) "Attendant" means EMS provider.

(h) "Basic life support" and "BLS" mean the statutorily authorized activities and interventions that may be performed by an emergency medical responder or emergency medical technician.

(i) "CAPCE" means the commission on accreditation for pre-hospital continuing education.

(j) "Certified mechanic," as used in K.A.R. 109-2-2, means an individual employed or contracted by the ambulance service, city or county, qualified to perform maintenance on licensed ambulances and inspect these vehicles and validate, by signature, that the vehicles meet both mechanical and safety considerations for use.

(k) "Class" means the period during which a group of students meets.

(l) "Coordination" means the submission of an application for approval of initial courses of instruction or continuing education courses and the oversight responsibility of those same courses and instructors once the courses are approved.

(m) "Course of instruction" means a body of prescribed EMS studies approved by the board.

(n) "Critical care transport" means the transport by an ambulance of a critically ill or injured patient who receives care commensurate with the care rendered by health care personnel as defined in this regulation or a paramedic with specialized training as approved by service protocols and the medical director.

(o) "Emergency" means a serious medical or traumatic situation or occurrence that demands immediate action.

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(p) "Emergency call" means an immediate response by an ambulance service to a medical or trauma incident that happens unexpectedly.

(q) "Emergency care" means the services provided after the onset of a medical condition of sufficient severity that the absence of immediate medical attention could reasonably be expected to cause any of the following:

- (1) Place the patient's health in serious jeopardy;
- (2) seriously impair bodily functions; or
- (3) result in serious dysfunction of any bodily organ or part.

(r) "EMR" means emergency medical responder.

(s) "EMS" means emergency medical services.

(t) "EMS provider" means emergency medical service provider.

(u) "EMT" means emergency medical technician.

(v) "Ground ambulance" means a ground-based vehicle that is specially designed and equipped for emergency medical care and transport of sick and injured persons and meets the requirements in K.A.R. 109-2-8.

(w) "Health care personnel" and "health care provider," as used in the board's regulations, means a physician, physician assistant, licensed professional nurse, advanced practice registered nurse, or respiratory therapist.

(x) "Incompetence," as applied to EMS providers and as used in K.S.A. 65-6133 and amendments thereto, means a demonstrated lack of ability, knowledge, or fitness to perform patient care according to applicable medical protocols or as defined by the authorized activities of the EMS provider's level of certification.

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~~(y) "Incompetence," as applied to instructor coordinators and as used in K.S.A. 65-6129b and amendments thereto, means a pattern of practice or other behavior that demonstrates a manifest incapacity, inability, or failure to coordinate or to instruct EMS provider training programs.~~

~~(z) "Incompetence," as applied to an operator and as used in K.S.A. 65-6132 and amendments thereto, means either of the following:~~

~~(1) The operator's inability or failure to provide the level of service required for the type of permit held; or~~

~~(2) the failure of the operator or an agent or employee of the operator to comply with a statute or regulation pertaining to the operation of a licensed ambulance service.~~

~~(aa) "Instructor coordinator" and "I-C" mean any of the following individuals who are certified to instruct and coordinate EMS provider training programs:~~

~~(1) Emergency medical technician;~~

~~(2) physician;~~

~~(3) physician's assistant;~~

~~(4) advanced practice registered nurse;~~

~~(5) licensed professional nurse;~~

~~(6) advanced emergency medical technician; or~~

~~(7) paramedic.~~

~~(bb) (z) "Interoperable" means that one system has the ability to communicate or work with another.~~

~~(cc) (aa) "Lab assistant" means an individual who is assisting a primary instructor in the instruction and evaluation of students in classroom laboratory training sessions.~~

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~~(dd)~~ (bb) "Long-term provider approval" means that the sponsoring organization has been approved by the executive director to provide any continuing education program as prescribed in K.A.R. 109-5-3.

~~(ee)~~ (cc) "Out of service," as used in K.A.R. 109-2-5, means that a licensed ambulance is not immediately available for use for patient care or transport.

~~(ff)~~ (dd) "Primary instructor" means ~~an instructor-coordinator~~ the person who is listed by the sponsoring organization as the individual responsible for the competent delivery of cognitive, psychomotor, and affective objectives of an approved initial course of instruction or continuing education program and who is the person primarily responsible for evaluating student performance and developing student competency.

~~(gg)~~ (ee) "Prior-approved continuing education" means material submitted by a sponsoring organization, to the board, that is reviewed and subsequently approved by the executive director, in accordance with criteria established by regulations, and that is assigned a course identification number.

~~(hh)~~ (ff) "Program manager" means an individual who has been appointed, employed, or designated by a sponsoring organization, as defined in K.S.A. 65-6112 and amendments thereto, to ensure that the sponsoring organization is in conformance with applicable regulations and to ensure that quality EMS education is provided by the sponsoring organization's qualified instructors.

~~(ii)~~ (gg) "Public call" means the request for an ambulance to respond to the scene of a medical emergency or accident by an individual or agency other than any of the following:

- (1) A ground ambulance service;

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(2) the Kansas highway patrol or any law enforcement officer who is at the scene of an accident or medical emergency;

(3) a physician, as defined by K.S.A. 65-6112 and amendments thereto, who is at the scene of an accident or medical emergency; or

(4) an EMS provider who has been dispatched to provide emergency first response and who is at the scene of an accident or medical emergency.

~~(jj)~~ (hh) "Quality management plan" means a written plan developed by a sponsoring organization that describes all processes utilized by the sponsoring organization to ensure that the EMS education provided meets the requirements of the community's EMS training needs assessment or meets the training needs of the intended audience. Each quality management plan shall, at a minimum, include a review and analysis by the medical director and program manager of each completed course and the instructor evaluations.

~~(kk)~~ (ii) "Reinstatement" means the process by which a person may be issued a certificate at the same level of certification as that of an expired certificate.

~~(ll)~~ (jj) "Retroactively approved continuing education" means credit issued to an EMS provider after attending a program workshop, conference, seminar, or other offering that is reviewed and subsequently approved by the executive director, in accordance with criteria established by the board.

~~(mm)~~ (kk) "Service director" means an individual who has been appointed, employed, or designated by the operator of an ambulance service to handle daily operations and to ensure that the ambulance service is in conformance with local, state,

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and federal laws and ensure that quality patient care is provided by the ambulance service EMS providers.

~~(nn)~~ (ll) "Service records" means the documents required to be maintained by state regulations and statutes pertaining to the operation and education within a licensed ambulance service.

~~(oo)~~ (mm) "Single-program provider approval" means that the sponsoring organization has been granted approval to offer a specific continuing education program.

~~(pp)~~ (nn) "Sufficient application" means that the information requested on the application form is provided in full, any applicable fee has been paid, all information required by statute or regulation has been submitted to the board, and no additional information is required to complete the processing of the application.

~~(qq)~~ (oo) "Teach" means instruct or coordinate training, or both.

~~(rr)~~ (pp) "Unprofessional conduct," as applied to EMS providers and as used in K.S.A. 65-6133 and amendments thereto, means conduct that violates those standards of professional behavior that through professional experience have become established by the consensus of the expert opinion of the members of the EMS profession as reasonably necessary for the protection of the public. This term shall include any of the following:

- (1) Failing to take appropriate action to safeguard the patient;
- (2) performing acts beyond the activities authorized for the level at which the individual is certified;
- (3) falsifying a patient's or an ambulance service's records;

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- (4) verbally, sexually, or physically abusing a patient;
- (5) violating statutes or regulations concerning the confidentiality of medical records or patient information obtained in the course of professional work;
- (6) diverting drugs or any property belonging to a patient or an agency;
- (7) making a false or misleading statement on an application for certification renewal or any agency record;
- (8) engaging in any fraudulent or dishonest act that is related to the qualifications, functions, or duties of an EMS provider; or
- (9) failing to cooperate with the board and its agents in the investigation of complaints or possible violations of the EMS statutes or board regulations, including failing to furnish any documents or information legally requested by the board. EMS providers who fail to respond to requests for documents or requests for information within 30 days from the date of request shall have the burden of demonstrating that they have acted in a timely manner.

~~(ss) "Unprofessional conduct," as applied to instructor coordinators and as used in K.S.A. 65-6129b and amendments thereto, means any of the following:~~

- ~~(1) Engaging in behavior that demeans a student. This behavior shall include ridiculing a student in front of other students or engaging in any inhumane or discriminatory treatment of any student or group of students;~~
- ~~(2) verbally or physically abusing a student;~~
- ~~(3) failing to take appropriate action to safeguard a student;~~
- ~~(4) falsifying any document relating to a student or the sponsoring organization;~~

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~~(5) violating any statutes or regulations concerning the confidentiality of student records;~~

~~(6) obtaining or seeking to obtain any benefit, including a sexual favor, from a student through duress, coercion, fraud, or misrepresentation, or creating an environment that subjects a student to unwelcome sexual advances, which shall include physical touching or verbal expressions;~~

~~(7) an inability to instruct because of alcoholism, excessive use of drugs, controlled substances, or any physical or mental condition;~~

~~(8) reproducing or duplicating a state examination for certification without board authority;~~

~~(9) engaging in any fraudulent or dishonest act that is related to the qualifications, functions, or duties of an instructor coordinator;~~

~~(10) willfully failing to adhere to the course syllabus; or~~

~~(11) failing to cooperate with the board and its agents in the investigation of complaints or possible violations of the board's statutes or regulations, including failing to furnish any documents or information legally requested by the board. Instructor coordinators who fail to respond to requests for documents or requests for information within 30 days of the request shall have the burden of demonstrating that they have acted in a timely manner. (Authorized by K.S.A. 2020 2022 Supp. 65-6110 and K.S.A. 2020 2022 Supp. 65-6111; implementing K.S.A. 2020 2022 Supp. 65-6110, K.S.A. 2020 2022 Supp. 65-6111, K.S.A. 2020 2022 Supp. 65-6129, K.S.A. 2020 Supp. 65-6129b, K.S.A. 65-6132, and K.S.A. 2020 2022 Supp. 65-6133; effective May 1, 1985; amended May 1, 1986; amended, T-88-12, May 18, 1987; amended, T-88-24, July 15, 1987;~~

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amended May 1, 1988; amended July 17, 1989; amended March 16, 1992; amended
Jan. 31, 1994; amended Jan. 30, 1995; amended Jan. 31, 1997; amended Nov. 12,
1999; amended Jan. 27, 2012; amended March 15, 2013; amended April 29, 2016;
amended Dec. 29, 2017; amended Dec. 31, 2021; amended P-_____.)

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109-5-1. Continuing education. (a) "Continuing education" shall mean a formally organized learning experience that has education as its explicit principal intent and is oriented towards the enhancement of emergency medical service (EMS) practice, values, skills, and knowledge.

(b) Continuing education credit shall be awarded in quarter-hour increments and shall not be issued for more than one hour of credit for a 60-minute period.

(c) Acceptable continuing education programs shall include the following:

(1) Initial courses of instruction and prior-approved continuing education provided by a sponsoring organization;

(2) programs approved or accredited by the commission on accreditation for pre-hospital continuing education (CAPCE), which shall be presumptively accepted by the board unless the board determines that a particular program does not meet board requirements; and

(3) programs or courses approved by another state's EMS regulatory or accrediting body, which shall be presumptively accepted by the board unless the board determines that a particular program does not meet board requirements.

(d) Any program not addressed in subsection (c) may be submitted for approval by the EMS provider as specified in K.A.R. 109-5-5.

(e) The amount of continuing education credit obtained in one calendar day shall not exceed 12 clock-hours.

(f) Each EMS provider ~~and instructor-coordinator~~ shall keep documentation of completion of approved continuing education for at least three years and shall provide this documentation to the board upon request by the executive director.

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(g) Documentation of completion of approved continuing education shall verify the following for each continuing education course completed:

- (1) The name of the provider of the continuing education course;
- (2) the name of the individual being issued the continuing education credit;
- (3) the title of the continuing education course;
- (4) the date or dates on which the course was conducted;
- (5) the location where the course was conducted;
- (6) the amount of continuing education credit issued to the individual; and

(7) the course identification number. (Authorized by K.S.A. ~~2020~~ 2022 Supp. 65-6110 and K.S.A. ~~2020~~ 2022 Supp. 65-6111; implementing K.S.A. ~~2020~~ 2022 Supp. 65-6129; effective, T-88-122, May 18, 1987; amended, T-88-24, July 15, 1987; amended May 1, 1988; amended July 17, 1989; amended Feb. 3, 1992; amended Aug. 16, 1993; amended Dec. 19, 1994; amended Nov. 1, 1996; amended Nov. 12, 1999; amended, T-109-8-8-00, Aug. 8, 2000; amended Nov. 13, 2000; amended Aug. 30, 2002; amended Sept. 10, 2010; amended, T-109-2-7-11, Feb. 7, 2011; amended June 3, 2011; amended Jan. 4, 2016; amended Dec. 29, 2017; amended March 1, 2019; amended Dec. 31, 2021; amended P-_____.)

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109-5-1e. (Authorized by K.S.A. 2009 Supp. 65-6111, as amended by L. 2010, ch. 119, sec. 1; implementing K.S.A. 65-6129b; effective, T-109-2-7-11, Feb. 7, 2011; effective June 3, 2011; revoked P-_____.)

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109-6-2. Renewal of EMS provider and instructor-coordinator certificates

certificate. (a) Each EMS provider certificate shall expire on December 31 of the second complete calendar year following the date of issuance.

(b) An EMS provider ~~and an instructor-coordinator who is also an EMS provider~~ may renew that person's certificate for each biennial period upon submission of a sufficient application for renewal as specified in subsection (d).

(c) Each application for certification renewal shall be submitted through the online license management system.

(d) Each application for renewal shall be deemed sufficient when all of the following conditions are met:

(1) The applicant provides in full the information requested and no additional information is required by the board to complete the processing of the application.

(2) The applicant submits a renewal fee in the applicable amount specified in K.A.R. 109-7-1.

(3) The applicant has completed the requirements in K.A.R. 109-5-1, K.A.R. 109-5-1a, K.A.R. 109-5-1b, K.A.R. 109-5-1c, and K.A.R. 109-5-1d, ~~and K.A.R. 109-5-1e~~ that are applicable to the application being submitted.

(e) The date of receipt of the renewal application shall mean the electronic time stamp indicating when the renewal application is submitted in the license management system. (Authorized by K.S.A. ~~2020~~ 2022 Supp. 65-6111; implementing K.S.A. ~~2020~~ 2022 Supp. 65-6129 ~~and 65-6129b~~; effective Nov. 1, 1996; amended Oct. 31, 1997; amended Nov. 12, 1999; amended, T-109-8-8-00, Aug. 8, 2000; amended Nov. 13, 2000; amended Feb. 12, 2010; amended Dec. 29, 2017; amended Dec. 31, 2021;

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109-7-1. Schedule of fees. (a) ~~Attendant, I-C,~~ EMS provider and ambulance service application fees shall be nonrefundable.

(b) Emergency medical responder fees:

(1) Application for certification fee\$15.00

(2) certification renewal application fee if received before certificate expiration
.....20.00

(3) certification reinstatement application fee if received within 31 calendar days
after certificate expiration40.00

(4) certification reinstatement application fee if received on or after the 32nd
calendar day after certificate expiration80.00

(c) Paramedic fees:

(1) Application for certification fee65.00

(2) certification renewal application fee if received before certificate expiration
.....50.00

(3) certification reinstatement application fee if received within 31 calendar days
after certificate expiration100.00

(4) certification reinstatement application fee if received on or after the 32nd
calendar day after certificate expiration200.00

(d) EMT and AEMT fees:

(1) Application for certification fee50.00

(2) certification renewal application fee if received before certificate expiration
.....30.00

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(3) certification reinstatement application fee if received within 31 calendar days
after certificate expiration60.00

(4) certification reinstatement application fee if received on or after the 32nd
calendar day after certificate expiration120.00

(e) Inactive certificate fees:

(1) Application for inactive certificate10.00

(2) inactive certificate renewal fee25.00

(3) application fee for reinstatement of inactive certificate20.00

(f) ~~Instructor coordinator fees:~~

~~(1) Application for certification fee65.00~~

~~(2) certification renewal application fee if received before certificate expiration~~

~~.....30.00~~

~~(3) certification reinstatement application fee if received within 31 calendar days
after certificate expiration60.00~~

~~(4) certification reinstatement application fee if received on or after the 32nd
calendar day after certificate expiration120.00~~

(g) Ambulance service fees:

(1) Service permit application fee100.00

(2) service permit renewal fee if received on or before permit expiration ...100.00

(3) service permit renewal fee if received after permit expiration200.00

(4) vehicle license application fee40.00

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(5) Temporary license for an ambulance10.00

(~~h~~) (g) Each application for certification shall include payment of the prescribed application for certification fee to the board.

(~~h~~) (h) Payment of fees may be made by either of the following:

(1) An individual using a personal, certified, or cashier's check, a money order, a credit card, or a debit card; or

(2) an ambulance service, fire department, or municipality using warrants, payment vouchers, purchase orders, credit cards, or debit cards.

(~~h~~) (i) Payment submitted to the board for application for certification fee, reinstatement fee, or renewal fee for more than one ~~attendant or I-C~~ EMS provider shall not be accepted, unless the fee amount is correct. (Authorized by K.S.A. ~~2020~~ 2022 Supp. 65-6110, K.S.A. ~~2020~~ 2022 Supp. 65-6111, K.S.A. ~~2020~~ 2022 Supp. 65-6127, and K.S.A. ~~2020~~ 2022 Supp. 65-6129, ~~and K.S.A. 2020 Supp. 65-6129b~~; implementing K.S.A. ~~2020~~ 2022 Supp. 65-6111, K.S.A. ~~2020~~ 2022 Supp. 65-6127, K.S.A. 65-6128, and K.S.A. ~~2020~~ 2022 Supp. 65-6129, ~~and K.S.A. 2020 Supp. 65-6129b~~; effective July 1, 1990; amended Feb. 3, 1992; amended Nov. 1, 1996; amended, T-109-8-8-00, Aug. 8, 2000; amended Nov. 13, 2000; amended Oct. 31, 2003; amended March 9, 2012; amended April 29, 2016; amended Dec. 29, 2017; amended Dec. 31, 2021; amended P-_____.)

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109-8-1. Examination. (a) The cognitive certification examination for emergency medical responders, emergency medical technicians, advanced emergency medical technicians, and paramedics shall be the national registry of emergency medical technicians' cognitive examination.

~~(b) The cognitive certification examination for instructor coordinator shall be the final cognitive examination developed by the sponsoring organization and approved by the board.~~

~~(c) Any instructor coordinator who fails the examination may retake it a maximum of three times. An applicant who has failed the examination three times shall not submit a new application for examination until documentation of successful completion of a new initial course has been received and reviewed by the executive director.~~

(d) Each emergency medical responder or emergency medical technician applicant shall be required to successfully complete the national registry of emergency medical technicians' cognitive examination and shall be required to demonstrate competency in psychomotor skills as evaluated by the psychomotor skills examination prescribed by the board.

(e) Each advanced emergency medical technician or paramedic applicant shall successfully complete the national registry of emergency medical technicians' cognitive examination and psychomotor skills evaluation.

(f) Any emergency medical responder or emergency medical technician applicant who is tested in psychomotor skills and who fails any psychomotor skill station may retest each failed station a maximum of three times.

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(g) Each emergency medical responder, emergency medical technician, advanced emergency medical technician, and paramedic shall successfully complete both the cognitive examination and the psychomotor skills examination no later than 24 months after the last date of that individual's initial course of instruction. Each individual specified in this subsection shall be required to successfully complete both the cognitive examination and the psychomotor skills examination within a 12-month period.

(h) Any examination for certification may be modified by the board as a pilot project to evaluate proposed changes to the psychomotor skills examination.

(Authorized by K.S.A. 2022 Supp. 65-6110 and 65-6111; implementing K.S.A. 2022 Supp. 65-6111, and K.S.A. 2022 Supp. 65-6129, ~~65-6129b~~; effective, T-109-1-19-89, Jan. 19, 1989; effective July 17, 1989; amended Aug. 27, 1990; amended Feb. 3, 1992; amended Dec. 19, 1994; amended Jan. 5, 1996; amended Nov. 8, 1996; amended May 16, 1997; amended, T-109-2-7-11, Feb. 7, 2011; amended June 3, 2011; amended Jan. 4, 2016; amended Dec. 29, 2017; amended March 1, 2019; amended P-_____.)

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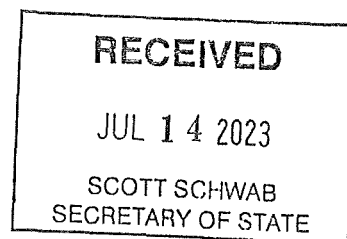
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109-9-1. (Authorized by K.S.A. 65-6110, K.S.A. 2010 Supp. 65-6111; implementing K.S.A. 65-6129b; effective, T-109-1-19-89, Jan. 19, 1989; effective July 17, 1989; amended Aug. 27, 1990; amended Feb. 3, 1992; amended Nov. 12, 1999; amended Nov. 9, 2001; amended Sept. 2, 2011; revoked P-_____.)



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109-9-4. (Authorized by K.S.A. 2016 Supp. 65-6110 and 65-6111; implementing K.S.A. 2016 Supp. 65-6110, 65-6111, and 65-6129b; effective, T-109-1-19-89, Jan. 19, 1989; effective July 17, 1989; amended Feb. 3, 1992; amended Jan. 31, 1994; amended Nov. 12, 1999; amended Nov. 9, 2001; amended Sept. 2, 2011; amended Dec. 29, 2017; revoked P-_____.)

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109-10-1e. (Authorized by and implementing K.S.A. 2014 Supp. 65-6110 and 65-6111;
effective, T-109-2-7-11, Feb. 7, 2011; effective June 3, 2011; amended May 1, 2015;
revoked P-_____.)

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109-10-4. Student transfers. (a) To transfer from one initial course of instruction to another initial course of instruction of the same certification level, the student shall provide the ~~instructor-coordinator~~ primary instructor of the course of instruction into which the student desires to transfer with:

(1) A signed and dated document which outlines reasons why the student was unable to complete the original course of instruction in which the student was enrolled; and

(2) a summary of the portion of the original course of instruction which the student successfully completed, signed by the ~~instructor-coordinator~~ primary instructor of the original course of instruction in which the student was enrolled.

(b) For a student to transfer into an initial course of instruction from another initial course of instruction the ~~instructor-coordinator~~ primary instructor shall submit to the board:

(1) Documentation from the ~~instructor-coordinator~~ primary instructor of the original course of instruction in which the student was enrolled, summarizing the portion of the original course of instruction in which the student was enrolled;

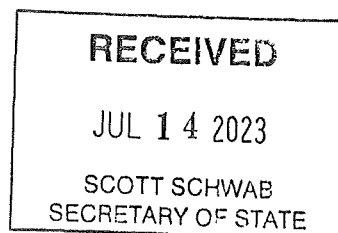
(2) a statement from the ~~instructor-coordinator~~ primary instructor of the course into which the student desires to transfer, certifying that the ~~instructor-coordinator~~ primary instructor will provide the remaining required material to the student and the student will be given a final evaluation of competencies of the required material of the total course; and

(3) a student form adding the student to the course.

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(c) A student may transfer from one course of instruction to another if the student has been enrolled in the original course of instruction within the past 1 year and the ~~instructor-coordinator~~ primary instructor agrees to accept this student and the requirements of subsections (a) and (b) of this regulation are met. (Authorized by and implementing K.S.A. 2022 Supp. 65-6110, ~~as amended by L. 1993, Ch. 71, Sec. 1;~~ effective Jan. 31, 1994; amended P-_____.)

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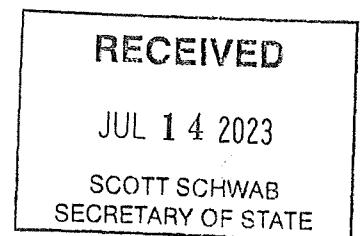
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109-11-7. (Authorized by and implementing K.S.A. 2020 Supp. 65-6110 and K.S.A. 2020 Supp. 65-6111; effective, T-109-1-19-89, Jan. 19, 1989; effective July 17, 1989; amended Dec. 31, 2021; revoked P-_____.)



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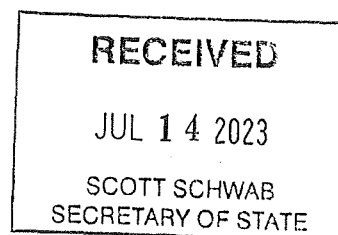
109-11-8. Successful completion of a course of instruction. (a) To successfully complete an initial course of instruction for EMS provider ~~or instructor-coordinator~~, each student shall meet the following requirements:

- (1) Demonstrate application of a cognitive understanding of each EMS educational standard;
- (2) demonstrate all practical skills to the satisfaction of the primary instructor;
- (3) for an emergency medical technician (EMT), initial course of instruction, demonstrate successful completion of each of the following:
 - (A) One complete patient assessment; and
 - (B) one nebulized breathing treatment during clinical training or field internship training;
- (4) for an advanced emergency medical technician (AEMT), initial course of instruction, demonstrate successful completion of the following:
 - (A) 20 venipunctures, of which at least 40 ten shall be for the purpose of initiating intravenous infusions;
 - (B) five intraosseous infusions;
 - (C) 15 complete patient assessments, of which at least 40 ten shall be accomplished during field internship training;
 - (D) 40 ten ambulance calls while being directly supervised by an AEMT, a paramedic, a physician, an advanced practice registered nurse, or a professional nurse;
 - (E) 40 ten intramuscular or subcutaneous injection procedures;
 - (F) 40 ten completed patient charts or patient care reports, or both; and

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(G) eight electrocardiogram applications and interpretations during clinical training and field internship training; and

(5) for a paramedic initial course of instruction, demonstrate each of the following:

(A) Successful completion of both clinical and field internship components; and

(B) confirmation of eligibility to be conferred, at a minimum, an associate degree in applied science by the postsecondary institution.

(b) The primary instructor shall provide written verification, within 15 days of the final class and at least seven days before the state examination for certification, that the primary instructor's students have met the requirements of subsection (a). (Authorized by K.S.A. ~~2020~~ 2022 Supp. 65-6110; implementing K.S.A. ~~2020~~ 2022 Supp. 65-6111, K.S.A. ~~2020~~ 2022 Supp. 65-6129; effective, T-109-1-19-89, Jan. 19, 1989; effective July 17, 1989; amended Jan. 31, 1994; amended Dec. 31, 2021; amended P-_____.)

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109-16-1. Graduated sanctions. (a) The following documents of the Kansas board of emergency medical services, dated April 10, 2013, are hereby adopted by reference:

- (1) "Graduated sanctions for attendants";
- (2) ~~"graduated sanctions for I-Cs and T.O.s";~~ and
- (3) ~~(2)~~ "graduated sanctions for operators."

(b) For purposes of applying the tables of graduated sanctions for ~~attendants, instructor coordinators, training officers,~~ EMS providers and operators, the following sanction levels shall apply:

(1) "Sanction level 1" means that the local action taken by the operator of the ambulance service, or its designee, is approved and accepted by the board's investigations committee.

(2) "Sanction level 2" means the modification of a certificate or permit by the imposition of conditions.

(3) "Sanction level 3" means the limitation of a certificate or permit.

(4) "Sanction level 4" means the suspension of a certificate or permit for less than three months.

(5) "Sanction level 5" means the suspension of a certificate or permit for three months or more.

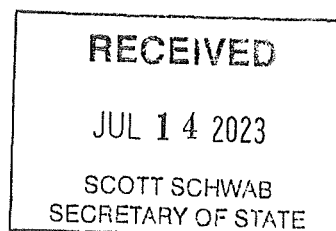
(6) "Sanction level 6" means the revocation of a certificate or permit.

(c) When the investigations committee is determining the appropriate sanction level, the following mitigating and aggravating circumstances, if applicable, shall be taken into consideration:

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- (1) The number of violations involved in the current situation;
- (2) the degree of harm inflicted or the potential harm that could have been inflicted;
- (3) any previous violations or the absence of previous violations;
- (4) the degree of cooperation with the board's investigation;
- (5) evidence that the violation was a minor or technical violation, or a serious or substantive violation;
- (6) evidence that the conduct was intentional, knowing, or purposeful or was inadvertent or accidental;
- (7) evidence that the conduct was the result of a dishonest, selfish, or criminal motive;
- (8) evidence that the ~~attendant, instructor-coordinator, training officer,~~ EMS provider or operator refused to acknowledge or was willing to acknowledge the wrongful nature of that person's conduct;
- (9) the length of experience as an ~~attendant, instructor-coordinator, training officer,~~ EMS provider or operator; and
- (10) evidence that any personal or emotional problems contributed to the conduct. (Authorized by K.S.A. ~~2012~~ 2022 Supp. 65-6110, 65-6111, and 65-6129, as amended by L. 2013, ch. 95, sec. 4; implementing K.S.A. ~~2012~~ 2022 Supp. 65-6129, as amended by L. 2013, ch. 95, sec. 4; effective Jan. 17, 2014; amended P-_____.)

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Kansas Administrative Regulations Economic Impact Statement (EIS)

Emergency Medical Services Board
Agency

Joseph House; Executive Director 785-296-7409
Agency Contact Contact Phone Number

K.A.R. 109-1-1, K.A.R. 109-5-1, K.A.R. 109-5-1e, K.A.R. 109-6-2, K.A.R. 109-7-1, K.A.R. 109-8-1,
K.A.R. 109-9-1, K.A.R. 109-9-4, K.A.R. 109-10-1e, K.A.R. 109-10-4, K.A.R. 109-11-7, K.A.R. 109-11-
8 and K.A.R. 109-16-1
K.A.R. Number(s) ☒ Permanent ☐ Temporary

Is/Are the proposed rule(s) and regulation(s) mandated by the federal government as a requirement for participating in or implementing a federally subsidized or assisted program?

- ☐ Yes If yes, continue to fill out the remaining form to be included with the regulation packet submitted in the review process to the Department of Administration and the Attorney General. Budget approval is not required; however, the Division of the Budget will require submission of a copy of the EIS at the end of the review process.
- ☒ No If no, do the total annual implementation and compliance costs for the proposed rule(s) and regulation(s), calculated from the effective date of the rule(s) and regulation(s), exceed \$1.0 million over any two-year period through June 30, 2024, or exceed \$3.0 million over any two-year period on or after July 1, 2024 (as calculated in Section III, F)?
- ☐ Yes If yes, continue to fill out the remaining form to be included with the regulation packet submitted in the review process to the Department of Administration, the Attorney General, AND the Division of the Budget. The regulation(s) and the EIS will require Budget approval.
- ☒ No If no, continue to fill out the remaining form to be included with the regulation packet submitted in the review process to the Department of Administration and the Attorney General. Budget approval is not required; however, the Division of the Budget will require submission of a copy of the EIS at the end of the review process.

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Section I

Brief description of the proposed rule(s) and regulation(s).

K.A.R. 109-1-1, K.A.R. 109-5-1, K.A.R. 109-5-1e, K.A.R. 109-6-2, K.A.R. 109-7-1, K.A.R. 109-8-1, K.A.R. 109-9-1, K.A.R. 109-9-4, K.A.R. 109-10-1e, K.A.R. 109-10-4, K.A.R. 109-11-7, K.A.R. 109-11-8 and K.A.R. 109-16-1, in whole or in part, provide the authority to implement K.S.A. 65-6129b.

The proposed changes are the result of successful passage of HB2014 that, in part, eliminates the occupational license for instructor-coordinator, a specific occupational license for emergency medical service (EMS) education, and removes its reference throughout Kansas law. The proposed revisions revoke, in their entirety, 5 regulations and eliminate reference to instructor-coordinator in the remaining 8.

Section II

Statement by the agency if the rule(s) and regulation(s) exceed the requirements of applicable federal law, and a statement if the approach chosen to address the policy issue(s) is different from that utilized by agencies of contiguous states or the federal government. *(If the approach is different or exceeds federal law, then include a statement of why the proposed Kansas rule and regulation is different.)*

This proposed revision is not mandated by the federal government. All of our contiguous states require instructors to be affiliated with a sponsoring organization and have completed a variation of the NHTSA DOT Educator Course. Half of the contiguous states issue a certification or license, half do not issue a certification or license.

Section III

Agency analysis specifically addressing the following:

- A. The extent to which the rule(s) and regulation(s) will enhance or restrict business activities and growth;

This proposed change will neither enhance nor restrict business activities and growth.

- B. The economic effect, including a detailed quantification of implementation and compliance costs, on the specific businesses, sectors, public utility ratepayers, individuals, and local governments that would be affected by the proposed rule(s) and regulation(s) and on the state economy as a whole;

Costs associated with anticipated revocation will be less than \$3000 and will be absorbed by the Kansas Board of Emergency Medical Services.

- C. Businesses that would be directly affected by the proposed rule(s) and regulation(s);

Sponsoring organizations as defined in K.S.A. 65-6112, specifically ambulance services and community colleges will experience the greatest impact from these proposed regulatory changes.

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D. Benefits of the proposed rule(s) and regulation(s) compared to the costs;

The benefits of these changes will improve the availability of subject matter experts to provide initial courses of education without the burden of having to complete an additional education training program for classroom and paperwork management. This should reduce the cost of expenses associated with instructor-coordinators not being locally available and allow for more wide-spread availability of EMS initial courses of instruction, especially in the more rural areas of our state.

E. Measures taken by the agency to minimize the cost and impact of the proposed rule(s) and regulation(s) on business and economic development within the State of Kansas, local government, and individuals;

Anticipated cost associated with these revisions is the loss of renewal fees for instructor-coordinators, approximately \$2100-\$2700 per year. This loss of revenue will be absorbed by the Kansas Board of Emergency Medical Services.

F. An estimate of the total annual implementation and compliance costs that are reasonably expected to be incurred by or passed along to businesses, local governments, or members of the public.

Note: Do not account for any actual or estimated cost savings that may be realized.

Costs to Affected Businesses – \$0

Costs to Local Governmental Units – \$0

Costs to Members of the Public – \$0

Total Annual Costs – \$0

(sum of above amounts)

Give a detailed statement of the data and methodology used in estimating the above cost estimate.

There is no cost for implementation. There are no additional measures being added, these changes remove a current occupational license.

- ☐ Yes If the total implementation and compliance costs exceed \$1.0 million over any two-year period through June 30, 2024, or exceed \$3.0 million over any two-year period on or after July 1, 2024, and prior to the submission or resubmission of the proposed rule(s) and regulation(s), did the agency hold a public hearing to find that the estimated costs
- ☐ No
- ☒ Not Applicable have been accurately determined and are necessary for achieving legislative intent? If applicable, document when the public hearing was held, those in attendance, and any pertinent information from the hearing.

If applicable, click here to enter public hearing information.

Provide an estimate to any changes in aggregate state revenues and expenditures for the implementation of the proposed rule(s) and regulation(s), for both the current fiscal year and next fiscal year.

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These changes will result in an approximate decrease of revenue to the Kansas Board of Emergency Medical Services of \$2100 to \$ 2700 per year. This will not have any fiscal impact on the agency's ability to continue to provide all current services.

Provide an estimate of any immediate or long-range economic impact of the proposed rule(s) and regulation(s) on any individual(s), small employers, and the general public. If no dollar estimate can be given for any individual(s), small employers, and the general public, give specific reasons why no estimate is possible.

No estimate is possible. There is a cost already involved in the preparation and submission of paperwork, but this proposed regulation reduces that workload.

- G. If the proposed rule(s) and regulation(s) increases or decreases revenues of cities, counties or school districts, or imposes functions or responsibilities on cities, counties or school districts that will increase expenditures or fiscal liability, describe how the state agency consulted with the League of Kansas Municipalities, Kansas Association of Counties, and/or the Kansas Association of School Boards.

The proposed revision to these regulations should neither increase nor decrease revenues of cities, counties, or school districts. The proposed revision to this regulation does not impose new functions or responsibilities upon cities, counties, or school districts.

- H. Describe how the agency consulted and solicited information from businesses, associations, local governments, state agencies, or institutions and members of the public that may be affected by the proposed rule(s) and regulation(s).

Discussions reference these changes has been ongoing for more than four years. Removing instructor-coordinator as an occupational license was discussed at numerous board and Education, Examination, Training and Certification meetings. The Instructor and Educator Development Task Forces conducted a survey of all Kansas licensed Instructor-Coordination with those responding that they felt a license was necessary; but did not agree with requiring any type of certification examination or renewal requirements. Survey results also indicated that an occupational license was not necessary to submit paperwork for courses. The topic was also discussed at many public meetings and regional meetings in each of the six EMS regions. Further discussion was had at the 2019, 2020, 2021, and 2022 annual legislative meetings with the EMS public. Based on all this input the Board determined in December 2021 that the agency should pursue the elimination of the instructor-coordinator occupational license.

Section IV

Does the Economic Impact Statement involve any environmental rule(s) and regulation(s)?

- ☐ Yes If yes, complete the remainder of Section IV.
☒ No If no, skip the remainder of Section IV.

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- A. Describe the capital and annual costs of compliance with the proposed rule(s) and regulation(s), and the persons who would bear the costs.

[Click here to enter agency response.](#)

- B. Describe the initial and annual costs of implementing and enforcing the proposed rule(s) and regulation(s), including the estimated amount of paperwork, and the state agencies, other governmental agencies, or other persons who would bear the costs.

[Click here to enter agency response.](#)

- C. Describe the costs that would likely accrue if the proposed rule(s) and regulation(s) are not adopted, as well as the persons who would bear the costs and would be affected by the failure to adopt the rule(s) and regulation(s).

[Click here to enter agency response.](#)

- D. Provide a detailed statement of the data and methodology used in estimating the costs used.

[Click here to enter agency response.](#)

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