

Landon State Office Building
900 SW Jackson Street, Room 1031
Topeka, KS 66612-1228

Dr. Joel E. Hornung, Chair
Joseph House, Executive Director



Proposed

phone: 785-296-7296
fax: 785-296-6212
www.ksbems.org

Governor Jeff Colyer, M.D.

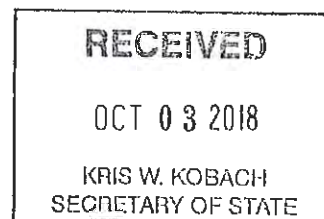
**STATE OF KANSAS
BOARD OF EMERGENCY MEDICAL SERVICES
NOTICE OF HEARING ON AMENDED ADMINISTRATIVE REGULATIONS**

A public hearing will be conducted at 10 a.m. Monday, December 17th, 2018 in Room 1031 of the Landon State Office Building, 900 S.W. Jackson, Topeka, Kansas 66612 to consider the revision of existing administrative regulations.

Publication of this notice of the public hearing shall open the period of public comment for submission of written public comments on the proposed amendments to K.A.R. 109-5-1, K.A.R. 109-8-1, K.A.R. 109-8-2 and K.A.R. 109-11-6a. All interested parties may submit written comments to the Kansas Board of Emergency Medical Services, Room 1031, Landon State Office Building, 900 S.W. Jackson, Topeka, Kansas 66612, or by email to carman.m.allen@ks.gov, prior to the scheduled meeting date. During the hearing, interested parties shall be allotted up to five minutes for oral presentations in reference to adoption of the proposed regulatory changes.

Individuals with disabilities may request accommodation to participate in the public hearing and to receive copies of the proposed regulations and economic impact statements in an accessible format. Requests for accommodation shall be received by the Board of Emergency Medical Services at least five business days prior to the hearing date by contacting Suzette Smith at 785-296-7296. Handicapped parking is located on Jackson, in front of the building, and on 9th Street, to the north of the Landon State Office Building.

These regulations are proposed for permanent revision. A summary of the proposed changes follows:



K.A.R. 109-5-1. Continuing education; requested changes are to redefine how continuing education credit shall be awarded, to add a course issued by another state's emergency medical services regulatory or accrediting body as an acceptable certificate of attendance or completion, and to add programs or courses approved by another state's emergency medical service regulatory or accrediting body as presumptively approved.

These changes will result in some Kansas certificate holders not having to complete a retroactive approval process to obtain credit for training completed in other states. There are no anticipated costs to the agency, nor any affect to businesses.

K.A.R. 109-8-1. Examination; is revised to change from a vendor contracted skills exam to a psychomotor skills exam approved by the board.

There are no anticipated costs to the agency, nor any affect to businesses.

K.A.R. 109-8-2. Scheduling examinations for certification; is revised to change from a vendor contracted skills exam to a psychomotor skills exam approved by the board and clean up the reexamination process for candidates unsuccessful on their initial attempt.

There is no anticipated costs to the agency, nor any affect to businesses.

K.A.R. 109-11-6a. Paramedic course approval; is revised to remove an incorrect reference to K.S.A. 65-6119, all remaining changes either incorporate language that mimic requirements of the committee on accreditation of educational programs for emergency medical services professions or remove requirements that are redundant due to the monitoring of the accrediting body.

There are no anticipated costs to the agency. It is anticipated that the seven educational institutions within the State and any educational institutions seeking emergency medical services program accreditation may realize savings associated with these changes due to current redundant requirements which require vastly different reporting.

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

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109-5-1. Continuing education. (a) ~~One clock hour of~~ Continuing education credit shall ~~mean at least 50 minutes of~~ be awarded in quarter-hour increments for instruction for which an individual meets the requirements in subsection (b) and shall not be issued for more than one hour of credit for a 60-minute period.

(b) Each individual seeking continuing education credit for a course shall submit either of the following:

- (1) The individual's certificate of attendance; or
- (2) the individual's certificate of completion.

(c) Each acceptable certificate of attendance or certificate of completion shall include the following:

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

for attending the course;

(7) the course identification number issued by the board, ~~or by CAPCE,~~ or by another state's emergency medical services regulatory or accrediting body; and

(8) the name of the person or entity authorized by the provider to issue the certificate.

(d)(1) Acceptable continuing education programs shall include the following:

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~~(A) Programs presented by a sponsoring organization that has single program provider approval or long-term provider approval, as defined in K.A.R. 109-1-1;~~

~~(B) Initial courses of instruction and continuing education provided by a sponsoring organization and approved by the board; and~~

~~(C)(B) programs approved or accredited by CAPCE, which shall be presumptively accepted by the board unless the board determines that a particular program does not meet board requirements; and~~

(C) programs or courses approved by another state's emergency medical services 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.

(2) Any program not addressed in this subsection may be submitted for approval by the attendant as specified in K.A.R. 109-5-5.

(e) The number of clock-hours received for continuing education credit during one calendar day shall not exceed 12.

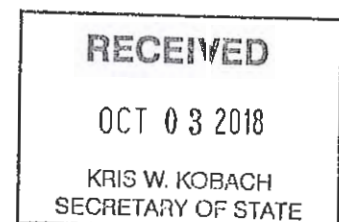
(f) Each attendant and sponsoring organization shall keep documentation of completion of approved continuing education for at least three years and shall provide this documentation to the board upon request by the executive director. (Authorized by K.S.A. 2016-Supp. 65-6110 and 65-6111; implementing K.S.A. 2016-Supp. 65-6129 and 65-6129b; effective, T-88-122, May 18, 1987; amended, T-88-24, July 15, 1987;

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K.A.R. 109-5-1

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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 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 ~~vender contracted~~ psychomotor skills examination prescribed by the board, ~~using criteria approved 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. ~~2016-Supp.~~ 65-6110 and 65-6111; implementing K.S.A. 2016 Supp. 65-6111, 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 P-_____.)

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109-8-2. Scheduling examinations for certification. (a) Each provider of initial courses of instruction for attendants shall ensure the provision of certification examinations for those students successfully completing the course.

(b) This subsection shall apply to the cognitive knowledge examination.

(1) For emergency medical responder, emergency medical technician, advanced emergency medical technician, and paramedic, the following requirements shall apply:

(A) Each candidate shall register with the national registry of emergency medical technicians.

(B) Each candidate shall schedule examinations with the computer-adaptive testing vendor specified by the national registry of emergency medical technicians.

(2) Each sponsoring organization shall validate each candidate's successful course completion.

(c) The following scheduling requirements shall apply to the psychomotor skills examination:

(1) Each sponsoring organization ~~or candidate~~ shall schedule the examination for emergency medical responder and emergency medical technician with the ~~state-~~ ~~contracted vendor~~ the board at least ~~30~~ 60 days in advance of the desired examination date.

(2) Each sponsoring organization ~~or candidate~~ shall schedule the examination for advanced emergency medical technician and paramedic with the national registry of emergency medical technicians by performing the following:

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(A) Negotiating a contractual agreement with a national registry representative to serve as facilitator;

(B) completing the examination host approval process and submitting the request for new examination with the national registry of emergency medical technicians;

(C) negotiating contractual agreements with examiners, as prescribed by the national registry representative, who have attained board approval following a review to ensure current certification, have no disciplinary actions taken or pending against their Kansas emergency medical services certification or certifications, and have held the current certification level for at least two years;

(D) negotiating contractual agreements with currently certified attendant assistants in numbers prescribed by the national registry representative;

(E) ensuring availability of a sufficient number of rooms to be used for examination stations, national registry representative room, candidate waiting area, and other facilities as prescribed by the national registry representative; and

(F) providing sufficient quantities of equipment and supplies as prescribed by the national registry representative.

(d) Each candidate not successfully completing the examination process examinations during the initial examination attempts shall schedule reexamination as follows:

(1) Cognitive knowledge examination reexaminations. For emergency medical

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responder, emergency medical technician, advanced emergency medical technician, and paramedic, the candidate shall schedule the examination with the national registry of emergency medical technicians.

(2) Psychomotor skills examination reexaminations.

(A) For emergency medical responder and emergency medical technician, the candidate shall schedule the examination ~~with the state contracted vendor~~ by completing the board-approved application for the examination according to guidelines available at the board's web-site.

(B) For the psychomotor skills examination for advanced emergency medical technician or paramedic, the candidate shall schedule the examination with the national registry of emergency medical technicians. (Authorized by and implementing K.S.A. 2016 Supp. 65-6111; effective March 2, 2012; amended Dec. 29, 2017; amended P-
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109-11-6a. Paramedic course approval. (a) Paramedic initial courses of instruction pursuant to K.S.A. 65-6119, and amendments thereto, may be approved by the executive director and shall be conducted only by sponsoring organizations that are accredited postsecondary educational institutions..

(b) Each sponsoring organization requesting approval to conduct paramedic initial courses of instruction shall meet the following requirements:

(1) Meet the requirements in K.A.R. 109-11-1a ~~(b)-(e)~~ (b)-(h);

(2) (A) provide letters from the director of each ambulance service that will provide field training to the students and the administrator or the administrator's designee of each hospital in which the clinical training is provided, indicating their commitment to provide the support as defined in the curriculum Ensure, and establish in writing, how each student is provided with hospital clinical and field internship experiences; and

(B) provide evidence of agreement to participate in the paramedic education process as follows:

(i) Ambulance service provision of field training for students during the field internship component of the paramedic educational process; and

(ii) health facility provision of clinical training for students during the clinical component of the paramedic educational process;

(3) require that, on or before completion of the required paramedic course, each student provide confirmation of eligibility to be conferred, at a minimum, an associate degree in applied science by the postsecondary institution; and

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(4)(A) Provide verification evidence that the sponsoring organization has ~~applied~~
~~for accreditation to the~~ completed the letter-of-review process with the committee on
accreditation of allied health education programs' joint review committee educational
programs for emergency medical technician-paramedic services professions; or

(B) provide evidence of accreditation from the committee on accreditation of
allied health education programs' joint review committee ~~for emergency medical~~
~~technician-paramedic programs~~ before the commencement of the third course.

(c) ~~Each application shall be received in the board office not later than 30~~
~~calendar days before the first scheduled class. Only a complete application packet shall~~
~~be processed.~~

~~(d)~~ Each approved paramedic course shall meet the following requirements:

(1) Meet or exceed the curriculum requirements in K.A.R. 109-10-1d; and

(2) consist of at least 1,200 hours of training, including at least the following:

~~(A) 400 hours of didactic and psychomotor skills laboratory instruction by~~
qualified instructors;

~~(B) 232 hours of clinical training at a hospital by qualified instructors; and~~

~~(C) 400 hours of field internship training with an ambulance service operating~~
~~with a valid permit and under the direct supervision of a paramedic; and~~ require
completion of both clinical and field internship components that provide the students
with experiences for integration of assessment findings to formulate a field impression

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and implement a comprehensive treatment or disposition plan for real patients presenting with any medical or traumatic ailment.

~~(3) ensure, and establish in writing, how each student is provided with experiences, which shall include at least the following:~~

~~(A) The performance of 20 successful venipunctures, of which at least 10 shall be for the purpose of initiating intravenous infusions;~~

~~(B) successful performance of three endotracheal intubations on live patients, with written verification by a physician or licensed registered nurse anesthetist competent in the procedure that the student is competent in performing the procedure;~~

~~(C) successful performance of five intraosseous infusions;~~

~~(D) administration of one nebulized breathing treatment during clinical training;~~

~~(E) performance of a complete patient assessment on 50 patients, of which at least 25 shall be accomplished during field internship training;~~

~~(F) participation in, as an observer or as an assistant, three vaginal-delivered childbirths during clinical training;~~

~~(G) in increasing positions of responsibility, being a part of a service crew responding to 30 ambulance calls for an ambulance service operating with a valid permit;~~

~~(H) performance of 10 intramuscular or subcutaneous injections;~~

~~(I) completion of 30 patient charts or patient care reports, or both; and~~

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~~(J) performance of monitoring and interpreting the electrocardiogram on 30 patients during clinical training and field internship training.~~

~~(e) The primary instructor shall provide the executive director with an application for certification form from each student within 20 days after the first class session.~~

~~(f) Any approved class may be monitored by the executive director.~~

~~(g) Each sponsoring organization shall ensure that the instructor coordinator provides any course documentation requested by the executive director.~~

~~(h) (d) Course approval may be withdrawn by the board if the sponsoring organization fails to comply with or violates any regulation or statute that governs sponsoring organizations. (Authorized by K.S.A. 2014-Supp. 65-6110 and 65-6111; implementing K.S.A. 2014-Supp. 65-6110, 65-6111, and 65-6119 and K.S.A. 65-6129a; effective, T-109-2-7-11, Feb. 7, 2011; effective June 3, 2011; amended May 1, 2015; amended P-_____.)~~

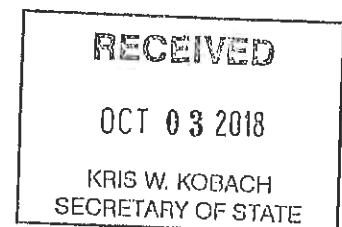
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Proposed

**Kansas Administrative Regulations
Economic Impact Statement
For the Kansas Division of the Budget**

Emergency Medical Services Board
Agency

Joseph House; Executive Director
Agency Contact

785-296-7409
Contact Phone Number

K.A.R. 109-5-1
K.A.R. Number(s)

Submit a hard copy of the proposed rule(s) and regulation(s) and any external documents that the proposed rule(s) and regulation(s) would adopt, along with the following to:

Division of the Budget
900 SW Jackson, Room 504-N
Topeka, KS 66612

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

K.A.R. 109-5-1 is a permanent regulation that provides the details for EMS continuing education. A proposed revision to this regulation clarify the Board's intent of continuing education being offered hour-for-hour with an exception that 50 minutes of course instruction may be awarded a full hour of continuing education. Other proposed revisions reflect the Board's intent of allowing EMS continuing education approved by another state's EMS regulatory or accrediting body to be presumptively accepted by the Board as meeting the requirements for Kansas EMS continuing education.

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

The proposed revisions to these regulations are not mandated by the federal government. The policy issue of defining how continuing education is awarded is similar in all four (4) contiguous states. All four contiguous states allow for continuing education that is approved by other states to be considered as approved continuing education within their jurisdiction. This revision more closely aligns Kansas with all of its contiguous states.

III. Agency analysis specifically addressing 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 and regulation and on the state economy as a whole;

There is no cost associated with the submission of continuing education to the state of Kansas for approval. We anticipate that this may save some Kansas certificate holders from having to complete additional paperwork to have continuing education approved additionally in Kansas.

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C. Businesses that would be directly affected by the proposed rule and regulation;

There are no businesses that would be directly affected by the revisions within the proposed regulations.

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

There is no anticipated cost to the revisions within the proposed regulations. The benefit to these revisions is clarification of the Board's intent and reducing the time involved with routinely submitting paperwork for courses approved by another state's EMS authority.

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;

There is no anticipated cost to the revisions within the proposed regulations. There were no measures necessary to minimize the cost and impact on business and economic development. These revisions should reduce the time involved with having to submit for retroactive approval of some continuing education programs.

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

\$0

An estimate, expressed as a total dollar figure, of the total implementation and compliance costs that are reasonably expected to be incurred by or passed along to business, local governments, or members of the public.

\$0

Do the above total implementation and compliance costs exceed \$3.0 million over any two-year period?

YES ☐ NO ☒

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

The proposed revisions are editorial in nature and do not change the underlying policy/procedure. There is no current cost borne by the individual for submitting continuing education for approval. There is no cost for the implementation of or compliance with these proposed revisions.

Prior to the submission or resubmission of the proposed rule(s) and regulation(s), did the agency hold a public hearing if the total implementation and compliance costs exceed \$3.0 million over any two-year period to find that the estimated costs have been accurately determined and are necessary for achieving legislative intent? If applicable,

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document when the public hearing was held, those in attendance, and any pertinent information from the hearing.

YES ☐ NO ☒

- 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 revisions to these regulations neither increases nor decreases revenues of cities, counties, or school districts. The proposed revisions to these regulations 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).

These proposed regulatory changes have been a topic upon Board and Committee meeting agendas since December 2017. No public comment has been provided or received during any of these public meetings regarding the specific language within these proposed regulations. We did receive a comment from Kansas City Fire Department (KCFD) in Kansas City, Missouri that this would save a significant amount of their staff time and personnel time in maintaining multiple state licenses. These proposed revisions do not change the underlying policy, they are an editorial change to clarify the definition of how continuing education should be awarded and grants a presumptive approval for continuing education that has already met another state's similar requirements.

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

These regulations do not have an environmental impact.

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**Kansas Administrative Regulations
Economic Impact Statement
For the Kansas Division of the Budget**

Emergency Medical Services Board
Agency

Joseph House, Executive Director
Agency Contact

785-296-7409
Contact Phone Number

K.A.R. 109-8-1 & 109-8-2
K.A.R. Number(s)

Submit a hard copy of the proposed rule(s) and regulation(s) and any external documents that the proposed rule(s) and regulation(s) would adopt, along with the following to:

Division of the Budget
900 SW Jackson, Room 504-N
Topeka, KS 66612

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

K.A.R. 109-8-1 identifies examinations required for certification as an EMS provider. K.A.R. 109-8-2 provides the process for the scheduling of these certification examinations. Both are existing permanent regulations and revisions proposed are to eliminate references to a vendor. The proposed language references the skills examination at the EMR and EMT level as prescribed by the Board and references an application for examination for both the initial examination attempt and any reexamination attempt.

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

The proposed revisions to these regulations are not mandated by the federal government. The policy issue of identifying certification examination(s) and the process of needing to schedule those examinations is nearly identical in all four (4) of our contiguous states. Each requires both cognitive and psychomotor examinations for certification. The details within the scheduling process differ slightly, but all involve the process of scheduling.

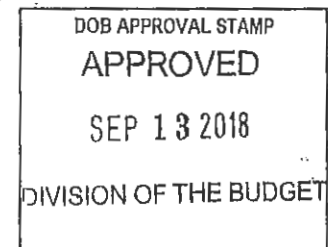
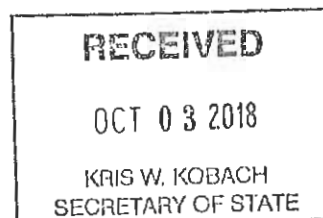
III. Agency analysis specifically addressing following:

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 and regulation and on the state economy as a whole;

It is not anticipated that these revisions would have any economic effect.



C. Businesses that would be directly affected by the proposed rule and regulation;

There are no businesses that would be directly affected by the revisions within the proposed regulations.

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

There is no anticipated cost to the revisions within the proposed regulations. The benefit to these revisions is correctly referencing the process rather than referencing a vendor and contract that no longer exists.

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;

There is no anticipated cost to the revisions within the proposed regulations. There were no measures necessary to minimize the cost and impact on business and economic development.

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

\$0

An estimate, expressed as a total dollar figure, of the total implementation and compliance costs that are reasonably expected to be incurred by or passed along to business, local governments, or members of the public.

\$0

Do the above total implementation and compliance costs exceed \$3.0 million over any two-year period?

YES ☐ NO ☒

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

The proposed revisions are editorial in nature and do not change the underlying policy/procedure.

Prior to the submission or resubmission of the proposed rule(s) and regulation(s), did the agency hold a public hearing if the total implementation and compliance costs exceed \$3.0 million over any two-year period to find that the estimated costs 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.

YES ☐ NO ☒

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

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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 revisions to these regulations neither increases nor decreases revenues of cities, counties, or school districts. The proposed revisions to these regulations 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).

These proposed regulatory changes have been a topic upon Board and Committee meeting agendas since December 2017. No public comment has been provided or received during any of these public meetings regarding the specific language within these proposed regulations. These proposed revisions do not change the underlying policy, they are an editorial change to appropriately reference the process involved with EMS certification examinations.

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

These regulations do not have an environmental impact.

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Proposed

**Kansas Administrative Regulations
Economic Impact Statement
For the Kansas Division of the Budget**

Emergency Medical Services Board
Agency

Joseph House, Executive Director
Agency Contact

785-296-7409
Contact Phone Number

K.A.R. 109-11-6a
K.A.R. Number(s)

Submit a hard copy of the proposed rule(s) and regulation(s) and any external documents that the proposed rule(s) and regulation(s) would adopt, along with the following to:

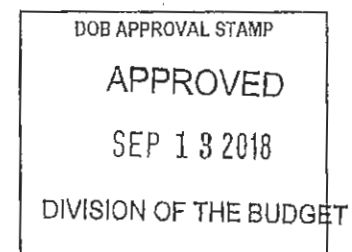
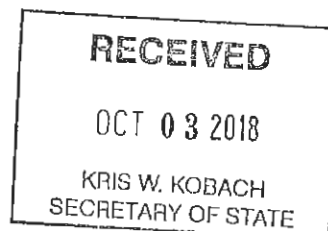
Division of the Budget
900 SW Jackson, Room 504-N
Topeka, KS 66612

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

K.A.R. 109-11-6a is a permanent regulation that provides the requirements for Paramedic course approval. The proposed revisions to this regulation are reflective that the process and requirements of accreditation better provide for a more consistent and standardized approach to reaching and maintaining a mastery level of skills and performance. The proposed changes allow for the accredited sponsoring organization to better address the needs of their students while maintaining a quality program that meets the state-defined curriculum requirements and educational objectives.

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

The proposed revisions to these regulations are not mandated by the federal government. The policy issue of identifying a course approval process is similar in all four (4) contiguous states. All four contiguous states currently require their paramedic programs to either hold accreditation from the committee on accreditation of allied health education programs or hold a letter of review from the committee on accreditation of educational programs for emergency medical services professions. Our contiguous states still require a defined number of hours within a course and a defined minimum number of performed procedures. We believe that requiring demonstration of mastery of the skill without a defined minimum is the better measure of whether a person is able to perform that skill. The same skills are being assessed, accreditation just places the end point at mastery instead of a defined number. We believe that students learn at different paces and that this approach by Kansas allows our sponsoring organizations offering a paramedic programs to better adjust their course dependent to the student's pace of gaining cognitive and psychomotor knowledge to the defined standard. The Kansas approach better aligns to regulating to the intended outcome rather than dictating a singular approach that may or may not reach that intended outcome.



III. Agency analysis specifically addressing 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. All of the state's paramedic programs are required to either be accredited or be working towards the process of being accredited.

- 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 and regulation and on the state economy as a whole;**

There are no anticipated implementation and/or compliance costs due to the revisions within the proposed regulations. These revisions allow for the seven educational institutions to determine the most cost efficient method for their program to reach the state's defined intended outcome of the course.

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

There are seven educational institutions that may be directly affected by the revisions within the proposed regulations: Johnson County Community College; Kansas City Kansas Community College; Coffeyville Community College; Cowley College; Hutchinson Community College; Barton County Community College; and Garden City Community College.

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

There is no anticipated cost to the revisions within the proposed regulations. All seven educational institutions currently hold and maintain accreditation from the committee on accreditation of allied health education programs. The proposed regulation allows for these seven institutions the flexibility of addressing their students' needs in the manner they determine is most cost efficient to reach the state's defined intended outcome of the course.

- 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;**

There is no anticipated cost to the revisions within the proposed regulations. There were no measures necessary to minimize the cost and impact on business and economic development. The proposed changes within this regulation allow for the entity to find the most cost efficient manner that works within their organization to reach the state's defined intended outcome of the paramedic course.

- F. An estimate, expressed as a total dollar figure, of the total annual implementation and compliance costs that are reasonably expected to be incurred by or passed along to business, local governments, or members of the public.**

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An estimate, expressed as a total dollar figure, of the total implementation and compliance costs that are reasonably expected to be incurred by or passed along to business, local governments, or members of the public.

\$0

Do the above total implementation and compliance costs exceed \$3.0 million over any two-year period?

YES ☐ NO ☒

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

The proposed revisions are primarily editorial in nature and do not change the underlying policy/procedure. There is no cost for the implementation of or compliance with these proposed revisions as accreditation or a letter of review is already required in order to offer a paramedic course in Kansas.

Prior to the submission or resubmission of the proposed rule(s) and regulation(s), did the agency hold a public hearing if the total implementation and compliance costs exceed \$3.0 million over any two-year period to find that the estimated costs 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.

YES ☐ NO ☒

- 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 revisions to these regulations neither increases nor decreases revenues of cities, counties, or school districts. The proposed revisions to these regulations 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).

These proposed regulatory changes have been a topic upon Board and Committee meeting agendas since December 2017. No public comment has been provided or received during any of these public meetings regarding the specific language within these proposed regulations. We did send out communication to each of the seven educational institutions currently accredited in Kansas and requested a response on economic impact as well as general comments upon the proposed changes to the regulation.

Two of the seven educational institutions responded to this request. A listing of their responses is attached to this statement. These proposed revisions do not change the underlying policy.

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- I. For environmental rule(s) and regulation(s) 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).

These regulations do not have an environmental impact.

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