



Interstate Commission for EMS Personnel Practice
5010 E. Trindle Road, Suite 202
Mechanicsburg, PA 17050
Phone (833) 473-7542
dmanz@emscompact.gov
www.emscompact.gov

To: All interested parties
From: Joe Schmider, Chair
Interstate Commission for EMS Personnel Practice
Date: March 14, 2019
RE: EMS Compact declared operational

On Tuesday, March 10, 2020, the Interstate Commission for EMS Personnel Practice declared the EMS Compact operational by majority vote.

Although the Compact came into existence on Oct. 7, 2017, with the signing of the 10th state, the operational components of the compact had not yet been rolled out because the commission was focused on passing rules in 2019 and the National Registry of EMTs has been dedicated to developing the national coordinated database that will serve as a central location for personnel information.

However, the Commission in conjunction with legal counsel, determined that a functioning national coordinated database was NOT a pre-requisite to operationalizing the compact, and that the mandatory reporting components of the compact could be handled via a manual process until the database becomes operational later in the year 2020.

The Commission felt strongly about operationalizing the compact prior to the database going live due to expressed, specific and current needs for EMS personnel in cross-border responses.

Currently there are 18 member states in the compact, and as outlined in its statute and rules, it facilitates movement of EMS personnel across state boundaries in the performance of their EMS duties as assigned by an appropriate authority, and authorizes state EMS officials to afford immediate legal recognition to EMS personnel licensed in any of the member states.

In short, member states need to be ready to:

1. Verify individual(s) operating in your state under the privilege to practice are performing EMS duties that are assigned by an EMS agency that is authorized in the remote state (Section 4, Privilege to Practice, (b))
2. Verify the EMS Personnel are licensed in good standing in a member state (Section 4, Privilege to Practice, (c) (d) and (e))
3. Verify medical direction and scope of practice from the home state, and determine if any modifications of scope are necessary (Section 4.4 Scope of Practice)
4. Meet the obligations of adverse action reporting by conveying the appropriate information to the Commission no later than two business days after the imposition of the adverse action (Section 8.1, Reporting of Adverse Actions)

To aid in the manual reporting process, the Commission has developed a simplified standard reporting form for states to use until the database goes live later this calendar year. The form is electronically available at www.emscompact.gov in the documents area, and is attached to this memo. Guidance for using the form is below, and on the website listed above.

The form is intended to be self-explanatory and can originate with either a *home state* or a *remote state*.

- **If a home state becomes aware of personnel being deployed to a remote state-** In this case the home state fills out the names, license levels, unrestricted license status, expiration dates and medical direction verification prior to sending the form to the remote state(s) where the personnel anticipate being deployed.
- **If a remote state becomes aware of personnel who will be entering their state from another EMS compact member state-** In this case the remote state begins the form with only the names of the personnel being deployed. The remote state then sends the form back to the home state where the personnel are coming from. The home state fills out the remaining information on license levels, unrestricted license status, expiration dates and medical direction. Once complete, the home state returns the completed form to the remote state that requested the verification.

Additional responsibilities and understandings-

- For this manual system to work effectively, it is the responsibility of both home and remote states to inform their personnel about how the manual system will work. The key for all states is awareness of which personnel are being deployed and where they are going. Some estimate of how long they may be deployed is probably also helpful.
- Personnel will operate on their home state scope of practice until and unless the remote state provides the personnel with additional information about scope of practice modifications in the remote state. We caution making modifications to the home state scope of practice to avoid confusion and possible training needs.
- When a home state verifies a person holds an unrestricted license, this means the person is fully able to practice in their home state. If this status changes, it is the responsibility of the home state to update any remote state where the person's license status was originally reported to be unrestricted.
- If a remote state finds a reason to revoke a person's privilege to practice, the remote state must report this to the home state within 48 hrs of making the determination. The home state should then not report the person's license status as unrestricted to other remote states.
- If a person's EMS license expires in or is renewed during the time a person is deployed to a remote state, the remote state should request an updated verification form from the home state.

All references to rule are from the Rules for the Interstate Commission for Emergency Medical Services (EMS) Personnel Practice, effective September 1, 2019, and found at <https://www.emscompact.gov/the-commission/documents/>.

As member states proceed leveraging the benefits of immediate legal recognition of EMS personnel, please contact any commissioner or the members of the Executive Committee with questions.