

Agency Purpose

MS. sections 144E.001-144E.52 designate the Emergency Medical Services Regulatory Board (EMSRB) as the lead agency for emergency medical services (EMS) in the state. Its mission is to *provide leadership which optimizes the quality of emergency medical care for the people of Minnesota – in collaboration with its communities – through policy development, regulation, system design, education, and medical direction.*

The EMSRB was created in 1995 legislation and began operations on 7-1-96. It was one of the first such independent EMS agencies in the nation and has served as a model for other states. Before its existence, EMS functions in Minnesota had been carried out in the Department of Health's EMS Section, dating to the 1960s when EMS was emerging here and nationally as a distinct public health component. The agency is governed by a 19-member board. Fifteen of those members are appointed by the governor from a variety of disciplines and areas comprising the EMS system. Additional members are a senator and a representative (both ex-officio) and the commissioners of Health and Public Safety.

The EMSRB also serves as the administering agency for the Health Professionals Services Program (HPSP). M.S. 214.31 to 214.37 charge HPSP with the responsibility to *protect the public from persons regulated by the [15 health-licensing] boards [and the EMSRB and Department of Health] who are unable to practice with reasonable skill and safety by reason of illness, use of alcohol, drugs, chemicals or any other material, or as a result of any mental, physical or psychological condition.*

Core Functions

- ⇒ Licenses and regulates approximately 300 ambulance services.
- ⇒ Certifies more than 28,000 EMS personnel after they have completed the required training and testing.
- ⇒ Approves approximately 130 training programs that conduct training courses for EMS personnel.
- ⇒ Designates and funds eight organizations that provide EMS support on a regional level throughout the state.
- ⇒ Registers approximately 500 first responder units, on a voluntary basis, statewide.
- ⇒ Monitors (through HPSP) nearly 500 health professionals to enhance public safety in health care.

Operations

- ⇒ Receives, investigates, and resolves complaints from the public and EMS professionals about ambulance services, training programs, and EMS personnel, taking action as necessary to protect the public from unsafe EMS practice.
- ⇒ Administers funding for Comprehensive Advanced Life Support (CALs) courses that teach advanced emergency care skills to rural doctors, nurses, and emergency room personnel.
- ⇒ Administers federal funding for the Minnesota EMS for Children (EMSC) Resource Center which provides information and training on pediatric emergency care and child safety.
- ⇒ Administers reimbursements to volunteer ambulance services for expenses associated with initial training and continuing education for approximately 1,400 volunteer EMS personnel.
- ⇒ Administers a Longevity Award Program that provides one-time cash awards to qualifying volunteer EMS personnel upon retirement.
- ⇒ Performs (through HPSP) intake and assessment services to determine if monitoring health professionals is indicated.
- ⇒ Creates (through HPSP) contracts for health professionals and monitors their compliance with the contracts (e.g., review drug screens, treatment provider, and work site reports).
- ⇒ Administers MNSTAR (Minnesota State Ambulance Reporting) a web-based, statewide system for collecting data from licensed ambulance services on approximately 450,000 ambulance runs annually. Implemented in April 2003, MNSTAR provides objective reports for improving EMS delivery (care/efficiency) in Minnesota.

At A Glance

- ◆ The EMS system in Minnesota is heavily dependent on volunteer ambulance services and on a diminishing pool of volunteers, particularly in rural areas.
- ◆ Low ambulance license fees and no fees for personnel certification (indicated by the voluntary makeup of EMS) prevent the agency from becoming fee-supported.

Budget

The EMSRB portion of the agency's budget comes from a variety of sources: General Fund appropriations, dedicated funds, federal grants and fines for seat-belt violations. Operation of the EMSRB accounts for 33.7% of its budget expenditures (16 full-time equivalent employees), with the remainder going to grants and other dedicated uses. The HPSP portion of the budget is generated by the participating boards. Each board pays an annual participation fee of \$1,000 and a pro rata share of program expenses based on the number of licenses they have in the program. HPSP has 7.0 full-time equivalent employees.

Contact

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<i>Dollars in Thousands</i>					
	Current		Forecast Base		Biennium 2006-07
	FY2004	FY2005	FY2006	FY2007	
<u>Direct Appropriations by Fund</u>					
General					
Current Appropriation	2,481	2,481	2,481	2,481	4,962
Forecast Base	2,481	2,481	2,481	2,481	4,962
Change		0	0	0	0
% Biennial Change from 2004-05					0%
State Government Spec Revenue					
Current Appropriation	546	546	546	546	1,092
Forecast Base	546	546	546	546	1,092
Change		0	0	0	0
% Biennial Change from 2004-05					0%
<u>Expenditures by Fund</u>					
Direct Appropriations					
General	2,432	2,745	2,481	2,481	4,962
State Government Spec Revenue	497	595	546	546	1,092
Open Appropriations					
General	883	984	900	900	1,800
State Government Spec Revenue	9	11	11	11	22
Statutory Appropriations					
General	3	10	10	10	20
Special Revenue	974	1,239	1,172	1,172	2,344
Federal	431	527	300	350	650
Gift	0	13	2	2	4
Total	5,229	6,124	5,422	5,472	10,894
<u>Expenditures by Category</u>					
Total Compensation	1,344	1,590	1,291	1,289	2,580
Other Operating Expenses	638	1,049	843	903	1,746
Payments To Individuals	355	385	385	385	770
Local Assistance	2,273	2,522	2,376	2,418	4,794
Other Financial Transactions	619	578	527	477	1,004
Total	5,229	6,124	5,422	5,472	10,894
<u>Expenditures by Program</u>					
Emergency Medical Services Bd	5,229	6,124	5,422	5,472	10,894
Total	5,229	6,124	5,422	5,472	10,894
Full-Time Equivalentents (FTE)	21.2	24.7	19.1	18.2	