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Emergency Medical Services Regulatory Board

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mn.gov/emsrb/

AT A GLANCE

- 12% of Minnesota's population receives emergency medical services annually
- 86,943 square miles of around-the-clock, 9-1-1 ambulance response coverage
- 264 licensed ambulance services operating 823 ground and 21 air ambulances across the state
- 317 ambulance service licenses issued (some ambulance services possess multiple licenses)
- 191 approved emergency medical services education programs
- 30,259 certified and registered emergency medical services personnel
- Nearly 400 applicant disclosures reviewed annually
- 46 investigations completed in response to allegations of misconduct pertaining to individuals and entities subject to the agency's jurisdiction
- 65% of the 270 licensed ambulance services have either a volunteer or combination paid / volunteer staffing model.
- 71% of the EMS Regulatory Board's total budget is disbursed to the emergency medical services community

PURPOSE

The mission of the Minnesota Emergency Medical Services (EMS) Regulatory Board (Board) is to protect the public's health and safety through regulation and support of the EMS system. We are the lead agency in Minnesota responsible for certifying EMS personnel, licensing and inspecting ambulance services, registering medical response units, and approving and auditing education programs. We also investigate all complaints and allegations of misconduct involving those individuals and entities subject to our jurisdiction. Our services start prior to the 9-1-1 call requesting response to a medical emergency: we safeguard the quality of care delivered by EMS personnel by ensuring the delivery of nationally recognized education and testing standards.

We make certain that ambulance services are safe, reliable, and available around-the-clock in metropolitan areas and in Greater Minnesota. Areas with small population bases often rely on volunteer EMS personnel to cover the cost of providing continuous ambulance service. Recruitment and retention of these volunteers continues to be stretched by an anticipated decrease in population in 74 counties through 2025. At the same time, the senior population, generally requiring more frequent and complex care, is increasing. We work with EMS agencies and communities to implement realistic solutions to these issues thereby improving the timely delivery of quality patient care.

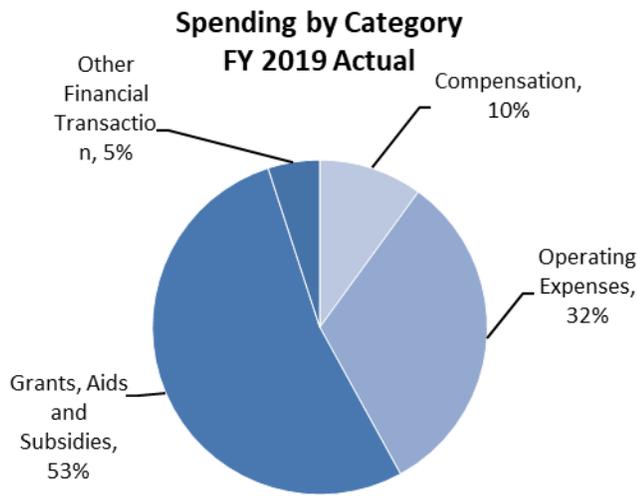
We coordinate ambulance and EMS assets and communication as part of our responsibilities during a natural or human-caused disaster or emergency.

The Board has formed committees and workgroups to aid in the execution of its mission. One such committee is the Medical Direction Standing Advisory Committee, which is comprised of physicians experienced in emergency medicine and emergency medical services and is led by a Board member/emergency physician who serves as the State's EMS Medical Director. This committee discusses, evaluates, and recommends improvements in matters pertaining to the delivery of pre-hospital emergency care.

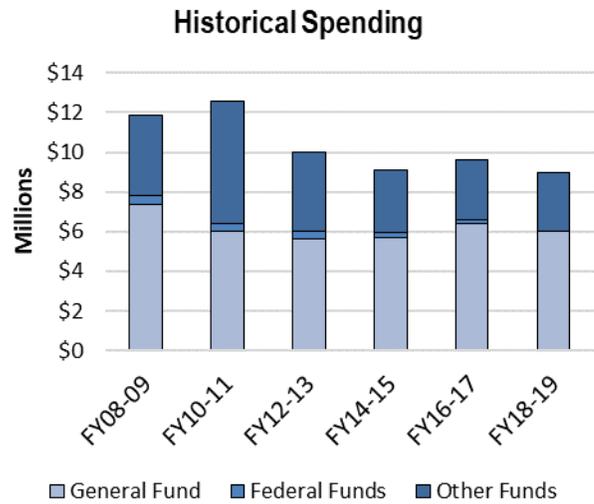
Our agency services include distributing state and federal grant funds that support the EMS community with retention and recruitment of EMS personnel, ambulance/hospital communications, education reimbursement, equipment acquisition, and improving the pediatric care infrastructure. Our service delivery continues with

assessing and advising rural ambulance services and their managers, and it concludes with reinforcing quality care through inspections and audits, complaint reviews and investigations, and intervention in both a disciplinary and non-disciplinary nature.

BUDGET



Source: Budget Planning & Analysis System (BPAS)



Source: Consolidated Fund Statement

The board budget is from a variety of sources: general fund, federal funds, and other funding sources such as revenue from citations issued for seat belt violations. Because the EMS system in Minnesota is heavily dependent on a diminishing pool of volunteers, particularly in rural areas, there is no fee for EMS personnel certification or medical response unit registration. A majority of the agency’s budget is dedicated to grant programs that support emergency medical services statewide.

STRATEGIES

To accomplish its mission of protecting the public’s health and safety, the Emergency Medical Services (EMS) Regulatory Board uses the following strategies:

- 1. Regulation**
 - a. Establish and enforce standards and requirements for ambulance services, EMS personnel, and education programs.
 - b. License ambulance services, registered medical response units, credential EMS personnel, and approve education programs.
- 2. Prevention**
 - a. Conduct educational compliance seminars.
 - b. Communicate compliance requirements to medical and ambulance service directors to reduce non-compliance issues.
 - c. Conduct rural ambulance assessments to help those services in Greater Minnesota obtain and maintain operational and organizational success.
- 3. Compliance and Discipline**
 - a. Conduct on-site inspections of ambulance services and vehicles and education programs.
 - b. Investigate complaints, allegations of misconduct, and self-reported violations in a fair and timely manner, ensuring that the subjects of those investigations receive the necessary due process.

- c. Review evidence to determine appropriate action through the agency’s Complaint Review Panel, which is a subset of our Board and supported by advice from the Attorney General’s Office and agency staff.
 - d. Collaborate with the Health Professionals Services Program for matters involving EMS providers experiencing mental health or substance abuse issues.
- 4. Support of the EMS System**
- a. Educate the public, EMS personnel, ambulance services, and education programs about certification and licensing requirements and responsibilities, ethical standards, and the complaint resolution process.
 - b. Distribute state and federal grant funds that support the EMS community with retention and recruitment of personnel, ambulance/hospital communications, education reimbursement, equipment acquisition, and improving the pediatric care infrastructure.
 - c. Continue to reach out to our wider audience: the general public, employers, and ethnically-diverse populations.
- 5. Maximize Technology and Online Services**
- a. Use technology to maximize efficiencies, improve customer service, increase data security, and decrease costs.
 - b. Provide a 24/7 online application and renewal process, no-cost license and certification look-up, and no-cost access to public data on adverse license and certification actions.
- 6. Risk Assessment and Continuous Improvement**
- a. Evaluate performance through customer surveys, research, and data analysis.
 - b. Identify trends in the EMS industry that may need new or improved support, standards, or oversight to ensure the public is protected.
 - c. Conduct system reviews and audits of fees, expenditures, receipts, and disbursements; improve systems as appropriate.
 - d. Engage public and private expertise and input. Our board, committees, and work groups are comprised of volunteers representing EMS physicians and personnel, educators, and stakeholders from public, private, and non-profit organizations. This is important because EMS has touch points in every part of the health care system, and these subject matter experts help identify issues and craft solutions.

RESULTS

| <i>Type of Measure</i> | <i>Name of Measure</i> | <i>Previous</i> | <i>Current</i> | <i>Dates</i> |
|------------------------|--|-----------------|----------------|-------------------|
| Quantity | Number of EMS personnel credentialed by the Emergency Medical Services Regulatory Board | 27,488 | 30,259 | FY 2018 & FY 2020 |
| Quality | Average time from receipt of completed EMS personnel application to issuance of credentials | 1 day | 1 day | FY 2018 & FY 2020 |
| Quantity | Requests for ambulance services statewide | 607,608 | 649,697 | FY 2018 & FY 2020 |
| Quality | First-Time Pass Rate - Minnesota Students National Registry of Emergency Medical Technicians Certification Cognitive Examination -- Paramedic | 75% | 67% | FY 2018 & FY 2020 |
| Quality | First-Time Test Pass Rate – National Average National Registry of Emergency Medical Technicians Certification Cognitive Examination -- Paramedic | 70% | 72% | FY 2018 & FY 2020 |
| Quality | Prompt Payments to Grantees (within 45 days) | 97% | 96% | FY 2018 & FY 2020 |

The Emergency Medical Services Regulatory Board’s legal authority comes from Minnesota Statute 144E and Minnesota Rules 4690 (<https://www.revisor.mn.gov/statutes/cite/144E> and <https://www.revisor.mn.gov/rules/4690/>).

Emergency Medical Services Regulatory Board

Agency Expenditure Overview

(Dollars in Thousands)

| | Actual FY18 | Actual FY19 | Actual FY20 | Estimate FY21 | Forecast Base | | Governor's Recommendation | |
|--------------------------------------|----------------|----------------|----------------|------------------|---------------|--------------|------------------------------|--------------|
| | | | | | FY22 | FY23 | FY22 | FY23 |
| <u>Expenditures by Fund</u> | | | | | | | | |
| 1000 - General | 3,253 | 3,224 | 3,012 | 4,646 | 3,776 | 3,776 | 3,803 | 3,829 |
| 2000 - Restrict Misc Special Revenue | 923 | 632 | 703 | 657 | 655 | 655 | 655 | 655 |
| 2001 - Other Misc Special Revenue | 659 | 632 | | | | | | |
| 3000 - Federal | 129 | 120 | 116 | 130 | 130 | 130 | 130 | 130 |
| 4900 - 911 Emergency | | | 683 | 683 | 683 | 683 | 683 | 683 |
| Total | 4,963 | 4,608 | 4,514 | 6,116 | 5,244 | 5,244 | 5,271 | 5,297 |
| Biennial Change | | | | 1,058 | | (142) | | (62) |
| Biennial % Change | | | | 11 | | (1) | | (1) |
| Governor's Change from Base | | | | | | | | 80 |
| Governor's % Change from Base | | | | | | | | 1 |

Expenditures by Program

| | | | | | | | | |
|-------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Emergency Medical Services Bd | 4,963 | 4,608 | 4,514 | 6,116 | 5,244 | 5,244 | 5,271 | 5,297 |
| Total | 4,963 | 4,608 | 4,514 | 6,116 | 5,244 | 5,244 | 5,271 | 5,297 |

Expenditures by Category

| | | | | | | | | |
|------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Compensation | 714 | 459 | 684 | 1,081 | 1,397 | 1,399 | 1,422 | 1,449 |
| Operating Expenses | 1,582 | 1,471 | 1,285 | 2,653 | 1,467 | 1,465 | 1,469 | 1,468 |
| Grants, Aids and Subsidies | 2,664 | 2,458 | 2,549 | 2,379 | 2,377 | 2,377 | 2,377 | 2,377 |
| Capital Outlay-Real Property | | 1 | | | | | | |
| Other Financial Transaction | 3 | 219 | (4) | 3 | 3 | 3 | 3 | 3 |
| Total | 4,963 | 4,608 | 4,514 | 6,116 | 5,244 | 5,244 | 5,271 | 5,297 |

Full-Time Equivalent

| | | | | | | | | |
|--|------|------|------|------|-------|-------|-------|-------|
| | 7.78 | 4.04 | 6.07 | 9.43 | 12.35 | 12.35 | 12.35 | 12.35 |
|--|------|------|------|------|-------|-------|-------|-------|

Emergency Medical Services Regulatory Board

Agency Financing by Fund

(Dollars in Thousands)

| | Actual FY18 | Actual FY19 | Actual FY20 | Estimate FY21 | Forecast Base | | Governor's Recommendation | |
|-----------------------------------|----------------|----------------|----------------|------------------|---------------|--------------|------------------------------|--------------|
| | | | | | FY22 | FY23 | FY22 | FY23 |
| 1000 - General | | | | | | | | |
| Balance Forward In | 78 | 936 | 102 | 837 | | | | |
| Direct Appropriation | 3,667 | 3,598 | 3,747 | 3,809 | 3,776 | 3,776 | 3,803 | 3,829 |
| Receipts | 203 | | | | | | | |
| Cancellations | | 1,310 | 0 | | | | | |
| Balance Forward Out | 695 | | 837 | | | | | |
| Expenditures | 3,253 | 3,224 | 3,012 | 4,646 | 3,776 | 3,776 | 3,803 | 3,829 |
| Biennial Change in Expenditures | | | | 1,181 | | (106) | | (26) |
| Biennial % Change in Expenditures | | | | 18 | | (1) | | (0) |
| Governor's Change from Base | | | | | | | | 80 |
| Governor's % Change from Base | | | | | | | | 1 |
| Full-Time Equivalents | 7.20 | 3.87 | 6.07 | 9.33 | 12.25 | 12.25 | 12.25 | 12.25 |

2000 - Restrict Misc Special Revenue

| | | | | | | | | |
|-----------------------------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Balance Forward In | 487 | 206 | 417 | 215 | 184 | 155 | 184 | 155 |
| Receipts | 25 | 14 | 11 | 8 | 8 | 8 | 8 | 8 |
| Transfers In | 615 | 618 | 490 | 618 | 618 | 618 | 618 | 618 |
| Balance Forward Out | 205 | 206 | 215 | 184 | 155 | 126 | 155 | 126 |
| Expenditures | 923 | 632 | 703 | 657 | 655 | 655 | 655 | 655 |
| Biennial Change in Expenditures | | | | (195) | | (50) | | (50) |
| Biennial % Change in Expenditures | | | | (13) | | (4) | | (4) |
| Governor's Change from Base | | | | | | | | 0 |
| Governor's % Change from Base | | | | | | | | 0 |
| Full-Time Equivalents | | | | 0.10 | 0.10 | 0.10 | 0.10 | 0.10 |

2001 - Other Misc Special Revenue

| | | | | | | | | |
|-----------------------------------|------------|------------|--|---------|--|---|--|---|
| Balance Forward In | 40 | 64 | | | | | | |
| Receipts | | 17 | | | | | | |
| Transfers In | 683 | 683 | | | | | | |
| Transfers Out | | 133 | | | | | | |
| Balance Forward Out | 64 | | | | | | | |
| Expenditures | 659 | 632 | | | | | | |
| Biennial Change in Expenditures | | | | (1,291) | | 0 | | 0 |
| Biennial % Change in Expenditures | | | | (100) | | | | |

Emergency Medical Services Regulatory Board

Agency Financing by Fund

(Dollars in Thousands)

| | Actual | Actual | Actual | Estimate | Forecast Base | | Governor's Recommendation | |
|-------------------------------|--------|--------|--------|----------|---------------|------|---------------------------|------|
| | FY18 | FY19 | FY20 | FY21 | FY22 | FY23 | FY22 | FY23 |
| Governor's Change from Base | | | | | | | | 0 |
| Governor's % Change from Base | | | | | | | | |
| Full-Time Equivalents | 0.45 | 0.17 | | | | | | |

2403 - Gift

| | | | | | | | | |
|---------------------|---|----|----|----|----|----|----|----|
| Balance Forward In | 9 | 9 | 10 | 10 | 10 | 10 | 10 | 10 |
| Receipts | 0 | 0 | 0 | | | | | |
| Balance Forward Out | 9 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |

3000 - Federal

| | | | | | | | | |
|-----------------------------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Receipts | 129 | 120 | 116 | 130 | 130 | 130 | 130 | 130 |
| Expenditures | 129 | 120 | 116 | 130 | 130 | 130 | 130 | 130 |
| Biennial Change in Expenditures | | | | (3) | | 14 | | 14 |
| Biennial % Change in Expenditures | | | | (1) | | 6 | | 6 |
| Governor's Change from Base | | | | | | | | 0 |
| Governor's % Change from Base | | | | | | | | 0 |
| Full-Time Equivalents | 0.13 | | | | | | | |

4900 - 911 Emergency

| | | | | | | | | |
|-----------------------------------|--|--|------------|------------|------------|------------|------------|------------|
| Transfers In | | | 683 | 683 | 683 | 683 | 683 | 683 |
| Expenditures | | | 683 | 683 | 683 | 683 | 683 | 683 |
| Biennial Change in Expenditures | | | | 1,366 | | 0 | | 0 |
| Biennial % Change in Expenditures | | | | | | 0 | | 0 |
| Governor's Change from Base | | | | | | | | 0 |
| Governor's % Change from Base | | | | | | | | 0 |

(Dollars in Thousands)

| | FY21 | FY22 | FY23 | Biennium 2022-23 |
|---|--------------|--------------|--------------|---------------------|
| Direct | | | | |
| Fund: 1000 - General | | | | |
| FY2021 Appropriations | 3,809 | 3,809 | 3,809 | 7,618 |
| Base Adjustments | | | | |
| Current Law Base Change | | (33) | (33) | (66) |
| Forecast Base | 3,809 | 3,776 | 3,776 | 7,552 |
| Change Items | | | | |
| Operating Adjustment | | 27 | 53 | 80 |
| Total Governor's Recommendations | 3,809 | 3,803 | 3,829 | 7,632 |
| Dedicated | | | | |
| Fund: 2000 - Restrict Misc Special Revenue | | | | |
| Planned Spending | 657 | 655 | 655 | 1,310 |
| Forecast Base | 657 | 655 | 655 | 1,310 |
| Total Governor's Recommendations | 657 | 655 | 655 | 1,310 |
| Fund: 3000 - Federal | | | | |
| Planned Spending | 130 | 130 | 130 | 260 |
| Forecast Base | 130 | 130 | 130 | 260 |
| Total Governor's Recommendations | 130 | 130 | 130 | 260 |
| Revenue Change Summary | | | | |
| Dedicated | | | | |
| Fund: 2000 - Restrict Misc Special Revenue | | | | |
| Forecast Revenues | 8 | 8 | 8 | 16 |
| Total Governor's Recommendations | 8 | 8 | 8 | 16 |
| Fund: 3000 - Federal | | | | |
| Forecast Revenues | 130 | 130 | 130 | 260 |
| Total Governor's Recommendations | 130 | 130 | 130 | 260 |
| Non-Dedicated | | | | |
| Fund: 1000 - General | | | | |
| Forecast Revenues | 73 | 73 | 73 | 146 |
| Total Governor's Recommendations | 73 | 73 | 73 | 146 |

Emergency Medical Services Regulatory Board

FY 2022-23 Biennial Budget Change Item

Change Item Title: Operating Adjustment

| Fiscal Impact (\$000s) | FY 2021 | FY 2022 | FY 2023 | FY 2024 | FY 2025 |
|--|----------|----------|----------|----------|----------|
| General Fund | | | | | |
| Expenditures | 0 | 27 | 53 | 53 | 53 |
| Revenues | 0 | 0 | 0 | 0 | 0 |
| Other Funds | | | | | |
| Expenditures | 0 | 0 | 0 | 0 | 0 |
| Revenues | 0 | 0 | 0 | 0 | 0 |
| Net Fiscal Impact = (Expenditures – Revenues) | 0 | 27 | 53 | 53 | 53 |
| FTEs | 0 | 0 | 0 | 0 | 0 |

Recommendation:

The Governor recommends additional funding of \$27,000 in FY 2022 and \$53,000 in each subsequent year from the general fund to maintain the current level of service delivery at the Emergency Medical Services Regulatory Board (EMSRB). This represents a 1% increase in FY 2022-2023 to the agency’s biennial base budget in the general fund.

Rationale/Background:

The operating increases recommended in FY 2022 and FY 2023 fund a portion of the projected cost increases in the upcoming biennium. Each year, the cost of doing business rises—including growing costs for employer-paid health care contributions and other salary and compensation-related costs. Other operating costs, like rent and lease, fuel and utilities, IT and legal services also grow. This cost growth puts pressure on agency operating budgets that remain flat from year to year without enacted increases. The EMSRB is funded through the general fund and is not supported by fees.

Proposal:

The Governor recommends increasing agency operating budgets to support the delivery of current services. This increase is below the assumed level of inflation, acknowledging continued efficiencies achieved by agencies. For the Emergency Medical Services Regulatory Board, this funding will cover employee compensation growth, rent increases, fuel and utilities, and IT services.

Results:

This proposal is intended to allow the Emergency Medical Services Regulatory Board to continue to provide current levels of service and information to the public.

Emergency Medical Services Regulatory Board

Federal Funds Summary

(Dollars in Thousands)

| Federal Agency and CFDA # | Federal Award Name and Brief Purpose | New Grant | FY 2020 Actuals | FY 2021 Budget | FY 2022 Base | FY 2023 Base | Required State Match or MOE? | FTEs |
|--|---|-----------|-----------------|----------------|---------------|---------------|------------------------------|-------------|
| US Dept. of Health & Human Services - 93.127 | Emergency Medical Services for Children: partner with Children's Minnesota to improve children pediatric emergency care | No | \$ 116 | \$ 130 | \$ 130 | \$ 130 | None | 0.00 |
| Federal Fund – Agency Total | | | \$ 116 | \$ 130 | \$ 130 | \$ 130 | | 0.00 |

Narrative

The Minnesota Emergency Medical Services Regulatory Board (EMSRB) receives \$130,000.00 per year in federal funding. The Emergency Medical Services for Children project is fully funded at the federal level and there have not been any matching state or local funds. There is no required State Match or Maintenance of Effort levels (MOE) for this grant project. The EMSRB receives no other federal grant funds.

Current federal appropriation levels and continuing resolutions as well as guidance from federal agencies were taken into consideration to determine the EMSRB's level of funding for the fiscal years 2020 and 2021. The level of funding has remained consistent and we anticipate the same base level of funding through the end of the current five-year grant cycle ending February 28, 2022. The basis for awarding the grant is a continuation of past grants and planned budgets of future grants.

The overall mission this grant project is to reduce the prevalence of pediatric morbidity and mortality that may occur as a result of acute illness or severe injury. To accomplish this mission, the EMSRB partners with Children's Minnesota (a/k/a Children's Hospitals and Clinics) to integrate pediatric-centered health care training, access, and delivery into the emergency medical services (EMS) system. The goal is for the EMS system to respond to pediatric emergencies with well-trained personnel, to provide appropriate intervention with equipment and technology tailored to the unique needs of pediatrics, and to transport pediatric emergencies to the most appropriate healthcare facility in the safest manner possible. Simply put, through this funding the EMSRB seeks to solidify the integration of a pediatric focus with in the EMS system.