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Emergency Medical Services Regulatory Board

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<https://mn.gov/boards/emsrb/>

AT A GLANCE

- 13% of Minnesota's population receives emergency medical services annually
- 266 licensed ambulance services operating 804 ground and 34 air ambulances across the state
- 341 ambulance service licenses issued (some ambulance services possess multiple licenses)
- 172 approved emergency medical services education programs
- 30,888 certified and registered emergency medical services personnel
- Nearly 400 applicant disclosures reviewed annually
- 77 investigations completed in response to allegations of misconduct pertaining to individuals and entities subject to the agency's jurisdiction
- 63% of the 266 licensed ambulance services have either a volunteer or paid / volunteer staffing model
- 64% of the EMS Regulatory Board's total budget is disbursed to the emergency medical services community (FY24)

PURPOSE

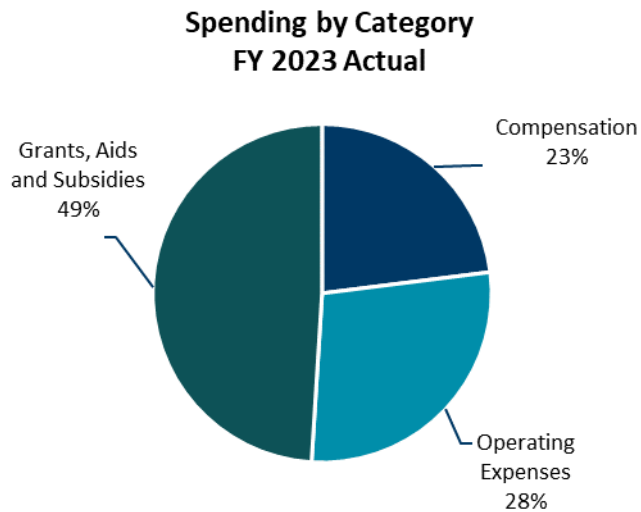
The mission of the Minnesota Emergency Medical Services (EMS) Regulatory Board (Board) is to protect the public's health and safety through regulation and support of the EMS system. We are the lead agency in Minnesota responsible for certifying EMS personnel, licensing, and inspecting ambulance services, registering medical response units, and approving and auditing education programs. We 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.

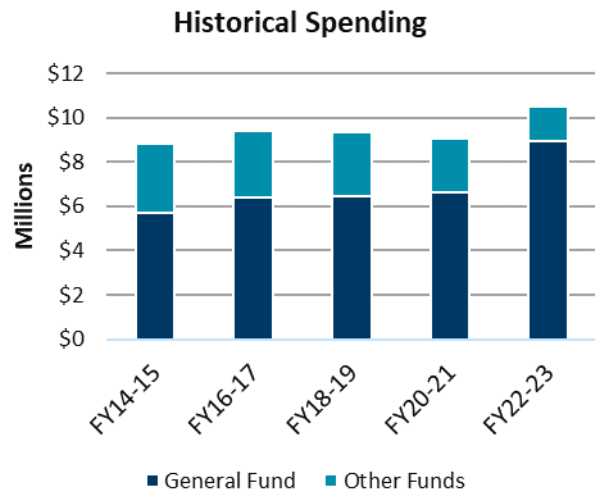
Our agency services include distributing state and federal grant funds that support the EMS community with retention and recruitment of EMS personnel, ambulance/hospital communications, education reimbursement, equipment acquisition, and improving the pediatric care infrastructure. Our service delivery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

In accordance with 2024 Minnesota Session Law Chapter 122, the Emergency Medical Services Regulatory Board will cease operation on January 1, 2025. On the same date all duties, authorities and appropriations will be transferred to a new state agency, the Office of Emergency Medical Services.

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. In accordance with the agency transfer an estimated \$3.5 million will transfer to the office of EMS under the provisions of 2024 Session Law Chapter 122.

STRATEGIES

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

Regulation

- Establish and enforce standards and requirements for ambulance services, EMS personnel, and education programs.
- License ambulance services, registered medical response units, credential EMS personnel, and approve education programs.

Prevention

- Conduct educational compliance seminars.
- Communicate compliance requirements to medical and ambulance service directors to reduce non-compliance issues.
- Conduct rural ambulance assessments to help those services in Greater Minnesota obtain and maintain operational and organizational success.

Compliance and Discipline

- Conduct on-site inspections of ambulance services and vehicles and education programs.
- 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.

- 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.
- Collaborate with the Health Professionals Services Program for matters involving EMS providers experiencing mental health or substance abuse issues.

Support of the EMS System

- Educate the public, EMS personnel, ambulance services, and education programs about certification and licensing requirements and responsibilities, ethical standards, and the complaint resolution process.
- 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.
- Continue to reach out to our wider audience: the public, employers, and ethnically diverse populations.

Maximize Technology and Online Services

- Use technology to maximize efficiencies, improve customer service, increase data security, and decrease costs.
- 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.

Risk Assessment and Continuous Improvement

- Evaluate performance through customer surveys, research, and data analysis.
- Identify trends in the EMS industry that may need new or improved support, standards, or oversight to ensure the public is protected.
- Conduct system reviews and audits of fees, expenditures, receipts, and disbursements; improve systems as appropriate.
- 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

Measure name	Measure type	Measure data source	Historical trend	Most recent data
Number of Credentialed EMS Personnel	Quantity	Active certification counts included in our licensure system	Is consistent post pandemic, but down from pre-pandemic highs	30,888 People
Number of ambulance requests	Quantity	Number of patient care reports submitted to state EMS data repository	Consistent with recent historical trends.	737,448 responses
Average application processing time for new EMT	Quality	Average completion time for completed EMT applications within our license management system	Consistent with historical trends.	1 Day

Measure name	Measure type	Measure data source	Historical trend	Most recent data
First Time Pass Rate NREMT EMT exam	Results	NREMT testing database	Pass rate increasing from most recent reporting	73%
Prompt payment to grantees	Quality	MMB Prompt Payment Reports	Prompt payment rate increasing	97% (FY23)

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/>).

(Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY22	FY23	FY24	FY25	FY26	FY27	FY26	FY27
<u>Expenditures by Fund</u>								
1000 - General	4,459	4,469	6,115	6,546				
2000 - Restrict Misc Special Revenue	419	428	280	216				
2001 - Other Misc Special Revenue	9	14	3					
3000 - Federal	126	141	149	21				
4900 - 911 Emergency	683							
Total	5,697	5,052	6,547	6,783				
Biennial Change				2,582		(13,330)		(13,330)
Biennial % Change				24		(100)		(100)
Governor's Change from Base								0
Governor's % Change from Base								

Expenditures by Program

Emergency Medical Services Bd	5,697	5,052	6,547	6,783		
Total	5,697	5,052	6,547	6,783		

Expenditures by Category

Compensation	1,043	1,158	1,266	952		
Operating Expenses	1,576	1,423	1,259	935		
Grants, Aids and Subsidies	3,067	2,464	4,017	4,893		
Other Financial Transaction	10	7	6	3		
Total	5,697	5,052	6,547	6,783		

Full-Time Equivalents

9.08	10.26	9.92	7.30		
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Emergency Medical Services Regulatory Board

Agency Financing by Fund

(Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY22	FY23	FY24	FY25	FY26	FY27	FY26	FY27
1000 - General								
Balance Forward In	248	605	237	923				
Direct Appropriation	4,780	4,576	6,800	12,176	0	0	0	0
Transfers Out		41		6,553				
Cancellations	3	434	0					
Balance Forward Out	566	237	922					
Expenditures	4,459	4,469	6,115	6,546				
Biennial Change in Expenditures				3,733		(12,661)		(12,661)
Biennial % Change in Expenditures				42		(100)		(100)
Governor's Change from Base								0
Governor's % Change from Base								
Full-Time Equivalents	8.85	10.15	9.92	7.30				

2000 - Restrict Misc Special Revenue

Balance Forward In	250	183	136	206				
Receipts	0	1	5	2				
Transfers In	302	327	346	360				
Transfers Out				352				
Balance Forward Out	133	83	206					
Expenditures	419	428	280	216				
Biennial Change in Expenditures				(352)		(496)		(496)
Biennial % Change in Expenditures				(41)		(100)		(100)
Governor's Change from Base								0
Governor's % Change from Base								
Full-Time Equivalents	0.11	0.07						

2001 - Other Misc Special Revenue

Receipts	9	14	3					
Expenditures	9	14	3					
Biennial Change in Expenditures				(20)		(3)		(3)
Biennial % Change in Expenditures				(86)				
Governor's Change from Base								0
Governor's % Change from Base								
Full-Time Equivalents	0.05	0.01						

Emergency Medical Services Regulatory Board

Agency Financing by Fund

(Dollars in Thousands)

	Actual FY22	Actual FY23	Actual FY24	Estimate FY25	Forecast Base FY26 FY27		Governor's Recommendation FY26 FY27	
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2403 - Gift

Balance Forward In	10	10	10	11				
Receipts	0	0	1					
Transfers Out				11				
Balance Forward Out	10	10	11					

3000 - Federal

Receipts	126	141	149	21				
Expenditures	126	141	149	21				
Biennial Change in Expenditures				(97)	(170)		(170)	
Biennial % Change in Expenditures				(36)	(100)		(100)	
Governor's Change from Base							0	
Governor's % Change from Base								
Full-Time Equivalents	0.07	0.03						

4900 - 911 Emergency

Transfers In	683							
Expenditures	683							
Biennial Change in Expenditures				(683)	0		0	
Biennial % Change in Expenditures								
Governor's Change from Base							0	
Governor's % Change from Base								

Emergency Medical Services Regulatory Board

Agency Change Summary

(Dollars in Thousands)

	FY25	FY26	FY27	Biennium 2026-27
Direct				
Fund: 1000 - General				
FY2025 Appropriations	12,176	12,176	12,176	24,352
Base Adjustments				
All Other One-Time Appropriations		(6,000)	(6,000)	(12,000)
Current Law Base Change		800	(800)	
Programs Moving to New Agencies		(6,976)	(5,376)	(12,352)
Forecast Base	12,176			
Total Governor's Recommendations	12,176			
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Planned Spending	216			
Forecast Base	216			
Total Governor's Recommendations	216			
Fund: 3000 - Federal				
Planned Spending	21			
Forecast Base	21			
Total Governor's Recommendations	21			
Revenue Change Summary				
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Forecast Revenues	2			
Total Governor's Recommendations	2			
Fund: 3000 - Federal				
Forecast Revenues	21			
Total Governor's Recommendations	21			
Non-Dedicated				
Fund: 1000 - General				
Forecast Revenues	33			
Total Governor's Recommendations	33			

Emergency Medical Services Regulatory Board

Federal Funds Summary

(Dollars in Thousands)

Federal Agency and ALN	Federal Grant Name Brief Purpose	FY 2024 Actual	FY 2025 Revised	FY 2026 Revised	FY 2027 Revised	Required State Match or MOE?	FTEs
US Dept. of Health & Human Services 93.127	Emergency Medical Services for Children - To partner with Children's Minnesota to improve children pediatric emergency care	\$ 149	\$ 21	\$ -	\$ -	No	0.1
Federal Fund – Agency Total		\$ 149	\$ 21	\$ -	\$ -		0.1

Narrative

The Minnesota Emergency Medical Services Regulatory Board (EMSRB) previously received \$130,000 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. For the grant application cycle beginning in FY 2024 the federal government requested application in the amount of \$205,000 per fiscal year. In FY24 the federal government notified EMSRB that the funding would instead be \$190,000. In accordance with 2024 session law chapter 122, the authority to administer this grant will transfer to the new Office of Emergency Medical Services.

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 2022 and 2023. The level of funding has remained consistent and we anticipate increases in base level of funding through the end of the current five-year grant cycle ending February 28, 2027 to the amount of \$190,000. 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 within the EMS system.