

Board Meeting Minutes

February 2, 2024

APPROVED

3/5/24

Board Members Present

Director David Adams
Rep. Stephanie Clayton
Rep. John Eplee
Dr. Gregory Faimon-virtual
Dr. Joel Hornung
Director Deb Kaufman
Chief Shane Pearson
Dr. Martin Sellberg
Director Jeri Wheatley

Board Members Absent

Sen Michael Fagg
Sen. Oletha Faust-Goudeau
Director John Ralston

Attorney

Sam Feather

Guests

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|-----------------------|-----------------------------|
| Kent Vosburg | Junction City |
| Jon Antrim | GMR |
| Frank Williams | Butler Co EMS |
| Jason White | MARCER |
| Con Olson | TECHS EMS |
| Mickey Huber | AMR |
| Angela Hamilton | Sedgwick Co EMS |
| Joe Hardy | LDCFM |
| Jon Cota | KCKFD |
| Clay Cox | LifeSave |
| Jason Zink | Pawnee Co EMS |
| Ron Marshall | KHA |
| Keith Wangerin | Smith Co EMS |
| Kara Lawrence | Pawnee Co EMS |
| Hank Besack | |
| Bryan Beaver, MD | Univ of Ks Health System |
| Travis Helberg, MD | Univ of Ks Health System |
| Scott Sare | JoCo MedAct |
| Paul Davis | JoCo MedAct |
| Jeff Boss | JoCo MedAct |

Staff Present

Joseph House, Exec. Director
Suzette Smith
Terry Lower
James Kennedy
Carman Allen
James Reed
Chad Pore
Mary-Elaine Skinner

Virtual attendees
listed at the
bottom.

Call to Order

Chairman Hornung called the Board Meeting to order on Friday, February 2, 2024, at 9:05 a.m.

Chairman Hornung called for a motion to approve the minutes.

Rep. Eplee moved to approve the December 1, 2023 minutes. Director Adams seconded the motion. No further discussion. No opposition noted. The motion carried.

Standing Items

Director House provided the following information.

- Variance approval was given to LifeWatch and Clay County EMS for lettering.
- Three additional services were tentatively given approval for alternative staffing variances pending the completion of their internal training: Clifton City Ambulance, Miltonvale EMS, and Norwich Ambulance Service.
- The City of Washington EMS reported completing their internal training and went live yesterday.

Investigation Committee Report

Chairman Hornung called on Director Wheatley to provide an update on the Investigations Committee meeting.

- The committee heard ten cases involving applications which had been flagged by staff as having prior criminal history or other questions regarding competency.
- Four disciplinary cases were heard. One case involved unprofessional conduct for taking a video of a co-worker in the shower; one involved transporting a patient in an unlicensed vehicle that was not an ambulance; and two cases involved providers who provided services with an expired or suspended certificate.

Office Update

Chairman Hornung called on Director House to give the Office Update. Director House provided the following update.

- K.A.R. 109-2-2 was approved by the Board in December but will be brought back for additional action. There was an issue with a previous version being stamped instead of the subsequent version with changes. All parties have reviewed version 2 and it is now stamped. He is asking the Board to convene on March 5th virtually following a 10:00 a.m. public hearing on the regulation to adopt this correct version. Service permits are due by April 30th and once published, the regulation would take effect 15 days later.
- Director House reported that draft regulatory language on several regulations is at the Department of Administration for the first stamp.
- He anticipates we could have to pull back K.A.R. 109-8-1 and K.A.R. 109-8-2 to make changes based on actions later in this meeting.
- A new regulatory change is needed due to a letter we received from the KBI that they are increasing our fees for the Criminal History Record Check. The changes would be to K.A.R. 109-15-2 and K.A.R. 109-15-3 and to change the fee to \$60.

Director Wheatley moved to proceed with revising K.A.R. 109-15-2 and K.A.R. 109-15-3 to increase fees. Director Kaufman seconded the motion. No further discussion. No opposition noted. The motion carried.

- Director House gave a legislative update and stated the budgets are being worked at a considerably quicker pace than the past. Senator Fagg helped us with getting our salary enhancement included in the Senate position. Director House is working the bill on the House side to get the enhancement included. Our fee fund balance continues to increase and is estimated to be over 4 million at the end of 2025. The salary enhancement we have requested fits well within the growth of our fee fund balance without us asking for any additional revenue.
- There is a lot of legislation going on this year. Senate Bill 384 is a single provider bill, which the Board opposed. It would require that the Board not be able to dictate more than one person on an ambulance, of which that person needed to be a certified EMT, AEMT, Paramedic, Nurse Practitioner, Physician, Nurse, or a Physician's Assistant. Director House encouraged the committee in the hearing to let our variance process work to see if there is a need for more legislation. The hearing is still open.
- Another bill discussed relates to the authorized distribution of over-the-counter medications by an EMS provider. The Board opposes that bill because it can be done today by lay persons. This will be discussed later in the Board Meeting.
- Carman Allen, Education Manager, provided an Education update. She reported this would be her last board meeting. They have processed just short of 7800 applications this past year. Slightly less than four thousand renewals were processed with 100% receiving audits. There were 798 new applicants certified. There were 219 initial courses with 142 of those being EMT classes. Individual exams were given to 1,184 candidates at 54 exam sites. Applications processed include: 501 Recognition of Non-Kansas Credentials, 266 Reinstatements, 533 Retro-active Approvals, 249 Sponsoring Organization, and 45 Inactive statuses.
- The AEMT standards are almost complete, and she is working on designing AEMT portfolios following yesterday's committee meeting.
- Director House thanked staff for their efforts in adhering to the regulations during the renewal period when we see greatly enhanced levels of scrutiny of the process.
- James Reed, Operations Manager, gave an Operations update. They completed 100% of program provider audits for a total of 171 and 100% of service inspections for a total of 168 with 611 vehicles inspected. They audited 18 Initial courses and assisted with exam sites. They also started doing investigations and are learning. They are in the process of licensing and permitting a new inter-facility transfer company slated to start in the next week or so. The focus this year will be to get information on Pulse Point to services and get AEDs registered. Service renewals will be due in April.
- Chad Pore, Program and Policy Analyst, provided an update. He reported that KAMTS had a meeting with the Aviation Director of KDOT to discuss issues with rural airports. Quite a few rural airports do not have runways that are long enough and there is no weather reporting. These issues have forced flight services to turn down flights. The discussion included priorities to improve rural airports. For the Version 3.5 update, 100% of agencies in Kansas are on NEMSIS. Kansas is one of the states with the most entries. The focus will now be on 3rd party vendors and getting them onboard. The Health Information Exchange (HIE) is trying to get linked with the Kansas Health Information Network (KHIN) to cut down on hospitals hunting down records. They would like to get it done this year. KHIN is not employees of the state. Access to patient records by a medical director to see a patient's medical history would include a \$300 cost.

Old Business

Chairman Hornung called upon Director House to provide information on Old Business.

Director House explained that 2023PS0013 – Paramedic Course Completion Requirements, is a request to align the process between legal recognition and those completing an initial Paramedic level course in the state of Kansas. The difference is an Associate degree requirement. For an initial paramedic course in Kansas, a course completion requirement is the attendee has an ability to have an associate degree conferred upon him/her. Those coming in from out of state do not have the requirement. Staff recommendation concluded there is no evidence to support the issue, but there is a concern that if we were to align one way or the other, we are going to adjust numbers. If we require those coming in from out of state to have this ability to have a degree conferred upon them, we might see a pretty significant reduction in the number of Legal Recognition candidates coming into the state which may make it a whole lot harder on the services who are close to the borders. Since there is no hard evidence one way or another, the staff recommendation is to set it aside. The question was raised regarding the need for a regulation change and the answer was no. The Board approved staff's recommendation without voiced opposition.

2023 PS 008 and 009, which were both topics regarding Critical Care Paramedics (CCP) and Mobile Integrated Health (MIH), to develop a career progression. During the committee's discussion they wanted clarification on what the difference is between certification, endorsement, and licensure. There is within statute a process for credentialing healthcare personnel, CCP and MIH could potentially fit into that framework. That would require us to go through the process that involves the Secretary of Health and Environment. Specific to this topic, on the endorsement side, endorsement is a means by which the Board can ensure certain criteria have been met, it acts as a confirmation of the completion of those criteria. It does not entitle the individual to do anything that is beyond their level of certification or licensure, but it acts as a verification to the public that they have completed some sort of additional requirement. The practice of endorsement doesn't appear to require any additional statutory language and can be done under the existing authority that the Board has. Although registration wasn't included in the original request, it is a step between endorsement and certification/licensure. Registration requires that you post a public list of those persons, or official roster of the persons, who can do that, and they are the only ones who can use that designated title. This would require statutory language and would have to go through the process. Certification and licensure are used interchangeably in Kansas statute. They both grant the holder of that certificate/licensure the ability to do what no one else with that certificate/license can do. Typically, a set of criteria established that has to be met in order for that certificate or license to be issued. If the Board is going to proceed down the path of new certification/licensure that does take going through the health care credentialing process. Credentialing is the formal recognition of some sort of professional or technical competence. The process for credentialing is provided in the Kansas Statutes and would require a fee of \$1000 and 100 proponent signatures and then referred to a committee.

Staff noted they believe it would be difficult to meet the criteria necessary for credentialing through registration or certification/licensure without establishing a ceiling to our current scope of practice. Endorsement simply suffices as state confirmation that criteria have been met but does not necessarily grant the holder any skill or practice that couldn't be rendered without the endorsement. Staff would recommend endorsement. No action taken on this topic by the Board at this meeting.

New Business

Chairman Hornung called on Director Kaufman to discuss the New Business. Director Kaufman reported the following.

- There is an action item from the Education Committee regarding the elimination of the AEMT/Paramedic psychomotor exam. They heard public comment from Chris Cannon, of Cowley County Community College, who supports doing away with the AEMT and Paramedic psychomotor exam. Charles Foat, of Johnson County Community College had similar comments. Carman Allen discussed that the AEMT skills exam by the National Registry ends July 1st. Regulations will need to be changed to address the path the Board wants to take. There was discussion that the suggested portfolio is complete and is out prior to this change going into effect. Carman Allen shared that the portfolio is a valid way to verify skills. The use of the portfolio would require review by the Board and regulatory action. There was discussion about the validity of the exam and how best to move forward. There is a concern that there is no consistency in non-college programs.
- Discussion continued with members of the Board regarding what is a portfolio, what other requirements would there be, a concern regarding minimum competency and patient contact requirement, inclusion of Kansas enhancements and medication lists and whether there would be live patients or a simulation lab.
- Director House stated that NESEMSO had developed the student minimum competencies for the AEMT. Accreditation is going to start requiring those, January 1, 2025. That leaves a gap and the NREMT is encouraging all states to proceed with establishing a student minimum competency pathway and a way to get there. The portfolio is our way to get there. We do have the ability to continue to use the test.

Dr. Sellberg made a motion to move forward with the portfolio. Dr. Eplee seconded the motion. No further discussion. No opposition noted. The motion carried.

- Director House referred to an e-mail that Board members had received on January 16th from MARCER regarding the ability to leave behind opioid antagonists by EMS responders. The letter stated if the legislation was drafted narrowly to deal only with opioid antagonists, it means the distribution of other OTC medicines would be in question. HB 2579 was that legislation and had a hearing, moved out of committee favorably, in its original form, and will hit the House floor soon. The Board submitted testimony in opposition because EMT's can already distribute non-prescription medications, just like every other layperson. The word distribution is defined by the Board of Pharmacy as anything that is NOT administering (introducing into the body) or dispensing (the giving of a prescription medication). This bill was seen as a means to leave behind naloxone. Director House feels it is a great practice to endorse.

- Through our research within this, there is a law within the Board of Pharmacy 65-16,127 that deals specifically with opioid antagonists. It covers dispensing, administration, storage, and possession. There were no opioid antagonists approved as an OTC medication when the law was passed. There is a concern that if an ambulance service was to distribute OTC medicines, specifically opioid antagonists, are they covered by state law? The EMS statutes are silent. The concern is that 65-16, 127 clearly authorizes first responders, school nurses, and scientists to store, possess, and administer. Director House feels that adding the word ‘distribute’ to 65-16,127 would be a way to fix the problem rather than the proposed HB 2579 that adds to the list of authorized activities, at the level of EMR. There was further discussion from Board members asking about the need for more legislation, the immediacy of the decision, what could happen to the bill during the legislative session, the concern about the OTC language and its effects on providers. The Board noted there is obviously a public desire for clear cut, written documentation that opioid antagonists can be left behind. The Board chose to be neutral on the bill throughout the remainder of the process, to continue to cite the language as seemingly unnecessary, and to provide a guidance document related to this topic to clearly direct staff upon what is considered unprofessional conduct in the Board’s eyes as it relates to the distribution of over-the-counter medications.
- Director House provided the Board the annual reminder of the concurrently delegated authorities provided to him by the Board. The Board took no action to amend or delete any of those delegated authorities.
- Chairman Horning announced the election of the positions of Chair and Vice-Chair of the Board.

Director Wheatley made a motion to retain Dr. Hornung as Chair and Chief Pearson as Vice-Chair. Dr. Eplee seconded the motion. No further discussion. No opposition noted. The motion carried.

Public Comment

- Con Olson, of the Administrators Society of KEMSA and TECH EMS supports the use of the portfolio. He said there might be other challenges coming our way with the announcement that Ford will no longer be producing ambulance chassis and the inability to obtain cardiac epinephrine.
- Jason White, on behalf of MARCER, expressed his frustration in the Board not allowing members of the MARCER team who put together the language for the legislation to speak upon this topic under New Business. He stated they will continue to push forward with the legislation. He feels that the confusion surrounding the wording of dispensing, handing out, and distributing has caused unease among EMS Service Directors regarding whether opioid antagonists can be left behind. Chairman Hornung noted there were no requests from anyone requesting to speak upon this agenda item by the published deadline in the agenda. Chairman Hornung offered the reminder that individuals wishing to address the Board upon a specific item on the agenda need to follow the instructions on the agenda and let Director House know by the published deadline, in this case, the Tuesday before the meeting at 4:30 p.m.

Commendation and Thanks

- Chairman Hornung took the opportunity to thank Director Deb Kaufman for her years of service on the Board as chair of multiple committees and a constant and consistent voice for rural Kansas in the policy making performed by this Board. It was announced Director Kaufman is retiring from Sheridan County EMS and has submitted her resignation of her Board position to the Governor's Office. In honor of her commitment to Kansas EMS, and as a token of the Board's appreciation, Director Kaufman was presented a plaque for her 18 years of service to the Board.

Having reached the end of the published agenda and there being no further business before the Board, the meeting was adjourned at 11:20 a.m.

Virtual Guests

Chris Cannon

Karl Leach

J Taylor

Jason Jenkins

Dave Johnston

Brandon Beck

Jason Hudson

Sharon

Andrew Hartzell

Chip Portz

Jason Nelson

Wendy O'Hare

Joe Doe

Adiel Garcia

Jeff Smith

Jesse Presley

Jordan Riley

Danita Schroeder

Scott Stueven

Matt

Mickie Helberg

Travis Vaughn

Craig Isom

Caroline Scoville

Chrissy Bartel

Monika Heller

K DeWitt

Pete Rogers

J Paugh

Jessica Baker

Logan Higbee

Frank Burrow

Mark Heath

Scott Harris

Alex Bergstrom

H Redeker