

Joint Committee for Review of Administrative Rules

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- **CR 00-091**

Report to the Legislature Clearinghouse Rule CR 00-091

The Joint Committee for Review of Administrative Rules

Produced pursuant to s.227.19(6), Stats.

Clearinghouse Rule 00-091, submitted by the Department of Health and Family Services (DHFS), is a proposed rule that, among other things, establishes license requirements for emergency medical technician-paramedics and procedures for the approval of emergency medical technician-paramedic operational plans.

Description of the Problem

On June 6, 2001 the Senate Committee on Health, Utilities, Veterans and Military Affairs met in executive session and voted 7-2 to object in part to Clearinghouse Rule 00-091. The Senate committee objected to a portion of proposed s. HFS 112.07 (2)(u)1.a. In part, the objected to portion of the rule authorized a two-paramedic service provider to dispatch the paramedics from separate sites and, under certain circumstances, authorized one of the two responders to be released for other duty while the other responder would return with the patient. The objected to portion of the rule also specified the actions a single paramedic could perform until the arrival of the second responder.

As a result of the Senate Committee action, the Joint Committee for Review of Administrative Rules (JCRAR) was required to nonconcur in the standing committee's partial objection or object to the rule itself. As part of the deliberations over this matter,

JCRAR and DHFS agreed that the department would consider making modifications to the rule. Following the receipt of the modifications, the issues before JCRAR were (1) whether an emergency medical technician-paramedic operational plan should require the participation of two responders together from the time of dispatch to the time of return and (2) what services should be provided if another paramedic arrived at the scene of an emergency prior to the arrival of an ambulance.

Arguments in Favor of Suspension

- *Many trauma situations require that at least two paramedics function together to provide the best care possible. Two paramedics provide enhanced patient management and better outcomes, thus improving the survival rates of patients.*
- *The current rules and the non-suspended portions of the proposed rules provide local communities operating a paramedic system with much flexibility. New paramedic services created after January 2001 will be able to come on line with one paramedic.*
- *In chaotic, difficult pre-hospital settings two paramedics stabilize the situation faster and complement and support each other, which in turn enhances and optimizes their training and skills.*
- *The staffing of two paramedics is the current norm and practice and has worked well in the departments that currently have paramedic service.*

Arguments Against Suspension

- *The hands of the local emergency team are tied because they are not allowed flexibility in the staffing pattern. They would be forced to have two paramedics*

together at all times. A suspension action would result in interference of local control.

- *To require a two-person team could be a financial burden, especially for less populated districts. Smaller communities might be forced to either hire more paramedics or their emergency services could suffer.*
- *A suspension of the rule forbids either paramedic from leaving an emergency scene even when the situation is assessed and stabilized; more critical patients may have to wait until two paramedics are available to reach them. This may be especially true of smaller communities, where there is a smaller supply of paramedics.*
- *Wisconsin has the most stringent law in the country regarding flexibility in emergency operational staffing patterns.*

Action by Joint Committee for Review of Administrative Rules

The committee held a public hearing and executive session on July 18, 2001. At that time the JCRAR requested modifications to the rule. The department submitted modifications on August 16, 2001 and the committee met in executive session on August 30, 2001. At the August 30 executive session, the committee voted 6-4 to object to part of the rule because, under s. 227.19 (4) (d) 2. and 6., Stats., it constituted an emergency relating to public health, safety and welfare and because it was arbitrary and capricious and imposed an undue hardship. The portion of the rule to which the committee objected is in modified s. HFS 112.07(2)(u)1.a., beginning with the second sentence and

continuing to the end of that subdivision paragraph. This action rejected the department's attempt to move away from the two-person team currently required in an emergency medical technician-paramedic operational plan. JCRAR met again on September 20, 2001 in executive session and voted to rescind a part of its objection to Clearinghouse Rule 00-091. By taking this partial rescission of its previous action, the Joint Committee restored the following language to Clearinghouse Rule 00-091: "A single paramedic, licensed registered nurse, licensed physician assistant, or physician performing in the staffing configuration specified in this paragraph may perform all of the skills authorized under s. HFS 112.04 (4) for EMTs-paramedic." On September 20, 2001 the Joint Committee voted 8-2 to introduce LRB 3716/2 and 3717/2 to sustain its objection to Clearinghouse Rule 00-091.