

Table of Contents

Emergency Medical Services Regulatory Board

<i>Agency Profile</i>	1
Agency Expenditure Overview	4
Agency Financing by Fund	5
Agency Change Summary	7
<u>Additional Documents</u>	9
<i>Enacted Budget Changes</i>	9

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

AT A GLANCE

- 13% of Minnesota's population receives emergency medical services annually
- 86,943 square miles of around-the-clock, 9-1-1 ambulance response coverage
- 267 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
- 29,877 certified and registered emergency medical services personnel
- Nearly 400 applicant disclosures reviewed annually
- 71 investigations completed in response to allegations of misconduct pertaining to individuals and entities subject to the agency's jurisdiction
- 65% of the 267 licensed ambulance services have either a volunteer or paid / volunteer staffing model
- 71% of the EMS Regulatory Board's total budget is disbursed to the emergency medical services community

PURPOSE

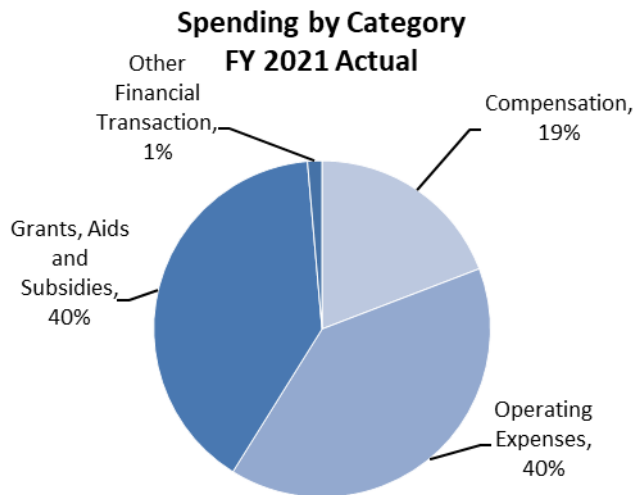
The mission of the Minnesota Emergency Medical Services (EMS) Regulatory Board (Board) is to protect the public's health and safety through regulation and support of the EMS system. We are the lead agency in Minnesota responsible for certifying EMS personnel, licensing, and inspecting ambulance services,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

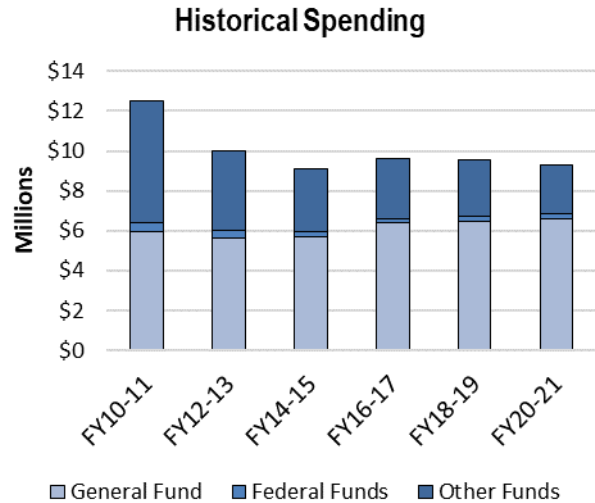
The Board has formed committees and workgroups to aid in the execution of its mission. One such committee is the Medical Direction Standing Advisory Committee, comprised of physicians experienced in emergency medicine and emergency medical services and led by a Board member/emergency physician who serves 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

- 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.

2. 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.

3. 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.

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 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	30,259	29,877	FY 2020 & FY 2022
Quality	Average time from receipt of completed EMS personnel application to issuance of credentials	1 day	1 day	FY 2020 & FY 2022
Quantity	Requests for ambulance services statewide	649,697	738,167	FY 2020 & FY 2022
Quality	First-Time Pass Rate - Minnesota Students National Registry of Emergency Medical Technicians Certification Cognitive Examination -- Paramedic	67%	75%	FY 2020 & FY 2022
Quality	First-Time Test Pass Rate – National Average National Registry of Emergency Medical Technicians Certification Cognitive Examination -- Paramedic	72%	71%	FY 2020 & FY 2022
Quality	Prompt Payments to Grantees (within 30 days)	96%	92%	FY 2020 & FY 2022

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		Enacted Budget	
	FY20	FY21	FY22	FY23	FY24	FY25	FY24	FY25
<u>Expenditures by Fund</u>								
1000 - General	3,012	3,594	4,459	5,142	3,776	3,776	6,800	6,176
2000 - Restrict Misc Special Revenue	703	372	419	540	407	407	407	407
2001 - Other Misc Special Revenue			9					
3000 - Federal	116	122	126	147	205	205	205	205
4900 - 911 Emergency	683	683	683					
Total	4,514	4,771	5,697	5,829	4,388	4,388	7,412	6,788
Biennial Change			2,241		(2,750)		2,674	
Biennial % Change			24		(24)		23	
Enacted Budget Change from Base							5,424	
Enacted Budget % Change from Base							62	

(Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast Base		Enacted Budget	
	FY20	FY21	FY22	FY23	FY24	FY25	FY24	FY25
1000 - General								
Balance Forward In	102	1,077	248	566				
Direct Appropriation	3,747	3,605	4,780	4,576	3,776	3,776	6,800	6,176
Transfers Out		25						
Cancellations	0	815	3					
Balance Forward Out	837	248	566					
Expenditures	3,012	3,594	4,459	5,142	3,776	3,776	6,800	6,176
Biennial Change in Expenditures			2,995		(2,049)		3,375	
Biennial % Change in Expenditures			45		(21)		35	
Enacted Budget Change from Base							5,424	
Enacted Budget % Change from Base							72	

2000 - Restrict Misc Special Revenue

Balance Forward In	417	232	250	133				
Receipts	11	8	0	2	2	2	2	2
Transfers In	490	359	302	405	405	405	405	405
Balance Forward Out	215	227	133					
Expenditures	703	372	419	540	407	407	407	407
Biennial Change in Expenditures				(116)		(145)		(145)
Biennial % Change in Expenditures				(11)		(15)		(15)
Enacted Budget Change from Base								0
Enacted Budget % Change from Base								0

2001 - Other Misc Special Revenue

Receipts			9					
Expenditures			9					
Biennial Change in Expenditures				9		(9)		(9)
Biennial % Change in Expenditures								
Enacted Budget Change from Base								0
Enacted Budget % Change from Base								

2403 - Gift

Balance Forward In	10	10	10	10	10	10	10	10
Receipts	0	0	0					

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base FY24 FY25		Enacted Budget FY24 FY25	
Balance Forward Out	10	10	10	10	10	10	10	10

3000 - Federal

Receipts	116	122	126	147	205	205	205	205
Expenditures	116	122	126	147	205	205	205	205
Biennial Change in Expenditures				36		137		137
Biennial % Change in Expenditures				15		50		50
Enacted Budget Change from Base								0
Enacted Budget % Change from Base								0

4900 - 911 Emergency

Transfers In	683	683	683					
Expenditures	683	683	683					
Biennial Change in Expenditures				(683)		(683)		(683)
Biennial % Change in Expenditures				(50)				
Enacted Budget Change from Base								0
Enacted Budget % Change from Base								

(Dollars in Thousands)

	FY23	FY24	FY25	Biennium 2024-25
Direct				
Fund: 1000 - General				
FY2023 Appropriations	4,576	4,576	4,576	9,152
Base Adjustments				
Current Law Base Change		(800)	(800)	(1,600)
Forecast Base	4,576	3,776	3,776	7,552
Change Items				
Maintain Current Service Levels		187	236	423
Enhancement of Existing Agency Services and Implementation of OLA Audit Recommendations		354	364	718
Emergency Medical Services Regional Grants		800	800	1,600
Medical Resource Communication Center Grants		1,683	1,000	2,683
Total Enacted Budget	4,576	6,800	6,176	12,976
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Planned Spending	540	407	407	814
Forecast Base	540	407	407	814
Total Enacted Budget	540	407	407	814
Fund: 3000 - Federal				
Planned Spending	147	205	205	410
Forecast Base	147	205	205	410
Total Enacted Budget	147	205	205	410
Revenue Change Summary				
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Forecast Revenues	2	2	2	4
Total Enacted Budget	2	2	2	4
Fund: 3000 - Federal				
Forecast Revenues	147	205	205	410
Total Enacted Budget	147	205	205	410
Non-Dedicated				
Fund: 1000 - General				
Forecast Revenues	78	78	78	156

(Dollars in Thousands)

	FY23	FY24	FY25	Biennium 2024-25
Total Enacted Budget	78	78	78	156

(Dollars in Thousands)

	FY23	FY24	FY25	Biennium 2024-25	FY26	FY27	Biennium 2026-27
--	------	------	------	---------------------	------	------	---------------------

Maintain Current Service Levels

This provision provides additional operating funds to maintain the current level of service delivery at the Emergency Medical Services Board.

1000 - General Fund Cost (Savings)	0	187	236	423	236	236	472
Expenditures	0	187	236	423	236	236	472

Enhancement of Existing Agency Services and Implementation of OLA Audit Recommendations

This provision provides funding for additional FTEs for the Emergency Medical Services Regulatory Board to allow more inspections and assist with field operations and technical assistance. Additionally, new staff will support an update to administrative rules. This provision addresses numerous findings contained within a report conducted by the Office of the Legislative Auditor during 2022.

1000 - General Fund Cost (Savings)	0	354	364	718	364	364	728
Expenditures	0	354	364	718	364	364	728

Emergency Medical Services Regional Grants

This provision supports the operation of Minnesota's eight regional Emergency Medical Systems (EMS). These systems, which are either non-profits or government run organizations, support community emergency medical service providers in the area of personnel training, coordinating transportation, communication, and coordination with other local public safety programs.

1000 - General Fund Cost (Savings)	0	800	800	1,600	1,600	0	1,600
Expenditures	0	800	800	1,600	1,600	0	1,600

Medical Resource Communication Center Grants

This provision provides grants to Minnesota's two centralized Medical Resource Communication Centers (MRCCs), which serve as a control center for ambulances throughout Minnesota by facilitating communication between hospitals and ambulances in the field and ensuring EMS providers have access to a physician. The MRCCs play a pivotal role in coordinating EMS response to large scale incidents within Minnesota.

1000 - General Fund Cost (Savings)	0	1,683	1,000	2,683	1,000	1,000	2,000
Expenditures	0	1,683	1,000	2,683	1,000	1,000	2,000