

Concerning Measures to Provide Community Based Out-of-Hospital Medical Services



Background

At least since 2010, the idea of using Emergency Medical Services (EMS) personnel (specifically paramedics) outside of their traditional role in non-acute care settings has been discussed and explored nationally and in Colorado. Two pilot programs were established in Colorado in 2012, through Eagle County EMS (which operates an ambulance-based service) and Southwest Colorado EMS (which operates a hospital-based service).

From 2012 to 2015, Colorado Department of Public Health and Environment (CDPHE) and stakeholders participated in numerous convenings to discuss options to utilize “community paramedics” in Colorado, and possible regulatory structures that may be necessary. Stakeholders included EMS providers, home care agencies, hospitals, physicians, nurses, consumer advocates and local public health agencies. In October 2015, a final report with recommendations was submitted to State Emergency Medical and Trauma Services Advisory Council (SEMTAC) that ultimately led to this legislation.

What You Need to Know

[Senate Bill 16-069 \(SB 069\):](#)

- Creates a state-governed EMS endorsement for Community Paramedics;
- Allows the provision of a “Community Assistance Referral and Education Services (CARES) Program”; and
- Creates a licensure path for “Community Integrated Health Care Service (CIHCS) Agencies”.

The major difference between the CARES program and the CIHCS Agency is the former does not offer any medical services and the latter does. Neither program requires the use of community paramedic or paramedics. If a paramedic or a community paramedic is used in the delivery of services in the CIHCS program to deliver care, then a physician medical director is required.

Given the diversity in the breadth and depth of local resources across the state, CHA worked to ensure flexibility in both models, such that hospitals and health systems are one of the many types of entities who are authorized to provide either of these programs. Many hospitals do not own and operate the EMS service, some do, and some hospital-based services are staffed by paramedics.

CDPHE has created two task forces to work on the Community Paramedic Endorsement Program and the CIHCS Agency licensure and model of care. The CARES program, as a non-medical service, does not require licensure at this time. A CARES program in existence prior to Jan. 1, 2015 is allowed to operate without being in compliance with the new statutory requirements until July 1, 2021.

Additional Resources

- [SB 069 Fiscal Note](#)
- SB 069 took effect on Aug. 10, 2016. Rules are forthcoming from the Colorado Department of Public Health and Environment.

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