

REPORT AND RECOMMENDATION OF HEARING OFFICER

Public Hearing: New Mexico Department of Health

Proposed Action: Amend Part 7.27.2 NMAC (“Licensing of Emergency Medical Services Personnel”) and 7.27.11 NMAC (“Supplemental Licensing Provisions”)

Hearing Date: June 7, 2021

Report Date: June 14, 2021

Report of Hearing Officer

1. The Hearing

A public hearing was held on June 7, 2021 at 9:00 via Webex® video conference for the purpose of considering the Department of Health (DOH)’s amendment of Part 7.27.2 NMAC (“Licensing of Emergency Medical Services Personnel”) and 7.27.11 NMAC (“Supplemental Licensing Provisions”). The hearing was held in accordance with the State Rules Act, Section 14-4-1 *et. seq.*

Christopher L. Graeser presided as Hearing Officer pursuant to appointment by Secretary Tracie C. Collins, M.D.

The hearing was electronically recorded by DOH. A digital copy of the recording is transferred with this report.

The Hearing Officer opened the hearing, introduced himself and had the participants introduce themselves and indicate their affiliation or interest.

2. Parties in Attendance

DOH was represented at the hearing by Assistant General Counsel Christopher Woodward, State EMS Medical Director Joy Crook, M.D., Emergency Medical System Bureau Chief Kyle Thornton and EMS Program Manager Jacob Bennett. Other parties present at the hearing included:

Charles Schroeder, Interested Party

Jenna White, M.D., EMS Medical Director of multiple EMS agencies in Sandoval County

Chelsea C. White, M.D., UNM Department of Emergency Medicine, EMS Medical Director of multiple EMS agencies in New Mexico

Pete Bellows, Chairman, Statewide EMS Advisory Committee

Carl Gilmore (participating via chat function)

Peggy Griego, EMS Bureau Licensing Manager

Rebekah Moskowitz, Paramedic and teacher at Central New Mexico Community College

Clint Kalan, UNM EMS Consortium

3. Exhibits

Mr. Woodward identified and entered the following documentary evidence, which was admitted without objection:

1.	<u>Proposed Rule Amendments</u> 7.27.2 NMAC – Licensing of Emergency Medical Service Personnel
2.	<u>Proposed Rule Amendments</u> 7.27.11 NMAC – Supplemental Licensing Provisions
3.	Notice of Public Hearing
4.	Affidavit of Notice to the Public
5.	Affidavit of Publication in the Albuquerque Journal
6.	Affidavit of Publication in the New Mexico Register
7.	Letter Appointing Hearing Officer
8.	Draft Amendments to 7.27.2 and 7.27.11 NMAC with Suggested Revisions from Members of the Public from 6/7/21 Hearing

4. Testimony

A. Part 11

Mr. Thornton identified and explained the purpose of each of the proposed amendments to Part 11, as recommended by the Medical Direction Committee, summarized as follows:

7.27.11.2: Scope of rule language added to include specialized and credentialed sub-categories of health care.

7.27.11.8.F: Scope of practice language added to include mobile integrated health.

7.27.11.8.F.6: Facilitation of telemedicine clinician contact language added to ensure that it is within scope of a community EMS provider.

7.27.11.8.K(1)(g), 7.27.11.8.L(1)(g), 7.27.11.8.M(1)(g), 7.27.11.8.N(1)(g): More general and accepted term “spinal motion restriction” substituted for “spine immobilization.”

7.27.11.8.K(2)(b)(iii): Subcutaneous administration of approved medication added, consistent with revised method of administration of epinephrine.

7.27.11.8.K(2)(b)(vi): Revised method of administration of epinephrine to reflect current practice by EMT-Basic with no adverse reports and reduction of costs to agencies.

7.27.11.8.L(2)(a)(v), 7.27.11.8.N(2)(a)(iii), 7.27.11.8.N(2)(a)(xiii): Restrictive “naso” language removed in favor of more general gastric tube language. Restriction was unintentional.

7.27.11.8.L(2)(c)(iv), 7.27.11.8.M(2)(c)(iv): Restrictive pediatric language removed from acetaminophen allowable drug to allow more general administration.

7.27.11.8.M(2)(c)(v): Inclusion of Ketorolac (an NSAID) for pain.

7.27.11.8.M(2)(c)(xv): Inclusion of written protocol as basis for provision of certain narcotic pain relievers by EMT-Intermediates.

7.27.11.8.N(2)(a)(iii): Removal of “intended for outpatient use” limitation on transport of patients with vascular access devices.

7.27.11.8.N(2)(c)(ix) “blood and blood products” included in allowable drugs to reflect inclusion in allowable skills.

Note: The above is an additional amendment suggested at hearing, and determined to be within scope of rulemaking. The amendment was suggested by Mr. Bellows, and discussed and agreed to by Mr. Thornton, Dr. Crook and Dr. C. White.

7.27.11.8.N(2)(c)(xxxiii): Inclusion of tranexamic acid in scope of allowable drugs, elimination of prescriptive dosing language to reflect current practice.

Note: The above is an additional amendment suggested at hearing, and determined to be within scope of rulemaking. The amendment was suggested by Mr. Kalan, and discussed and agreed to by Mr. Thornton, Dr. Crook and Dr. C. White.

7.27.11.8.N(3): Allowing less restrictive language regarding titration of medications, to facilitate transportation.

7.27.11.8.N(3)(c): Removal of “tranexamic acid” from inter-facility transport monitoring due to inclusion in scope of practice for Paramedics in 7.27.11.8.N(2)(a)(xxxiii).

7.27.11.8.N(3)(f): Removal of “blood and blood products” from inter-facility transport monitoring due to inclusion in scope of practice for Paramedics in 7.27.11.8.N(2)(a)(xviii).

7.27.11.8.N(3)(o): Dobutamine, which was previously removed from transport drugs, resulting in confusion, added back in.

7.27.11.8.N(3)(s): Inclusion of new antivenin Anavip.

7.27.11.9: Modification of language allowing for other bureau-approved organizations for accreditation, and recognition of six vs. five listed organizations.

7.27.11.10 (throughout): Replacement of term “training coordinator” with “program manager” due to change in bureau positions.

7.27.11.10.G: Reduction in time for applications to be placed on agenda.

7.27.11.10.P: Change in reporting requirement to be more permissive and flexible.

7.27.11.10.P: Reports by services to be submitted annually on anniversary date rather than all reports due June 1.

Note: The above is an additional amendment suggested at hearing, and determined to be within scope of rulemaking. The amendment was suggested by Mr. Bellows, and discussed and agreed to by Mr. Thornton, Dr. Crook, Dr. C. White and Mr. Gilmore.

7.27.11.10.S: Digital copies of applications now accepted.

B. Part 2

Mr. Thornton then identified and explained the purpose of certain proposed amendments to Part 2, summarized as follows:

7.27.2.11.J: Changes in CE credits to align three levels and national registry.

7.27.2.12: Removal of requirement to carry wallet card in favor of being listed on bureau’s list, to recognize online access to information and avoid unauthorized modification of paper documents.

Mr. Woodward then identified and explained the purpose of the remaining proposed amendments to Part 2, summarized as follows:

7.27.2.14.G(3)(d), 7.27.2.16.A, 7.27.2.16.C: Limitation in disqualifying convictions in accordance with recent statutory changes in the Criminal Offender Employment Act.

There being no other comments or questions, the Hearing Officer closed the hearing and thanked everyone for their attendance.

5. Written Comments

No written comments were received.

Recommendation of Hearing Officer

The Hearing Officer finds that the proposed amendments are reasonable, necessary, and consistent with applicable statutes.

The Hearing Officer finds the oral testimony of parties to the hearing to be well taken and to be unanimously in favor of the proposed amendments, including consensus revisions made at the hearing.

The Hearing Officer recommends that the Secretary adopt the proposed amendments to Part 7.27.2 NMAC ("Licensing of Emergency Medical Services Personnel") and 7.27.11 NMAC ("Supplemental Licensing Provisions") as revised and contained in **Exhibit 8** to this rulemaking.



Christopher L. Graeser,
Hearing Officer

Date: 6-17-21