

An Implementation Plan for the Establishment of the Maine Emergency Medical Services Licensing Board

July 28, 2025



Contents

Executive Summary	1
Part I: Foundational Analysis: Rationale, Mandate, and Governance Framework	3
Section 1.1: Legislative Intent and the Principle of Bifurcated Governance	3
Section 1.2: The Emergency Medical Services Licensing Board: Composition and Authority	5
Section 1.3: Delineation of Powers: A Comparative Analysis.....	7
Part II: Phased Implementation Plan: From Appointment to Full Operation	10
Section 2.1: Phase 1 - Board Appointment (Timeline: August 6, 2025, to September 3, 2025)	10
Section 2.2: Phase 2 - Operational Transition (Timeline: September 3, 2025, to October 31, 2025).....	12
Part III: Inter-Board Relations and Strategic Communication.....	13
Section 3.1: Defining the "Consultation" Framework.....	13
Conclusion: Ensuring a Seamless Transition and a New Era of Focused Governance	15

Executive Summary

This document presents a comprehensive implementation plan for the Maine Emergency Medical Services (EMS) Board to guide the establishment and operationalization of the new Emergency Medical Services Licensing Board, as mandated by Public Law 2025, chapter 491¹. The creation of the Licensing Board represents a significant and strategic evolution in the governance of emergency medical services in Maine, aligning the state with established best practices in professional regulation as outlined by national organizations like the Council on Licensure, Enforcement and Regulation (CLEAR) and foundational principles of administrative law². This move is also consistent with the strategic recommendations, approved by the Board in April 2023, outlined in the "Maine EMS Vision and Plan," which called for a clear separation between system-level planning and the licensing and regulation of individual practitioners³. The core rationale for this legislative change is the principle of bifurcated governance: separating the broad, system-level policymaking and oversight functions from the specific, quasi-judicial responsibilities of professional licensure and discipline. This separation is designed to enhance due process for licensees, mitigate potential conflicts of interest, and allow each board to develop specialized expertise in its respective domain.

This plan provides a detailed, actionable roadmap for a seamless transition. It is structured in four parts:

1. **Foundational Analysis:** An in-depth examination of the legislative mandate, the rationale for the new governance structure, and a precise delineation of the powers and duties being transferred from the EMS Board to the new Licensing Board.
2. **Phased Implementation Plan:** A two-phase timeline with specific, sequential steps for the EMS Board to follow, covering the initial establishment of the Licensing Board (Phase 1), the transition of operational responsibilities (Phase 2).
3. **Operational Plan:** A set of standard operating procedures for the new Licensing Board, including detailed workflows for complaint investigation and adjudication, licensing and records management, and the conduct of public meetings, all grounded in Maine statute and administrative best practices.
4. **Inter-Board Relations and Communication:** A framework for managing the critical new relationships between the Licensing Board, the EMS Board, and the Medical Direction and Practices Board, with a particular focus on defining the statutory requirement for "consultation."

Critical recommendations outlined in this plan include the immediate development of a formal and transparent appointment, and operation process, for Licensing Board members. By adhering

¹ PL 2025 Ch. 491

² <https://boards.bsd.dli.mt.gov/docs/public-comment/Pol-Overview.pdf>

³ <https://www.maine.gov/ems/sites/maine.gov.ems/files/inline-files/20230522-Maine-EMS-Vision-and-Plan.pdf>

to this structured plan, the Maine EMS Board can ensure the successful launch of the Licensing Board, fostering a new era of focused, accountable, and legally robust governance for the entire Maine EMS system.

Part I: Foundational Analysis: Rationale, Mandate, and Governance Framework

Section 1.1: Legislative Intent and the Principle of Bifurcated Governance

The enactment of Public Law 2025, chapter 491, marks a fundamental restructuring of the governance framework for Emergency Medical Services in Maine. The law's central provision—the creation of a new Emergency Medical Services Licensing Board—is not merely an administrative reshuffling but a deliberate implementation of a core principle of modern professional regulation: the separation of broad policymaking and rulemaking functions from quasi-judicial licensing and disciplinary functions⁴. An analysis of the amendments to Title 32, chapter 2-B, reveals a clear legislative intent to align Maine EMS with this established model, which is prevalent across other professional and occupational licensing boards within the state⁵.

This legislative action directly implements a key recommendation from the "Maine EMS Vision and Plan," which was adopted by the Maine EMS Board by a unanimous vote at its regularly scheduled meeting on April 5, 2023⁶, and the 2024 report from the Blue-Ribbon Commission to Study Emergency Medical Services in the State⁷. The Vision and Plan called for a clear delineation between system planning and the regulation of personnel, proposing the creation of a professional licensing board responsible for regulating personnel and conducting investigations. Similarly, the Blue-Ribbon Commission, in its Recommendation B-3, explicitly supported the proposed reorganization, which would establish a separate EMS Licensing Board charged with the regulation of EMS licensing⁸. The stated goal of this structural change was to "decouple personnel regulation from system development, guidance, and planning," thereby promoting a more agile and responsive system.

Prior to this law, the Maine EMS Board was a monolithic entity, responsible for the full spectrum of EMS oversight. Its duties ranged from high-level strategic planning, such as developing the statewide trauma system and establishing community paramedicine programs, to the granular, quasi-judicial work of granting individual licenses, investigating complaints, and imposing disciplinary sanctions⁹. While this consolidated structure served Maine for many years, it contained an inherent potential for conflicts of interest. The same body that promulgated the rules defining licensure standards and professional conduct was also responsible for adjudicating alleged violations of those very rules. This created a dynamic where the board acted as legislator,

⁴ PL 2025 Ch. 491

⁵ <https://www.mainelegislature.org/legis/statutes/5/title5sec12004-A.html>

⁶ <https://www.maine.gov/ems/sites/maine.gov.ems/files/inline-files/20230405-EMS-Board-Minutes.pdf>

⁷ <https://www.maine.gov/ems/sites/maine.gov.ems/files/inline-files/20240124-Maine%20EMS-LD244-Final%20Report.pdf>

⁸ <https://www.maine.gov/ems/sites/maine.gov.ems/files/inline-files/20240124-Maine%20EMS-LD244-Final%20Report.pdf>

⁹ <https://www.mainelegislature.org/legis/statutes/32/title32sec81-A.html>

investigator, prosecutor, judge, and jury.

The new law remedies this by bifurcating these responsibilities. The EMS Board retains its authority over system-wide policy, planning, and the promulgation of rules, while the newly created Licensing Board is vested with the specific authority to apply those rules through licensing, investigation, and discipline¹⁰. This separation yields two primary benefits that strengthen the entire system.

First, it significantly enhances the principles of due process and fairness for all licensees. By creating a separate adjudicatory body, the law ensures that disciplinary proceedings are conducted by a board whose sole focus is the impartial application of established rules to the specific facts of a case. This structure removes any perception that the body hearing a complaint is predisposed to a certain outcome because it also authored the rule in question. This separation of powers is a cornerstone of administrative law and strengthens the legal defensibility of all licensing and disciplinary actions, ensuring they are less vulnerable to procedural challenges on appeal.

Second, this bifurcation fosters specialized expertise and focus. The Maine EMS Board is comprised of a large, diverse membership representing a wide array of stakeholders and is tasked with a broad and complex mission¹¹. Its focus is necessarily on the health of the entire EMS system. The new Licensing Board, by contrast, is a smaller, more focused body whose membership is specifically tailored to the domains it will regulate: an EMS physician, advanced and basic life support providers, emergency medical dispatch, training centers, and service administrators¹². This composition allows the Licensing Board to develop deep, specialized expertise in the complex, fact-intensive work of licensure, evidence review, and adjudication. Simultaneously, it frees the EMS Board to concentrate its efforts on critical, high-level strategic challenges facing the state, such as workforce sustainability, public outreach, regional coordination, and the integration of EMS with the broader healthcare system. This division of labor is designed to produce greater efficiency and higher-quality outcomes in both the regulatory and strategic domains.

¹⁰ PL 2025 Ch. 491

¹¹ <https://www.mainelegislature.org/legis/statutes/32/title32sec88.html> - 32 M.R.S. §88(1)(A)

¹² PL 2025 Ch. 491

Section 1.2: The Emergency Medical Services Licensing Board: Composition and Authority

Public Law 2025, c. 491, meticulously defines the composition for the new Emergency Medical Services Licensing Board in the newly enacted 32 MRSA §84, sub-§1, paragraph H¹³. The structure is designed to ensure that the board possesses the requisite expertise and perspective to fairly and competently oversee the licensing and discipline of EMS professionals and entities.

The Licensing Board will consist of seven members, each representing a key sector of the EMS community:

1. An emergency medical services physician representing hospitals.
2. A member representing advanced emergency medical services persons.
3. A member representing basic emergency medical services persons.
4. A member representing emergency medical dispatch services.
5. A member representing emergency medical services licensed training centers.
6. A member representing emergency medical services administrators.
7. The Director of Maine Emergency Medical Services or the director's designee.

This composition ensures that decisions are informed by direct experience from the field, from clinical leadership, from the educational community, and from service management. The inclusion of the Maine EMS Director as a full voting member provides a direct and permanent link to the administrative arm of the EMS system, facilitating coordination and communication, and ensures that there is impartial representation of the interests of the public on this Board¹⁴.

The appointment process outlined in the statute is unique. Unlike many state boards whose members are appointed directly by the Governor, the members of the EMS Licensing Board are to be appointed by the Maine EMS Board itself, by majority vote and "in consultation with the Commissioner of Public Safety or the commissioner's designee¹⁵." This internal appointment mechanism places a significant responsibility on the EMS Board. The credibility, legitimacy, and ultimate success of the new Licensing Board will hinge on the integrity and transparency of this initial appointment process.

To fulfill this duty responsibly, the EMS Board must establish a formal, public, and defensible selection process that mirrors best practices for public appointments¹⁶. A casual or informal process would risk charges of favoritism and undermine the new board's authority from its inception. Therefore, this implementation plan strongly recommends the following actions for the EMS Board:

¹³ PL 2025 Ch. 491

¹⁴ PL 2025 Ch. 491

¹⁵ PL 2025 Ch. 491

¹⁶ PL 2025 Ch. 491

- Approve the use of current application: Maine EMS created a standardized application form for interested candidates. This form solicits information regarding the applicant's qualifications, experience, and understanding of the role.
- Publicize Vacancies Widely: Announce the openings for the six board seats through all official Maine EMS channels to ensure a broad and diverse pool of qualified applicants.
- Conduct Formal Interviews: The EMS Board, or a designated subcommittee, should promptly conduct interviews with qualified applicants and make recommendations to the full Board and the Commissioner of Public Safety.
- Document the Consultation Process: The "consultation with the Commissioner of Public Safety or the commissioner's designee" must be a meaningful and documented step. This should involve the commissioner's or his designee involvement in all aspects of the selection process. If the commissioner has a designee, the designee should be identified in writing to the Board.

Section 1.3: Delineation of Powers: A Comparative Analysis

Public Law 2025, c. 491, systematically transfers a suite of specific powers and responsibilities related to licensing and discipline from the Maine EMS Board to the new EMS Licensing Board. Understanding this precise delineation of authority is critical for both boards, as well as for Maine EMS staff, legal counsel, and all system stakeholders, to prevent jurisdictional confusion and ensure a smooth operational transition.

The law accomplishes this transfer through a series of targeted amendments and repeals within 32 MRSA chapter 2-B. Key functions, previously vested solely in the EMS Board, are now either delegated entirely to the Licensing Board and its staff, or are to be exercised by the EMS Board only "in consultation with" the Licensing Board. The most significant transfer of power occurs in the complete overhaul of 32 MRSA §90-A, which now grants the full spectrum of investigatory and disciplinary authority to the Licensing Board. Concurrently, the law repeals the sections that previously granted this authority to the EMS Board, such as subsections 3, 4, and 5 of §88, thereby removing the old disciplinary framework¹⁷.

The following table provides a detailed, comparative analysis of these changes, contrasting the statutory authority before and after the enactment of PL 2025, c. 491. This table serves as a primary reference guide to the new division of responsibilities.

¹⁷ PL 2025 Ch. 491

Table 1: Transfer of Powers and Responsibilities from the EMS Board to the EMS Licensing Board

Function/Responsibility	Pre-PL 2025, c. 491 Authority	Post-PL 2025, c. 491 Authority	Governing Statutory Citation (PL 2025, c. 491)
Granting of Licenses	EMS Board Only [Sec. 88(2)(C)]	Delegated to EMS Licensing Board	Sec. 12, amending 32 MRSA §88(2)(C)
Setting Licensing Requirements	EMS Board Only [Sec. 85(3)]	EMS Board, in consultation with Licensing Board	Sec. 6, amending 32 MRSA §85(3)
Setting Relicensing Requirements	EMS Board Only [Sec. 85(4)]	EMS Board, in consultation with Licensing Board	Sec. 7, amending 32 MRSA §85(4)
Obtaining Applicant Criminal History Records	EMS Board Only [Sec. 85(3)]	EMS Licensing Board Only	Sec. 6, amending 32 MRSA §85(3)
Obtaining Ambulance Operator Background Checks	EMS Board Only [Sec. 85-B(2)]	EMS Licensing Board Only	Sec. 10, amending 32 MRSA §85-B(2)
Investigating Complaints	EMS Board, subcommittee/staff through delegation [Sec. 90-A(1)]	EMS Licensing Board or its staff	Sec. 17, amending 32 MRSA §90-A(1)
Subpoena Power for Investigations	EMS Board, subcommittee /staff through delegation [Sec. 90-A(1)]	EMS Licensing Board or its staff	Sec. 17, amending 32 MRSA §90-A(1)
Conducting Informal Conferences	EMS Board, subcommittee/ staff through delegation [Sec. 90-A(3)]	Repealed	Sec. 17, amending 32 MRSA §90-A(3)

Negotiating Consent Agreements	EMS Board [Sec. 90-A(4)(A)]	EMS Licensing Board or its staff	Sec. 17, amending 32 MRSA §90-A(4)(A)
Imposing Disciplinary Sanctions (Warnings, Suspensions, Revocations)	EMS Board [Sec. 88(3)(A)]	EMS Licensing Board or its staff as delegated	Sec. 17, amending 32 MRSA §90-A(7)(A)
Imposing Civil Penalties	EMS Board (up to \$1,500) [Sec. 88(3)(C)]	EMS Licensing Board or its staff as delegated (up to \$1,500)	Sec. 17, amending 32 MRSA §90-A(7)(C)
Issuing Letters of Guidance	EMS Board, or as delegated its subcommittee/staff [Sec. 88(4)]	EMS Licensing Board or its staff as delegated	Sec. 17, amending 32 MRSA §90-A(8)
Requesting Mental/Physical Exams	No Previous Authority	EMS Licensing Board Only	Sec. 17, enacting 32 MRSA §90-A(9)
Hearing Appeals of Staff Non-disciplinary Actions	EMS Board	EMS Licensing Board	Sec. 17, amending 32 MRSA §90-A(10) & Sec. 19, repealing §91-A
Setting Fees (Licensure, Application, etc.)	EMS Board Only [Sec. 88(2)(I)]	EMS Board, in consultation with Licensing Board	Sec. 13, amending 32 MRSA §88(2)(I)

Part II: Phased Implementation Plan: From Appointment to Full Operation

This section outlines a structured, two-phase implementation plan designed to ensure an orderly and effective transition from the current governance model to the new bifurcated structure. Each phase includes specific, actionable steps with a recommended timeline, beginning prior to the effective date of PL 2025, c. 491, **which is September 24, 2025.**

Section 2.1: Phase 1 - Board Appointment (Timeline: August 6, 2025, to September 3, 2025)

The initial phase focuses on the foundational tasks of legally constituting the new Emergency Medical Services Licensing Board and equipping it with the necessary training to begin its work.

Step 1: Appoint Members

Following the established procedure, the EMS Board shall review applications, conduct interviews, and formally vote to appoint the seven members as mandated by 32 MRSA §84(1)(H).¹⁸ The EMS Director will then notify the successful appointees.

Step 2: Conduct Inaugural Meeting.

The Director of Maine EMS, or their designee, shall call the inaugural meeting of the Licensing Board. The first order of business at this meeting, after calling the roll, should be the election of a Chair and Vice-Chair from among the board's members. This Chair/Vice Chair may not be the Director of Maine EMS, or their designee.

Step 3. Onboarding.

A critical component of this phase is mandatory onboarding and training for all new members. This training must cover, at a minimum:

- The Maine Administrative Procedure Act (APA)¹⁹: As a quasi-judicial body, the Licensing Board's actions, particularly adjudicatory hearings, are strictly governed by the APA. Members must understand the legal requirements for notice, hearings, evidence, and decision-making.
- The Maine Freedom of Access Act (FOAA)²⁰: Members must be trained on the requirements for open meetings, public notice, proper use of executive sessions, and the handling of public records requests to avoid violations.

¹⁸ PL 2025 Ch. 491

¹⁹ <https://www.mainelegislature.org/legis/statutes/5/title5ch375sec0.html>

²⁰ <https://www.mainelegislature.org/legis/statutes/1/title1ch13sec0.html>

- The Board's Enabling Legislation²¹: A thorough review of the amended 32 MRSA chapter 2-B, focusing on the board's specific powers and duties as outlined in PL 2025, c. 491.
- Conflict of Interest Laws: Training on state ethics laws and the board's specific conflict of interest policies to ensure members understand when they must recuse themselves from a matter.

²¹ PL 2025 Ch. 491

Section 2.2: Phase 2 - Operational Transition (Timeline: September 3, 2025, to October 31, 2025)

This phase involves the transfer of active cases, and administrative processes from the EMS Board to the new Licensing Board, while ensuring legal compliance and operational continuity.

Step 1: Plan for Handover of Active Cases (September 3, 2025, to September 24, 2025)

A significant risk during the transition is the mishandling of open complaint and investigation files. A haphazard handover could compromise investigations, violate the confidentiality of records, or prejudice the due process rights of licensees. To mitigate this, Maine EMS staff must develop a formal, written plan for the transition of all active cases.

The plan must address:

- Case Inventory: Creation of a master list of all open complaints, detailing their current status (e.g., awaiting licensee response, under active investigation).
- Notification: A communication scheme for notifying licensees in active cases about the transfer of jurisdiction to the new Licensing Board, including any potential delays in the adjudication of their case to allow for the transition.
- Handling of Current Cases: A plan for ensuring that cases already heard by the EMS Board or its investigation subcommittee prior to the effective date of the legislation, shall be completed under the EMS Board.

Step 2: Transition of Licensing and Application Processes (September 24, 2025, to October 31, 2025)

Maine EMS administrative staff must undertake a comprehensive update of all public-facing materials and internal workflows. This includes:

- Revising all initial and renewal licensure application forms for individuals, training centers, and dispatch centers to reflect the Licensing Board as the issuing authority.
- Updating the Maine EMS website, online portals, and any relevant databases to direct all licensing inquiries and submissions to the new board and its staff.
- Modifying the existing workflow for the Licensing Board's designated staff to request, receive, process, and securely store the criminal history record information and driver's license information required under the amended statutes.
- Modification of existing policies to reflect their use under the amended statute, and to reflect the transition to the Licensing Board.
- Collaborative work between the Licensing Board and the EMS Board to update chapters of Maine EMS Rules that address personnel licensure and re-licensure. (Anticipated Completion by June 2026)

Part III: Inter-Board Relations and Strategic Communication

The creation of the Licensing Board establishes a new, more complex governance ecosystem. The success of this new structure will depend not only on the internal operations of the Licensing Board but also on its ability to build effective working relationships with the EMS Board. A proactive approach to defining these relationships and communicating the changes to stakeholders is essential.

Section 3.1: Defining the "Consultation" Framework

A significant governance risk embedded in PL 2025, c. 491, is the repeated statutory mandate for the EMS Board to act "in consultation with the licensing board" on a range of critical rulemaking matters. This phrase appears in the amended sections governing the definition of skills, initial licensing requirements, relicensing standards, ambulance operator qualifications, and the establishment of fees²².

The statute, however, does not define "consultation." This ambiguity is a potential source of future conflict and administrative gridlock. For example, if the two boards disagree on a proposed rule, one could argue that the other failed to "consult" in good faith, potentially stalling or invalidating the rulemaking process under the Maine Administrative Procedure Act²³. The process of rulemaking is a formal one, and ambiguity in a required procedural step creates legal vulnerability.

To mitigate this risk, the EMS Board and the new Licensing Board must proactively and collaboratively define this term themselves. It is strongly recommended that the two boards jointly draft and adopt a rule of procedure. This rule should establish a clear, predictable, and documented process. This/These rule(s) should include:

- **Formal Initiation:** A requirement that the EMS Board initiate consultation by identifying an area of rulemaking for which consultation is required and voting to send a rule proposal to the Licensing Board for their advice and input.
- **Defined Timeline:** A specified and reasonable timeline (e.g., 45 or 60 days) for the Licensing Board to review the proposal, discuss it at a public meeting, and provide a formal written response to the EMS Board.
- **Official Record:** A requirement that the Licensing Board's written response be officially entered into the administrative record for the rulemaking proceeding. This ensures their input is formally documented and considered.
- **Dispute Resolution:** A process for resolving significant disagreements, such as scheduling a joint work session between the two boards to discuss the issues before the EMS Board moves forward.

²² PL 2025 Ch. 491

²³ <https://www.mainelegislature.org/legis/statutes/5/title5ch375sec0.html>

- Clarification of Authority: The rule should explicitly state that while the Licensing Board's input must be formally solicited and considered, "consultation" does not grant the Licensing Board veto power over the EMS Board's final rulemaking authority. This preserves the statutory hierarchy while ensuring the Licensing Board's expert voice is heard.

Conclusion: Ensuring a Seamless Transition and a New Era of Focused Governance

The implementation of Public Law 2025, chapter 491, represents a pivotal moment for the Maine Emergency Medical Services system. The transition from a single, all-encompassing board to a bifurcated structure with a distinct EMS Board and EMS Licensing Board is a move toward a more modern, accountable, and legally robust model of professional governance. This change promises to enhance due process for providers, foster specialized expertise, and allow for a more focused approach to both system-wide strategic planning and individual-level regulation.

The success of this transition hinges on a deliberate, collaborative, and transparent implementation process. The detailed, phased plan presented in this report provides the necessary roadmap for the Maine EMS Board to navigate this complex undertaking.