

INTRO TO COMMUNITY PARAMEDICINE

Community Paramedicine is non-urgent, non-emergent care provided by EMS clinicians (EMT, AEMT, Paramedic) throughout the state of Maine and is enabled by LD 1427.

CP HISTORY

2017
LD 1427 ENABLED
CP LONG TERM

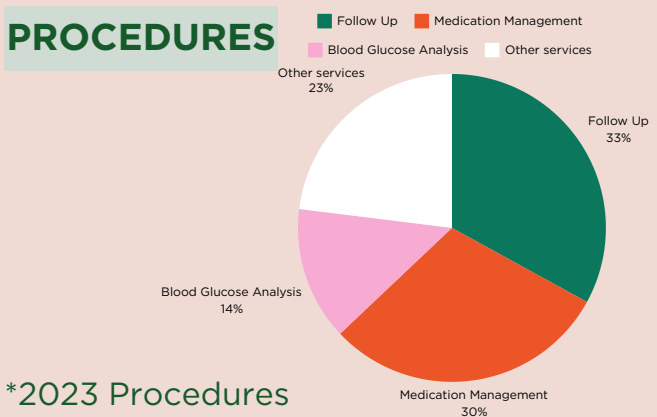


2012
LD 1837 APPROVED
12 CP PILOT PROJECTS



2023
LD 883 HOME HEALTH
EXEMPTION

PROCEDURES



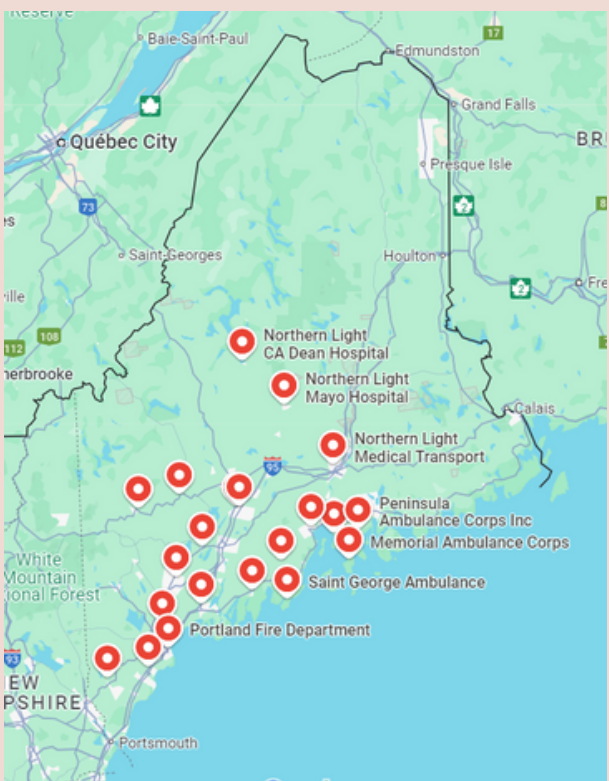
*2023 Procedures

MAINECARE



Between 2018 - 2022 58% of CP patients were MaineCare members

CP AGENCIES



21 Agencies with CP Designations
as of 10/3/2024

WHAT CAN CP DO?

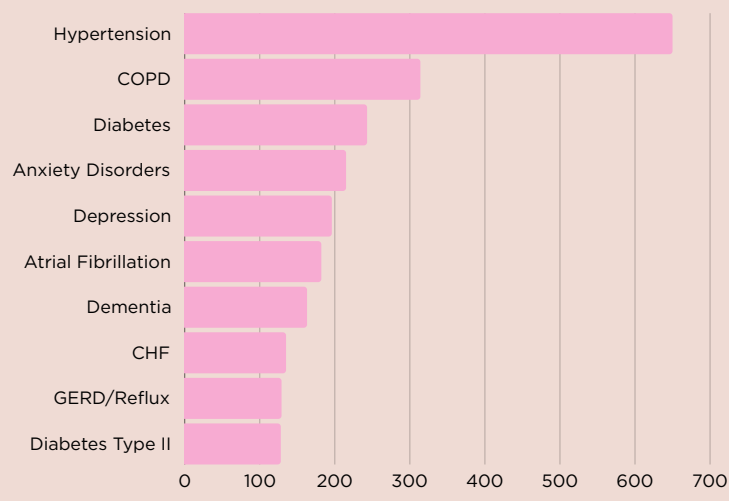
CP IS:

- Episodic
- Non-Emergent
- Provider Referred Care
- Meets the patient where they are (on the street, in a shelter, at their home, etc.)
- Aligns with the patient's plan of care

CP IS NOT:

- Substitute for other services
- 911 service
- Referred by the EMS clinician
- Alternate route after 911 is initiated (ET3)

TOP 10 MEDICAL HISTORY



In 2023, 569 unique patients were treated through CP and these were the top conditions identified within medical history.

REIMBURSEMENT

The state has been working with the Office of MaineCare Services (OMS) towards medicaid reimbursement. There have also been larger initiatives towards multi-payer alignment,

Most agencies fund CP through volunteerism and grants.

FREQUENTLY ASKED QUESTIONS

COMMUNITY PARAMEDICINE

(FAQ)

1. WHO CAN BE A PRIMARY CARE MEDICAL DIRECTOR?

A physician (MD or DO) or a nurse practitioner (NP) who is licensed and practicing in a primary care capacity within the state of Maine. A physician assistant may assist in this role under the direct supervision of a physician; however, the supervising physician must be identified to Maine EMS as the medical director.

2. WHO CAN DO REFERRALS FOR COMMUNITY PARAMEDICINE SERVICES?

Referrals can come from a physician (MD, DO), nurse practitioner (NP) or physician assistant (PA). Those providers can be from any specialty, including ED physicians, specialty physicians, discharging hospitalists, etc.

3. WHAT IS EXPECTED FOR A MEDICAL DIRECTOR AS FAR AS TRAINING?

Medical director expectations may differ based on the community's needs. However, it is not expected that medical directors will provide overarching CP education. Some medical directors will provide area-specific education or skills boosters as needed by their service. They may also support CEH opportunities.[The job description provides a helpful overview.](#)

4. HOW IS COMMUNITY PARAMEDICINE FUNDED?

This currently depends on the agency. There is movement towards statewide reimbursement models to standardize. Just as 911 billing differs from agency to agency, so does CP funding. Some agencies utilize grant funding, municipal funding, volunteerism, or community donations, or a mix of all. Agencies also have the option of individually contracting with private insurers. On December 8, 2023, MaineCare provided a Rate Determination Initiation Notice for Community Paramedicine Services. In the fall of 2024, LD 1832 created a stakeholder group to consider stakeholder models for CP services.

5. ARE THERE EXPECTATIONS AROUND QA/QI FOR A PCP MEDICAL DIRECTOR?

Medical Directors will work collaboratively with their agency and available resources to develop a robust QA/QI program. Depending on agency structure, medical director expectations vary from the medical director doing the majority of the overview to providing support on a broader QA/QI team. [The job description provides a helpful overview.](#)