

**16 DEPARTMENT OF PUBLIC SAFETY**

**163 BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS)**

**CHAPTER 15: MAINE EMS REGIONS AND REGIONAL COUNCILS**

**§1. Regions**

1. The State of Maine shall be divided into four distinct EMS regions based on geographical county boundaries. Those regions shall be:

- A. Region One: Cumberland and York Counties.
- B. Region Two: Androscoggin, Franklin, Kennebec, Oxford, Sagadahoc, and Somerset Counties.
- C. Region Three: Hancock, Knox, Lincoln, Penobscot, Piscataquis, Waldo, and Washington Counties.
- D. Region Four: Aroostook County.

**§2. Regional Councils**

**1. Designation**

- A. Each Region shall have one (1) Regional Council; an entity may not serve more than one region.
- B. The Board shall designate regional emergency medical services councils, but in no event shall the number of regional councils exceed four (4).
- C. Such regional councils shall be established by application for designation to be submitted by a business entity. Such application shall describe, at minimum, the region to be served and contain a list of nominees for appointment to voting membership of the council, on an application approved by the Board.
- D. The Board, upon a finding that the regional council has failed to execute its duties, may designate another business entity, with a two-thirds majority vote
  - 1. If an entity serving as the regional council is terminated for cause, the board may designate an entity to serve as the regional council until the Board designates a new entity through the designation process described in this sub-section. The temporarily appointed entity may be an entity that serves a separate region.

## 2. Roles and Responsibilities

- A. The Regional Council and its representative to the Board shall ensure information is shared between the Board, Committees, Entities of the Board, and Office, with the local agencies and stakeholders within the region served.
- B. The Regional Council shall appoint, subject to approval by the board, a Regional Medical Director, in accordance with §3(1) of this chapter.
- C. The Regional Council shall nominate candidates in accordance with 32 M.R.S. §89.
- D. The Regional Council shall establish a committee to carry out a plan of quality improvement approved by the Board.
- E. Each region shall have one (1) Regional Coordinator, who shall be responsible to the Regional Council. This Coordinator shall, with the advice and knowledge of the Regional Council, be responsible for the administration of regional plans, goals, and operations as defined in this rule.
  - 1. The Regional Coordinator shall be an ex-officio non-voting member of the Regional Council.
  - 2. The Regional Coordinator shall interface with and provide monthly updates to the Office of EMS.
  - 3. The vacancy of this position shall be reported to the Office of EMS within seven (7) calendar days.

## 3. Composition

- A. The regional council shall consist of the following voting members. No single Ambulance Service or Non-Transporting Emergency Medical Service shall have more than one voting representative on the council. A regional council shall, at a minimum, consist of:
  - 1. Three (3) representatives from Hospital(s) located within the region. Three (3) representatives from Maine EMS-licensed Ambulance Services or Non-Transporting Emergency Medical Services located within the region. One (1) representative of Emergency Medical Dispatch Services who is currently licensed by the Board. Seven (7) representatives currently residing within the region, one of whom is not licensed by the Maine EMS Board. There must, at minimum, be a member chosen from each county represented within the region

- B. A Regional Council shall have no more than 17 voting members.
- C. Voting members of the regional councils shall be limited by terms defined by the Regional Council bylaws.
- D. The names and public contact information for the voting members of the regional council shall be published digitally, and maintained by the regional council. Any changes in name or public contact information shall be published within seven (7) business days.

#### 4. Duties

- A. Make and alter by-laws for its organization and internal management.
- B. Convene a meeting no less than four (4) times annually. Draft minutes will be recorded for each of these meetings, which will become final upon a vote of the council. Maine EMS-licensed entities within the region shall receive written notice no later than seven (7) days prior to the meeting. Finalized minutes will be provided within five (5) business days after council approval to the Office of EMS and any Maine EMS-licensed entities within the region.
- C. Develop and submit to the Board a comprehensive Regional Plan that provides for the organization and implementation of regional goals and strategies in alignment with the goals and objectives defined by the Board and as defined in the Request for Proposal, if applicable. This plan shall identify how the Regional Council will provide support to Ambulance Services and Non-Transporting services, and be accompanied by an analysis of regional operations that includes the identification of resources needed to meet the goals and strategies identified within the plan. This plan shall be subject to annual approval by the Board; submission shall be no later than August 15 of each calendar year. The Board will approve or reject the submitted plan within 70 calendar days after the deadline for submission. If a plan is rejected, a Regional Council shall be afforded 60 calendar days to submit a modified plan to the Board for approval.
- D. Develop a comprehensive Quality Assurance and Improvement plan approved by the Board. This plan must be reviewed and approved by the Board at a minimum every three (3) years.
  - 1. The plan shall be based on an ongoing region-wide assessment of EMS and EMD services operating within the region, and the quality of service-level quality assurance/quality improvement efforts.

- E. Undertake or cause to be undertaken plans, surveys, analyses and studies necessary, convenient or desirable for the effectuation of its purposes and powers, and to prepare recommendations and reports in regard thereto.

**§3. Regional Medical Director**

- 1. Each region shall have one (1) Regional Medical Director, who shall be a Maine licensed physician affiliated with a hospital within the region they serve.

**2. Appointment**

- A. Upon appointment by the region, the qualifications and experience of the licensed physician will be submitted to the Board. The Board, in consultation with the Medical Direction and Practices Board, shall vote to confirm the appointment.

**3. Duties**

- A. A Regional Medical Director shall serve as a point of contact, coordination, and advice for Service-Level Medical Directors. A Regional Medical Director may, at their discretion, serve as a Service-Level Medical Director.
- B. Attend 75% of Regional Quality Assurance and Improvement Committee Meetings.
- C. Serve as the regional representative to the Medical Direction and Practices Board, maintaining compliance with that board's bylaws.
- D. Will refer, as appropriate, cases to the Office of EMS for investigation, and after adjudication by the Board of EMS, will serve as a coordinator for referred matters. A Regional Medical Director may not be referred a matter that involves a Maine-EMS licensed entity for which they serve as a Service-Level Medical Director; the matter should be directed to the Associate Regional Medical Director, or if one isn't available, a Regional Medical Director in another Region.

**4. Delegation of Duties**

- A. The Regional Medical Director may delegate in writing to other licensed physicians the responsibilities of their position. This written delegation must be submitted to the Office of EMS prior to the delegation's effect.
- B. The Regional Medical Director may not delegate their representation on the Medical Direction and Practices Board.

**§4. Associate Regional Medical Director**

1. Each region may have one (1) Associate Regional Medical Director, who shall be a Maine-licensed physician.

**2. Appointment**

- A. The Associate Regional Medical Director shall be designated by, with the advice of the Regional Medical Director, the Regional Council.

**3. Duties**

- A. The Associate Regional Medical Director may assist the Regional Medical Director in carrying out their duties.
- B. The Associate Regional Medical Director may perform the functions of the Regional Medical Director as delegated in writing and after submission of such delegation to the Office of EMS.

AUTHORITY: 32 M.R.S., Chapter 2-B.

EFFECTIVE DATE: July 3, 1978 (EMERGENCY)

AMENDED: April 1, 1982  
December 25, 1982 - Sec. 2.31, 3131, 6.311, 6.63 and 6.73  
January 1, 1984 - Sec. 1, 2, 3, 5, 6, 8.32, 10.2, 10.3, 11.1066, 11.1067  
April 30, 1985 - Sec. 1, 2.846.222, 6.332, 9.313, 8.3216 and 9.11  
January 1, 1986 - Sec. 1, 6. 8.15, 8.2, 8.3, 8.4 and 11.103  
September 1, 1986  
August 25, 1987 - Sec. 5, 6.011 and 12 (added)  
July 1, 1988  
March 4, 1992  
September 1, 1996

EFFECTIVE DATE (ELECTRONIC CONVERSION):  
July 1, 2000

REPEALED AND REPLACED:  
July 1, 2000  
July 1, 2003  
October 1, 2009  
May 1, 2013  
January 10, 2021  
March 6, 2024