1	16	DEPARTMENT OF PUBLIC SAFETY		
2 3 4	163	BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS)		
5 6	CHAPTER 15: MAINE EMS REGIONS AND REGIONAL COUNCILS			
7 8	§1. R	egions		
9 10 11		1. The State of Maine shall be divided into four distinct EMS regions based on geographical county boundaries. Those regions shall be:		
12		A. Region One: Cumberland and York Counties		
13 14 15		B. Region Two: Androscoggin, Franklin, Kennebec, Oxford, Sagadahoc, and Somerset Counties		
16 17 18		C. Region Three: Hancock, Knox, Lincoln, Penobscot, Piscataquis, Waldo, and Washington Counties		
19 20 21		D. Region Four: Aroostook County		
22	§2. Regional Councils			
23 24		1. Designation		
25 26 27		A. Each Region shall have one (1) Regional Council; an entity may not serve more than one region		
28 29 30 31		B. The Board shall designate regional emergency medical services councils, but in no event shall the number of regional councils exceed four (4)		
32 33 34 35 36 37		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		
38 39 40		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		
41		2. Roles and Responsibilities		
42 43 44		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 level agencies and stakeholders within the region served		
45 46		and Office with the local agencies and stakeholders within the region served		

47	B. The Regional Council shall appoint, subject to approval by the board, a
48	Regional Medical Director, in alignment with $\$3(1)$ of this chapter
49	
50	C. The Regional Council shall nominate 2 or more candidates from the region
51	for a position on the Board, from whom the Governor may select a member
52	
53	D. The Regional Council shall establish a committee to carry out a plan of
54	quality improvement approved by the Board
55	
56	E. Each region shall have one (1) Regional Coordinator, who shall be
57	responsible to the Regional Council. This Coordinator shall, with the advice
58	and knowledge of the Regional Council, be responsible for the administration
59	of regional plans, goals, and operations as defined in this rule
60	1. The Designal Constitutes at all with a section of such as false Designal.
61	1. The Regional Coordinator shall not be a voting member of the Regional
62	Council
63	2. The Designal Coordinator shall interfere with and amount has
64 CF	2. The Regional Coordinator shall interface with and provide monthly
65	updates to the Office of EMS
66	2. The management of this position shall be presented to the Office of EMS
67 68	3. The vacancy of this position shall be reported to the Office of EMS within source (7) colored and days
68 60	within seven (7) calendar days
69 70	
70 71	3. Composition
	5. Composition
72 72	A. The regional council shall consist of the following voting members. No single
73 74	Maine EMS-licensed entity shall have more than one voting representative on
75	the council. A regional council shall, at a minimum, consist of:
76	the council. A regional council shall, at a minimum, consist of.
77	1. Three representatives from Hospital(s) located within the region. Three
,,	1. Three representatives from Hospital(3) focated within the region. Three
78	Representatives from Maine FMS-licensed entities located within the
78 79	representatives from Maine EMS-licensed entities located within the region Seven (7) representatives currently residing within the region
79	region. Seven (7) representatives currently residing within the region,
79 80	region. Seven (7) representatives currently residing within the region, one of whom is not licensed by the Maine EMS Board. There must, at
79 80 81	region. 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
79 80 81 82	region. Seven (7) representatives currently residing within the region, one of whom is not licensed by the Maine EMS Board. There must, at
79 80 81 82 83	region. 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
79 80 81 82 83 84	region. 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
79 80 81 82 83 84 85	<ul><li>region. 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</li><li>B. A Regional Council shall have no more than 17 voting members</li></ul>
79 80 81 82 83 84 85 86	<ul> <li>region. 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</li> <li>B. A Regional Council shall have no more than 17 voting members</li> <li>C. Voting members of the regional councils shall be limited by terms defined by</li> </ul>
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79 80 81 82 83 84 85 86 87 88 88 89	<ul> <li>region. 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</li> <li>B. A Regional Council shall have no more than 17 voting members</li> <li>C. Voting members of the regional councils shall be limited by terms defined by the Regional Council bylaws</li> <li>D. The names and public contact information for the voting members of the</li> </ul>
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79 80 81 82 83 84 85 86 87 88 88 89	<ul> <li>region. 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</li> <li>B. A Regional Council shall have no more than 17 voting members</li> <li>C. Voting members of the regional councils shall be limited by terms defined by the Regional Council bylaws</li> <li>D. The names and public contact information for the voting members of the</li> </ul>

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94	E. The Director may designate an officer or employee of the Office to act as
95	secretary of the regional council and may assign from time to time such other
96	employees as the regional council may require
97	······································
98	4. Duties
99	
100	A. Make and alter by-laws for its organization and internal management
101	A. Wake and after by-faws for its organization and internal management
102	
102	B. Convene a meeting no less than four (4) times annually. Draft minutes will be
104	recorded for each of these meetings, which will become final upon a vote of
105	the council. Maine EMS-licensed entities within the region shall receive
106	written notice no later than seven (7) days prior to the meeting. Finalized
107	minutes will be provided within five (5) business days after council approval
108	to the Office of EMS and any Maine EMS-licensed entities within the region
109	
110	C. Develop and submit to the Board a comprehensive Regional Plan that
111	provides for the organization and implementation of regional goals and
112	strategies in alignment with the goals and objectives defined by the Board and
113	as defined in the Request for Proposal, if applicable. This plan shall be
114	accompanied by an analysis of regional operations that includes the
115	identification of resources needed to meet the goals and strategies identified
116	within the plan. This plan shall be subject to annual approval by the Board;
117	submission shall be no later than August 15 of each calendar year. The Board
118	will take action on the submitted plan within 70 calendar days after the
119	deadline for submission
120	
121	D. Develop a comprehensive Quality Assurance and Improvement plan approved
122	by the Board. This plan must be reviewed and approved by the Board at a
123	minimum every three (3) years
124	
125	1. The plan shall be based on an ongoing region-wide assessment of EMS
126	and EMD services operating within the region on their capacity,
127	throughput, and the quality of service-level quality assurance/quality
128	improvement efforts
129	improvement errorts
129	E. Undertake or cause to be undertaken plans, surveys, analyses and studies
130	necessary, convenient or desirable for the effectuation of its purposes and
132	powers, and to prepare recommendations and reports in regard thereto
133	82 Designal Madical Divertar
134	§3. Regional Medical Director
135	
136	1. Each region shall have one (1) Regional Medical Director, who shall be a Maine
137	licensed physician affiliated with a hospital within the region they serve
138	

139	2. Appointment
140	
141	A. Upon appointment by the region, the qualifications and experience of the
142	licensed physician will be submitted to the Board. The Board, in consultation
143	with the Medical Direction and Practices Board, shall vote to confirm the
144	appointment
145	
146	3. Duties
147	
148	A. A Regional Medical Director shall serve as a point of contact, coordination,
149	and advice for Service-Level Medical Directors. A Regional Medical Director
150	may, at their discretion, serve as a Service-Level Medical Director
151	
152	B. Attend 75% of Regional Quality Assurance and Improvement Committee
153	Meetings
154	
155	C. Serve as the regional representative to the Medical Direction and Practices
156	Board, maintaining compliance with that board's bylaws
157	
158	D. Will refer, as appropriate, cases to the Office of EMS for investigation, and
159	after adjudication by the Board of EMS, will serve as a coordinator for
160	referred matters. A Regional Medical Director may not be referred a matter
161	that involves a Maine-EMS licensed entity for which they serve as a Service-
162	Level Medical Director
163	
164	4. Delegation of Duties
165	
166	A. The Regional Medical Director may delegate in writing to other licensed
167	physicians the responsibilities of their position. This written delegation must
168	be submitted to the Office of EMS prior to the delegation's effect
169	
170	B. The Regional Medical Director may not delegate their representation to the
171	Medical Direction and Practices Board
172	
173	§4. Associate Regional Medical Director
174	
175	1. Each region may have one (1) Associate Regional Medical Director, who shall be a
176	Maine-licensed physician
177	
178	2. Appointment
179	
180	A. The Associate Regional Medical Director shall be designated by, with the
181	advice of the Regional Medical Director, the Regional Council
182	3. Duties
183	

184 185		ciate Regional Medical Director may assist the Regional Medical n carrying out their duties	
186			
187	B. The Associate Regional Medical Director may perform the functions of the		
188		Medical Director as delegated in writing and after submission of	
189	such delegation to the Office of EMS		
190	Such dele		
191	AUTHORITY: 32 M.R	R.S., Chapter 2-B.	
192			
193	EFFECTIVE DATE:	July 3, 1978 (EMERGENCY)	
194			
195	AMENDED:	April 1, 1982	
196		December 25, 1982 - Sec. 2.31, 3131, 6.311, 6.63 and 6.73	
197		January 1, 1984 - Sec. 1, 2, 3, 5, 6, 8.32, 10.2, 10.3, 11.1066, 11.1067	
198		April 30, 1985 - Sec. 1, 2.846.222, 6.332, 9.313, 8.3216 and 9.11	
199		January 1, 1986 - Sec. 1, 6. 8.15, 8.2, 8.3, 8.4 and 11.103	
200		September 1, 1986	
201		August 25, 1987 - Sec. 5, 6.011 and 12 (added)	
202		July 1, 1988	
203		March 4, 1992	
204		September 1, 1996	
205			
206	EFFECTIVE DATE (ELECTRON	NIC CONVERSION):	
207		July 1, 2000	
208			
209	REPEALED AND REPLACED:		
210		July 1, 2000	
211		July 1, 2003	
212		October 1, 2009	
213		May 1, 2013	
214		January 10, 2021	
215		TBD	
216			
217			
218	16 DEPARTMENT O	FPUBLIC SAFETY	
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220	163RUREAU OF EME	RGENCY MEDICAL SERVICES (MAINE EMS)	
221			
222	CHAPTER 15. MAINE EN	AS REGIONS AND REGIONAL COUNCILS	
223	-		
223	1 Comp	osition of Councils	
224	1. Comp	<del>ostion of Coulous</del>	
225	A Regional Council shall at	least, provide adequate representation for ambulance and rescue	
220 227		ans and nurses, each hospital, and the general public. A Regional	
228		o adequately represent each major geographical part of its	
229	region. Regional Councils V	vill identify and publicize names of representatives and their	

230		s in order that constituents are able to effectively communicate with their
231	representative	<del>28.</del>
232	-	
233		2. Regional Council Activities
234	-	
235		1. Only one Regional Council shall be recognized in any region. Any
236		organization proposing to serve, as a Regional Council must state this intention in
237		writing delivered to Maine EMS no later than 120 days before the start of the
238		fiscal year in which the contract is to be written. The Board will select the
239		organization which best demonstrates an ability to carry out those functions
240		specified in the service contract for the upcoming fiscal year. The Board will then
241		negotiate a price for carrying out the service contract with the organization
242		selected to be the Regional Council. The Board may elect to enter into a 2-year
243		contract consistent with the biennial budget process.
244	-	
245		2. Regional Council activities specified in the service contract will include
246		but are not limited to those activities listed in 32 M.R.S., Chapter 2-B §89. By
247		December 31, following the year the contract was in effect, each Regional
248		Council will submit to Maine EMS a final report for the previous fiscal year
249		detailing its performance in carrying out the provisions of the service contract,
250		and which includes an independently prepared financial report. Maine EMS will
251		use financial reports for the purpose of monitoring the general activities of each
252		Council and for setting reasonable prices for future service contracts. Because
253		Regional Councils depend largely on Maine EMS for operational revenue, Maine
254		EMS will endeavor to maintain a schedule of payments to the Region that
255		provides operational funds in advance of the period in which the funds will be
256		employed. Any regional personnel handling the disbursement of its funds shall be
257		bonded at a minimum of \$10,000.
258	-	
259		3. Designation of Regions-
260	-	
261	~	1. The Board shall delineate regions within the State in accordance
262		with 32 M.R.S. Chapter 2-B §89(1).
263	-	
264		2. Service Affiliation with Regions
265	-	
266		A. Services that respond only to cities, towns, townships, and
267		territories within a single region will be affiliated with that region.
268		
269		B. Services that respond to cities, towns, townships and territories in
270		more than one region will be affiliated with the region as determined
271		by the initial hospital destination of a simple majority of the patients
272		treated by the service as defined in §3.1 of this chapter.
273	-	
274		3. Changes to Service affiliation within Regional designations are
275		made by Maine EMS when they are approved by the Board and published

276	in a document distributed to all service chiefs. The Board will seek advice
277 278	from the services and Regional Councils affected regarding any disruption of patient service or EMS system caused by the proposed change in
279	designation.
280 -	
281 .	4. Medical Control and Delegation
282 -	
283	1. Regional Medical Directors acting within the provision of these Rules and
284	32 M.R.S. Chapter 2-B are agents of Maine EMS. Regional Medical Directors
285	may designate, with the approval of Maine EMS, licensed and qualified
286	physicians to serve as their assistants in carrying out these provisions. These
287	assistants will similarly be considered agents of Maine EMS.
288 -	
289	2. <u>A Regional Medical Director may impose conditions upon a licensee's</u>
290	ability to practice in that Director's region with the licensee's consent. In all
291	cases, the Regional Medical Director must inform Maine EMS of this action as
292	soon as possible and forward to Maine EMS a copy of the executed
293	agreement. If a Regional Medical Director wishes to take action to modify a
294	licensee's ability to practice at his or her license level or modify approval to
295	practice and the licensee does not consent to the modification, the Regional
296	Medical Director will immediately inform Maine EMS.