§1. **Definitions**

1. “Certificate of Immunization” means a written statement from a physician, nurse practitioner, physician assistant or other health care provider who has administered an immunization to a Covered Emergency Medical Services Person, specifying the vaccine administered and the date it was administered. For purposes of this chapter, such Certificate of Immunization shall be specific to COVID-19.

2. “Covered Emergency Medical Services Person” means an advanced emergency medical services person, a basic emergency medical services person or any person who routinely provides direct patient care. For the purposes of this definition, EMS students that provide direct patient care are Covered Emergency Medical Services Persons.

3. “Direct patient care” means any activity that places an individual within 6 feet of a patient for a period of 15 minutes or more.

4. “Entity” means an organization which holds a license issued by the Board that authorizes it as an organization to provide emergency medical services, or a training center licensed by the Board.

5. “Exemption” means a formal procedure to procure discharge from the requirement to vaccinate under this rule in accordance with Section 3 below. For purposes of this chapter, such Exemption shall be specific to COVID-19.

6. “Immunization” means a vaccine, antitoxin or other substance used to increase an individual’s immunity to disease.

§2. **Immunization Required**

1. Each Entity with which a Covered Emergency Medical Services Person is associated must require that the Covered Emergency Medical Services Person provide to the Entity a Certificate of Immunization against COVID-19 or documentation of an Exemption.

2. From October 15, 2021 through November 21, 2021, no Entity may permit a Covered Emergency Medical Services Person to provide direct patient care without a Certificate of Immunization for COVID-19, or documentation of an Exemption.
3. The number of recommended COVID-19 immunization doses shall be in accordance with the COVID-19 immunization manufacturer’s Emergency Use Authorization or labelling, or after final FDA approval, the subsequent applicable manufacturer’s dosing specification or labelling.

4. Any such immunization must meet the standards for biological products which are approved by the United States Public Health Service.

§3. Exemptions

1. A Covered Emergency Medical Services Person who does not obtain a Certificate of Immunization may be permitted to provide direct patient care if that Covered Emergency Medical Services Person possesses an Exemption.

2. An Exemption is available to a Covered Emergency Medical Services Person who provides a written statement from a licensed physician, nurse practitioner or physician assistant that, in the physician’s, nurse practitioner’s or physician assistant’s professional judgment, immunization against COVID-19 may be medically inadvisable.

3. Contingent upon a service’s ability to obtain BinaxNOW, or equivalent antigen testing at no cost, a Covered Emergency Medical Services Person with an Exemption must receive a BinaxNOW or an equivalent antigen test three times per week, or at the start at each scheduled shift, whichever is less, if that person is available for response to emergency medical calls.

§4. Record Keeping

1. An Entity must keep a record of the COVID-19 immunization status of each Covered Emergency Medical Services Person associated with the Entity. The record must include, at a minimum, the month and year that each COVID-19 immunization was administered.

2. Where an Exemption has been granted to a Covered Emergency Medical Services Person, the Entity must maintain the written documentation of the Exemption on file.

3. Each Entity must maintain a listing of the names of all Covered Emergency Medical Services Person associated with the Entity who are not currently immunized against COVID-19. The list must also include the names of all Covered Emergency Medical Services Persons with Exemptions.

4. All records required under this chapter shall be deemed, for the purposes of public access, confidential medical records under statute. Notwithstanding this
statement, the Board may obtain and disclose records required under this chapter in accordance with 32 M.R.S. § 91-B.

§5. Required Reports

1. Periodic Reporting

Each Entity must submit a summary report on the COVID-19 immunization status of all Covered Emergency Medical Services Persons associated with the Entity on a form prescribed by the Board or Maine EMS on September 1, 2021, September 15, 2021, and September 30, 2021. The summary report will include the following information at a minimum: specific contact information identifying the Entity, the total number of Covered Emergency Medical Services Persons who are immunized against COVID-19, the total number of Covered Emergency Medical Services Persons who possess Exemptions, and the total number of Covered Emergency Medical Services Persons who do not possess a Certificate of Immunization or an Exemption. Each report must be signed by a representative of the Entity as a certification that the information is accurate.

2. Additional Requests

An Entity must provide to the Board, within 48 hours of the request, any requested information pertaining to those Covered Emergency Medical Services Persons who do not possess a Certificate of Immunization or an Exemption. Such information shall be subject to the confidentiality provisions of 32 M.R.S. § 91-B.

§6. Enforcement

The failure to comply with the provisions of this chapter could be considered a violation of standards of professional conduct.

AUTHORITY: 32 M.R.S. § 84(1)(A)

EFFECTIVE DATE: August 25, 2021