MAINE EMERGENCY MEDICAL SERVICES LICENSING BOARD

ORDER DELEGATING AUTHORITY TO BOARD STAFF

Background

In April and June 2016, the Maine Emergency Medical Services Board ("the Board") adopted formal policies that provided guidelines to the Staff of the Office of Maine Emergency Medical Services ("Board Staff") for issuing letters of guidance for the failure to submit patient care reports, the failure to participate in quality assurance activities, unlicensed practice, and allowing EMS personnel or emergency medical dispatchers to practice without a license. In April 2022, the Board added guidelines for issuing letters of guidance to individuals who fail to demonstrate the required continuing education at the time of renewal. In March of 2025, the Board incorporated Ambulance Operator Licensure within this delegation, revised the timeframes for letters of guidance to reflect current licensure durations, and clarified the applicable circumstances surrounding unlicensed practice for Ambulance Services.

On September 24, 2025, P.L. 2025 c. 491 became effective, establishing the Maine Emergency Medical Services Licensing Board ("Licensing Board"). This legislative change transferred the authority to issue Letters of Guidance to the Licensing Board and gave the Licensing Board the authority to delegate that function to Board Staff.

This Limited Delegation of Authority revises, updates, and reestablishes previous delegations to Board Staff to be consistent with legislative changes. It authorizes Board Staff to issue Letters of Guidance to applicants and licensees in limited situations where their conduct does not rise to the level of misconduct sufficient to merit disciplinary action. The practical effect of this delegation of authority is to avoid bringing every such matter to the Licensing Board for resolution, allowing for the expedient and fair resolution of investigations involving applicants and licensees.

Applicable Law

Pursuant to 32 M.R.S. § 90-A(8), the Licensing Board has the ability to issue a letter of guidance to an applicant or licensee. 32 M.R.S. §90-A(8) also gives the Licensing Board the authority to delegate this power to the Board's Staff:

8 . Authority to issue letters of guidance. In addition to authority otherwise conferred, the licensing board or, as delegated, its staff may issue a letter of guidance or concern to an applicant or licensee.

A letter of guidance may be used to educate, reinforce knowledge regarding legal or professional obligations, and express concern over action or inaction by the licensee or applicant that does not rise to the level of misconduct sufficient to merit disciplinary action. The issuance of a letter of

guidance is not a formal proceeding and does not constitute any form of adverse disciplinary action. Notwithstanding any other provision of law, a letter of guidance is not confidential. The licensing board or, as delegated, its staff may place a letter of guidance or concern, together with any underlying complaint, report, and investigation materials, in a licensee's or applicant's file for a specified amount of time, not to exceed 10 years. Any letters, complaints, and materials placed on file may be accessed and considered by the licensing board or its staff in any subsequent action commenced against the applicant or licensee within the specified time frame [P.L. 2025 c. 491]

Pursuant to 32 M.R.S. § 90-A(6), the Licensing Board is obligated to provide notice of actions taken, including the issuance of a letter of guidance, to the town or city manager and municipal officers of the municipality that owns and operates or contracts with an ambulance service, within 5 business days of taking that action:

6. Notice of action. In any proceeding under this section with regard to an ambulance service owned and operated by a municipality or a private ambulance service with which a municipality contracts for services, if the licensing board or its staff takes further licensing action under subsection 4, the licensing board shall notify in writing the town manager or city manager and the municipal officers of the municipality that owns and operates or contracts with the ambulance service within 5 business days of taking the action [P.L. 2025 c. 491]

Delegation

The Licensing Board hereby delegates authority to Board Staff to issue a Letter of Guidance (hereafter "LOG") to an applicant or licensee pursuant to 32 M.R.S. § 90-A(8), in the circumstances described below, when the facts of the case obtained meet the criteria specified in the limitations as described below, for the timeframe specified below for that circumstance.

Board Staff reserves the right to bring any case fitting into the above situations to the Licensing Board for resolution. In the event that a licensee has another LOG or Board Action concerning the same issue on file, Board Staff will not take the delegated action and will instead bring the matter to the Licensing Board for resolution.

If Board Staff issues a LOG to an Ambulance Service owned and/or operated by a municipality, or a private Ambulance Service with which a municipality contracts for services, notice shall be provided in writing to the town or city manager and the municipal officers of the municipality that owns/operates or contracts with the Ambulance Service, within 5 business days.

This Delegation of Authority is effective upon the approval of the Licensing Board, and will expire on the Expiration Date indicated below, at which time the Licensing Board shall review the actions taken pursuant to this Delegation, and determine whether to renew, suspend, or modify this delegation.

Specific Circumstance, Limitations, and Length of Issuance

Circumstance	Limitations	Length of Time LOG and Related Materials Placed on File
Licensed EMS clinician failed to submit a completed electronic patient care report as specified by Maine EMS, within twenty-four hours pursuant to Maine EMS System Rules, Chapter 22 § 3(2) and § 4(2).	1. Less than 10 patient care reports were not submitted or were not submitted within twenty-four hours; 2. No medication administration or invasive procedures were performed; 3. No patient harm occurred on the calls for which a patient care report was not submitted; and 4. This incident is the first occurrence of such conduct	If the clinician self-reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of two (2) years. In all other qualifying cases, the LOG shall be issued for four (4) years.
Ambulance service or non-transporting emergency medical service failed to ensure that, for each request for service, or for each patient when more than one patient is involved in a call, a completed electronic patient care report as specified by Maine EMS was submitted within twenty-four hours by the EMS clinician primarily responsible for patient care, or by a participating EMS clinician when no patient is presented, pursuant to Maine EMS System Rules, Chapter 3 § 9 and Chapter 22 § 3(1).	1. Less than 10 patient care reports were not submitted or were not submitted within twenty-four hours; 2. No medication administration or invasive procedures were performed; 3. No patient harm occurred on the calls for which a patient care report was not submitted; and 4. This incident is the first occurrence of such conduct.	If the ambulance service or non- transporting emergency medical service self-reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of two (2) years. In all other qualifying cases, the LOG shall be issued for four (4) years.
Providing emergency medical treatment, operating an ambulance while associated with a ground-transporting ambulance service, or providing EMD services after the individual's or service's Maine EMS license has	1. The individual or service provided emergency medical treatment, operated an ambulance, or provided EMD services on 10 or	If the person or service self-reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of two (2) years. In all other qualifying cases, the LOG shall be issued for four (4) years.

expired (Unlicensed Practice under 32 M.R.S. § 82(1))	fewer emergency medical calls; 2. The individual or service was licensable at the time of expiration of the license; 3. No patient harm occurred on the calls on which the individual or service provided emergency medical treatment, operated an ambulance while associated with a ground-transporting service, or provided EMD services while unlicensed; and 4. This incident is the first occurrence of such conduct.	
Providing emergency medical treatment, or providing EMD services without licensure from the Board, when the individual has never held licensure. (Unlicensed practice under 32 M.R.S. § 82(1))	1. The individual provided emergency medical treatment, or provided EMD services on 10 or fewer emergency medical calls; 2. The individual was licensable at the time of occurrence; and 3. No patient harm occurred on the calls on which the individual provided emergency medical treatment or provided EMD services. Absent serious circumstances (e.g., patient harm), Board Staff should not delay the issuance of	2 years

	the license while the investigation is ongoing.	
Operating an ambulance when affiliated with a ground- transporting service, without licensure from the Board, when the individual has never held licensure. (Unlicensed practice under 32 M.R.S. § 82(1))	1. The person or service was licensable at the time of occurrence; and 2. No harm or collision occurred on the calls on which the individual operated the ambulance. Absent serious circumstances (e.g. collision), Board Staff should not delay the issuance of the license while the investigation is ongoing.	
Ambulance service or non-transporting emergency medical service allowed an EMS person to provide emergency medical treatment or operate an ambulance while associated with a ground-transporting service after that person's licensure expired. (Aiding or abetting the practice of emergency medical care by an unlicensed person under 32 M.R.S. § 90-A(5)(D))	1. The individual provided emergency medical treatment, or operated an ambulance, on 10 or fewer emergency medical calls; 2. The individual was licensable at the time of expiration of the license; 3. No harm occurred on the calls on which the individual provided emergency medical treatment or operated an ambulance; 4. The incident is the first occurrence of such conduct; and 5. If a ground transporting ambulance service: They have complied with all requirements related to billing governmental payors for the calls on which the unlicensed	If the ambulance service or non- transporting emergency medical service self-reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of up to one (1) year from the date of the last infraction. In all other qualifying cases, the LOG shall be issued for two (2) years.

	individual participated.	
Ambulance service or non-transporting emergency medical service allowed an individual to perform emergency medical treatment or operate an ambulance when that individual is associated with a ground- transporting service, without licensure from the Board, when that individual has never held licensure. (Acting negligently or neglectfully in conducting an ambulance service which is considered unprofessional conduct under 32 M.R.S. § 90- A(5)(F), as defined by Board Rules 16-163 C.M.R. Ch. 11 §1(23))	1. The individual provided emergency medical treatment or operated an ambulance, on 10 or fewer emergency medical calls; 2. The individual was licensable at the time of occurrence; 3. No patient harm occurred on the calls on which the person provided emergency medical treatment or operated an ambulance; 4. The incident is the first occurrence of such conduct; and 5. If a ground transporting ambulance service, the service has complied with all requirements related to billing governmental payors for the calls on which the unlicensed individual participated.	If the ambulance service or non- transporting emergency medical service self-reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of two (2) years. In all other qualifying cases, the LOG shall be issued for four (4) years.
Licensed EMD center allowed an emergency medical dispatcher to provide EMD services without a valid EMS license (pursuant to Maine EMS System Rules, Chapter 3-A § 6(1), EMD centers must use licensed dispatchers unless the person is a dispatcher in training)	1. The dispatcher provided EMD services on 10 or fewer emergency medical calls; 2. The dispatcher was licensable at the time of the occurrence; 3. No patient harm occurred on the calls on which the dispatcher provided	If the licensed EMD center self- reports the infraction within thirty days of its occurrence, the LOG shall be issued for a period of two (2) years. In all other qualifying cases, the LOG shall be issued for four (4) years.

	EMD services while unlicensed; and 4. The incident is the first· occurrence of such conduct. Absent serious circumstances (e.g., patient harm), Board Staff should not delay the issuance of the license while the investigation is ongoing.	
Licensed EMS service or EMD center failed to participate in Maine EMS quality assurance activities pursuant to Maine EMS System Rules, Chapter 18 §§ 4-5.	First occurrence of conduct only	2 years
Licensee failed to notify the board in writing within 10 days of certain information pursuant to 32 M.R.S. §90-C	1. Relative to§ 90-C(B): the criminal conviction does not involve: conduct directly related to the license; dishonesty or false statement; conviction of a crime for which incarceration for one year or more may be imposed; or the conviction relates to a crime defined in Title 17-A, chapter 11, l2, or 45; 2. Relative to § 90-C(C): the disciplinary action taken was not based on conduct related to the profession or otherwise open to disciplinary proceedings with the Board; 3. Relative to § 90-C(D): there was no harm to	4 years

	the public as a result of the delay in reporting; and 4. The incident was the first occurrence of such conduct.	
Licensee failed to present proof of satisfactory completion of continuing education upon submitting a license renewal application pursuant to Maine EMS System Rules, Chapter 5 § 6(2)(C)(4 & 5)	1. The licensee was deficient in a total of less than or equal to two (2) continuing education hours at the time of application; 2. The licensee subsequently satisfies the deficient continuing education hour requirement in accordance with Maine EMS Rules, within 10 business days after notification is made to the applicant by Board staff; and 3. The incident is the first occurrence of such conduct.	4 years

EFFECTIVE: November 20, 2025

EXPIRES: December 18, 2025

SO ORDERED:

Joseph C. Kellner (Nov 21, 2025 15:35:39 EST)

Joseph C. Kellner, Interim Chair
EMS Licensing Board

HISTORY:

ADOPTED: November 4, 2020, by the Maine Emergency Medical Services Board

October 23, 2025, by the Maine Emergency Medical Services Licensing Board

REVISED/RENEWED:

Revised by the Maine Emergency Medical Services Board on March 3, 2021

Revised by the Maine Emergency Medical Services Board on April 6, 2022

Renewed by the Maine Emergency Medical Services Board on November 2, 2022

Revised by the Maine Emergency Medical Services Board on March 5, 2025

Revised by the Maine Emergency Medical Services Licensing Board, October 23, 2025

Revised by the Maine Emergency Medical Services Licensing Board, November 20, 2025

Rules Violation Delegation Order - November 2025 Unsigned

Final Audit Report 2025-11-21

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