# **16 DEPARTMENT OF PUBLIC SAFETY**

**163 EMERGENCY MEDICAL SERVICES BOARD (MAINE EMS)**

**Chapter 19: COMMUNITY PARAMEDICINE**

1. **DEFINITIONS**
   1. ***“Community Paramedicine”***means the practice by an emergency medical services provider primarily in an out-of-hospital setting of providing episodic patient evaluation, advice, and treatment directed at preventing or improving a particular medical condition within the scope of practice of the emergency medical services provider as specifically requested or directed by a physician.
   2. ***“Episodic*”** means an encounter with a patient focused on presenting concerns and an identified medical condition in which neither the community paramedic nor the patient has the expectation of an ongoing general home care relationship;"
   3. ***“Formulary”*** means a list of substances that may and may not be administered, and the routes available for their administration in the context of Community Paramedicine.
   4. ***“Community Paramedicine Affiliate”***means an emergency medical services person with active, unrestricted licensure, at minimum at the EMT level, who is licensed by the Board to provide community paramedicine according to the affiliate-level scope-of-practice, this chapter of rules, and the scope of practice to which they are otherwise licensed by the Board.
   5. ***“Community Paramedicine Technician”***means an emergency medical services person with active, unrestricted licensure, at minimum at the AEMT level, who is licensed by the Board to provide community paramedicine according to the affiliate-level scope-of-practice, this chapter of rules, and the scope of practice to which they are otherwise licensed by the Board.
   6. ***“Community Paramedic”***means an emergency medical services person with active, unrestricted licensure, at minimum at the Paramedic level, who is licensed by the Board to provide community paramedicine according to the affiliate-level scope-of-practice, this chapter of rules, and the scope of practice to which they are otherwise licensed by the Board.
   7. “Community Paramedicine Personnel” means an emergency medical services person licensed as a Community Paramedicine Affiliate, Community Paramedicine Technician, or Community Paramedic.
   8. ***“IBSC”*** means the International Board of Specialty Certification.
   9. ***“CP-C”*** means Certified Community Paramedic through the IBSC.
   10. ***“Primary Care Medical Director”*** means a a physician or a nurse practitioner who has completed the required clinical experience pursuant to 32 M.R.S. §2102(2- A), who assumes primary responsibility to ensure quality medical care for community paramedicine program. 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. A Primary Care Medical Director must be licensed and practicing in a primary care capacity within the State of Maine.
   11. **“Business Records”** meansany document or record associated with doing business in the State of Maine, including, but not limited to: Insurance documents, office space leases, ownership/incorporation documents, business bank records, municipal permits or approvals, infectious waste agreements, business policies/procedures, and personnel files.
2. **COMMUNITY PARAMEDICINE PERSONNEL CONDITIONAL LICENSURE**
   1. Conditional Licensure
      1. Any person licensed in Maine to provide emergency medical treatment and who actively practiced community paramedicine prior to July 1, 2024, may be eligible to apply for conditional licensure. Applicants must demonstrate the following:
         1. Active community paramedicine practice in the State of Maine prior to July 1, 2024, as evidenced by a minimum of 10 community paramedicine patient care reports in the Maine EMS and Fire Incident Reporting System, completed within the past year.
         2. Proof of initial education received and completion of a Maine EMS evaluation of said education:
            1. The education received must relate to the provision of Community Paramedicine.
         3. Proof of eight (8) hours of continued education related to community paramedicine.
   2. Those conditionally licensed under this subsection, may only provide community paramedicine according to the scope of practice for the level of licensure they are licensed at per Chapter 5 §2.
3. **COMMUNITY PARAMEDICINE PERSONNEL LICENSURE LEVELS**
   1. Community Paramedicine Personnel Licenses are issued for the following levels of care in ascending order. To be eligible to receive licensure , an applicant must meet the standards as defined below:
      1. Community Paramedicine Affiliate
         1. Current active and unrestricted licensure as an EMT, AEMT, or Paramedic.
      2. Community Paramedicine Technician
         1. Current active and unrestricted licensure as an AEMT or Paramedic.
      3. Community Paramedic
         1. Current active and unrestricted licensure as a Paramedic
         2. CP-C Certificate from the IBSC or an equivalent as judged by Maine EMS.
   2. Community Paramedicine Personnel licensed under this chapter are not permitted to exceed the scope of Community Paramedicine care at their agency’s level or permitted level of licensure.
   3. Licensure
      1. To obtain and maintain a new or renewed Community Paramedicine license, the applicant must:
         1. At the time of initial application, be affiliated with a Maine EMS licensed service approved by the Board to provide Community Paramedicine Services.
         2. At the time of application, the applicant must have held personnel licensure at the level that makes them eligible for the community paramedicine licensure level for greater than two years, or one licensure cycle, whichever is greater, and the applicant must be documented in a caregiver role at the EMT, AEMT, or Paramedic level on at least 24 electronic patient care reports in the Maine EMS Fire and Incident Reporting System involving contact with a patient while licensed at that level.
         3. Possess and maintain active, unrestricted licensure at the level appropriate for the desired license level:
            1. For the Community Paramedicine Affiliate level license, the applicant must have an EMT, AEMT, or Paramedic license.
            2. For the Community Paramedicine Technician level license, the applicant must have an AEMT or Paramedic level license.
            3. For the Community Paramedic level license, the applicant must have a Paramedic license as well as a Board-approved CP-C certificate or an equivalent, as determined by the Office of EMS.
         4. Submit the following to Maine EMS:
            1. A completed Maine EMS Community Paramedicine application provided by the Office of Maine EMS that is signed by the applicant.
            2. For initial licensure, the applicant must provide a verifiable copy of a transcript showing the successful completion of Maine EMS-approved training as described in Maine Community Paramedicine Education Standards, dated June 30, 2024, at a level appropriate for the desired level of licensure, or education judged as equivalent by Maine EMS, obtained within two years of the date of application.

Education should include both didactic instruction and clinical hours.

* + - * 1. A Certificate of Completion of State of Maine Mandated Reporter Training.
        2. In the case of an applicant whose Community Paramedicine license is current or not expired by more than two years, proof of completion of Board approved continuing education hours.

For all levels of licensure, the applicant must submit proof of completion of 16 hours of Maine EMS-approved continuing education in community paramedicine topics, as specified by Maine EMS, provided that:

Certificates of continuing education hours have not been used for a previous license renewal and have been earned within their licensure cycle

Include a minimum 1 hour of mandated reporter training.

* + - 1. Submit a complete history of any action taken against any emergency medical services certification or license or professional certification or license that the applicant currently holds or has ever held.

1. **SCOPE OF PRACTICE**
   1. The Community Paramedicine scope of practice is considered to be additive to the applicant's primary Maine EMS clinician level of licensure.
   2. The scope of practice for the Community Paramedicine Affiliate, Community Paramedicine Technician, and Community Paramedic is defined within the Community Paramedicine Scope of Practice Document, dated December 20, 2022, and which is incorporated by reference. Copies of this document are available at Maine EMS, 152 State House Station, Augusta, ME 04333-0152.
2. **COMMUNITY PARAMEDICINE FORMULARY**
   1. The Formulary identifies what medications may or may not be administered following a physician order for a Community Paramedicine provider. The formulary will act as an expansion of existing protocols. The formulary is defined within Community Paramedic or Technician at the Paramedic Level Formulary, dated May 2, 2023, and which is incorporated by reference. Copies of this document are available at Maine EMS, 152 State House Station, Augusta, ME 04333-0152.
3. **EDUCATIONAL REQUIREMENTS FOR LICENSURE**
   1. A Training Center currently licensed by Maine EMS in accordance with Chapter 8-A, is approved to conduct training programs that qualify an individual for licensure under this chapter.
   2. An educational program that qualifies an individual for licensure under this chapter must:
      1. Test student proficiency and periodically measure student learning;
      2. Maintain records of student attendance at didactic sessions, practical laboratory requirements, and performance of clinical requirements;
      3. Provide, by policy, for the removal of a student from the course for unsatisfactory performance; and
      4. Demonstrate that the program has adequate training space, equipment and other resources to conduct the particular level of instruction.
   3. Community Paramedicine Affiliate
      1. Programs qualifying an individual for licensure at the Community Paramedicine Affiliate level must:
         1. Consist of a minimum of 32 hours of didactic, hands-on, and clinical rotations addressing the following topics:
            1. The social determinants of health model;
            2. The role of a Community Paramedicine Affiliate in public health and primary care;
            3. Developing cultural competency;
            4. Chronic disease management;
            5. Recognition and treatment of mental health; and
            6. Personal safety and wellness of the Community Paramedicine affiliate.
   4. Community Paramedicine Technician
      1. Programs qualifying an individual for licensure at the Community Paramedicine Technician level must:
         1. Consist of a minimum of 96 hours of didactic, hands-on, and clinical rotations addressing the following topics:
            1. The social determinants of health model;
            2. The role of a Community Paramedicine Technician in public health and primary care;
            3. Developing cultural competency:
            4. Personal safety and wellness of the Community Paramedicine Technician;
            5. Chronic disease management; and
            6. Recognition and treatment of mental health.
   5. Community Paramedic
      1. A minimum of 1800 hours of didactic, hands-on, and clinical rotations addressing the following topics:
         1. The social determinants of health model;
         2. The role of a Community Paramedic in public health and primary care;
         3. Developing cultural competency;
         4. Personal safety and wellness of the Community Paramedic;
         5. Systems of Care;
         6. Chronic disease management;
         7. Recognition and treatment of mental health; and
         8. Pandemic response.
   6. The education standards identify the standards Community Paramedicine education must follow. This is inclusive of minimum hours, initial education, and continuing education The standards are defined within Maine Community Paramedicine Education Standards, dated June 30, 2024, and which is incorporated by reference. Copies of this document are available at Maine EMS, 152 State House Station, Augusta, ME 04333-0152.
4. **COMMUNITY PARAMEDICINE AGENCY DESIGNATION**
   1. Agency Designations will only be valid until November 30, 2025, and will not be issued after that date. Following November 30, 2025, agencies will need to obtain a Community Paramedicine license as described in section 8 of this Chapter in order to provide Community Paramedicine in the State of Maine.
   2. To obtain a new Community Paramedicine designation prior to November 30, 2025, an emergency medical services provider, including but not limited to an ambulance service or non-transporting emergency medical service, must apply to Maine EMS for approval. In order to obtain this designation, the provider must:
      1. Apply on forms available from the Office of Maine EMS;
      2. Provide a description of the intended Community Paramedicine plan to be approved by the Board or Maine EMS staff;
      3. Provide a quality assurance and quality improvement plan that directly addresses Community Paramedicine;
      4. Identify a primary care medical director with whom it plans to work. The Primary Care Medical Director may serve as the Service-level medical director. An individual serving in both capacities must be clearly identified to Maine EMS as fulfilling both roles; and
      5. Demonstrate to Maine EMS that it has designated an emergency medical services medical director.
   3. Once an application for a new Community Paramedicine designation has been accepted as complete by Maine EMS, Maine EMS shall grant, refuse, or conditionally grant the designation within 70 days. Applications for a new Community Paramedicine designation will only be accepted until 70 days before November 30, 2025.
   4. All designations will be issued with an expiration date of November 30. Designations active as of November 30, 2025, will be issued Community Paramedicine licensure at their level, with an expiration date of November 30, 2026. Designations issued licensure in this fashion will be required to meet the provisions of section 7 of this rule to renew their licensure.
5. **COMMUNITY PARAMEDICINE SERVICE LICENSURE**
   1. To obtain a new Community Paramedicine service license, an emergency medical services provider, including but not limited to an ambulance service or non-transporting emergency medical service, must apply to Maine EMS for approval. In order for the application to be considered complete, the applicant must:
      1. Apply on forms available from the Office of Maine Maine EMS;
      2. Provide a description of the intended Community Paramedicine Plan to be approved by the Board or the Office of Maine EMS addressing at a minimum:
         1. A training plan
         2. Referral process
         3. Agency-specific protocols
         4. Service Area
         5. Pharmacy Agreements
      3. Provide a quality assurance and quality improvement plan that directly addresses Community Paramedicine;
      4. Identify a Primary Care Medical Director with whom it plans to work; the Primary Care Medical Director may serve as the Service-Level Medical Director. An individual serving in both capacities must be clearly identified to Maine EMS as fulfilling both roles.; and
      5. Demonstrate to Maine EMS that it has designated a Service Level Medical Director.
   2. A Community Paramedicine Service licensed under this chapter, is required to have any individual who is providing Community Paramedicine services, complete a background check through the Maine Background Check Center for their Community Paramedicine Personnel and must ensure that their Community Paramedicine Personnel maintain enrollment.
   3. Any licensed service must conduct mandatory reporter training during the onboarding of any Community Paramedicine Personnel, and annually, for anyone providing community paramedicine services or overseeing the program.
   4. Patient Records
      1. For each request for service, or for each patient when more than one patient is involved, the individual licensed under this chapter who is primarily responsible for providing Community Paramedicine services must complete and submit an electronic Maine EMS patient care report, as specified by Office of Maine EMS, within twenty-four hours from the time they arrived at patient’s location.
   5. Business records
      1. Business records of the Community Paramedicine Licensed Service shall be kept and retained in a manner consistent with all applicable city, state and federal laws, ordinances and regulations with proper audit trails available. Business records, contracts, and newspaper advertisements will be retained for a minimum of five (5) years.
      2. A Community Paramedicine Licensed Service must make its records available for inspection at the request of the Maine EMS Office.
      3. Proof of current licensure of all licensed community paramedicine personnel employed directly by the agency.
      4. The Community Paramedicine Licensed service shall keep a personnel file for each community paramedicine personnel employed which shall include, but not be limited to:
         1. Their application for employment;
         2. Evidence of current qualifications;
         3. Evidence of orientation and in-service training; and
         4. Periodic evaluations.
   6. Any licensed service shall work to coordinate and communicate with local Home Health Agencies, Hospice, other community, and social services, and local ED providers within the area served. In coordination of services they shall work to avoid any duplication of services.
   7. Once an application for a new Community Paramedicine Service license has been accepted as complete by Maine EMS, Maine EMS shall grant, refuse, or conditionally grant the license within 70 days.
   8. Any actively licensed Community Paramedicine Agency that wishes to change their Community Paramedicine Plan approved by the Board and/or the Office of Maine EMS, must submit a formal request to the Office of Maine EMS prior to effecting those changes.
      1. If the change is deemed a significant change in the scope of work the agency may be required to submit a new application.
      2. If the change is deemed a minor change the agency will just need to submit an addendum for review by the office. Following review and approval the agency can implement said change.
   9. All Community Paramedicine Agency Licenses will be issued for up to 13 months, with an expiration date of November 30.

This section of the rule is effective 70 days prior to November 30, 2025.

1. **COMMUNITY PARAMEDICINE SERVICE LICENSURE RENEWAL**
   1. A service applying for renewal of their Community Paramedicine Service Licensure must demonstrate, as specified by the Office of Maine EMS, that they have provided Community Paramedicine services at least once (1) within the preceding licensure term.
   2. Once an application for a renewed Community Paramedicine Service license has been accepted as complete by Maine EMS, Maine EMS shall grant, refuse, or conditionally grant the license within 70 days.
   3. To obtain a renewed Community Paramedicine service license, an emergency medical services provider, including but not limited to an ambulance service or non-transporting emergency medical service, must apply to Maine EMS for approval. In order for an application to be considered complete, the applicant must:
      1. Apply on forms available from the Office of Maine EMS;
      2. Demonstrate, as required by the Office of Maine EMS, that they continue to meet the requirements of Section 7 of this rule.
2. **COMMUNITY PARAMEDICINE SERVICE REQUIREMENTS**
   1. A service licensed to provide community paramedicine services must ensure its employees have received and documented training to the standard within its Community Paramedicine Plan prior to those employees providing community paramedicine services. Proof of documented training must be provided to Maine EMS upon request.

STATUTORY AUTHORITY: 32 M.R.S. §§ 84(1) & 84(4)

ADOPTED: August 7, 2019

EFFECTIVE DATE: August 26, 2019

REPEALED AND REPLACED: January 10, 2021

REPEALED AND REPLACED:

January 20, 2025 – filing 2025-007 (Nonsubstantive correction to rule history section to indicate repeal and replacement of the rule, not an amendment of it as previously indicated.)

APAO WORD VERSION CONVERSION (IF NEEDED) AND ACCESSIBILITY CHECK: July 18, 2025