

Colorado Legislative Council Staff Fiscal Note

**FINAL
FISCAL NOTE**

Drafting Number: LLS 15-0595	Date: September 1, 2015
Prime Sponsor(s): Rep. Winter Sen. Cooke	Bill Status: Signed into Law
	Fiscal Analyst: Lauren Schreier (303-866-3523)

BILL TOPIC: INTERSTATE COMPACT EMS PROVIDERS

Fiscal Impact Summary*	FY 2015-2016	FY 2016-2017	FY 2017-2018
State Revenue			
State Expenditures			\$131,450
Cash Funds			119,028
Centrally Appropriated Costs**			12,422
FTE Position Change			1.0 FTE
Appropriation Required: None.			

* This summary shows changes from current law under the bill for each fiscal year.
 ** These costs are not included in the bill's appropriation. See the State Expenditures section for more information.

Summary of Legislation

The bill authorizes the Governor to enter into an interstate compact with other states or jurisdictions to recognize and allow emergency medical services (EMS) providers licensed in a compact member state to provide EMS in Colorado. EMS providers include emergency medical technicians, advanced emergency medical technicians, and paramedics. The interstate compact will be known as the Recognition of Emergency Medical Services Personnel Licensure Interstate Compact Act (REPLICA). The bill defines the REPLICA Commission as the national administrative body of which all states that have enacted the compact are members.

For REPLICA to become effective, at least ten states must join. Any EMS provider with a valid license in a member state will be authorized to practice in all other member states. A home state license authorizes an EMS provider to practice in a member state only if the EMS provider's home state:

- currently requires the use of the National Registry of Emergency Medical Technicians examination as a condition of issuing initial licenses at the EMT and paramedic levels;
- has a mechanism in place for receiving and investigating complaints about individuals;
- notifies the commission, in a manner compliant with compact terms, of any adverse actions or investigations of an individual;
- within five years of the activation of the compact, requires a criminal background check of all applicants for initial licensure, compliant with the requirements of the Federal Bureau of Investigation; and
- complies with the rules of the commission.

The bill defines conditions under which individuals in member states can practice in other member states. Per the bill, individuals must:

- be at least eighteen years of age;
- possess a current, unrestricted license in a member state as a recognized EMS provider;
- practice under the supervision of a medical director; and
- practice in other member states within the scope of practice authorized by the EMS provider's home state, or the scope of practice may be modified or appropriately defined by the commission.

The bill defines conditions of practice for EMS providers practicing in other member states and specifies certain requirements relating to treatment of veterans and military personnel and their spouses. The bill also provides that when a Governor of a member state declares a state of emergency or disaster, the Emergency Management Assistant Compact becomes active, and terms of practice for EMS providers of member states take effect.

Under the bill, each home state has the authority to impose adverse actions against EMS providers licensed by the home state. If an EMS provider's license or privilege to practice in their home state is restricted, suspended, or revoked for any reason, the EMS provider may not practice in any other member state until their license has been restored. When a home state enacts an adverse action against an EMS provider, the home state must include a statement that the individual's compact privileges are inactive, unless otherwise specified by the home state and another member state. Home states must communicate any adverse actions to the REPLICA commission.

The bill also creates a joint public agency known as the Interstate Commission for EMS Personnel Practice, as a political and instrumental body of the REPLICA compact. Each member state will have one delegate to represent them in the commission. The commission must meet at least once each calendar year and all meetings will be open to the public. Among other areas, the bill sets forth specific requirements of the commission related to governing, administration, rulemaking, investigations, and financial accounting. The commission will also be responsible for developing and maintaining a coordinated central database and reporting system. This system will contain the licensure, adverse action, and any relevant investigatory information on all licensed individuals in participating member states. Member states will be responsible for submitting a uniform data set containing information required by the commission on licensed individuals in the state. Nothing in the compact supercedes state law or rules related to licensure of EMS personnel.

Background

As of the writing of this fiscal note, the REPLICA Compact has not been enacted in any states or legal jurisdictions in the United States. In Colorado, the Department of Public Health and Environment (CDPHE) licenses and regulates the activity of authorized EMS personnel.

Assumptions. This fiscal note assumes that there will be sufficient revenues in the Emergency Medical Services Cash Fund in the CDPHE to cover costs associated with the bill. Revenue into the cash fund is levied from a \$2 fee for each vehicle registered in Colorado. This cash fund has an annual average revenue of \$10.5 million and average expenditures of \$10 million.

State Expenditures

The bill is expected to increase expenditures by **\$131,450 and 1.0 FTE in FY 2017-18 from the Emergency Medical Services Cash Fund in the CDPHE**, conditional upon the REPLICA compact entering into effect. Expenditures are contingent on at least nine other states entering into the REPLICA. As a result, FY 2017-18 would likely be the earliest year in which the REPLICA may take effect. The fiscal note assumes that the CDPHE will be responsible for all REPLICA membership responsibilities and activities on behalf of the state of Colorado. Table 1, below, outlines costs associated with the bill.

Table 1. Expenditures Under HB 15-105			
Cost Components	FY 2015-16	FY 2016-17	FY 2017-18
Personal Services			\$51,345
FTE			1.0 FTE
Operating Expenses and Capital Outlay Costs			\$5,653
Travel Costs			\$2,030
Database			\$10,000
Commission Annual Dues			\$50,000
Centrally Appropriated Costs*			\$12,422
TOTAL			\$131,450

* Centrally appropriated costs are not included in the bill's appropriation.

Staffing. The CDPHE requires 1.0 FTE for staff in the Emergency Medical Services Division. This staff is needed to collect and share data on licensed individuals with the compact, investigate complaints and report to the compact regarding any adverse actions or investigations related to individuals authorized to provide services under the compact.

Travel. The fiscal note assumes a CDPHE representative will be required to travel to at least two meetings per year of the REPLICA member states.

Database. The bill requires the REPLICA commission to maintain a central database of information relevant to licensed individuals in all member states. The fiscal note assumes this database will likely cost \$100,000 and, shared among at least ten member states, would cost \$10,000 to the CDPHE.

Annual dues for the commission. Member states will likely be required to submit annual member dues to the commission. While this cost may vary based on actual commission needs, this fiscal note estimates this cost at \$50,000 per year.

Judicial Department. If the REPLICA compact becomes active, the bill may result in a minimal workload increase for the trial courts. This work would be related to the investigation of disputes regarding EMS providers licensed by Colorado or other member states. However, this fiscal note assumes a high rate of compliance among EMS providers licensed to practice in member states, and any potential trial court workload impact would be minimal.

Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. The centrally appropriated costs subject to this policy are estimated in the fiscal note for informational purposes and summarized in Table 2.

Table 2. Centrally Appropriated Costs Under HB 15-1015*			
Cost Components	FY 2015-16	FY 2016-17	FY 2017-18
Employee Insurance (Health, Life, Dental, and Short-term Disability)			\$8,028
Supplemental Employee Retirement Payments			\$4,394
TOTAL			\$12,422

**More information is available at: <http://colorado.gov/fiscalnotes>*

Effective Date

The bill was signed into law by the Governor and took effect on May 8, 2015.

State and Local Government Contacts

Public Health and Environment
Judicial
Military and Veterans Affairs

Governor's Office
Law