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# JESSE KREMER

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STATE REPRESENTATIVE • 59<sup>TH</sup> ASSEMBLY DISTRICT

*Testimony before the Assembly Committee on Health  
State Representative Jesse Kremer  
August 2, 2017*

Good morning,

Thank you committee members, and especially you, Chairman Sanfelippo, for holding a hearing on this bill within our "Rural Fire & EMS Reforms" package.

Emergency Medical Service responders are currently licensed by the Department of Health Services (DHS) for a period of two years. The level of training for Emergency Responders, EMTs, EMT Advanced members or Paramedics varies significantly. In general, there are between 18 and 42 hours of specific training that must be fulfilled biennially to continue practicing in Wisconsin.

One of the concerns that was discussed during the 2016 Legislative Council Study Committee on Volunteer Firefighter and Emergency Medical Technician Shortages was the access to training and scheduling difficulties for volunteers who work full time jobs and are raising families in the communities they proudly serve. Personally, it had always been extremely challenging as a career pilot, with constantly changing schedules, to locate and complete all of the required modules to continue my service as an EMT.

Providing high quality services to residents of rural areas is a constant challenge for community leaders and EMS directors. One of my goals has been to locate creative outside the box solutions that provide relief for emergency responder agencies while preventing additional burdens and a lower quality of service from becoming the acceptable norm for rural Wisconsin communities. This bill does just that.

Assembly Bill 356 closely mirrors a policy issue that was removed from Governor Walker's budget proposal earlier this year. This bill would change the renewal period from a two year to a three year process to strike a balance of providing much needed flexibility while ensuring adequate continuing education for our first responders.

Please note that across the nation, renewal cycles vary from one to five year periods. The majority of states (44) already utilize either a two or three year renewal cycle. This proposed flexibility is common sense and keeps our state well within accepted practices nationwide.

Thank you again for the opportunity to testify this morning and I encourage you to support Assembly Bill 356.



## State Senator Sheila Harsdorf

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Date: August 2, 2017

To: Assembly Committee on Health

From: Senator Sheila Harsdorf

RE: Assembly Bill 356: relating to licensure or certificate renewal for certain emergency medical services personnel and ambulance service providers.

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Dear Chair Sanfelippo and Committee Members:

Thank you for holding a public hearing on Assembly Bill 356 which would extend the license or certificate for first responders and emergency medical technicians to a three year period.

Under current law a first responder or EMT must renew their license every two years and complete a certain number of hours of continuing education and training commonly referred to as refresher education. Courses vary depending on the level of the responder license. Times and location of courses vary as well. Given that first responders and emergency medical technicians in rural Wisconsin often find it difficult and burdensome to complete training, lengthening the license period will minimize the challenges in meeting continuing education requirements.

Rural communities rely on generous volunteers that provide critical emergency services. These dedicated volunteers balance family, work and other responsibilities along with contributing time and skills to their communities across the state. AB 356 would allow the opportunity for more flexibility in fulfilling the required continuing education for these licenses.

I urge your support and prompt action on this legislation.

**BLAINE WERNER, EMS DIRECTOR**

**RANDOM LAKE FIRE DEPARTMENT**

I AM HERE TO SUPPORT THE 3 BILLS PENDING REGARDING EMS CARE IN WISCONSIN.

THE FIRST BILL, RELATING TO UPGRADING OF SERVICES TO THE HIGHEST LEVEL OF LICENSURE OF ANY EMT STAFFING.

I AM BLAINE WERNER, AND AM THE EMS DIRECTOR FOR THE RANDOM LAKE FIRE DEPARTMENT. THE RANDOM LAKE FIRE DEPARTMENT AMBULANCE SERVICE SERVES A POPULATION OF 5374 IN THE SOUTHWEST PART OF SHEBOYGAN COUNTY. RANDOM LAKE IS THE LARGEST COMMUNITY WITH A POPULATION OF 1500. I JOINED THE RANDOM LAKE FIRE DEPARTMENT IN 1977 AND WAS HIRED BY THE CITY OF SHEBOYGAN FIRE DEPARTMENT IN 1989. I BECAME AN EMT-BASIC IN 1977, EMT IMMEDIATE IN THE 1980'S AND AN EMT PARAMEDIC IN 1997. I HAVE ALSO BEEN AN EMS INSTRUCTOR FOR LAKESHORE TECHNICAL COLLEGE FOR LAST 25 YEARS.

THE FOUNDER OF THE RANDOM LAKE AMBULANCE WAS AN EMPLOYER IN OUR COMMUNITY. UP UNTIL 5 YEARS AGO, THIS COMPANY EMPLOYED 13 MEMBERS OF SERVICE, INCLUDING 6 OF HIS OWN FAMILY MEMBERS. HE ALLOWED ALL OF THE EMTs TO LEAVE WORK FOR EMS AND FIRE CALLS. HIS PRINTING BUSINESS LOST BUSINESS DUE TO INDUSTRY MOVE TO NON-PRINT MATERIALS AND 2 YEARS AGO WAS PURCHASED BY ANOTHER COMPANY. THE COMPANY HAS NOT CLOSED, HOWEVER ONLY ONE OF THOSE 13 MEMBERS IS STILL EMPLOYED BY THE COMPANY. THIS HAS LEFT A HUGE HOLE IN OUR DAY TIME STAFFING.

ALTHOUGH AT THIS POINT IN TIME WE HAVE NEVER HAD A CALL THAT WE COULD NOT PROVIDE AN AEMT LEVEL OF SERVICE, THE DAY WILL BE COMING SOON THAT WE WILL ONLY HAVE EMT-BASICS AVAILABLE FOR A CALL. MANY OF OUR AEMTS ARE NEARING RETIREMENT AND THE YOUNGER CREW ARE EMPLOYED OUTSIDE OF THE COMMUNITY.

I KNOW THAT SOME CONCERNS HAVE BEEN RAISED THAT SOME SERVICES HAVE PARAMEDICS ON THEIR SQUADS WHO COULD PRACTICE AT A HIGHER LEVEL. I SUPPOSE THAT THIS COULD BE POSSIBLE. HOWEVER, WITH THE DEPARTMENT OF HEALTH'S STRINGENT REQUIREMENTS TO ACT AS AN EMT-P ON A SQUAD, AND THE FEDERAL REQUIREMENTS FOR CONTROLLED SUBSTANCES ACCOUNTABILITY, I THINK THAT ANY MEDICAL DIRECTOR WOULD BE HESITANT TO ALLOW ANY INDIVIDUAL TO PERFORM AT THE EMT-P LEVEL. THE MEDICAL DIRECTOR IS RESPONSIBLE FOR QUALITY CONTROL OF THE NARCOTICS ON THAT AMBULANCE.

EIGHT MEMBERS OF THE RANDOM LAKE SQUAD ARE LICENSED EMT-PARAMEDICS AND I DON'T KNOW OF ANY MEDICAL DIRECTOR IN OUR AREA THAT WOULD GIVE HIS OR HER APPROVAL TO ALLOW ONE OF US TO ACT AS A PARAMEDIC ON THE AEMT AMBULANCE.

WHEN I REVIEWED OUR AMBULANCE CALLS OVER THE LAST 2 YEARS, I FOUND THAT NEARLY 2/3 OF OUR REQUESTS FOR A PARAMEDIC LEVEL INTERCEPT WAS FOR PAIN CONTROL ONLY.

IN THE LATE 1990-2000'S ALMOST ALL OF THE MEMBERS THAT BECAME AN EMT-B CONTINUED ON THROUGH THE EMT-I CLASS WITH A NEARLY 100% PASS RATE AND LICENSURE. NOW, WITH AN

ADDITIONAL 100 PLUS HOURS OF REQUIRED EDUCATION AND A HIGH NATIONAL REGISTRY FAIL RATE, WE HAVE HAD ONLY 2 MEMBERS TAKE THE AEMT CLASS IN THE LAST 5 YEARS. VOLUNTEERISM IS CHANGING. MORE AND MORE YOUNG MEN AND WOMEN ARE SPENDING TIME WITH THEIR FAMILIES (RIGHTFULLY SO), AND CAN'T SPEND AS MANY HOURS IN TAKING THE COURSE, REFRESHER COURSE, AND CONTINUAL TRAINING TO BE AN AEMT.

THE SECOND BILL THAT I SUPPORT IS REGARDING THE FUNDING FOR ADDITIONAL MEMBERS OF MEDICAL FIRE RESPONDERS UNDER THE FUNDING ASSISTANCE PROGRAM. MOST SERVICES THAT RUN AS A FIRST RESPONDERS, ARE NON-TRANSPORTING SERVICES AND THUS THEY ARE UNABLE TO BILL FOR SERVICES. THESE SERVICES FUND THEIR UNIT MAINLY THROUGH FUND RAISING EVENTS. THE EMT BASIC OR HIGHER AMBULANCE SERVICE RECEIVE AN ALLOWANCE FOR TRAINING THROUGH THE FAP PROGRAM AND ADDITIONAL DOLLARS ARE AVAILABLE THROUGH THE INCOME FOR AMBULANCE TRANSPORTS. PROVIDING FUNDS FOR FIRST RESPONDER EDUCATION IS KEY IN RURAL AREAS. FIRST RESPONDERS MAY BE FIRST ON SCENE AND CARING FOR PATIENTS FOR A LONG TIME BEFORE THE AMBULANCE ARRIVES.

I ALSO SUPPORT CHANGING THE REQUIREMENTS FOR RE LICENSURE FROM EVERY 2 YEARS TO 3 YEARS AS LONG AS THE SERVICE MEDICAL DIRECTOR SIGNS OFF ON LICENSURE. I BELIEVE THAT THIS WILL HELP US TO RETAIN OUR VOLUNTEER MEMBERS.

I ATTENDED ONE OF THE AD HOC SESSIONS WHERE A NUMBER OF PEOPLE TESTIFIED ON THE STATE OF WISCONSIN EMS. TWENTY YEARS AGO, THE SAME PEOPLE TESTIFIED AND STATED THE SAME THINGS THAT ARE BEING SAID TODAY. WHAT HAS CHANGED ARE OUTCOMES FOR THE OVERDOSE PATIENTS WITH THE UTILIZATION OF NARCAN BY ALL LEVELS OF LICENSURE. I ALSO AM CONCERNED ABOUT THE QUALITY OF MEDICAL DIRECTORS/ MEDICAL CONTROL AVAILABLE FOR OUR RURAL SERVICES. THIS TOO NEEDS TO BE ADDRESSED IN THE FUTURE.

I WOULD LIKE TO THANK YOU FOR TAKING THIS NEXT STEP TO KEEP THE STATE OF WISCONSIN PRE HOSPITAL CARE AT A HIGH LEVEL OF SERVICE.