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# HOWARD MARKLEIN

STATE SENATOR • 17<sup>th</sup> SENATE DISTRICT

**March 3, 2021**

## **Senate Committee on Insurance, Licensing and Forestry Testimony on Senate Bill (SB) 89**

Thank you Chair Felzkowski and committee members for hearing Senate Bill (SB) 89, which reduces barriers to entry for Emergency Medical Responders (EMRs). Thank you Chair Felzkowski for co-authoring the bill.

EMS departments are staples of our rural communities. However, many rural, volunteer departments are struggling to recruit new members and retain current members. In the Fall of 2019, I held four “Rural Volunteer EMS Summits” across the 17<sup>th</sup> Senate District to answer the question, “*What can the state do to encourage volunteers and help with recruitment and retention of rural volunteer EMS?*” Nearly 70 EMS volunteers, representing almost 30 different departments, attended. SB 89 is one of three bills that are the direct result of feedback I received at these Summits.

SB 89 will make the National Registry of Emergency Medical Technicians (NREMT) exam optional for EMRs. However, individual departments will have the ability to decide whether or not the NREMT exam will still be required for credentialing with their department. I have consistently heard that the NREMT exam is difficult, expensive, and doesn’t always test for relevant information. Many departments told me that they would have two, three, or even eight more volunteers if the NREMT exam was not a required part of the initial licensure process. No less than 10 other states, including Minnesota, do not require the NREMT exam for EMRs.

It is important to note that even with this change, SB 89 leaves in place the requirement that each EMR would need to complete a Department of Health Services (DHS) approved training course and pass all other applicable tests and hands-on experiences to receive licensure. This bill simply states that DHS cannot require the NREMT exam to be one of the requirements for licensure for EMRs.

In conclusion, this bill is designed to help and support rural, volunteer EMS departments. The changes are not designed to intrude on the services that Paramedic departments provide. They do important work and are vital to a functioning EMS system in Wisconsin.

These changes are not going to solve the volunteer shortage overnight, but will remove obstacles and improve state-level regulation. There is still work to do, but I am proud of this initiative to support the local men and women who respond when we need them. Thank you again for allowing me the opportunity to testify in support of this bill, and I welcome any questions.



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**March 3, 2021**

**The Senate Committee on Insurance, Licensing and Forestry  
Testimony on Senate Bill 89**

Thank you, Chair Felzkowski and committee members, for taking the time today to hold a public hearing on Senate Bill 89. It has been great working on this legislation with my co-author, Senator Marklein. We both have consistently heard from our local Emergency Medical Service (EMS) department leaders, about the challenges they face in recruiting new volunteers in their communities.

One of the biggest hurdles individuals face, is the state's requirement to pass the National Registry of Emergency Medical Technicians (NREMT) exam, in order to become an Emergency Medical Responder (EMR).

Since 2011, by rule, the Department of Health Services has required that the NREMT exam be taken and passed prior to becoming licensed. Unfortunately, the feedback we have received about this exam is that it's extremely challenging, expensive and doesn't always test the most relevant information needed to become an EMR volunteer in Wisconsin. The exam is such a significant deterrent, that it's become a recruitment barrier for getting new people interested in becoming volunteers.

This bill would make the NREMT exam optional for Emergency Medical Responders (EMRs), which is the lowest level recognized in Wisconsin. The NREMT exam is optional for EMRs in at least 10 other states, which include; Minnesota, North Dakota, South Dakota, and New York.

Under this bill, EMRs would still need to pass a Department of Health Services certified training course before they would be able to be licensed. Also, individual departments would have the ability to decide if they think that the NREMT exam should be a requirement for their department.

I would like to thank Senator Marklein for his leadership on this issue, as well as my colleagues who signed on as co-sponsors of Senate Bill 89. It's my hope that we can all come together and make this common sense reform, to help support Wisconsin's rural EMS departments throughout the state.

Thank you again for listening to my testimony, and I would be happy to take any questions.

March 3, 2021

To whom it may concern,

My name is Andy Chenous and I am the service director for Argyle EMS which is a rural volunteer ambulance service located in Argyle, WI. I would like to take a minute of your time and let you know how this bill will help our service. To give you a bit of background on our service it covers approximately 78 square miles and has 2,280 individuals in our service area. We cover 7 municipalities with our service area as well. Senator Marklein had a listening session in Lafayette County that I attended in the fall of 2019 and where the idea for this bill stemmed from. I am going to now proceed to tell you how this bill will benefit our service in southwest Wisconsin.

SB 89: In this day and age where it is not as much of a "volunteer community" as it used to be 20 years ago, I feel it is much harder to get anyone to join a service. Any way of taking an extra burden of even paying for a book off of them may help to get them to go to class and become a volunteer. Again, we go back to the fact of schooling and just getting members to go to class. To be a volunteer in this day and age requires someone who works a 40-60+ hours a week to go to class, have a family, and work in their schedule. This can seem impossible, but some people pull it off.

As far as the National Registry goes, I don't understand why they are required to take it as EMR's. If they are a standalone EMR service (first response agency) they will never transport a patient and if they are with a transporting agency, they will have a nationally registered EMT with them at minimum. The state technical college tests out the student and ensures their competencies in both written and practical tests currently and then they must go to the National Registry to obtain a certificate number, once successfully completing testing, in order to obtain a state license. Testing and then retesting doesn't make a lot of sense in my book when we are having problems with even obtaining members. If they can display and prove their competencies with the State of Wisconsin technical college, I feel that should be enough to give them a license. We need individuals and taking that test which costs that member or service more money doesn't make that person who took the class any better of an EMR.

Please consider passing this so we can get more members on our rosters. Last year I had 7 people take the class and pass all the tech school requirements but 4 of these potential members were unable to take the National Registry testing due to their work schedules and the test having to be taken at a testing location not convenient so these 4 people never became EMR's. If this bill were in place, then I would have 4 more members on my department today. I strongly believe that this will not adversely affect our level of care for the individuals of the state but on the contrary will help them as it will ensure that in fact SOME ONE WILL COME in their time of need as we will have more members. Don't over test these volunteers, I know we need and want a high level of care, but we need to be realistic in our thinking and know that we will not get doctors with a PhD to volunteer so we have to draw the line somewhere.

Please consider passing this bill as it has the future of Wisconsin EMS in mind. There must come a time where it is not made harder to provide volunteer services to the ones in need and we can

start by passing this bill. I apologize that I am unable to deliver this message to you today and answer your questions face to face as I am a face to face person.

If any of you have questions for me, please contact me at my below information.

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MEMO TO: Senate Committee on Insurance, Licensing, and Forestry  
FROM: Mike Koles, WTA Executive Director  
RE: SB89 Testimony  
DATE: 3/3/2021

*Unfortunately due to overlap with our National Association of Towns and Townships Virtual Fly-In, we are unable to testify in person. Please accept my written and supportive comments on SB89.*

Chair Felzkowski, members of the committee, thank you for the opportunity to provide our comments on SB89. For many years, the WTA has indicated that Wisconsin must address an impending fire and EMS service provision crisis. As you are aware, towns are required by statute to provide fire and ambulance service. Several changes in recent sessions helped. Last session's inclusion of joint EMS in the 2% + CPI levy limit alleviation that has historically been available to joint fire and the temporary increased investment in LOSA that built on changes adopted in the 2017-19 budget were a great start. However, an even deeper and wider approach is necessary, and Senator Marklein's package of bills, including SB89 begins that more comprehensive strategy.

In Chair Felzkowski's District, four towns covering ½ of Florence County recently lost their ambulance service due primarily to lack of volunteers. Luckily for them, with significant work they were able to find a temporary solution from the private sector at a significantly increased cost. In Senator Bewley's District, where Senator Stafholt owns a hunting cabin, the towns have not been so lucky. Six towns were informed that their private provider would no longer be offering service starting January 1, 2021. Three towns were able to find a neighboring service at an increased cost. Three towns, which cover the area of six townships (one town is a double township and one a triple), currently have no ambulance service. For one town, their only option is to form their own service. The other two received only one offer, which would have required a 170% and a 492% increase in town taxes. You might have listened to last week's WPR story covering this. The issues driving these crises are many, varied, and beyond describing in this testimony.

One of the issues our members communicate to us frequently pertains to training standards. Some members are satisfied with the current training requirements, while others feel the training requirements are too extensive. The former are concerned that lower training standards will decrease safety, while the latter beg the question - "Is it better to have someone show up that is trained at a lower level than today's requirements or not have anyone show up at all?" This bill does not address this dilemma, but it is incumbent upon me to note the dilemma.

More consensus exists regarding the need to examine how Wisconsin evaluates EMR, EMT, AEMT, and Paramedic readiness. Many of our members, who believe strongly in the existing training requirements,

simultaneously question whether or not the NREMT is the correct evaluative tool, including wondering if a Wisconsin tailored written examination would be a better tool. Many cite that they have lost highly qualified would-be EMS volunteers because they have test anxiety, are not good at computers, have difficulty with the multiple choice approach of the NREMT, or have difficulty with test questions they do not consider pertinent to the skills being assessed. Again, this bill does not address this overall dilemma.

Our Board unanimously supports SB89 and the common sense, minor change it makes. It does not change training standards or hours required. It simply allows for a department to choose whether or not the NREMT is the correct evaluative tool for the most basic EMS professional at the EMR – first responder - level. The EMR training curriculum is different and requires fewer hours than the EMT level for which the NREMT is designed to evaluate. This bill allows local decision makers the flexibility to use this testing requirement or to simply evaluate readiness based on completion of a Department of Health Services (DHS) approved training course and passage of all other applicable tests and hands-on experiences required to receive licensure.