


KAREN HURD

STATE REPRESENTATIVE • 68TH ASSEMBLY DISTRICT

Assembly Bill 432
Public Testimony
Committee on Health, Aging and Long-Term Care
January 10, 2024

Thank you, Chair Moses and members of the committee for holding this hearing on Assembly Bill 432.

In March of 2023, the Wisconsin Office of Rural Health released its report on the *Reliability of Wisconsin's 911 Ambulance Response*. Although, officials in the state of Wisconsin were previously aware that a serious problem with Emergency Medical Services (EMS) existed, the findings in this report cemented the facts concerning this crisis. The key findings in this report were:

- The strain on reliability is a state-wide issue due to staffing and funding challenges experienced by agencies in every region, rural or urban, whether volunteer or paid staff.
- 41% of EMS agencies have periods where they do not have staffing to be able to respond to a request for an ambulance.
- 78% of EMS agencies have to respond to another agency's request for mutual aid due to a lack of staffing at the first EMS agency.

In the summer of 2022, I was commanding a Military Honors unit at a veteran's funeral in Fall Creek, WI. The American Legion member who was part of the color guard suddenly collapsed. Immediately, we called 911. It was 25 minutes later that an ambulance finally arrived. The man had suffered a cardiac event. The location of the funeral was not a 25 minute drive away from Eau Claire (from where the ambulance came). A resident in a car could have driven the speed limit and arrived sooner than 25 minutes. Of course, we did not move the man as we were unsure of his injuries. We followed the dispatcher's instructions while we waited for the EMS personnel to arrive.

This experience prompted me to inquire as to what was the industry standard as far as response time. I learned that it varied from location to location but the national average was 7 minutes. Later, in April of 2023, I read the City of Delafield, WI referendum justification that stated that they were unable to achieve the industry standard of an 8-minute response time due to staffing shortages.

AB 432 helps address the staffing shortages within our EMS agencies. This bill would allow 17-year-olds to become licensed emergency medical responders. Currently, 17-year-olds can be certified by the National Registry of EMTs (NREMT) as having completed the necessary education and qualifications to practice; however, these certified 17-year olds cannot become licensed until they are age 18.

As individual maturity and ability to handle difficult and traumatic situations is essential in consideration of a 17-year-old being a part of an EMS team the bill requires specific criteria be met in addition to the standard education and other requirements of EMS personnel:

- Approval must be obtained from the parent or guardian
- Affiliation with a sponsor that provides emergency medical services must be established
- School attendance requirements must be met
- Compliance with all applicable federal and state laws, rules, and regulations (i.e. Child Labor laws—a 17-year-old cannot drive as a part of his/her job; restricted hours, restricted duties)

This bill does not require any emergency medical agency to employ 17-year-old EMS personnel. It gives them the opportunity to do so only if the agency deems that the individual is of a maturity level and appropriate temperament to handle the work.

Some concern has been raised if insurance companies would cover if 17-year-olds are part of the EMS team. Andy Franken, President of the Wisconsin Insurance Alliance wrote this in response to my query to him: “Regarding liability coverage concerns, if all training and licensure requirements are met and continuing training requirements met, then we would have minimal concerns for the casualty exposure.”

Amendment 1 to AB 432 makes it clear that a 17-year-old must have direct contact with a physician, physician assistant, or certified advanced practice nurse for the purpose of providing medical direction.

I thank the committee for their time. I will be happy to answer any questions.



January 10th, 2024

Representative Moses, Chair

Members of the Assembly Committee on Health, Aging, and Long Term Care

Testimony on 2023 Assembly Bill 432

Relating to: eligibility of certain minors for licensure as emergency medical services practitioners and certification as emergency medical responders, providing an exemption from emergency rule procedures, and extending the time limit for emergency rule procedures.

Thank you, Chairman Moses and other members of the committee, for hearing my testimony on Assembly Bill 432 today. As a first responder from a rural area, I am proud to be the author a bill that could help local emergency medical services teams with their staffing shortages.

The staffing of EMS departments, especially smaller, rural departments has been a concern for quite some time. 43 percent of EMS services in Wisconsin are staffed by 6 or fewer people, with 21 percent of services being run by 2-3 members. Additionally, 51 percent of agencies have crew rosters with 75 percent or more of volunteer members. Smaller agencies rely on volunteer members because sometimes they're all the agency can afford. While the new shared revenue amounts in this year's budget will help alleviate some of the funding concerns for these departments, such as being able to afford paid part-time or full-time employees, but that is only part of the battle. Recruitment and retention are both hurdles that agencies face. Burn out, fewer applicants, and other jobs with better promises, benefits, and schedules make the EMS world less appealing to younger applicants. We have to start thinking of different ways to attract and keep our qualified EMS workers.

That is where this bill comes in. Our Youth Apprenticeship programs in the state encourage high school students to explore different career options, and EMS should be one of those fields. This legislation would allow 17 year old students to receive their emergency medical responder or services practitioner license in Wisconsin if they met the following criteria: met school attendance requirements, received approval from a parent or guardian, be affiliated with a sponsor that provides EMS services, and the student agrees to comply with all applicable federal and state laws. Additionally, the Department of Workforce Development would be required to add EMS Youth Apprenticeship curriculum.

At the national level, the National Registry of EMTs sets educational standards and credentials for EMT personnel. In 2020, the NREMT removed the requirement that an applicant must be 18 years old to receive their license. Since Wisconsin participates in the NREMT, our applicants should not have to be at least 18 years old to receive their credentials. Aligning our state statute with the national guidelines will give more opportunities to students to get trained, certified, and employed in the EMS field.

This is an opportunity to support both our students and our EMS departments. Youth apprenticeships encourage tangible and applicable skills for specific careers, and this bill would help with that workforce pathway. Thank you, and I will take any questions at this time.

Respectfully,

A handwritten signature in black ink, appearing to read 'Jesse James'.

Senator Jesse James

23rd Senate District

Sen.James@legis.wisconsin.gov



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Kirsten L. Johnson, Secretary

TO: Members of the Assembly Committee on Health, Aging, and Long-Term Care

FROM: HJ Waukau, Legislative Director

DATE: January 10, 2024

RE: AB 432 relating to: Eligibility of certain minors for licensure as emergency medical services practitioners and certification as emergency medical responders, providing an exemption from emergency rule procedures, and extending the time limit for emergency rule procedures.

The Wisconsin Department of Health Services (DHS) would like to submit written testimony in support of Assembly Bill 432 (AB 432), as amended, which would allow 17-year-old individuals to become licensed as emergency medical services (EMS) practitioners and certified emergency medical responders (EMR). Under AB 432, 17-year-old individuals would be eligible for either an EMS license or EMR certification provided they meet school attendance requirements, provide DHS with both a letter of consent from their parent or guardian and letter of endorsement from a sponsoring organization, and they comply with applicable federal and state laws and regulations. Additionally, EMS would be approved as an occupational area in the youth apprenticeship program; and DHS would be able to reimburse a school district, charter school, or Tribal school for any costs to administer an exam to become a licensed EMS practitioner or certified EMR.

Governor Evers and DHS ardently support increasing funding, access, and flexibility for all of Wisconsin's EMS and EMR personnel. This is why Governor Evers allocated nearly \$40 million in additional funding from the American Rescue Plan Act (ARPA) in 2022 to help our state's EMS and EMR services recover from the COVID-19 pandemic. \$32 million was allocated to newly created EMS Flex Grants and \$8 million was allocated to supplement the EMS Funding Assistance Program. These grants provided needed investments in staff, equipment, and training for our state's EMS providers so they can continue to serve our communities in our time of need. Governor Evers also approved new flexibilities for EMS providers under 2023 Act 12. Act 12 eliminates the requirement for entry-level EMS providers to pass a National Registry of Emergency Medical Technicians (NREMT) exam, allows ambulance service providers and EMS programs to accept military training and experience as "substantially equivalent" or "relevant" to course completion requirements, removes stocking requirements for rural ambulance service providers, and allows for new staffing flexibilities for non-emergency interfacility transports.

AB 432 would add to these new flexibilities as communities across the state evaluate how best to address staffing and workforce shortages for critically needed services. Assembly Amendment 1 enhances AB 432 by providing guardrails to ensure that any 17-year-old EMS or EMR practitioner is adequately prepared to respond to the extraordinary situations they may encounter. This includes access to on-line medical control, requirements for when a 17-year-old EMS or

EMR practitioner must consult with an on-line medical control, and service provider flexibility for additional requirements or conditions that may be necessary. This amendment bolsters the structure of AB 432 by not placing a 17-year-old EMR or EMS practitioner in a situation that is beyond their capacity while maintaining patient safety and quality of care.

DHS would like to thank the bill authors for their assistance in amending AB 432 and thanks the Committee for the opportunity to provide written testimony in support of AB 432. As always, DHS offers itself as a resource for the Committee should it have any questions.

Wisconsin EMS Association®

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Wisconsin EMS Association®

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To: Representative Moses (Chair)
Representative Rozar (Vice-Chair)
Members of the Assembly Committee on Health, Aging and Long-Term Care

From: Alan DeYoung, Executive Director

Date: Wednesday, January 10th, 2024

Re: **Testimony for concern of 2023 Assembly Bill 432**

Good morning, Chair Moses, Vice Chair Rozar and members of the Committee,

The Wisconsin EMS Association (WEMSA®) has a membership of over 7,000 EMS professionals and over 350 EMS Services (both rural and urban) in Wisconsin. On behalf of the Association and its membership, this testimony is to highlight our concerns regarding Assembly Bill 432, allowing 17-year-olds to be licensed and operate as an Emergency Medical Service practitioner.

We do respect the authors and co-sponsors of this legislation. They recognize that staff recruitment and retention shortages are at a crisis for many Wisconsin emergency medical services, where 78.6 percent of Wisconsin EMS services rely on volunteers – 24 hours, 7-days a week and 365 days per year.

However, at the core of our testimony is the question – is it good public policy to be opening the door to putting minors in positions of emergency response that could have profound impacts upon their mental health and well-being? Where is the policy line from when a child is a child no more and becomes a fully functioning adult? And, as a State – do we have the right infrastructure and mental health support in place for minors (and adults) operating as emergency responders?

Please keep in mind, these kids will be responding to all sorts of health emergencies, physical and mental traumas, vehicle accidents, shootings, etc. In short, difficult situations to process and deal with. And, if a EMS practitioner is found to be negligent or reckless in their administration of services – they can be criminally charged.

“In Wisconsin, you become a legal “adult” at age 18, unless you are under a legal adult guardianship based on disability. However, for criminal law purposes, you will be treated as an adult at age 17. And although at age 18 you are now old enough to join the military, you cannot drink alcohol until you reach the age of 21.¹”

Please also know that Wisconsin already has thriving Dual Enrollment Academies (DEAs) / Programs for high school students to gain training while attending high school – so that they can be licensed immediately as EMTs at 18 years of age.

¹ Wisconsin State Bar, What You Should Know about [Wisconsin Law: Your Legal Rights & Responsibilities](#).



As policymakers, we ask you to consider some questions and whether additional system supports are needed to ensure we are not putting minors at risk – and frankly, to help our adult EMTs already struggling from what they have been exposed to and deal with responding to emergency calls.

Mental Health

- A study conducted using in-hospital and prehospital providers found that “prehospital providers were significantly more likely to screen positive for PTSD compared to the in-hospital providers (42% vs. 21%, $P < 0.001$).”²
- From a study published in the Journal of Emergency Medical Services researchers found that first responders (EMS) in the United States were approximately 10 times more likely to have suicidal ideations and/or attempt suicide compared to the CDC national average.
- Studies show that first responders are at an increased risk of post-traumatic stress disorder and additional mental health issues including substance abuse. These studies compared police, firefighters, and first responders in each study.³
- Depression and PTSD affect an estimated 30% of our nation’s first responders – compared to 20% of the general population.⁴
- Approximately 3.7% of Americans have contemplated suicide, that rate jumps to 37% for fire and EMS professionals - same thing as above but different wording.⁵
- Today, emergency first responders that are not full-time firefighters or police officers, including EMS providers not attached to a full-time fire department have the same ability to obtain post-traumatic stress disorder coverage (assumptions) under Wisconsin Workers Compensation, even though these departments (including volunteer) pay Workers Compensation premium coverage.

Staffing of an Ambulance

- DHS 110.50(1)(a) “EMT ambulance. An EMT ambulance shall be staffed with at least two individuals, credentialed with that emergency medical service provider under s. [DHS 110.53](#), who are licensed at the EMT level or one licensed EMT and one with an EMT training permit. When staffed with a person that holds an EMT training permit the licensed EMT must be in the patient compartment during transport.”⁶
- When transporting a patient in an emergency situation, the 17-year old is either going to be the lone practitioner with the patient in the back of the ambulance or driving the ambulance to the hospital.

² Reference: [Journal of EMS: First Responders and PTSD: A Literature Review](#)

³ Reference: [Journal of EMS: First Responders and PTSD: A Literature Review](#)

⁴ Reference: [America's first responders' struggle with PTSD and depression](#)

⁵ Reference: [America's first responders' struggle with PTSD and depression](#)

⁶ [Wisconsin DHS 110.50\(1\)\(a\)](#)



- The question raised by many EMS members is what the potential insurance cost impact could be for allowing \ covering a 17-year-old minor to drive an ambulance?
- We understand that professional liability insurance coverage costs are likely to be similar for a licensed EMT at 17 versus 18 years of age – but we are asking if there will be restrictions or costs association with vehicle insurance?

EMS departments already struggle with providing proper support to their adult staff that face traumatic scenarios and life-altering events. This includes lack of support for EMS providers through PTSD worker's compensation coverage, which they currently do not have. Additionally, this field has increased exposure to hazardous materials, increased risk of harm from patients or external sources, and increases in future mental health challenges through traumatic scenes.

These are all risks that minors (let alone adults even) should not be exposed to without proper support, both through worker's compensation support, but through resources provided locally. Mental health support for minors (and for adults) is extremely limited in Wisconsin, highlighting shortages of mental health clinicians, especially in rural areas identified by the Wisconsin Office of Rural Health shortage maps (HRSA 2022 Data).

Again, we understand the pressures facing Wisconsin EMS today – both from a staffing perspective and funding perspective. As services transition from volunteer to paid – communities can struggle. **In the past 5 years alone, 84 licensed EMS departments have closed in Wisconsin** (both 911 transport and first responder non-transport).

Other Things to Consider – Suggestion Pieces Toward the EMS Solution Puzzle

As a state we need to also consider properly funding and supporting EMS in Wisconsin, especially when we as a state rely so heavily on volunteers to staff 24/7 coverage for 911 medical response.

Volunteers and even career professionals in EMS are struggling to volunteer and even work in EMS. This is in addition to many holding a full-time job (outside of EMS) and working to support their families. This can be identified through the decrease in the number of licensed EMS providers and the decrease in the number of participating EMS providers. Wisconsin has seen a **9.7% decrease** in the past 5 years in the **number of licensed EMS providers**, but **911 call volume has increased by 21%** over that same period.

We have around 3,000 to 3,500 licensed EMS providers that are no longer working for an EMS department but still hold an active EMS license. This means that around **20% of the entire licensed EMS workforce are eligible to work for a department but are choosing not to**. Reasons can include: not being reimbursed for expenses when volunteering, not getting paid or paid enough for the risks associated with the field, not being provided any benefits (health insurance, mental health support, etc.), mental health risks associated with the role, not being able to support a family on the existing pay structure, etc. These are just some of the reasons gathered from licensed providers that are not active with any EMS department. We have a huge opportunity to encourage already licensed providers to get back into the workforce but need to provide the proper funding and support to do so.



Encourage Licensed Providers to Re-Enter Workforce

Staffing shortages and funding challenges are real and are at a crisis level in many communities. Communities are being faced with unanswered 911 calls, increased call volumes, burnout of overworked volunteers and staff and more. We would recommend that the legislature utilize funding to encourage EMS providers to re-enter the workforce. Funding could be used for increasing mental health resources, worker's compensation coverage for PTSD, increased pay to actually support their family, and increased benefits to support EMS providers in their field.

For clarification to others, the State of Louisiana does require a minimum of 16 years of age by the scheduled end date of the emergency medical responder (EMR) course and a minimum of 17 years of age at the conclusion date of the EMT course. Other states, like Utah, are similar, allowing the EMR certification at age 16 and all other EMS licenses at 18 years old.

Another suggestion could be that this bill be amended and allow only the EMR level certification to be eligible at 16 or 17 years old and older, EMT and higher levels should be at minimum 18 years of age or above.

Thank you for allowing us to testify today. I look forward to working with the authors of this bill, the members of this Committee and the State Legislature to identify and implement workable solutions to deal with the crisis in EMS.

Thank you,

A handwritten signature in black ink, appearing to read "Alan DeYoung".

Alan DeYoung, M.S.
CEO/ Executive Director
Wisconsin EMS Association
26422 Oakridge Dr
Wind Lake, WI 53185

Other Supporting Documentation:

1. Wisconsin Office of Rural Health Wisconsin's Designated Health Professional Shortage Areas
 - a. Data Set: Mental Health Providers
2. Louisiana Article from Louisiana Illuminator
 - a. Passages highlighted providing support that licensing minors is not assisting the EMS shortage. Furthermore, EMS employers struggle to hire them due to insurance rules or municipal set policies.
 - b. <https://lailluminator.com/2023/02/06/states-strive-to-reverse-shortage-of-paramedics-emts/>

Dual Enrollment Academies/ Programs currently exist across the state to allow for high school students to be educated in EMS while in high school.

From: [Dernbach, BJ](#)
To: [Behm, Maryjane](#)
Cc: [Parr, Joshua](#)
Subject: FW: Support for Assembly Bill 432
Date: Tuesday, January 9, 2024 3:15:25 PM
Attachments: [image001.png](#)

Could you please distribute this to the committee members tomorrow? Thank you.

BJ Dernbach

Committee Clerk

Assembly Committee on Workforce Development and Economic Opportunities

Office of Representative Warren Petryk

608.237.9193 (Office)

608.316.9666 (Direct)



[/Rep.Petryk](#)

From: Heidi Stewart <curlyheidi@gmail.com>
Sent: Tuesday, January 9, 2024 10:16 AM
To: Dernbach, BJ <BJ.Dernbach@legis.wisconsin.gov>
Cc: Heidi Stewart <curlyheidi@gmail.com>; Mya Stewart <stewartmy@alma.k12.wi.us>
Subject: Support for Assembly Bill 432

TO: Assembly Committee on Health, Aging, and Long-Term Care

FROM: Heidi Stewart, Registered Nurse/ EMT/ Health Officer

Mya Stewart, Certified Nursing Assistant/ Student

DATE: January 9, 2024

SUBJECT: Assembly Bill 432

Thank you, Chairman Moses, Vice-Chair Rozar, and members of the Assembly Committee on Health, Aging and Long-term Care, for allowing us to submit testimony in support of Assembly Bill 432.

According to a 2023 report from the Office of Rural Health, more than 40% of state EMS agencies have staffing gaps where no ambulance is available for emergency calls. These gaps appear to be more significant in less populated, rural Wisconsin. According to the Department of Health Services (DHS), there are close to 800 EMS providers in Wisconsin and over 450 of them are staff with volunteers or a combination of volunteers and paid staff. During a medical emergency, our residents should be confident that the local service staffing is adequate, and that help is on the way.

Throughout the past two years, WI has made some valuable investments in EMS through grant funding for staffing support, training, supplies and equipment upgrades. Assembly Bill 432 is another investment in EMS that will enhance recruitment, training and staffing for the future. It lowers the licensure age limit to align with the National Registry of EMTs and that of similar positions such as certified nursing assistants, it supports continued collaboration between community and educational systems, and it creates a focused youth apprenticeship for students with an interest in an emergency medicine career.

Safeguards built into the proposed bill and established requirements for EMS licensure detailed in WI Administrative Rule 110 assure that all licensure candidates are well prepared and able to

perform the duties required. Per the bill, the student EMT must be in good standing, have guardian permission and the endorsement of a local EMS agency to be eligible. The process of achieving the requirements of licensure is multilayered. Candidates must complete course and clinical work at an EMS training center which follows a specific WI state approved curriculum, they must pass the training center testing requirements along with the National Registry of EMT certification, and they must become affiliated with a service through a local credentialing agreement. The path to becoming a licensed EMT is intense and will only be accomplished by those with a sincere interest.

Community and technical colleges have been effectively partnering with public and private schools for years. Through this partnership, students are provided with opportunities for college credit, certifications, and in some instances degrees. Students are able to explore future career pathways while participating in higher level coursework that is completed in a more independent learning style. Building their resume with life experience, volunteer work, and clinical experience will benefit students as they apply for medical school or other health related fields. Most higher education institutions have an expectation of clinical experience which can be achieved as an EMT.

Developing a youth apprenticeship specific to emergency medical services will complement the others that are already established. Currently, students have the opportunity to participate as medical assistants, dental assistants, laboratory assistants, pharmacy assistants, nursing assistants, physical therapy assistants and others in the healthcare field. By leaving EMS out, an already dwindling workforce will continue to fall behind.

Assembly Bill 432 supports our local communities, schools, and students. Investing in our students is an investment for the future. Thank you.