

## PARAMEDIC LICENSURE EXAMINATION REQUIREMENT

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**House Bill 6086 as introduced**  
**Sponsor: Rep. Jeff Yarocho**  
**Committee: Workforce, Trades, and Talent**  
**Revised 6-4-22**

Analysis available at  
<http://www.legislature.mi.gov>

### SUMMARY:

House Bill 6086 would amend Part 209 of the Public Health Code to change provisions relating to the examinations individuals seeking to enter certain regulated professions must successfully complete. The bill would add new requirements relating specifically to the examination needed to become a paramedic and require the Department of Health and Human Services (DHHS) to develop or prescribe a written and practical examination for paramedics. The bill also would require unaccredited sponsors of education programs for paramedics to disclose their unaccredited status before offering an individual a program.

#### Examinations

Currently, as used in Part 209, the term *examination* means a written and practical evaluation approved or developed by the National Registry of Emergency Medical Technicians or other organization with equivalent national recognition and expertise in emergency medical services personnel testing and approved by DHHS. This definition applies to license examinations for medical first responders, emergency medical technicians, emergency medical technician specialists, paramedics, and emergency medical services instructor-coordinators.

The bill would remove “written and practical” from the above definition of *examination*. This revised definition would apply to an examination for licensure as a medical first responder, emergency medical technician, or emergency medical technician specialist. It would not apply to examinations for emergency medical services instructor-coordinators.

Under the bill, a paramedic would have to pass either of the following to become licensed in Michigan:

- The written examination proctored by DHHS or a designee of DHHS and a practical examination proctored by DHHS or a designee of DHHS. An individual taking the examination described in this provision would have to pay the fee for it directly to the National Registry of Emergency Medical Technicians or another organization approved by DHHS. (The revised definition of *examination* described above would apply to the examination described in this provision.)
- A written and practical examination developed or prescribed by DHHS other than the examination described above. (DHHS would have two years to develop or prescribe the examination and could charge a fee for it that does not exceed the fee for an applicant taking the examination described above.)

#### Education program sponsors

The bill would add a new provision requiring an *education program sponsor* that conducts education programs for paramedics and is not accredited to notify an individual seeking licensure as a paramedic that the sponsor is not accredited before offering an education program

to that individual. (Accreditation means being approved by the joint review committee on educational programs for the EMT-paramedic or other organization approved by DHHS as having equivalent expertise and competency. The entity must submit an application to DHHS that includes verification of the accreditation and maintain that accreditation.)

*Education program sponsor* means a person, other than an individual, that meets the standards of DHHS to conduct training at the following levels:

- Medical first responder.
- Emergency medical technician.
- Emergency medical technician specialist.
- Paramedic.
- Emergency medical services instructor-coordinator.

MCL 333.20904 et seq.

### **FISCAL IMPACT:**

House Bill 6086 would have fiscal implications for DHHS for the Emergency Medical Services (EMS) licensing and enforcement program. DHHS would be obligated to develop or prescribe a new written and practical examination option for paramedics, and may charge and collect a fee. Currently paramedic examination fees are paid directly to a non-state examination entity. DHHS indicates an estimated cost of \$2.0 million to establish an examination program, with annual costs of \$1.6 million per year including 15.0 FTEs to implement, support, and maintain the examination program. It is likely that a fee would be charged to take the examination, producing revenue which would help to offset the costs of the examination program. DHHS estimates a fee similar to the current non-state exam of \$152, which would produce revenue of \$152,000.

Licensing and examination fees would be used only to support the cost of the EMS licensing and examination program. Current year funding supporting EMS licensing programs is about \$2.3 million Gross, including \$1.5 million GF/GP and \$805,000 from licensing fees.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.