

## State Regulation of Community Paramedicine Programs: A National Analysis

The following is a synopsis of “State Regulation of Community Paramedicine Programs: A National Analysis,” published in 2018 in *Prehospital Emergency Care*.

*Updated April 2019: In a previous version of this Science in Brief, it was stated that community paramedics provide services free of charge to populations who cannot afford hospital bills or do not have insurance or transportation to a hospital. However, sustainable funding is currently an ongoing issue within this emerging profession, especially after the conclusion of demonstration projects.*



### What is already known on this topic?

Community paramedicine has recently emerged as a topic in public health. Community paramedics provide medical services to the community outside of their conventional emergency response roles. This model is intended to reduce 9-1-1 calls, emergency room crowding, and hospital readmissions. In demonstration projects, community paramedics often provide care in the home setting for individuals with chronic disease and limited health care access. However, since the development of community paramedicine, there has been concern about finances and policy regulations across the country. Establishing a consistent scope of practice (SOP) for community paramedics is important, because it will help inform coverage and financing policies, as well as the integration of community paramedicine into existing public health programs.

### What is added by this article?

The authors of this article sought to identify the scope of practice for community paramedics by examining current state regulations and surveying state emergency medical services (EMS) agency representatives.

To examine current state regulations, investigators used LexisNexis to conduct a systematic review of

laws, regulations, and policies on community paramedicine from all 50 U.S. states as of June 2016. This review allowed researchers to identify common required skills between states. In cases where a clear SOP could not be identified, additional measures were taken, such as requiring the EMS agency to create or clarify an SOP or inferring possible SOPs from other formal documents. States that had SOPs were then evaluated to determine whether the skills outlined were unique to community paramedicine.

A total of 21 skills common between state SOPs were identified and grouped into four major categories: assessment, treatment/intervention, referral/transport, and prevention/public health. The authors then selected two emergency physician reviewers to conduct anonymous, standardized phone surveys with state EMS agency representatives, to help determine whether the EMS agency’s current SOP included the 21 skills. The researchers found that the EMS agencies surveyed reported a mean of about nine fewer skills than had been found during the regulatory review. The skills with the highest concordance between the legal review and agency surveys were assessing vital signs, administering breathing treatments, and assessing glucose; the skills with the lowest concordance were assessing drug interactions, assessing patient safety, and providing asthma education.



## What are the implications of these findings?

These findings can be used as a starting point to help develop a clearer, more consistent scope of practice across all 50 U.S. states. The results from this study suggest that there is a lack of guidance and inconsistent interpretation regarding community paramedicine. Additional studies could help further determine best practices involving regulations and guidance of community paramedicine while allowing this field to continue to grow.



## Resources:

Rural Health Information Hub Community Paramedicine  
<https://www.ruralhealthinfo.org/topics/community-paramedicine>

U.S. Department of Health and Human Services (HHS)  
Human Resources and Services Administration  
Community Paramedicine Evaluation Tool  
<https://www.hrsa.gov/sites/default/files/ruralhealth/pdf/paramedicevaltool.pdf> (PDF 631K)

Health Affairs  
Community Paramedicine: A Simple Approach to Increasing Access to Care, with Tangible Results  
<https://www.healthaffairs.org/doi/10.1377/hblog20171027.424417/full/>

## Citation

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*The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.*



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