

AN ACT concerning regulation.

**Be it enacted by the People of the State of Illinois,  
represented in the General Assembly:**

Section 5. The Emergency Medical Services (EMS) Systems Act is amended by changing Sections 3.5, 3.50, 3.55, and 3.65 and by adding Section 3.260 as follows:

(210 ILCS 50/3.5)

Sec. 3.5. Definitions. As used in this Act:

"Clinical observation" means the ongoing observation of a patient's medical or mental health condition by a licensed health care professional utilizing a medical skill set while continuing assessment and care.

"Department" means the Illinois Department of Public Health.

"Director" means the Director of the Illinois Department of Public Health.

"Emergency" means a medical condition of recent onset and severity that would lead a prudent layperson, possessing an average knowledge of medicine and health, to believe that urgent or unscheduled medical care is required.

"Emergency Medical Services personnel" or "EMS personnel" means persons licensed as an Emergency Medical Responder (EMR) (First Responder), Emergency Medical Dispatcher (EMD),

Emergency Medical Technician (EMT), Emergency Medical Technician-Intermediate (EMT-I), Advanced Emergency Medical Technician (A-EMT), Paramedic (EMT-P), Emergency Communications Registered Nurse (ECRN), Pre-Hospital Registered Nurse (PHRN), Pre-Hospital Advanced Practice Registered Nurse (PHAPRN), or Pre-Hospital Physician Assistant (PHPA).

"Exclusive representative" has the same meaning as defined in Section 3 of the Illinois Public Labor Relations Act.

"Health care facility" means a hospital, nursing home, physician's office or other fixed location at which medical and health care services are performed. It does not include "pre-hospital emergency care settings" which utilize EMS personnel to render pre-hospital emergency care prior to the arrival of a transport vehicle, as defined in this Act.

"Hospital" has the meaning ascribed to that term in the Hospital Licensing Act.

"Labor organization" has the same meaning as defined in Section 3 of the Illinois Public Labor Relations Act.

"Medical monitoring" means the performance of medical tests and physical exams to evaluate an individual's ongoing exposure to a factor that could negatively impact that person's health. "Medical monitoring" includes close surveillance or supervision of patients liable to suffer deterioration in physical or mental health and checks of various parameters such as pulse rate, temperature,

respiration rate, the condition of the pupils, the level of consciousness and awareness, the degree of appreciation of pain, and blood gas concentrations such as oxygen and carbon dioxide.

"NREMT" means the National Registry of Emergency Medical Technicians.

"Silver spanner program" means a program in which a member under a fire department's or fire protection district's collective bargaining agreement works on or at the EMS System under another fire department's or fire protection district's collective bargaining agreement and (i) the other fire department or fire protection district is not the member's full-time employer and (ii) any EMS services not included under the original fire department's or fire protection district's collective bargaining agreement are included in the other fire department's or fire protection district's collective bargaining agreement.

"Trauma" means any significant injury which involves single or multiple organ systems.

(Source: P.A. 103-521, eff. 1-1-24; 103-689, eff. 1-1-25.)

(210 ILCS 50/3.50)

Sec. 3.50. Emergency Medical Services personnel licensure levels.

(a) "Emergency Medical Technician" or "EMT" means a person who has successfully completed a course in basic life support

as approved by the Department, is currently licensed by the Department in accordance with standards prescribed by this Act and rules adopted by the Department pursuant to this Act, and practices within an EMS System. A valid Emergency Medical Technician-Basic (EMT-B) license issued under this Act shall continue to be valid and shall be recognized as an Emergency Medical Technician (EMT) license until the Emergency Medical Technician-Basic (EMT-B) license expires.

(b) "Emergency Medical Technician-Intermediate" or "EMT-I" means a person who has successfully completed a course in intermediate life support as approved by the Department, is currently licensed by the Department in accordance with standards prescribed by this Act and rules adopted by the Department pursuant to this Act, and practices within an Intermediate or Advanced Life Support EMS System.

(b-5) "Advanced Emergency Medical Technician" or "A-EMT" means a person who has successfully completed a course in basic and limited advanced emergency medical care as approved by the Department, is currently licensed by the Department in accordance with standards prescribed by this Act and rules adopted by the Department pursuant to this Act, and practices within an Intermediate or Advanced Life Support EMS System.

(c) "Paramedic (EMT-P)" means a person who has successfully completed a course in advanced life support care as approved by the Department, is licensed by the Department in accordance with standards prescribed by this Act and rules

adopted by the Department pursuant to this Act, and practices within an Advanced Life Support EMS System. A valid Emergency Medical Technician-Paramedic (EMT-P) license issued under this Act shall continue to be valid and shall be recognized as a Paramedic license until the Emergency Medical Technician-Paramedic (EMT-P) license expires.

(c-5) "Emergency Medical Responder" or "EMR (First Responder)" means a person who has successfully completed a course in emergency medical response as approved by the Department and provides emergency medical response services in accordance with the level of care established by the National EMS Educational Standards Emergency Medical Responder course as modified by the Department, or who provides services as part of an EMS System response plan, as approved by the Department, of that EMS System. The Department shall have the authority to adopt rules governing the curriculum, practice, and necessary equipment applicable to Emergency Medical Responders.

On August 15, 2014 (the effective date of Public Act 98-973), a person who is licensed by the Department as a First Responder and has completed a Department-approved course in first responder defibrillator training based on, or equivalent to, the National EMS Educational Standards or other standards previously recognized by the Department shall be eligible for licensure as an Emergency Medical Responder upon meeting the licensure requirements and submitting an application to the

Department. A valid First Responder license issued under this Act shall continue to be valid and shall be recognized as an Emergency Medical Responder license until the First Responder license expires.

(c-10) All EMS Systems and licensees shall be fully compliant with the National EMS Education Standards, as modified by the Department in administrative rules, within 24 months after the adoption of the administrative rules.

(d) The Department shall have the authority and responsibility to:

(1) Prescribe education and training requirements, which includes training in the use of epinephrine, for all levels of EMS personnel except for EMRs, based on the National EMS Educational Standards and any modifications to those curricula specified by the Department through rules adopted pursuant to this Act.

(A) A failure rate per course of 30% or greater at the first attempt on the licensure examination shall require the EMS System to submit a quality improvement plan to the Department. The EMS System shall share failure rates with the EMS Lead Instructor quarterly. Neither the EMS System nor the Department may take licensure action against an EMS Lead Instructor based solely on first-attempt pass rates.

(B) Candidates shall complete the licensure examination within the timeline required by the NREMT.

(C) An accredited Paramedic program shall be conducted only by an EMS System or an academic institution whose curriculum has been approved by the EMS System. An EMS System associate hospital may allow students from an EMS System-approved and Department-approved Paramedic course to complete clinical rotations as approved by the EMS System Medical Director. The approval by the EMS System Medical Director may not be unreasonably denied.

(2) Prescribe licensure testing requirements for all levels of EMS personnel, which shall include a requirement that all phases of instruction, training, and field experience be completed before taking the appropriate licensure examination. Candidates shall ~~may elect to~~ take the appropriate National Registry examination ~~in lieu of the Department's examination, but are responsible for making their own arrangements for taking the National Registry examination.~~ In prescribing licensure testing requirements for honorably discharged members of the armed forces of the United States under this paragraph (2), the Department shall ensure that a candidate's military emergency medical training, emergency medical curriculum completed, and clinical experience, as described in paragraph (2.5), are recognized.

(2.5) Review applications for EMS personnel licensure from honorably discharged members of the armed forces of

the United States with military emergency medical training. Applications shall be filed with the Department within one year after military discharge and shall contain: (i) proof of successful completion of military emergency medical training; (ii) a detailed description of the emergency medical curriculum completed; and (iii) a detailed description of the applicant's clinical experience. The Department may request additional and clarifying information. The Department shall evaluate the application, including the applicant's training and experience, consistent with the standards set forth under subsections (a), (b), (c), and (d) of Section 3.10. If the application clearly demonstrates that the training and experience meet such standards, the Department shall offer the applicant the opportunity to successfully complete a Department-approved EMS personnel examination for the level of license for which the applicant is qualified. Upon passage of an examination, the Department shall issue a license, which shall be subject to all provisions of this Act that are otherwise applicable to the level of EMS personnel license issued.

(3) License individuals as an EMR, EMT, EMT-I, A-EMT, or Paramedic who have met the Department's education, training and examination requirements.

(4) Prescribe annual continuing education and relicensure requirements for all EMS personnel licensure

levels.

(5) Relicense individuals as an EMD, EMR, EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic every 4 years, based on their compliance with continuing education and relicensure requirements as required by the Department pursuant to this Act. Every 4 years, a Paramedic shall have 100 hours of approved continuing education, an EMT-I and an advanced EMT shall have 80 hours of approved continuing education, and an EMT shall have 60 hours of approved continuing education. An Illinois licensed EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHPA, PHAPRN, or PHRN whose license has been expired for less than 36 months may apply for reinstatement by the Department. Reinstatement shall require that the applicant (i) submit satisfactory proof of completion of continuing medical education and clinical requirements to be prescribed by the Department in an administrative rule; (ii) submit a positive recommendation from an Illinois EMS Medical Director attesting to the applicant's qualifications for retesting; and (iii) pass a Department approved test for the level of EMS personnel license sought to be reinstated.

(6) Grant inactive status to any EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who qualifies, based on standards and procedures established by the Department in rules adopted pursuant to this Act.

(7) Charge a fee for EMS personnel examination, licensure, and license renewal.

(8) Suspend, revoke, or refuse to issue or renew the license of any licensee, after an opportunity for an impartial hearing before a neutral administrative law judge appointed by the Director, where the preponderance of the evidence shows one or more of the following:

(A) The licensee has not met continuing education or relicensure requirements as prescribed by the Department;

(B) The licensee has failed to maintain proficiency in the level of skills for which he or she is licensed;

(C) The licensee, during the provision of medical services, engaged in dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud, or harm the public;

(D) The licensee has failed to maintain or has violated standards of performance and conduct as prescribed by the Department in rules adopted pursuant to this Act or his or her EMS System's Program Plan;

(E) The licensee is physically impaired to the extent that he or she cannot physically perform the skills and functions for which he or she is licensed, as verified by a physician, unless the person is on inactive status pursuant to Department regulations;

(F) The licensee is mentally impaired to the extent that he or she cannot exercise the appropriate judgment, skill and safety for performing the functions for which he or she is licensed, as verified by a physician, unless the person is on inactive status pursuant to Department regulations;

(G) The licensee has violated this Act or any rule adopted by the Department pursuant to this Act; or

(H) The licensee has been convicted (or entered a plea of guilty or nolo contendere) by a court of competent jurisdiction of a Class X, Class 1, or Class 2 felony in this State or an out-of-state equivalent offense.

(9) Prescribe education and training requirements in the administration and use of opioid antagonists for all levels of EMS personnel based on the National EMS Educational Standards and any modifications to those curricula specified by the Department through rules adopted pursuant to this Act.

(d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who is a member of the Illinois National Guard or an Illinois State Trooper or who exclusively serves as a volunteer for units of local government with a population base of less than 5,000 or as a volunteer for a not-for-profit organization that serves a service area with a population base of less than 5,000 may submit an application to the Department

for a waiver of the fees described under paragraph (7) of subsection (d) of this Section on a form prescribed by the Department.

(d-10) A person who is not an EMS personnel may operate an EMS vehicle pursuant to this Act if the following requirements are met: (i) the person meets the requirements of Section 11-1421 of the Illinois Vehicle Code; (ii) 2 Department-licensed EMS personnel are present and have met educational requirements prescribed by the Department; and (iii) the clinical condition of the patient necessitates the involvement of additional licensed personnel to ensure appropriate assessment, treatment, and patient safety. If a waiver is issued by the Department, the person who is not an EMS personnel may operate the EMS vehicle if only one EMS personnel is present. Upon request, the Department may issue a retroactive waiver when appropriate.

The education requirements prescribed by the Department under this Section must allow for the suspension of those requirements in the case of a member of the armed services or reserve forces of the United States or a member of the Illinois National Guard who is on active duty pursuant to an executive order of the President of the United States, an act of the Congress of the United States, or an order of the Governor at the time that the member would otherwise be required to fulfill a particular education requirement. Such a person must fulfill the education requirement within 6 months after his or

her release from active duty.

(e) In the event that any rule of the Department or an EMS Medical Director that requires testing for drug use as a condition of the applicable EMS personnel license conflicts with or duplicates a provision of a collective bargaining agreement that requires testing for drug use, that rule shall not apply to any person covered by the collective bargaining agreement.

(f) At the time of applying for or renewing his or her license, an applicant for a license or license renewal may submit an email address to the Department. The Department shall keep the email address on file as a form of contact for the individual. The Department shall send license renewal notices electronically and by mail to a licensee who provides the Department with his or her email address. The notices shall be sent at least 60 days prior to the expiration date of the license.

(Source: P.A. 101-81, eff. 7-12-19; 101-153, eff. 1-1-20; 102-558, eff. 8-20-21; 102-623, eff. 8-27-21.)

(210 ILCS 50/3.55)

Sec. 3.55. Scope of practice.

(a) Any person currently licensed as an EMR, EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic may perform emergency and non-emergency medical services as defined in this Act, in accordance with his or her level of education, training and

licensure, the standards of performance and conduct prescribed by the Department in rules adopted pursuant to this Act, and the requirements of the EMS System in which he or she practices, as contained in the approved Program Plan for that System. The Director may, by written order, temporarily modify individual scopes of practice in response to public health emergencies for periods not exceeding 180 days.

(a-5) EMS personnel who have successfully completed a Department approved course in automated defibrillator operation and who are functioning within a Department approved EMS System may utilize such automated defibrillator according to the standards of performance and conduct prescribed by the Department in rules adopted pursuant to this Act and the requirements of the EMS System in which they practice, as contained in the approved Program Plan for that System.

(a-7) An EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic who has successfully completed a Department approved course in the administration of epinephrine shall be required to carry epinephrine with him or her as part of the EMS personnel medical supplies whenever he or she is performing official duties as determined by the EMS System. The epinephrine may be administered from a glass vial, auto-injector, ampule, or pre-filled syringe.

(b) An EMR, EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic may practice as an EMR, EMT, EMT-I, A-EMT, or Paramedic or utilize his or her EMR, EMT, EMT-I, A-EMT, PHRN,

PHAPRN, PHPA, or Paramedic license in pre-hospital or inter-hospital emergency care settings or non-emergency medical transport situations, under the written or verbal direction of the EMS Medical Director. For purposes of this Section, a "pre-hospital emergency care setting" may include a location, that is not a health care facility, which utilizes EMS personnel to render pre-hospital emergency care prior to the arrival of a transport vehicle. The location shall include communication equipment and all of the portable equipment and drugs appropriate for the EMR, EMT, EMT-I, A-EMT, or Paramedic's level of care, as required by this Act, rules adopted by the Department pursuant to this Act, and the protocols of the EMS Systems, and shall operate only with the approval and under the direction of the EMS Medical Director.

This Section shall not prohibit an EMR, EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic from practicing within an emergency department or other health care setting for the purpose of receiving continuing education or training approved by the EMS Medical Director. This Section shall also not prohibit an EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic from seeking credentials other than his or her EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic license and utilizing such credentials to work in emergency departments or other health care settings under the jurisdiction of that employer.

(c) An EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic

may honor Do Not Resuscitate (DNR) orders and powers of attorney for health care only in accordance with rules adopted by the Department pursuant to this Act and protocols of the EMS System in which he or she practices.

(d) A student enrolled in a Department approved EMS personnel program, while fulfilling the clinical training and in-field supervised experience requirements mandated for licensure or approval by the System and the Department, may perform ~~prescribed~~ procedures under the direct supervision of a physician licensed to practice medicine in all of its branches, a qualified registered professional nurse, or qualified EMS personnel, only when authorized by the EMS Medical Director. A student enrolled in an EMT class may take the Department-approved EMR licensure exam after the student has completed the first 40 hours of the EMS System-approved and Department-approved EMT course.

(e) An EMR, EMT, EMT-I, A-EMT, PHRN, PHAPRN, PHPA, or Paramedic may transport a police dog injured in the line of duty to a veterinary clinic or similar facility if there are no persons requiring medical attention or transport at that time. For the purposes of this subsection, "police dog" means a dog owned or used by a law enforcement department or agency in the course of the department or agency's work, including a search and rescue dog, service dog, accelerant detection canine, or other dog that is in use by a county, municipal, or State law enforcement agency.

(f) Nothing in this Act shall be construed to prohibit an EMT, EMT-I, A-EMT, Paramedic, or PHRN from completing an initial Occupational Safety and Health Administration Respirator Medical Evaluation Questionnaire on behalf of fire service personnel, as permitted by his or her EMS System Medical Director.

(g) An EMT, EMT-I, A-EMT, Paramedic, PHRN, PHAPRN, or PHPA shall be eligible to work for another EMS System for a period not to exceed 2 weeks if the individual is under the direct supervision of another licensed individual operating at the same or higher level as the EMT, EMT-I, A-EMT, Paramedic, PHRN, PHAPRN, or PHPA; obtained approval in writing from the EMS System's Medical Director; and tests into the EMS System based upon appropriate standards as outlined in the EMS System Program Plan. The EMS System within which the EMT, EMT-I, A-EMT, Paramedic, PHRN, PHAPRN, or PHPA is seeking to join must make all required testing available to the EMT, EMT-I, A-EMT, Paramedic, PHRN, PHAPRN, or PHPA within 2 weeks after the written request. Failure to do so by the EMS System shall allow the EMT, EMT-I, A-EMT, Paramedic, PHRN, PHAPRN, or PHPA to continue working for another EMS System until all required testing becomes available.

(h) A member of a fire department's or fire protection district's collective bargaining unit shall be eligible to work under a silver spanner program for another EMS System's fire department or fire protection district that is not the

full-time employer of that member, for a period not to exceed 2 weeks, if the member: (1) is under the direct supervision of another licensed individual operating at the same or higher licensure level as the member; (2) made a written request to the EMS System's Medical Director for approval to work under the silver spanner program, which shall be approved or denied within 24 hours after the EMS System's Medical Director received the request; and (3) tests into the EMS System based upon appropriate standards as outlined in the EMS System Program Plan. The EMS System within which the member is seeking to join must make all required testing available to the member within 2 weeks of the written request. Failure to do so by the EMS System shall allow the member to continue working under a silver spanner program until all required testing becomes available.

(Source: P.A. 102-79, eff. 1-1-22; 103-521, eff. 1-1-24; 103-547, eff. 8-11-23; 103-605, eff. 7-1-24.)

(210 ILCS 50/3.65)

Sec. 3.65. EMS Lead Instructor.

(a) "EMS Lead Instructor" means a person who has successfully completed a course of education as approved by the Department, and who is currently approved by the Department to coordinate or teach education, training and continuing education courses, in accordance with standards prescribed by this Act and rules adopted by the Department

pursuant to this Act.

(b) The Department shall have the authority and responsibility to:

(1) Prescribe education requirements for EMS Lead Instructor candidates through rules adopted pursuant to this Act.

(2) Prescribe testing requirements for EMS Lead Instructor candidates through rules adopted pursuant to this Act.

(3) Charge each candidate for EMS Lead Instructor a fee to be submitted with an application for an examination, an application for licensure, and an application for relicensure.

(4) Approve individuals as EMS Lead Instructors who have met the Department's education and testing requirements.

(5) Require that all education, training and continuing education courses for EMT, EMT-I, A-EMT, Paramedic, PHRN, PHPA, PHAPRN, ECRN, EMR, and Emergency Medical Dispatcher be coordinated by at least one approved EMS Lead Instructor. A program which includes education, training or continuing education for more than one type of personnel may use one EMS Lead Instructor to coordinate the program, and a single EMS Lead Instructor may simultaneously coordinate more than one program or course. An EMS Lead Instructor may oversee a paramedic with at

least 3 years of experience to teach EMT classes, with a licensed teacher, in high schools. High school students electing to not take the National Registry of Emergency Medical Technicians (NREMT) Certification exam shall not be accounted for in calculating the course pass rate by the EMS System or Department.

(6) Provide standards and procedures for awarding EMS Lead Instructor approval to persons previously approved by the Department to coordinate such courses, based on qualifications prescribed by the Department through rules adopted pursuant to this Act.

(7) Suspend, revoke, or refuse to issue or renew the approval of an EMS Lead Instructor, after an opportunity for a hearing, when findings show one or more of the following:

(A) The EMS Lead Instructor has failed to conduct a course in accordance with the curriculum prescribed by this Act and rules adopted by the Department pursuant to this Act; or

(B) The EMS Lead Instructor has failed to comply with protocols prescribed by the Department through rules adopted pursuant to this Act.

(c) To be eligible for an EMS Lead Instructor license, the applicant shall meet at least the following minimum experience and education requirements and shall provide a written recommendation from the EMS Medical Director of the primary

EMS System affiliation:

(1) a current Illinois license as an EMD, EMT, EMT-I, A-EMT, Paramedic, RN, PHRN, PHPA, PHAPRN, or physician;

(2) a minimum of 2 years of experience in EMS or emergency care;

(3) at least 6 hours of teaching hours audited by a current EMS Lead Instructor;

(4) documented EMS classroom teaching experience with a recommendation for EMS Lead Instructor licensure by an EMS Medical Director; and

(5) documented successful completion of the National Standard Curriculum for EMS Instructors, or its equivalent, as approved by the Department.

(Source: P.A. 103-689, eff. 1-1-25.)

(210 ILCS 50/3.260 new)

Sec. 3.260. Emergency Medical Services bridge programs.

(a) As used in this Section, "stakeholders" include, but are not limited to, members representing private ground ambulance providers throughout this State representing for-profit and nonprofit rural and urban ground ambulance providers; the State Board of Education, the Illinois Community College Systems, and the University of Illinois Systems; the Illinois Board of Higher Education; and the Department of Commerce and Economic Opportunity.

(b) The Department of Public Health shall facilitate

gathering stakeholders to review and provide recommendations on the development of bridge programs that encourage and allow individuals licensed as certified nursing assistants to transition to careers as EMS personnel and a bridge program that encourages and allows EMS personnel to transition to careers as nursing professionals licensed under the Nurse Practice Act.

Section 99. Effective date. This Act takes effect upon becoming law.