

**RULES  
OF THE  
TENNESSEE DEPARTMENT OF HEALTH  
EMERGENCY MEDICAL SERVICES BOARD**

**CHAPTER 1200-12-07  
COMMUNITY PARAMEDICINE**

**TABLE OF CONTENTS**

1200-12-07-.01	Purpose	1200-12-07-.06	Community Paramedic Training Programs – Requirements for Approval
1200-12-07-.02	Scope of Practice	1200-12-07-.07	Community Paramedic Training Programs – Types of Approval; Renewal
1200-12-07-.03	Definitions	1200-12-07-.08	Mobile Integrated Healthcare Programs – Approval
1200-12-07-.04	Community Paramedic Applicant Requirements		
1200-12-07-.05	Endorsement Renewal, Retirement, Reactivation, and Reinstatement		

**1200-12-07-.01 PURPOSE.**

The purpose of mobile integrated healthcare is to focus on patient-centered navigation by integrating existing infrastructure and using emergency care resources more efficiently, and to improve access to primary care for medically underserved populations. As a vital component of mobile integrated healthcare, community paramedics will work with EMS services and other healthcare and social service providers to address specific local problems in the out-of-hospital environment. Community Paramedics are licensed EMS professionals that complete a formal standardized educational program approved by the EMS Board. The Community Paramedic has demonstrated competence in the provision of health education, monitoring, and services beyond the roles of traditional emergency care and transport and works in conjunction with medical direction.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

**1200-12-07-.02 SCOPE OF PRACTICE.**

A community paramedic is an experienced paramedic who has received additional training through a standardized curriculum, to serve communities more broadly in the areas of, primary care, public health, disease management, prevention and wellness, mental health and oral health. A community paramedic's scope of practice includes, at a minimum, all basic knowledge and skills of a paramedic as well as the psychomotor skills set identified in the current National EMS Scope of Practice Model and National EMS Education Standards for a Paramedic. Community paramedics are not independent practitioners and must practice under the supervision of an entity with an approved integrated healthcare program. The community paramedic's duties and scope of services shall be determined by local protocols established by the medical director as defined in 1200-12-07-.03. Community paramedics are subject to the same standards prohibiting unethical practices and conduct as all other emergency medical services personnel as outlined in 1200-12-01-.17.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

**1200-12-07-.03 DEFINITIONS.**

- (1) Definitions. Within these rules, the following terms shall apply:
  - (a) "Approved Program" means a Community Paramedic training program approved by the Tennessee Emergency Medical Services Board;

(Rule 1200-12-07-.03, continued)

- (b) “Board” means the Tennessee Emergency Medical Services Board;
- (c) “Community Paramedic” means an individual who:
  - 1. Is licensed as a paramedic that delivers care in emergency and non-urgent pre-hospital settings with oversight of a physician;
  - 2. Has received specialized training in physiology, disease processes, injury and illness prevention, and medical system navigation, in addition to general paramedic training; and
  - 3. Meets the requirements for additional endorsement as a community paramedic as established by the Board;
- (d) “Community Paramedicine” means the practice by emergency medical services personnel, primarily in an out-of-hospital setting, that may include the provisions of such services as patient evaluation, advice, treatment directed at preventing or improving a particular medical condition, or referrals to other community resources, which may be provided occasionally or at irregular intervals;
- (e) “Medical Control” means the instruction, advice, or orders given by a physician in accordance with locally or regionally approved protocols related to the practice of a community paramedic;
- (f) “Medical Director” means an individual who has an active, unencumbered license to engage in the practice of medicine pursuant to Title 63, Chapter 6 or Chapter 9, who is knowledgeable of the mobile integrated healthcare program, and provides medical advice, direction, oversight, quality assurance and authorization to the community paramedicine personnel within a board-approved program;
- (g) “Mobile integrated health care” (MIHC) means the provision of health care using patient-centered, mobile resources in the out-of-hospital environment under local medical control as part of a community-based team of health and social services providers to include, but not be limited to, home health organizations and community paramedics.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

#### **1200-12-07-.04 COMMUNITY PARAMEDIC APPLICANT REQUIREMENTS.**

- (1) Persons seeking endorsement as Community Paramedics in Tennessee shall:
  - (a) Comply with all rules governing paramedics under Chapter 1200-12-01;
  - (b) Hold a current, unencumbered Tennessee paramedic license with at least five years of work experience as a paramedic with an advanced life support EMS service;
  - (c) Using the prescribed form, complete and submit a Community Paramedic endorsement application accompanied by the Application Fee and Initial Endorsement Fee as outlined in 1200-12-01-.05(4) to the Division;
  - (d) Complete a Board-approved Community Paramedic Training Program;
  - (e) Demonstrate specialized training in physiology, disease processes, injury and illness prevention, and medical system navigation, in addition to general paramedic training;

(Rule 1200-12-07-.04, continued)

- (f) Pass a Board-approved Community Paramedic endorsement examination with a passing score as established by the Board, subject to the following:
  - 1. Anyone who fails the examination three (3) times within two (2) years of completing a Board-approved Community Paramedic Training Program must show remediation from such program before they may take the examination again. After showing remediation, each person may take the examination up to three (3) more times within two (2) years of completing a Board-approved Community Paramedic Training Program.
  - 2. Anyone who fails the examination six (6) times within two (2) years of completing a Board-approved Community Paramedic Training Program, or for any reason fails to be endorsed as a Community Paramedic within two (2) years of completing a Board-approved Community Paramedic Training Program, must repeat all of their Community Paramedic training before they may take the examination again;
- (g) Cause the result of a criminal background check to be submitted directly from the vendor identified in the Division's endorsement application materials to the administrative office of the Division. Such criminal background check shall include the sex offender and abuse registries for states in which the prospective student has lived during the previous seven (7) years. Persons whose names appear on either registry are not eligible for Community Paramedic endorsement. Such result shall be valid for one (1) year from the date it is received by the Division;
- (2) Persons completing a Community Paramedic Training Program prior to the effective date of these rules may apply for endorsement, pending the rules becoming effective. Applicants must show documentation of completing a Community Paramedic Training Program that meets the Board-approved Community Paramedic curriculum, and must complete the qualifying examination referred to above;
- (3) Only graduates of Tennessee Board-approved programs or those who have completed an equivalent curriculum in other states, as determined by the Board or the Division, are eligible for State community paramedic endorsement.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

**1200-12-07-.05 ENDORSEMENT RENEWAL, RETIREMENT, REACTIVATION, AND REINSTATEMENT.**

- (1) Renewal of a community paramedic endorsement must be obtained every two years and is contingent on meeting the following requirements:
  - (a) Complying with all rules governing paramedics under Chapter 1200-12-01, including, but not limited to, Rule 1200-12-01-.04(1)(e), which establishes the scope of practice for paramedics and requires that all patient care provided by paramedics be under medical direction;
  - (b) Having a current, unencumbered paramedic license;
  - (c) Paying the applicable fees as outlined in 1200-12-07-.05(4); and
  - (d) Obtaining ten (10) continuing education contact hours in mobile integrated healthcare topics within the two-year period preceding renewal of the endorsement. Such hours are required in addition to the continuing education hours required for any other endorsement/license.

(Rule 1200-12-07-.05, continued)

(2) Retirement of an Endorsement

- (a) A licensee may retire a community paramedicine endorsement by meeting the requirements found in Rule 1200-12-01-.04(7)(a); and
- (b) A licensee requesting reactivation of a retired endorsement shall meet the requirements of Rule 1200-12-01-.04(4)(d) and (8), and pay the Reactivation/Reinstatement Fee as outlined in Rule 1200-12-07-.05(4)(d).

(3) Reinstatement of an Expired/Lapsed Endorsement

- (a) A licensee requesting reinstatement of an expired/lapsed endorsement shall pay the Reactivation/Reinstatement Fee in addition to the renewal fee;
- (b) To reinstate an endorsement that has lapsed over sixty (60) days but less than two (2) years, a licensee must meet the requirements found in Rule 1200-12-01-.04(4)(d); and
- (c) To reinstate an endorsement that has lapsed over two (2) years, a licensee must meet the requirements found in Rule 1200-12-01-.04(4)(d) and must reenroll in and complete a Board-approved community paramedicine training program.

(4) Community Paramedic - Fees for initial endorsement, renewal, reactivation, and reinstatement shall be remitted as follows:

- (a) Application and Initial Endorsement Fee \$75.00
- (b) Renewal Fee \$90.00
- (c) Late Fee \$25.00  
(if renewal submitted within sixty (60) days of the date of renewal and renewal requirements were met prior to the renewal date)
- (d) Reactivation/Reinstatement Fee \$100.00

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309.

**1200-12-07-.06 COMMUNITY PARAMEDIC TRAINING PROGRAMS – REQUIREMENTS FOR APPROVAL.**

(1) In order to be a Board-approved Community Paramedic Training Program, the program shall:

- (a) Have a written statement of the educational philosophy and purpose of the program;
- (b) Maintain a written agreement with hospitals and/or agencies that are capable of supporting Community Paramedic clinical training;
- (c) Have a physician with an unencumbered Tennessee license to practice medicine who serves as medical director;
- (d) Ensure that the program's funding, equipment, facilities and leadership are adequate for a sound educational program;
- (e) Ensure that students who complete the program are competent, and support students taking endorsement examinations;

(Rule 1200-12-07-.06, continued)

- (f) Be effectively organized and well-administered;
- (g) Utilize faculty that are experienced in the subject matter of the courses they teach, including but not limited to community health, home health, mental health, hospice, and other specialty areas;
- (h) Evaluate teacher effectiveness according to criteria established by the program;
- (i) Maintain an appropriate instructor/student ratio;
- (j) Maintain the following records:
  - 1. A copy of the program's complete curriculum;
  - 2. Statements of course objectives for each course;
  - 3. Copies of course outlines, class schedules, schedules of supervised clinical experience, and teaching plans;
  - 4. Evidence of student competency in achieving the educational objectives of the program;
- (k) Maintain the following student admission requirements:
  - 1. Have five years' experience as a paramedic with an advanced life support EMS service;
  - 2. Hold an unencumbered paramedic license;
  - 3. Cause a letter of recommendation to be submitted directly from the applicant's employer to the program. If the applicant is unemployed, the applicant must cause two letters of recommendation to be submitted directly from former employers and/or supervisors to the program. Such letter(s) shall specify the applicant's title, duties and dates of employment, and shall attest to applicant's character;
  - 4. Undergo a criminal background check, to be requested by the program, to include the sex offender and abuse registries for states in which the prospective student has lived during the previous seven (7) years. Persons whose name appears on either registry are not eligible for admission to a Board-approved Community Paramedic program;
- (l) Comply with the Board-approved standards posted on the educational program section of the Board's website, as well as any applicable Board rules.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

**1200-12-07-.07 COMMUNITY PARAMEDIC TRAINING PROGRAMS – TYPES OF APPROVAL; RENEWAL.**

- (1) The Board may approve or deny approval of Community Paramedic training programs as follows:
  - (a) Initial approval may be granted for a period of one (1) year to a new program that has not been in operation long enough to complete its first class, but has otherwise demonstrated its eligibility for full approval: The program shall be reviewed after one year

(Rule 1200-12-07-.07, continued)

or when its first students complete the program, whichever comes first. A program's failure to meet the requirements for full approval after such time is grounds for denying full approval;

- (b) Full approval may be granted for a period of five (5) years to a program that has met the applicable requirements;
  - (c) Conditional approval may be granted to a program that has failed to meet the applicable requirements and has been notified that it must meet the requirements within a specified time period.
- (2) Renewal of approval shall be made by the Board on the recommendation of the Division, based on surveys, site visits, conferences, a review of documentation, the program's instructor/student ratio and instructor qualifications, and by compliance with this Chapter.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.

#### **1200-12-07-.08 MOBILE INTEGRATED HEALTHCARE PROGRAMS – APPROVAL.**

- (1) Approval
- (a) An ambulance service or licensed healthcare organization wishing to establish a mobile integrated healthcare program must submit the following to the Division for approval
    - 1. A completed application
    - 2. A letter from the medical director who has agreed to provide medical advice, direction, oversight, quality assurance, and authorization to the community paramedic personnel within an approved program.
  - (b) MIHC program approval is not transferable or assignable.
  - (c) In the event that deficiencies are noted after submission of a completed application, the applicant shall submit a plan of corrective action to the Division. Once the deficiencies have been corrected, the Division shall reconsider the application for approval.
  - (d) Changes of address, insurance agent or policies, program director, other program officials, MIHC medical director, or bankruptcy filings must be reported to the Division no later than five (5) business days after the change or the date of effective action.
  - (e) A proposed change of ownership, including a change in a controlling interest, must be reported to the Division a minimum of thirty (30) days prior to the change. The new owner must submit a new application to the Division for approval.

**Authority:** T.C.A. §§ 68-140-302, 68-140-304, and 68-140-309. **Administrative History:** Original rules filed December 16, 2019; effective March 15, 2020.