

## States that Designate EMS as an Essential Service: Structure and Funding

| State                    | Essential Service Designation  | EMS Structure   | EMS Funding   |
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| <p><b>California</b></p> | <p><a href="#">CA. Health and Safety Code §1797.1</a> and <a href="#">§1797.2</a></p> <ul style="list-style-type: none"> <li>The Legislature finds and declares that it is the intent of the [Emergency Medical Services System and the Prehospital Emergency Care Personnel Act] to provide the state with a statewide system for EMS by establishing the Emergency Medical Services Authority within the State Health and Welfare Agency, which is responsible for the coordination and integration of all state activities concerning EMS.</li> <li>It is the intent of the Legislature to maintain and promote the development of EMT-P paramedic programs where appropriate throughout the state and to initiate EMT-II limited advanced life support programs only where geography, population density, and resources would not make the establishment of a paramedic program feasible.</li> </ul> | <p>Each county may develop an emergency medical services program; the local EMS agency plans, implements, and evaluates an emergency medical services system consisting of an organized pattern of readiness and response services based on public and private agreements and operational procedures.</p>   | <p><a href="#">CA. Health and Safety Code 1797.98a</a><br/>Maddy Emergency Medical Services Fund<br/>Each county may establish an emergency medical services fund, upon the adoption of a resolution by the board of supervisors. Source of the fund is a penalty assessment imposed by counties on criminal offenses. 17 percent of fund distributed to counties to use to support EMS services.</p>   |
| <p><b>Colorado</b></p>   | <p><a href="#">Co. Rev. Stat. §5-3.5-102</a><br/>(1) The general assembly hereby declares that it is in the public interest to provide available, coordinated, and quality emergency medical and trauma services to the people of this state. It is the intent of the general assembly in enacting this article to establish an emergency medical and trauma services system, consisting of at least treatment, transportation, communication, and documentation subsystems, designed to prevent premature mortality and to reduce the morbidity that arises from critical injuries, exposure to poisonous substances, and illnesses.(2) To effect</p>   | <ul style="list-style-type: none"> <li>Department of Public Health and Environment provides resources and technical assistance to EMS providers in the state with the assistance of a state emergency medical and trauma services advisory council.</li> <li>Colorado Board of health regulates EMS and paramedic services</li> <li>Local emergency medical and trauma service providers include local governing boards, training centers, hospitals, special districts, and other private and public service providers that have as their purpose</li> </ul> | <p><a href="#">Co. Rev. Stat. §25-3.5-603</a><br/><b>Emergency Medical Services Account</b></p> <ul style="list-style-type: none"> <li>A special account within the highway users tax fund; source of fund is an additional \$2 fee on vehicle registrations; fees collected 3 for provisional certifications or licenses of emergency medical service providers, and fees collected for provisional registration of emergency medical responders.</li> <li>Funds are used for distribution as grants to local emergency medical and trauma service providers pursuant to the emergency medical and trauma services (EMTS) grant program for training of EMS personnel and for distribution to each Colorado county for planning and coordination of emergency</li> </ul> |

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|                        | <p>this end, the general assembly finds it necessary that the department of public health and environment assist, when requested by local government entities, in planning and implementing any one of such subsystems so that it meets local and regional needs and requirements and that the department coordinate local systems so that they interface with an overall state system providing maximally effective emergency medical and trauma systems.(3) The general assembly further finds that the provision of adequate emergency medical and trauma services on highways in all areas of the state is a matter of statewide concern and requires state financial assistance and support.</p> | <p>the provision of emergency medical and trauma services.</p> <ul style="list-style-type: none"> <li>Counties are conferred with the statutory authority to license ground ambulance services.</li> </ul>                 | <p>medical and trauma services in the county and between counties when such coordination would provide for better service geographically.</p> <p>There are 4 types of funding available through the EMTS funding program:</p> <ul style="list-style-type: none"> <li>CREATE education grants - The Colorado Resource for EMS and Trauma Education (CREATE) program supports initial training and continuing education for EMS and trauma service providers working for eligible organizations in Colorado.</li> <li>Provider grants - Grant funds are available to help purchase: medical and rescue equipment, communications, data collection equipment and response vehicles. Support for personnel, recruitment and retention projects and other projects is also available. Grantees must provide matching funds if funded for a provider grant.</li> <li>System improvement funding -System improvement funding supports regional or statewide projects to improve the emergency medical and trauma services system. These projects address a need identified by data with clearly defined activities and evaluation measures.</li> <li>Emergency grant funding -The emergency grant program assists Colorado EMS and trauma organizations that experience an emergency that seriously jeopardizes the level of EMS or trauma services within their service area.</li> </ul> |
| <p><b>Delaware</b></p> | <p><a href="#">Del. Code 16§ 9701</a><br/> The purposes of the emergency medical services systems legislation are to establish and/or identify specific roles and responsibilities in regard to emergency medical services in Delaware in order to reduce morbidity and mortality rates for the citizens of Delaware and to ensure quality of emergency care services, within available resources, through the effective</p>  | <p>EMS statewide system is overseen by the Office of Emergency Medical Services within the Division of Public Health; EMS services are provided by volunteer fire and ambulance companies at the local or county level</p> | <p><a href="#">Del. Code 16 §9814</a><br/> <b>Statewide Paramedic Funding Program</b></p> <ul style="list-style-type: none"> <li>General Assembly appropriates annually an amount sufficient to reimburse 30 percent of approved costs of the statewide paramedic program; this appropriation is made in the annual Grants-In-Aid Act and is appropriated to the Office of Emergency Medical Services, Division of Public Health, Department of Health and Social Services.</li> </ul>   |

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|                      | <p>coordination of the emergency medical services system.</p>  |   | <ul style="list-style-type: none"> <li>Funds distributed to a county for the purpose of supporting a county component of the statewide paramedic system may be used for direct operating costs or as debt service and financing for bond issuance for that purpose. For those capital projects with a total cost greater than \$200,000, the State reimburses on a debt service basis. In no instance does reimbursement include the cost of indirect services provided by the county.</li> </ul>  |
| <p><b>Hawaii</b></p> | <p><a href="#">H.R.S. §321-221</a><br/> The legislature finds that the establishment of a state emergency medical services system, including emergency medical services for children, is a matter of compelling state interest and necessary to protect and preserve public health. A system designed to reduce medical emergency deaths, injuries, and permanent long-term disability through the implementation of a fully integrated, cohesive network of components, the legislature further finds, will best serve public health needs. Accordingly, the purpose of this part is to establish and maintain a state emergency medical services system in communities that can be most effectively served by the State, and to fix the responsibility for the administration of this state system, which shall provide for the arrangement of personnel, facilities, and equipment for the effective and coordinated delivery of health care services under emergency conditions, whether occurring as the result of a patient's condition, from natural disasters, or from other causes. The system shall provide for personnel, personnel training, communications, emergency transportation, facilities, coordination with emergency medical and critical care services, coordination and use of available public safety agencies, promotion of consumer</p> | <p>The Department of Health oversees EMS statewide with the consultation of an advisory committee and determines the levels of EMS to be implemented in each county within the service area. Ambulance service is either operated by the county or the state contracts with an ambulance service in those counties that do not provide ambulance service.</p> | <p><a href="#">H.R.S. §321-234</a><br/> <b>Emergency Medical Services Special Fund</b></p> <ul style="list-style-type: none"> <li>Fund consists of fees remitted from vehicle registration (\$5), cigarette tax revenues, interest and investment earnings attributable to the moneys in the special fund, legislative appropriations, and grants, donations, and contributions from private or public sources.</li> <li>Beginning with fiscal year 2021-2022, \$3,500,000 is distributed each fiscal year to counties operating a county emergency medical services system for the operation of that system.</li> <li>The remainder of the fund is distributed to the Department of Health for operating the EMS system, including enhanced and expanded services.</li> </ul> |

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|                | participation, accessibility to care, mandatory standard medical recordkeeping, consumer information and education, independent review and evaluation, disaster linkage, mutual aid agreements, and other components necessary to meet the purposes of this part.   |   |  |
| <b>Indiana</b> | <a href="#">IC 16-31-1-1</a><br>a) The general assembly declares that the provision of emergency medical services is a matter of vital concern affecting the public health, safety, and welfare of the people of Indiana.(b) It is the purpose of this article:(1) to promote the establishment and maintenance of an effective system of emergency medical service, including the necessary equipment, personnel, and facilities to ensure that all emergency patients receive prompt and adequate medical care throughout the range of emergency conditions encountered;(2) that the emergency medical services commission established shall cooperate with other agencies empowered to license persons engaged in the delivery of health care so as to coordinate the efforts of the commission and other agencies; and (3) to establish standards and requirements for the furnishing of emergency medical services by persons not licensed or regulated by other appropriate agencies. | EMS is overseen by the Emergency Medical Services Commission that is responsible for the development of a statewide EMS that must include state, regional, and local emergency ambulance service plans; promotion of statewide EMS facilities by developing minimum standards, procedures, and guidelines for personnel, equipment, supplies, communications, facilities and location of centers; and the promotion of programs for training of EMS personnel | <a href="#">IC 16-46-16.5-4</a><br><b>Health Issues and Challenges Grant Program</b> <ul style="list-style-type: none"> <li>• The fund consists of:(1) money appropriated for the program or to the fund by the general assembly;(2) money received from state or federal grants or programs; and (3) gifts, money, and donations received from any other source, including transfers from other funds or accounts.</li> <li>• More than \$4 million has been awarded for community paramedicine.</li> </ul>                         |
| <b>Iowa</b>    | <a href="#">Iowa Code §422D.1</a><br>A county board of supervisors can adopt a resolution declaring emergency medical services to be an essential county service. The resolution declaring emergency medical services to be an essential service is considered and voted on for approval at two meetings of the board prior to the meeting at which the resolution is to be finally approved by a majority of the board.  | EMS is overseen by the Department of Health with the assistance of an EMS Advisory Council; emergency medical service districts coordinate with local emergency medical services agencies to provide EMS services; district advisory councils recommends a funding level for the EMS services.  | <a href="#">Iowa Code §357F.8</a> <ul style="list-style-type: none"> <li>• Allows Emergency Medical Services Districts to impose an additional annual property tax levy on residents if a majority of residents vote to approve one.</li> <li>• Allows counties that adopt a resolution by majority vote of the county board declaring EMS to be an essential county service the authority to have optional taxes, including local option income surcharges and ad valorem property taxes (must be voted in an election).</li> </ul> |

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| Louisiana | <p><a href="#">LA. Rev. Stat. 40:1139.1</a></p> <p>The legislature hereby finds and declares the following: (1) Emergency medical services constitute an invaluable part of the healthcare delivery system of Louisiana and are an essential element of Louisiana's emergency preparedness system. (2) Emergency medical services will be a key element in any healthcare reform initiative. (3) Emergency medical services are a key component of any economic development program as they are essential to recruiting and retaining industry. (4) The cost of funding the Medicaid program and healthcare for the poor and uninsured in the state must be carefully managed in a manner which recognizes the challenges associated with appropriate reimbursement for services under the program. (5) Emergency medical service providers want to assure that emergency medical services are available to all residents of Louisiana. (6) It is in the best interest of the state that there exist sufficient resources to assure the availability of emergency ambulance services to the citizens of Louisiana and the creation of a statewide ambulance service district will help to ensure this goal. (7) The Louisiana Ambulance Alliance and the Louisiana Department of Health are interested in exploring the use of local revenues to enhance the delivery of emergency ambulance services through the use of certified public expenditures, intergovernmental transfers or other financing mechanisms that are in accordance with the applicable state and federal regulations.</p> | <ul style="list-style-type: none"> <li>• The Department of Health is responsible for establishing and maintaining a program for the improvement and regulation of emergency medical services in the state.</li> <li>• The responsibility for implementation of the program is vested in the Bureau of Emergency Medical Services. The bureau is responsible for the development of a state plan for the prompt and efficient delivery of adequate emergency medical services to acutely sick and injured individuals, and serves as the primary agency for participation in any federal program involving emergency medical services and may receive and disburse available federal funds to implement any service program. The bureau sets minimum standards for course approval, instruction, and examination.</li> </ul> | <p><a href="#">LA. R.S. 46:2626</a></p> <p><b>Emergency Ground Ambulance Service Provider Trust Fund Account</b></p> <ul style="list-style-type: none"> <li>• The Department of Health assesses each emergency ground ambulance service provider a percentage fee not to exceed the percentage of net patient service revenues permitted by federal regulations.</li> <li>• Funds from the Trust Fund Account are used to achieve the maximum reimbursement under federal law and appropriated solely to fund the reimbursement enhancements in the most recent formula adopted by the legislature or the secretary and distributed exclusively among emergency ground ambulance service providers for emergency and nonemergency ambulance transportation services provided.</li> </ul> |
| Nebraska  | <p><a href="#">Neb. Rev. Stat. §38-1203</a></p> <p>The Legislature finds:</p> <p>(1) That emergency medical care is a primary and essential health care service and that the presence of an adequately</p>  | <p>Nebraska is divided into four separate EMS regions: Western, Central, Northeast and Southeast. A dedicated EMS Specialist supports each region. The EMS Specialists provide are</p>  | <p><a href="#">Neb. Rev. Stat. §71-51-103</a></p> <p><b>Nebraska Emergency Medical Systems Operation Fund</b></p> <p>The fund may receive gifts, bequests, grants,</p>   |

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|                      | <p>equipped ambulance and trained emergency care providers may be the difference between life and death or permanent disability to those persons in Nebraska making use of such services in an emergency;</p> <p>(2) That effective delivery of emergency medical care may be assisted by a program of training and licensure of emergency care providers and licensure of emergency medical services in accordance with rules and regulations adopted by the board;</p> <p>(3) That the Emergency Medical Services Practice Act is essential to aid in advancing the quality of care being provided by emergency care providers and by emergency medical services and the provision of effective, practical, and economical delivery of emergency medical care in the State of Nebraska;</p> <p>(4) That the services to be delivered by emergency care providers are complex and demanding and that training and other requirements appropriate for delivery of the services must be constantly reviewed and updated; and</p> <p>(5) That the enactment of a regulatory system that can respond to changing needs of patients and emergency care providers and emergency medical services is in the best interests of the residents of Nebraska.</p> | <p>resource for every EMS service, EMS provider and hospital for training and technical assistance including system development, rules and regulations, statutes, protocol and policy development, documentation, quality improvement, recruitment and retention, recognition, mandatory reporting regulations, education, significant exposure procedures and systems of care.</p> | <p>fees, or other contributions or donations from public or private entities.</p> <ul style="list-style-type: none"> <li>• The fund is used to carry out the purposes of the Statewide Trauma System Act and the Emergency Medical Services Practice Act, including activities related to the design, maintenance, or enhancement of the statewide trauma system, support of emergency medical services programs, and support for the emergency medical services programs for children.</li> <li>• Any money in the fund available for investment is invested by the state investment officer.</li> </ul> |
| <p><b>Nevada</b></p> | <p><a href="#"><u>NRS 450.B.015</u></a></p> <p>The Legislature hereby declares that prompt and efficient emergency medical care and transportation is necessary for the health and safety of the people of Nevada, and that minimum standards for such care and all persons providing it must be established.</p>  | <p>EMS is overseen by the State Board of Health and District Boards of Health with assistance from a Committee on Emergency Medical Services; the board adopts regulations establishing minimum standards for ambulance and EMS services; health authorities adopt regulations to establish certification and licensure of EMS personnel</p>  | <p><a href="#"><u>NRS 450B.1505</u></a></p> <ul style="list-style-type: none"> <li>• Any money the Division receives from a fee set by the State Board of Health for the issuance or renewal of a license; an administrative penalty imposed or an appropriation made by the Legislature for the purposes of training related to emergency medical services: <ul style="list-style-type: none"> <li>(a) Must be deposited in the State Treasury and accounted for separately in the State General Fund;</li> </ul> </li> </ul>  |

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|                              |  |   | <p>(b) May be used only to carry out a training program for emergency medical services personnel who work for a volunteer ambulance service or firefighting agency, including, without limitation, equipment for use in the training; and</p> <p>(c) Does not revert to the State General Fund at the end of any fiscal year.</p> <ul style="list-style-type: none"> <li>Any interest or income earned on the money in the account must be credited to the account. Any claims against the account must be paid in the manner that other claims against the State are paid.</li> </ul>   |
| <p><b>North Carolina</b></p> | <p><a href="#">10 NCAC 13P.0201</a>; <a href="#">N.C. Gen. Statutes §143-507 - §143-518</a></p> <p>County government shall ensure that EMS are provided to its citizens; minimum service area for an EMS System shall be one county; care must be offered to residents within a service area 24 hours a day, seven days a week; personnel credentialed to perform within the scope of practice for all EMS personnel functioning in the EMS System</p> | <ul style="list-style-type: none"> <li>Statewide EMS coordination is the responsibility of the Division of Public Health, Office of Preparedness and Response, Division of Emergency Management and the Division of Health Service Regulation, Office of Emergency Medical Services</li> <li>The Regional Advisory Committees (RACs) provide direction, guidance, and coordination for each region.</li> <li>There are 100 county EMS systems and one tribal EMS system consisting of multiple responders from rescue squads, critical care transport, and standard EMS providers. On the county level, planning efforts take place at the Local Emergency Planning Committee (LEPC). These LEPCs consist of stakeholders from law, fire, EMS, hospitals, Public Health, and private industry. LEPCs answer to the local Emergency Management.</li> </ul> | <p><a href="#">N.C. §58-87-5</a></p> <p><b>Volunteer Rescue/EMS Fund</b></p> <ul style="list-style-type: none"> <li>Created in the Department of Insurance to provide grants to volunteer rescue units, rescue/EMS units, EMS units that are volunteer fire departments that are a part of a county's EMS system plan, and EMS units providing rescue or rescue and emergency medical services to purchase equipment and make capital improvements.</li> <li>Department shall to the extent possible select applicants from all parts of the State based upon need.</li> <li>State Treasurer invests the Fund's assets according to law, and the earnings shall remain in the Fund.</li> </ul> |
| <p><b>Pennsylvania</b></p>   | <p><a href="#">35 Pa. C.S. §8102</a></p> <p>The General Assembly finds and declares as follows:</p> <ul style="list-style-type: none"> <li>Emergency medical services are an essential public service and frequently the health care safety net for many Commonwealth residents.</li> <li>Emergency medical services should be acknowledged, promoted and</li> </ul>   | <ul style="list-style-type: none"> <li>The Department of Health is responsible for planning, coordinating and guiding programs to promote effective and efficient operation of Statewide and regional EMS systems</li> <li>State EMS Advisory Board advises the Department of Health concerning manpower and training, communications, EMS agencies,</li> </ul>   | <p><a href="#">35 Pa. C.S. §8153</a></p> <p><b>Emergency Medical Services Operating Fund</b></p> <ul style="list-style-type: none"> <li>Sources of the fund are a \$20 surcharge on traffic violations; \$50 fee for a person to participate in the Accelerated Rehabilitative Disposition program; appropriations and contributions.</li> <li>75% of the fund is dispersed to EMS agencies for costs related to contracts and grants, 30% of the fund allocated to EMS</li> </ul>   |

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|           | <p>supported as an essential public service.</p> <ul style="list-style-type: none"> <li>The emergency medical services system should fully integrate with the overall health care system, and in particular with the public health system, to identify, modify and manage illness and injury and illness and injury risks.</li> </ul>   | <p>regulations, and standards and policies.</p> <ul style="list-style-type: none"> <li>Regional emergency medical services councils assist the Department of Health in carrying out the implementation of the EMS system.</li> </ul>   | <p>agencies to provide training to underserved rural area; at least 10% of the fund provided to Ems agencies to assist with medical equipment purchases for ambulances and to regional EMS councils for the development, maintenance and improvement of EMS systems and for training, education and licensure.</p>  |
| Tennessee | <p><a href="#">TN Code 7-61-102</a><br/>Ambulance service is hereby designated as an essential service in the state of Tennessee.</p>   | <ul style="list-style-type: none"> <li>Emergency Medical Services Board is empowered to approve schools and prescribe courses for EMS personnel, promulgate regulations governing licenses and permits, and establish standards for the activities and operation of emergency medical and ambulance services.</li> <li>All county governing bodies are authorized and directed to make provisions to ensure that at least one (1) licensed ambulance service is available within their county. This may be provided as a county service, but can also be accomplished through other means, including, but not limited to: providing a license or franchise to a private company; contracting with a public, private, or nonprofit entity for the service; entering into an interlocal agreement with one (1) or more local governments; or entering into an agreement with a hospital or other healthcare facility.</li> </ul> | <p><a href="#">Public Chapter 1052, 2022</a><br/><b>Ambulance Service Assessment Revenue Fund</b></p> <ul style="list-style-type: none"> <li>Sources of the fund are quarterly assessments on ground ambulance service providers; penalties for not paying the assessment; donations from private sources and investment earnings.</li> <li>Money in the fund may only be used to create directed payments for qualified ground ambulance services and to reimburse qualified Medicaid transports.</li> </ul> |
| Virginia  | <p><a href="#">Va. Code § 32.1-111.3</a><br/>The objectives of a statewide EMS Plan is:<br/>1. Establishing a comprehensive statewide emergency medical services system, incorporating facilities, transportation, manpower, communications, and other components as integral parts of a unified system that will serve to improve the delivery of emergency medical services and thereby</p> | <ul style="list-style-type: none"> <li>Office of Emergency Service is responsible for the development of a comprehensive, coordinated, statewide emergency medical services plan.</li> <li>The State Board of Health has designed 11 Regional EMS Councils to serve specific geographic areas of the Commonwealth. Each council is charged with the development and</li> </ul>   | <p><a href="#">Va. Code §46.2-694</a><br/><b>Four-for-Life Fund</b></p> <ul style="list-style-type: none"> <li>Source of the fund is a \$4 per year charge that is collected at the time of vehicle registration</li> <li>32% of the fund is distributed to the Rescue Squad Assistance Fund for training of EMS personnel and equipment purchases.</li> <li>30% is distributed through contracts and other procurements to support EMS</li> </ul>  |



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|       | <p>decrease morbidity, hospitalization, disability, and mortality;</p> <p>2. Reducing the time period between the identification of an acutely ill or injured patient and the definitive treatment;</p> <p>3. Increasing the accessibility of high quality emergency medical services to all citizens of Virginia;</p> <p>4. Promoting continuing improvement in system components including ground, water, and air transportation; communications; hospital emergency departments and other emergency medical care facilities; health care provider training and health care service delivery; and consumer health information and education;</p> <p>5. Ensuring performance improvement of the emergency medical services system and emergency medical services and care delivered on scene, in transit, in hospital emergency departments, and within the hospital environment;</p> <p>6. Working with professional medical organizations, hospitals, and other public and private agencies in developing approaches whereby the many persons who are presently using the existing emergency department for routine, nonurgent, primary medical care will be served more appropriately and economically;</p> <p>7. Conducting, promoting, and encouraging programs of education and training designed to upgrade the knowledge and skills of emergency medical services personnel, including expanding the availability of paramedic and advanced life support training throughout the Commonwealth with particular emphasis on regions underserved by emergency medical services personnel having such skills and training;</p> | <p>implementation of an efficient and effective regional emergency medical services delivery system.</p> <ul style="list-style-type: none"> <li>• Any county, city or town may provide EMS to its citizens by establishing an EMS agency.</li> </ul> | <p>training programs, recruitment and retention programs, EMS development, local, regional and statewide performance contracts for EMS, technology and radio communications enhancements.</p> <ul style="list-style-type: none"> <li>• 2% is distributed to the Virginia Association of Volunteer Rescue Squads to conduct volunteer recruitment, retention and training activities.</li> <li>• 26% is allocated to the “Return to Locality” fund to provide local funding for training of EMS personnel and the purchase of equipment and supplies for EMS and rescue services.</li> </ul> |

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|                      | 8. Consulting with and reviewing, with agencies and organizations, the development of applications to governmental or other sources for grants or other funding to support emergency medical services programs.  |   |   |
| <b>West Virginia</b> | <p><a href="#">W. Va. Code §16-4C-2</a></p> <p>The Legislature finds and declares: (1) That the safe and efficient operation of life-saving and life-preserving emergency medical service to meet the needs of citizens of this state is a matter of general public interest and concern; (2) to ensure the provision of adequate emergency medical services within this state for the protection of the public health, safety and welfare, it is imperative that minimum standards for emergency medical service personnel be established and enforced by the state; (3) that emergency medical service personnel should meet minimum training standards promulgated by the commissioner; (4) that it is the public policy of this state to enact legislation to carry out these purposes and comply with minimum standards for emergency medical service personnel as specified herein; (5) that any patient who receives emergency medical service and who is unable to consent thereto should be liable for the reasonable cost of such service; and (6) that it is the public policy of this state to encourage emergency medical service providers to do those things necessary to carry out the powers conferred in this article unless otherwise forbidden by law.</p> | <ul style="list-style-type: none"> <li>• Office of EMS is created in the Bureau of Public Health</li> <li>• Emergency Medical Services Advisory Council develops, with the commissioner, standards for emergency medical services personnel and for the purpose of providing advice to the Office of Emergency Medical Services and the commissioner with respect to reviewing and making recommendations for the establishment and maintenance of adequate emergency medical services for all portions of this state.</li> <li>• Each of the 55 counties provides some EMS services.</li> <li>• The state is divided into 10 EMS regions.</li> </ul> | <p><a href="#">W. Va. Code §16-4C-24</a></p> <p><b>Emergency Medical Services Equipment and Training Fund</b></p> <ul style="list-style-type: none"> <li>• The fund may only be used for the purpose of providing grants to equip emergency medical services providers and train emergency medical services personnel.</li> <li>• Commissioner of Bureau of Health establishes a grant program for equipment and training of EMS personnel and providers; priority given to rural and volunteer EMS providers.</li> <li>• Allocated \$10 million in federal coronavirus relief funding to “EMS WV: Answer the Call” program to fund strategic initiatives that will bolster the state’s EMS workforce and equip communities to better care for West Virginia citizens.</li> </ul> |