To: Highest Jurisdictional Authority and EMS Program Directors

From: Rae Oliveira
Director, Office of Licensure and Certification

Date: July 6, 2016

Subject: Maryland’s Move to the National Continued Competency Program for National Registry Certification Renewal

The National Registry of Emergency Medical Technicians (NREMT) has introduced the National Continued Competency Program (NCCP), a new recertification model that streamlines the process into three categories of continuing education: National, Local, and Individual. Benefits of the new model are reduced hours and an increase in the amount of distributive education that can be used towards recertification at the Paramedic level for National Registry certification renewal.

Maryland will move to the new NCCP process in July of 2016 for Paramedic level providers. Since the NREMT is in the process of phasing out the I-99 provider level and encourages the transition to Paramedic by the 2018-2019 recertification cycles, the NREMT will not switch over their current I-99 renewal to the NCCP model. Therefore, Maryland CRT/I-99 providers will have the choice of renewing through the NREMT at 72 hours, until the end their transition period; or renew as a Maryland CRT through a State process that will mirror the Paramedic NCCP requirements of 60 hours. Note: Maryland CRT’s that do not renew through the NREMT 72 hour process will be allowing their National Registry certification to lapse. CRT’s must maintain their Maryland license. If a Maryland CRT allows their State license to lapse, they will be required to reinstate their CRT license in order to function at the CRT level. The reinstatement process for Maryland CRT requires retesting the NREMT I-99 cognitive examination.

BLS providers (EMR and EMT) will continue to renew through the current Maryland renewal process. However, BLS providers who choose to obtain or maintain an NREMT certification will fall under the new NCCP model for National Registry, as well. The chart on the next page highlights the Maryland and National Registry requirements after the move to the NCCP model.

Once Maryland makes the switch to the NCCP model with the National Registry, the new hours requirements will be in effect. However, there will be a one-year grace period for EMS Education Programs to switch their ALS refresher programs over to the NCCP model. Therefore, any approved Maryland refresher courses taken by ALS providers during their current recertification cycle will count toward the new NCCP process and the reduced hours requirements.
For Maryland EMS Education Programs moving to the NCCP model for ALS refresher programs in Fall 2016, or sooner, the Maryland/Local education requirements are located at the end of this letter. The National education requirements can be found in the Paramedic Education Guidelines and is located on the NREMT website, along with other NCCP information at: https://www.nremt.org/nremt/EMTServices/nccp_info.asp. Note: All Maryland approved ALS EMS Education Programs MUST utilize the NCCP model education requirements for refresher courses beginning after July 1, 2017.

We ask jurisdictional authorities and programs directors to encourage ALS providers to visit the NREMT website for information on the switch to NCCP.

Please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 or 800-762-7157 for additional clarification.

<table>
<thead>
<tr>
<th>Provider Level</th>
<th>Maryland Requirements</th>
<th>NREMT Requirements</th>
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</table>
| Paramedic *    | **NREMT Required**    | 60 Hours in a 2 year cycle  
30 hours National (10 can be Distributive)  
15 hours Local/State (10 can be Distributive)  
15 hours Individual (15 can be Distributive)  
Skills Verification |
| CRT/I-99 **    | 60 Hours in a 2 year cycle  
30 hours National  
15 hours Local/State  
15 hours Individual  
Skills Verification |
| EMT ***        | 24 Hours in a 3 year cycle  
4 hours Medical  
4 hours Trauma  
4 hours Local  
12 hours Skills |
| EMR ***        | 12 Hours in a 3 year cycle  
2 hours Medical  
2 hours Trauma  
2 hours Local  
6 hours Skills |

* Maryland Paramedics are required to maintain NREMT certification  
** Maryland CRT’s have the option of renewal through either the Maryland or NREMT Process  
*** Maryland EMR and EMT providers are not required to maintain NREMT certification. However, those that do may use the NREMT process. Maryland EMR and EMT providers that do not choose the NREMT process must recertify through the Maryland process in order to maintain their Maryland certification.
<table>
<thead>
<tr>
<th>Topic/Objectives:</th>
<th>Hours</th>
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<tbody>
<tr>
<td>After successful completion of the below topics -</td>
<td></td>
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<tr>
<td><strong>2016 ALS Protocol Update</strong></td>
<td>3</td>
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<tr>
<td>The provider will successfully complete the 2016 ALS Protocol Update with a quiz score of 70% or greater.</td>
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<tr>
<td><strong>Documentation (Transition to eMeds Elite Platform/Update on new ePCR criteria) – or Local Option approved by MIEMSS</strong></td>
<td>2</td>
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<tr>
<td>The provider will recognize the significance of the move to the NEMSIS v3 data collection platform.</td>
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<tr>
<td>The provider will recall the items to be collected for ePCR submission involved in the move to NEMSIS v3.</td>
<td></td>
</tr>
<tr>
<td>The provider will interpret the mandatory data elements to be collected for ePCR submission involved in the move to NEMSIS v3.</td>
<td></td>
</tr>
<tr>
<td>The provider will interpret the mandatory data elements to be collected for ePCR submission that pertain to CARES.</td>
<td></td>
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<tr>
<td><strong>MOLST Form Review</strong></td>
<td>0.5</td>
</tr>
<tr>
<td>The provider will recall the information required for a valid MOLST form.</td>
<td></td>
</tr>
<tr>
<td>The provider will differentiate the levels of care and CPR instruction in section one (1) of the MOLST form.</td>
<td></td>
</tr>
<tr>
<td>The provider will interpret the care options defined in sections 2-9 of the MOLST form.</td>
<td></td>
</tr>
<tr>
<td><strong>Medication Review</strong></td>
<td>2</td>
</tr>
<tr>
<td>The provider will give example of indication, contraindications, and doses for adenosine.</td>
<td></td>
</tr>
<tr>
<td>The provider will give example of indication, contraindications, and doses for calcium chloride.</td>
<td></td>
</tr>
<tr>
<td>The provider will give example of indication, contraindications, and doses for haloperidol.</td>
<td></td>
</tr>
<tr>
<td>The provider will give example of indication, contraindications, and doses for magnesium sulfate.</td>
<td></td>
</tr>
</tbody>
</table>
The provider will give example of indication, contraindications, and doses for midazolam.

The provider will give example of indication, contraindications, and doses for morphine sulfate.

**Emerging Infectious Diseases**

| 2 |
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The provider will recall several emerging infectious diseases. |
The provider will identify infectious patients. |
The provider will differentiate various personal protection equipment based on the level of exposure and disease presented. |
The provider will describe the unique processes for patient transfer. |

**Potentially Volatile Environments with Life Sustaining Intervention**

| 0.5 |
---|---|
The provider will list examples of potentially volatile environments. |
The provider will explain the indications of a potentially volatile environment. |
The provider will define the level of care to be conducted in the hot zone of a potentially volatile environment. |
The provider will define the level of care to be conducted in the warm zone of a potentially volatile environment. |

**12-Lead Electrocardiogram**

| 3 |
---|---|
The provider will identify normal sinus rhythm and the associated cardiac conduction phases. |
The provider will identify classic and unusual STEMI presentations. |
The provider will identify false STEMI indicators. |
The provider will identify Left Bundle Branch Blocks (LBBB). |
The provider will identify rhythms and rhythm disturbances associated with drug interactions and electrolyte imbalances. |

**Life Span Development**

| 2 |
---|---|


The provider will identify age ranges, physiologic changes, physical characteristics, and psychosocial characteristics associated with the following:

- a. Newly Born
- b. Neonate
- c. Toddler
- d. Preschooler
- e. School-Age
- f. Adolescent
- g. Early Adulthood
- h. Middle Adulthood
- i. Late Adulthood/Geriatric

| Total Hours | 15 |