The National Association of EMS Educators (NAEMSE) supports the concept of graduate degrees resulting in an expanded scope of practice that includes prescriptive authority for EMS clinicians. We ask that NEMSAC continue to move it forward for the following reasons:

1. Industry research published by NAEMT (NAEMT, 2022), AAA (AAA, 2021), Fitch (Fitch, 2022), etc. makes it clear that Paramedic attrition is closely linked to lack of opportunity for upward mobility. EMS clinicians consistently rank “lack of opportunity” and desire to expand their practice abilities as leading reasons for leaving EMS. EMS needs a clinical career ladder.

2. Predominant funding and reimbursement models for EMS are insufficient, unsustainable, and do not reflect well on EMS being more than emergency response and patient transport. To bill for individual CPT codes, there must be some category of Paramedic that conforms to the federal government’s definition of “Practitioners”; the de facto requirement here is to possess a graduate degree.

3. This concept likely affords patients and the healthcare system alike an opportunity for less expensive and more efficient patient-centered care. Taking essentially every patient to the Emergency Department is costly, often ineffective and has resulted in a well-documented strain on EMS systems, healthcare systems and financial hardship for patients (NEMSAC, 2016).

4. A graduate level of education is necessary to achieve competency in the interdependent ideas of advanced clinical practice, healthcare system navigation, healthcare finance, population health, and specifically the interventions that are in the scope of practice of Practitioners (e.g. patient disposition/referral, prescribing, mid-level procedures, etc.).

As the nation’s EMS Education professional association, we encourage this advisory to be moved forward and would like to offer our assistance in the development of educational guidelines and standards for it.

Respectfully,
NAEMSE Board of Directors
References


