

ADMINISTRATIVE ORDER NO.: 2022-002**DATE: January 13, 2022****SUBJECT: PROVISIONAL CERTIFICATION FOR EMERGENCY MEDICAL SERVICE AGENCIES DURING THE DECLARED COVID-19 PUBLIC HEALTH EMERGENCY**

By virtue of the authority vested in me by the COVID-19 Response Emergency Amendment Act of 2020 (D.C. Act 23-247), effective March 17, 2020, and any subsequent COVID-19 legislation, and Mayor's Order 2022-008, issued January 11, 2022, it is hereby **ORDERED**:

I. PURPOSE

This Administrative Order sets forth requirements under which certification requirements for emergency medical services may be granted, on a temporary basis, to certain provider agencies that have been awarded a Certificate of Need (CON) or a CON exemption. Permits and fees shall be waived for healthcare practitioners appointed as temporary agents of the District of Columbia, in order to respond to the COVID-19 public health emergency.

II. FINDINGS AND ORDER

The Director of the Department of Health (Director), as the lead in the District's efforts in the containment and mitigation of COVID-19, has determined that it is in the best interest of the health, safety, and welfare of District residents to allow for additional emergency medical services (EMS) in the District. The additional emergency medical services are intended to support the response to COVID-19 and to provide for alternate means of providing healthcare services to District residents in order to limit unnecessary exposures to the virus.

The Director makes the following findings:

- A. District of Columbia licensed, registered, and certified healthcare providers have been on the front lines of identifying, testing, and treating patients with COVID-19.
- B. As the number of COVID-19 infections rise, a growing number of licensed, registered, and certified healthcare providers in the District of Columbia have either been exposed or infected with COVID-19, requiring self-quarantine.
- C. The spread of COVID-19 among licensed, registered, and certified healthcare providers in the District of Columbia is impacting the ability of healthcare providers and healthcare facilities to provide safe and appropriate care to District residents.
- D. There are additional healthcare providers, who are properly licensed, registered, or certified and in good standing in their home jurisdictions, who can provide safe and appropriate care to District residents and are willing to relocate to the District to do so.

- E. Current telehealth technologies allow for the safe treatment and care for patients, in accordance with the Guidance for Use of Telehealth in the District of Columbia, published March 12, 2020, and accessible at <https://coronavirus.dc.gov>, as well as any applicable laws and regulations.
- F. The District of Columbia is in immediate need of certain healthcare providers to address the above concerns. However, the regular timelines for the certification and credentialing of EMS agencies and their personnel will significantly impede the ability of additional healthcare services to District of Columbia residents in a timely manner.
- G. It is in the best interests of District of Columbia residents that certification requirements be minimized during the period of this public health emergency to allow certain EMS agencies that have met CON requirements to provide care to District of Columbia residents.

Based on the above findings, the Director makes the following Order:

- A. An EMS agency that has been awarded a CON or CON exemption, either permanent or temporary, by the District of Columbia State Health Planning and Development Agency shall be offered a streamlined process for a provisional DC EMS Agency certification for the duration of the declared public health emergency plus thirty (30) days thereafter. The proposed EMS agency shall complete a streamlined application with the Health Emergency Preparedness and Response Administration, EMS Program. The application shall include:
 - 1. Verification that the Medical Director is licensed and in good standing;
 - 2. Verification of insurance coverage as required in 29 DCMR §§ 500 *et seq.*;
 - 3. Verification of certification in good standing and full COVID-19 vaccination of any provider who will provide EMS services under the license of the Medical Director; and
 - 4. Inspection of any ambulance or transport vehicle intended to be used by the EMS agency.
- B. An EMS agency that has been awarded a CON or a CON exemption, either permanent or temporary, by the District of Columbia State Health Planning and Development Agency shall be offered a streamlined process for a provisional DC EMS Agency certification for the duration of the declared public health emergency plus thirty (30) days thereafter. The proposed EMS agency shall complete a streamlined application with the Health Emergency Preparedness and Response Administration, EMS Program. The application shall include:
 - 1. Verification that the Medical Director licensed and in good standing;
 - 2. Verification of insurance coverage as required in 29 DCMR 500 *et seq.*; and,

3. Verification of certification in good standing and full COVID-19 vaccination of any provider who will provide EMS services under the license of the Medical Director.
- C. Pursuant to 29 DCMR § 562, the Director may authorize Community Paramedicine as new or continuing pilot projects in the interest of improving patient care services. Authorized Community Paramedicine EMS agencies:
1. May provide in-home and community based primary healthcare with emergency medical services providers under the supervision of a District licensed physician;
 2. Shall provide a copy of a written agreement with a Medical Director who is a District-licensed physician;
 3. Shall provide recommendations for staffing levels, protocols, scope of practice, and equipment standards to DC Health for review and approval;
 4. Shall, in the absence of specific regulations, follow the guidance of DC Health;
 5. Shall provide a detailed quality assurance program to DC Health for review and approval;
 6. Shall apply for certification for all EMS providers operating for the agency; and
 7. Shall cease operations in the District of Columbia no more than thirty (30) days after the expiration of the declared public health emergency, or at the direction of DC Health, whichever occurs first.
- D. All other EMS certification requirements and fees shall be waived for healthcare practitioners for the duration of the declared public health emergency.
- E. Among the services authorized pursuant to this order are:
1. In-home healthcare services via mobile physician service or telemedicine. Telehealth services shall be in accordance with the Guidance for Use of Telehealth in the District of Columbia, published March 12, 2020, and accessible at <https://coronavirus-dc.gov>, as well as any applicable District laws and regulations;
 2. Services shall be available to every patient, in every ward of the District, irrespective of the patient's insurance status or ability to pay; and
 3. Services shall be available to support the District's non-emergency COVID-19 calls if required by the District's 911 system.

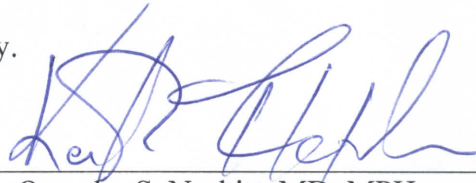
- F. Upon expiration of this Order, any provisional certification or pilot project status issued to an EMS agency, vehicle, or personnel pursuant to this Order shall terminate thirty (30) days following the expiration of this Order. Any such agency may apply for certification through the normal processes, including the payment of fees.

III. DURATION OF ORDER

This Order shall remain in effect during the period of Public Health Emergency as declared by the Mayor in Mayor's Order 2022-008 as may be extended, unless earlier rescinded or superseded.

IV. EFFECTIVE DATE

This Order shall become effective immediately.



LaQuandra S. Nesbitt, MD, MPH
Director
District of Columbia Department of Health