



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

HB4477

Introduced 1/20/2026, by Rep. Michael J. Kelly

SYNOPSIS AS INTRODUCED:

210 ILCS 50/3.5
210 ILCS 50/3.35
210 ILCS 50/3.40
210 ILCS 50/3.45
210 ILCS 50/3.50

Amends the Emergency Medical Services (EMS) Systems Act. Defines "digital license", "Just Culture Matrix", and "physical license". Provides that the Department of Public Health, by rule, shall publish a Just Culture Matrix, and it shall recommend that each EMS System include the Just Culture Matrix in its Program Plan for evaluating and responding to errors or failures to perform emergency and nonemergency medical services in accordance with the defined scope of practice of the EMS personnel. Provides that the Just Culture Matrix shall be a framework for fairly and consistently applying EMS System participation suspensions. Sets forth provisions concerning membership of the local System review board. Provides that the local System review board shall only have the authority to affirm, reduce, or rescind the EMS Medical Director's suspension order. Provides that the function of the State Emergency Medical Services Disciplinary Review Board is to review and affirm, reduce, or rescind disciplinary orders (instead of review and affirm, reverse, or modify). Makes conforming changes. Provides that the Department shall issue to EMS personnel a physical license, and all EMS personnel shall have access to a digital license. Requires a licensee to possess a copy of a physical license or a digital license.

LRB104 17768 BAB 31200 b

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Emergency Medical Services (EMS) Systems
5 Act is amended by changing Sections 3.5, 3.35, 3.40, 3.45, and
6 3.50 as follows:

7 (210 ILCS 50/3.5)

8 Sec. 3.5. Definitions. As used in this Act:

9 "Clinical observation" means the ongoing observation of a
10 patient's medical or mental health condition by a licensed
11 health care professional utilizing a medical skill set while
12 continuing assessment and care.

13 "Department" means the Illinois Department of Public
14 Health.

15 "Digital license" means a secure electronic record of a
16 license issued by the Department to EMS personnel that is
17 accessible to EMS personnel through a Department-maintained or
18 Department-approved electronic platform, website, or
19 electronic application and is readily verifiable by Resource
20 Hospitals and vehicle service providers.

21 "Director" means the Director of the Illinois Department
22 of Public Health.

23 "Emergency" means a medical condition of recent onset and

1 severity that would lead a prudent layperson, possessing an
2 average knowledge of medicine and health, to believe that
3 urgent or unscheduled medical care is required.

4 "Emergency Medical Services personnel" or "EMS personnel"
5 means persons licensed as an Emergency Medical Responder (EMR)
6 (First Responder), Emergency Medical Dispatcher (EMD),
7 Emergency Medical Technician (EMT), Emergency Medical
8 Technician-Intermediate (EMT-I), Advanced Emergency Medical
9 Technician (A-EMT), Paramedic (EMT-P), Emergency
10 Communications Registered Nurse (ECRN), Pre-Hospital
11 Registered Nurse (PHRN), Pre-Hospital Advanced Practice
12 Registered Nurse (PHAPRN), or Pre-Hospital Physician Assistant
13 (PHPA).

14 "Exclusive representative" has the same meaning as defined
15 in Section 3 of the Illinois Public Labor Relations Act.

16 "Health care facility" means a hospital, nursing home,
17 physician's office or other fixed location at which medical
18 and health care services are performed. It does not include
19 "pre-hospital emergency care settings" which utilize EMS
20 personnel to render pre-hospital emergency care prior to the
21 arrival of a transport vehicle, as defined in this Act.

22 "Hospital" has the meaning ascribed to that term in the
23 Hospital Licensing Act.

24 "Just Culture Matrix" means a decision-making tool
25 published by the Department for evaluating EMS personnel
26 performance in an EMS System.

1 "Labor organization" has the same meaning as defined in
2 Section 3 of the Illinois Public Labor Relations Act.

3 "Medical monitoring" means the performance of medical
4 tests and physical exams to evaluate an individual's ongoing
5 exposure to a factor that could negatively impact that
6 person's health. "Medical monitoring" includes close
7 surveillance or supervision of patients liable to suffer
8 deterioration in physical or mental health and checks of
9 various parameters such as pulse rate, temperature,
10 respiration rate, the condition of the pupils, the level of
11 consciousness and awareness, the degree of appreciation of
12 pain, and blood gas concentrations such as oxygen and carbon
13 dioxide.

14 "NREMT" means the National Registry of Emergency Medical
15 Technicians.

16 "Physical license" means the paper copy of the license
17 issued by the Department to EMS personnel who have met the
18 Department's education, training, and examination
19 requirements.

20 "Silver spanner program" means a program in which a member
21 under a fire department's or fire protection district's
22 collective bargaining agreement works on or at the EMS System
23 under another fire department's or fire protection district's
24 collective bargaining agreement and (i) the other fire
25 department or fire protection district is not the member's
26 full-time employer and (ii) any EMS services not included

1 under the original fire department's or fire protection
2 district's collective bargaining agreement are included in the
3 other fire department's or fire protection district's
4 collective bargaining agreement.

5 "Trauma" means any significant injury which involves
6 single or multiple organ systems.

7 (Source: P.A. 103-521, eff. 1-1-24; 103-689, eff. 1-1-25;
8 104-362, eff. 8-15-25.)

9 (210 ILCS 50/3.35)

10 Sec. 3.35. Emergency Medical Services (EMS) Resource
11 Hospital; Functions. The Resource Hospital of an EMS System
12 shall:

13 (a) Prepare a Program Plan in accordance with the
14 provisions of this Act and minimum standards and criteria
15 established in rules adopted by the Department pursuant to
16 this Act, and submit such Program Plan to the Department
17 for approval. The Department, by rule, shall publish a
18 Just Culture Matrix, and it shall recommend that each EMS
19 System include the Just Culture Matrix in its Program Plan
20 for evaluating and responding to errors or failures to
21 perform emergency and nonemergency medical services in
22 accordance with the defined scope of practice of the EMS
23 personnel. The Just Culture Matrix shall be a framework
24 for fairly and consistently applying EMS System
25 participation suspensions. This framework shall be

1 utilized by the EMS Medical Director prior to suspending
2 EMS personnel.

3 (b) Appoint an EMS Medical Director, who will
4 continually monitor and supervise the System and who will
5 have the responsibility and authority for total management
6 of the System as delegated by the EMS Resource Hospital.

7 The Program Plan shall require the EMS Medical
8 Director to appoint an alternate EMS Medical Director and
9 establish a written protocol addressing the functions to
10 be carried out in his or her absence.

11 (c) Appoint an EMS System Coordinator and EMS
12 Administrative Director in consultation with the EMS
13 Medical Director and in accordance with rules adopted by
14 the Department pursuant to this Act.

15 (d) Identify potential EMS System participants and
16 obtain commitments from them for the provision of
17 services.

18 (e) Educate or coordinate the education of EMS
19 personnel and all other license holders in accordance with
20 the requirements of this Act, rules adopted by the
21 Department pursuant to this Act, and the EMS System
22 Program Plan. An EMS System may coordinate education
23 outside of the region of which it is located with valid
24 justification and Department approval. The didactic
25 portion of education may be conducted through an online
26 platform with EMS System and Department approval. An

1 education plan within a Resource Hospital may include
2 classes performed outside of the region in which the
3 Resource Hospital is located. When considering whether to
4 approve or deny an education plan for classes performed
5 outside of the region in which a Resource Hospital is
6 located, the Department shall give deference to the EMS
7 Medical Director's education plan request and shall not
8 unreasonably withhold approval.

9 (f) Notify the Department of EMS personnel who have
10 successfully completed the requirements as provided by law
11 for initial licensure, license renewal, and license
12 reinstatement by the Department.

13 (g) Educate or coordinate the education of Emergency
14 Medical Dispatcher candidates, in accordance with the
15 requirements of this Act, rules adopted by the Department
16 pursuant to this Act, and the EMS System Program Plan.

17 (h) Establish or approve protocols for prearrival
18 medical instructions to callers by System Emergency
19 Medical Dispatchers who provide such instructions.

20 (i) Educate or coordinate the education of
21 Pre-Hospital Registered Nurse, Pre-Hospital Advanced
22 Practice Registered Nurse, Pre-Hospital Physician
23 Assistant, and ECRN candidates, in accordance with the
24 requirements of this Act, rules adopted by the Department
25 pursuant to this Act, and the EMS System Program Plan.

26 (j) Approve Pre-Hospital Registered Nurse,

1 Pre-Hospital Advanced Practice Registered Nurse,
2 Pre-Hospital Physician Assistant, and ECRN candidates to
3 practice within the System, and reapprove Pre-Hospital
4 Registered Nurses, Pre-Hospital Advanced Practice
5 Registered Nurses, Pre-Hospital Physician Assistants, and
6 ECRNs every 4 years in accordance with the requirements of
7 the Department and the System Program Plan.

8 (k) Establish protocols for the use of Pre-Hospital
9 Registered Nurses, Pre-Hospital Advanced Practice
10 Registered Nurses, and Pre-Hospital Physician Assistants
11 within the System.

12 (l) Establish protocols for utilizing ECRNs and
13 physicians licensed to practice medicine in all of its
14 branches to monitor telecommunications from, and give
15 voice orders to, EMS personnel, under the authority of the
16 EMS Medical Director.

17 (m) Monitor emergency and non-emergency medical
18 transports within the System, in accordance with rules
19 adopted by the Department pursuant to this Act.

20 (n) Utilize levels of personnel required by the
21 Department to provide emergency care to the sick and
22 injured at the scene of an emergency, during transport to
23 a hospital or during inter-hospital transport and within
24 the hospital emergency department until the responsibility
25 for the care of the patient is assumed by the medical
26 personnel of a hospital emergency department or other

1 facility within the hospital to which the patient is first
2 delivered by System personnel.

3 (o) Utilize levels of personnel required by the
4 Department to provide non-emergency medical services
5 during transport to a health care facility and within the
6 health care facility until the responsibility for the care
7 of the patient is assumed by the medical personnel of the
8 health care facility to which the patient is delivered by
9 System personnel.

10 (p) Establish and implement a program for System
11 participant information and education, in accordance with
12 rules adopted by the Department pursuant to this Act.

13 (q) Establish and implement a program for public
14 information and education, in accordance with rules
15 adopted by the Department pursuant to this Act.

16 (r) Operate in compliance with the EMS Region Plan.

17 (Source: P.A. 103-689, eff. 1-1-25.)

18 (210 ILCS 50/3.40)

19 Sec. 3.40. EMS System Participation Suspensions and Due
20 Process.

21 (a) An EMS Medical Director may suspend from participation
22 within the System any EMS personnel, EMS Lead Instructor (LI),
23 individual, individual provider, or other participant
24 considered not to be meeting the requirements of the Program
25 Plan of that approved EMS System. An EMS Medical Director must

1 submit a suspension order to the Department describing which
2 requirements of the Program Plan were not met and the
3 suspension's duration. The Department shall review and confirm
4 receipt of the suspension order, request additional
5 information, or initiate an investigation. The Department
6 shall incorporate the duration of that suspension into any
7 further action taken by the Department to suspend, revoke, or
8 refuse to issue or renew the license of the individual or
9 entity for any violation of this Act or the Program Plan
10 arising from the same conduct for which the suspension order
11 was issued if the suspended party has neither requested a
12 Department hearing on the suspension nor worked as a provider
13 in any other System during the term of the suspension.

14 (b) Prior to suspending any individual or entity, an EMS
15 Medical Director shall provide an opportunity for a hearing
16 before the local System review board in accordance with
17 subsection (f) and the rules promulgated by the Department.
18 The local System review board shall only have the authority to
19 affirm, reduce, or rescind the EMS Medical Director's
20 suspension order. The local System review board shall consist
21 of 3 members and 2 alternates. All 5 members shall be
22 individuals who are of the same professional category as the
23 individual, individual provider, or other participant
24 requesting the hearing. The 5 members shall be randomly
25 selected by the Department from a computer program maintained
26 by the Department for that purpose, which shall include all

1 individuals who are of the same professional category and who
2 participate in the same EMS Region as the individual,
3 individual provider, or other participant requesting the
4 hearing. The individual, individual provider, or other
5 participant requesting the hearing and the EMS Medical
6 Director or the EMS Medical Director's designee may witness
7 the random selection of members to the local System review
8 board.

9 (1) If the local System review board affirms or
10 reduces ~~modifies~~ the EMS Medical Director's suspension
11 order, the individual or entity shall have the opportunity
12 for a review of the local board's decision by the State EMS
13 Disciplinary Review Board, pursuant to Section 3.45 of
14 this Act.

15 (2) If the local System review board rescinds ~~reverses~~
16 or reduces ~~modifies~~ the EMS Medical Director's suspension
17 order, the EMS Medical Director shall have the opportunity
18 for a review of the local board's decision by the State EMS
19 Disciplinary Review Board, pursuant to Section 3.45 of
20 this Act.

21 (3) The suspension shall commence only upon the
22 occurrence of one of the following:

23 (A) the individual or entity has waived the
24 opportunity for a hearing before the local System
25 review board;

26 (B) the order has been affirmed or reduced

1 ~~modified~~ by the local system review board and the
2 individual or entity has waived the opportunity for
3 review by the State Board; or

4 (C) the order has been affirmed or reduced
5 ~~modified~~ by the local system review board, and the
6 local board's decision has been affirmed or reduced
7 ~~modified~~ by the State Board.

8 (c) An individual interviewed or investigated by the local
9 system review board or the Department shall have the right to a
10 union representative and legal counsel of the individual's
11 choosing present at any interview. The union representative
12 must comply with any confidentiality requirements and
13 requirements for the protection of any patient information
14 presented during the proceeding.

15 (d) An EMS Medical Director may immediately suspend an
16 EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHRN, LI, PHPA,
17 PHAPRN, or other individual or entity if he or she finds that
18 the continuation in practice by the individual or entity would
19 constitute an imminent danger to the public. The suspended
20 individual or entity shall be issued an immediate verbal
21 notification followed by a written suspension order by the EMS
22 Medical Director which states the length, terms, and basis for
23 the suspension.

24 (1) Within 24 hours following the commencement of the
25 suspension, the EMS Medical Director shall deliver to the
26 Department, by messenger, telefax, or other

1 Department-approved electronic communication, a copy of
2 the suspension order and copies of any written materials
3 which relate to the EMS Medical Director's decision to
4 suspend the individual or entity. All medical and
5 patient-specific information, including Department
6 findings with respect to the quality of care rendered,
7 shall be strictly confidential pursuant to the Medical
8 Studies Act (Part 21 of Article VIII of the Code of Civil
9 Procedure).

10 (2) Within 24 hours following the commencement of the
11 suspension, the suspended individual or entity may deliver
12 to the Department, by messenger, telefax, or other
13 Department-approved electronic communication, a written
14 response to the suspension order and copies of any written
15 materials which the individual or entity feels are
16 appropriate. All medical and patient-specific information,
17 including Department findings with respect to the quality
18 of care rendered, shall be strictly confidential pursuant
19 to the Medical Studies Act.

20 (3) Within 24 hours following receipt of the EMS
21 Medical Director's suspension order or the individual or
22 entity's written response, whichever is later, the
23 Director or the Director's designee shall determine
24 whether the suspension should be stayed pending an
25 opportunity for a hearing or review in accordance with
26 this Act, or whether the suspension should continue during

1 the course of that hearing or review. When an immediate
2 suspension order is not stayed, the Director or the
3 Director's designee within the Department shall identify
4 if that suspension shall immediately apply to statewide
5 participation only in situations when a licensee has been
6 charged with a crime while performing the licensee's
7 official duties as an EMR, EMD, EMT, EMT-I, A-EMT,
8 Paramedic, ECRN, TNS, PHRN, LI, PHPA, or PHAPRN and the
9 licensee's continuation to practice poses the possibility
10 of imminent harm to the public based upon factual evidence
11 provided to the Department. The determination to issue an
12 immediate statewide suspension shall not deny the right to
13 due process to a licensee. The Director or the Director's
14 designee shall issue this determination to the EMS Medical
15 Director, who shall immediately notify the suspended
16 individual or entity. The suspension shall remain in
17 effect during this period of review by the Director or the
18 Director's designee.

19 (e) Upon issuance of a suspension order for reasons
20 directly related to medical care, the EMS Medical Director
21 shall also provide the individual or entity with the
22 opportunity for a hearing before the local System review
23 board, in accordance with subsection (f) and the rules
24 promulgated by the Department. The local System review board
25 shall only have the authority to affirm, reduce, or rescind
26 the EMS Medical Director's suspension order.

1 (1) If the local System review board affirms or
2 reduces ~~modifies~~ the EMS Medical Director's suspension
3 order, the individual or entity shall have the opportunity
4 for a review of the local board's decision by the State EMS
5 Disciplinary Review Board, pursuant to Section 3.45 of
6 this Act.

7 (2) If the local System review board rescinds ~~reverses~~
8 or reduces ~~modifies~~ the EMS Medical Director's suspension
9 order, the EMS Medical Director shall have the opportunity
10 for a review of the local board's decision by the State EMS
11 Disciplinary Review Board, pursuant to Section 3.45 of
12 this Act.

13 (3) The suspended individual or entity may elect to
14 bypass the local System review board and seek direct
15 review of the EMS Medical Director's suspension order by
16 the State EMS Disciplinary Review Board.

17 (f) The Resource Hospital shall designate a local System
18 review board in accordance with the rules of the Department,
19 for the purpose of providing a hearing to any individual or
20 entity participating within the System who is suspended from
21 participation by the EMS Medical Director. The EMS Medical
22 Director shall arrange for a certified shorthand reporter to
23 make a stenographic record of that hearing and thereafter
24 prepare a transcript of the proceedings. The EMS Medical
25 Director shall inform the individual of the individual's right
26 to have a union representative and legal counsel of the

1 individual's choosing present at any interview. The union
2 representative must comply with any confidentiality
3 requirements and requirements for the protection of any
4 patient information presented during the proceeding. The
5 transcript, all documents or materials received as evidence
6 during the hearing and the local System review board's written
7 decision shall be retained in the custody of the EMS system.
8 The System shall implement a decision of the local System
9 review board unless that decision has been appealed to the
10 State Emergency Medical Services Disciplinary Review Board in
11 accordance with this Act and the rules of the Department.

12 (g) The Resource Hospital shall implement a decision of
13 the State Emergency Medical Services Disciplinary Review Board
14 which has been rendered in accordance with this Act and the
15 rules of the Department.

16 (Source: P.A. 103-521, eff. 1-1-24; 103-779, eff. 8-2-24;
17 104-417, eff. 8-15-25.)

18 (210 ILCS 50/3.45)

19 Sec. 3.45. State Emergency Medical Services Disciplinary
20 Review Board.

21 (a) The Governor shall appoint a State Emergency Medical
22 Services Disciplinary Review Board, composed of an EMS Medical
23 Director, an EMS System Coordinator, a Paramedic, an Emergency
24 Medical Technician (EMT), and the following members, who shall
25 only review cases in which a party is from the same

1 professional category: a Pre-Hospital Registered Nurse, a
2 Pre-Hospital Advanced Practice Registered Nurse, a
3 Pre-Hospital Physician Assistant, an ECRN, a Trauma Nurse
4 Specialist, an Emergency Medical Technician-Intermediate
5 (EMT-I), an Advanced Emergency Medical Technician (A-EMT), a
6 representative from a private vehicle service provider, a
7 representative from a public vehicle service provider, and an
8 emergency physician who monitors telecommunications from and
9 gives voice orders to EMS personnel. The Governor shall also
10 appoint one alternate for each member of the Board, from the
11 same professional category as the member of the Board.

12 (b) The members shall be appointed for a term of 3 years.
13 All appointees shall serve until their successors are
14 appointed. The alternate members shall be appointed and serve
15 in the same fashion as the members of the Board. If a member
16 resigns his or her appointment, the corresponding alternate
17 shall serve the remainder of that member's term until a
18 subsequent member is appointed by the Governor.

19 (c) The function of the Board is to review and affirm,
20 reduce, ~~reverse~~ or rescind ~~modify~~ disciplinary orders.

21 (d) Any individual or entity, who received an immediate
22 suspension from an EMS Medical Director may request the Board
23 to reduce ~~reverse~~ or rescind ~~modify~~ the suspension order. If
24 the suspension had been affirmed or reduced ~~modified~~ by a
25 local System review board, the suspended individual or entity
26 may request the Board to reduce ~~reverse~~ or rescind ~~modify~~ the

1 ~~suspension local board's decision.~~

2 (e) Any individual or entity who received a non-immediate
3 suspension order from an EMS Medical Director which was
4 affirmed or reduced ~~modified~~ by a local System review board
5 may request the Board to reduce ~~reverse~~ or rescind ~~modify~~ the
6 suspension order ~~local board's decision~~. The individual shall
7 be informed of the individual's right to have one
8 representative from the labor organization recognized as the
9 exclusive representative of that individual's bargaining unit
10 present and a legal representative present during the State
11 Emergency Medical Services Disciplinary Review Board
12 proceedings during open session. The labor organization's
13 representative must also comply with all confidentiality
14 requirements and requirements for the protection of any
15 patient information presented during the proceeding.

16 (f) An EMS Medical Director whose suspension order was
17 reduced ~~reversed~~ or rescinded ~~modified~~ by a local System
18 review board may request the Board to affirm ~~reverse~~ or ~~modify~~
19 the suspension order ~~local board's decision~~.

20 (g) The Board shall meet on the first Tuesday of every
21 month, unless no requests for review have been submitted.
22 Additional meetings of the Board shall be scheduled to ensure
23 that a request for direct review of an immediate suspension
24 order is scheduled within 14 days after the Department
25 receives the request for review or as soon thereafter as a
26 quorum is available. The Board shall meet in Springfield or

1 Chicago, whichever location is closer to the majority of the
2 members or alternates attending the meeting. The Department
3 shall reimburse the members and alternates of the Board for
4 reasonable travel expenses incurred in attending meetings of
5 the Board.

6 (h) A request for review shall be submitted in writing to
7 the Chief of the Department's Division of Emergency Medical
8 Services and Highway Safety, within 10 days after receiving
9 the local board's decision or the EMS Medical Director's
10 suspension order, whichever is applicable, a copy of which
11 shall be enclosed.

12 (i) At its regularly scheduled meetings, the Board shall
13 review requests which have been received by the Department at
14 least 10 working days prior to the Board's meeting date.
15 Requests for review which are received less than 10 working
16 days prior to a scheduled meeting shall be considered at the
17 Board's next scheduled meeting, except that requests for
18 direct review of an immediate suspension order may be
19 scheduled up to 3 working days prior to the Board's meeting
20 date.

21 (j) A quorum shall be required for the Board to meet, which
22 shall consist of 3 members or alternates, including the EMS
23 Medical Director or alternate and the member or alternate from
24 the same professional category as the subject of the
25 suspension order. At each meeting of the Board, the members or
26 alternates present shall select a Chairperson to conduct the

1 meeting.

2 (k) Deliberations for decisions of the State EMS
3 Disciplinary Review Board shall be conducted in closed
4 session. Department staff may attend for the purpose of
5 providing clerical assistance, but no other persons may be in
6 attendance except for the parties to the dispute being
7 reviewed by the Board and their attorneys, unless by request
8 of the Board.

9 (l) The Board shall review the transcript, evidence, and
10 written decision of the local review board, or the written
11 decision and supporting documentation of the EMS Medical
12 Director, whichever is applicable, along with any additional
13 written or verbal testimony or argument offered by the parties
14 to the dispute.

15 (m) At the conclusion of its review, the Board shall issue
16 its decision and the basis for its decision on a form provided
17 by the Department, and shall submit to the Department its
18 written decision together with the record of the local System
19 review board. The Department shall promptly issue a copy of
20 the Board's decision to all affected parties. The Board's
21 decision shall be binding on all parties.

22 (Source: P.A. 103-521, eff. 1-1-24.)

23 (210 ILCS 50/3.50)

24 Sec. 3.50. Emergency Medical Services personnel licensure
25 levels.

1 (a) "Emergency Medical Technician" or "EMT" means a person
2 who has successfully completed a course in basic life support
3 as approved by the Department, is currently licensed by the
4 Department in accordance with standards prescribed by this Act
5 and rules adopted by the Department pursuant to this Act, and
6 practices within an EMS System. A valid Emergency Medical
7 Technician-Basic (EMT-B) license issued under this Act shall
8 continue to be valid and shall be recognized as an Emergency
9 Medical Technician (EMT) license until the Emergency Medical
10 Technician-Basic (EMT-B) license expires.

11 (b) "Emergency Medical Technician-Intermediate" or "EMT-I"
12 means a person who has successfully completed a course in
13 intermediate life support as approved by the Department, is
14 currently licensed by the Department in accordance with
15 standards prescribed by this Act and rules adopted by the
16 Department pursuant to this Act, and practices within an
17 Intermediate or Advanced Life Support EMS System.

18 (b-5) "Advanced Emergency Medical Technician" or "A-EMT"
19 means a person who has successfully completed a course in
20 basic and limited advanced emergency medical care as approved
21 by the Department, is currently licensed by the Department in
22 accordance with standards prescribed by this Act and rules
23 adopted by the Department pursuant to this Act, and practices
24 within an Intermediate or Advanced Life Support EMS System.

25 (c) "Paramedic (EMT-P)" means a person who has
26 successfully completed a course in advanced life support care

1 as approved by the Department, is licensed by the Department
2 in accordance with standards prescribed by this Act and rules
3 adopted by the Department pursuant to this Act, and practices
4 within an Advanced Life Support EMS System. A valid Emergency
5 Medical Technician-Paramedic (EMT-P) license issued under this
6 Act shall continue to be valid and shall be recognized as a
7 Paramedic license until the Emergency Medical
8 Technician-Paramedic (EMT-P) license expires.

9 (c-5) "Emergency Medical Responder" or "EMR (First
10 Responder)" means a person who has successfully completed a
11 course in emergency medical response as approved by the
12 Department and provides emergency medical response services in
13 accordance with the level of care established by the National
14 EMS Educational Standards Emergency Medical Responder course
15 as modified by the Department, or who provides services as
16 part of an EMS System response plan, as approved by the
17 Department, of that EMS System. The Department shall have the
18 authority to adopt rules governing the curriculum, practice,
19 and necessary equipment applicable to Emergency Medical
20 Responders.

21 On August 15, 2014 (the effective date of Public Act
22 98-973), a person who is licensed by the Department as a First
23 Responder and has completed a Department-approved course in
24 first responder defibrillator training based on, or equivalent
25 to, the National EMS Educational Standards or other standards
26 previously recognized by the Department shall be eligible for

1 licensure as an Emergency Medical Responder upon meeting the
2 licensure requirements and submitting an application to the
3 Department. A valid First Responder license issued under this
4 Act shall continue to be valid and shall be recognized as an
5 Emergency Medical Responder license until the First Responder
6 license expires.

7 (c-10) All EMS Systems and licensees shall be fully
8 compliant with the National EMS Education Standards, as
9 modified by the Department in administrative rules, within 24
10 months after the adoption of the administrative rules.

11 (d) The Department shall have the authority and
12 responsibility to:

13 (1) Prescribe education and training requirements,
14 which includes training in the use of epinephrine, for all
15 levels of EMS personnel except for EMRs, based on the
16 National EMS Educational Standards and any modifications
17 to those curricula specified by the Department through
18 rules adopted pursuant to this Act.

19 (A) A failure rate per course of 30% or greater at
20 the first attempt on the licensure examination shall
21 require the EMS System to submit a quality improvement
22 plan to the Department. The EMS System shall share
23 failure rates with the EMS Lead Instructor quarterly.
24 Neither the EMS System nor the Department may take
25 licensure action against an EMS Lead Instructor based
26 solely on first-attempt pass rates.

1 (B) Candidates shall complete the licensure
2 examination within the timeline required by the NREMT.

3 (C) An accredited Paramedic program shall be
4 conducted only by an EMS System or an academic
5 institution whose curriculum has been approved by the
6 EMS System. An EMS System associate hospital may allow
7 students from an EMS System-approved and
8 Department-approved Paramedic course to complete
9 clinical rotations as approved by the EMS System
10 Medical Director. The approval by the EMS System
11 Medical Director may not be unreasonably denied.

12 (2) Prescribe licensure testing requirements for all
13 levels of EMS personnel, which shall include a requirement
14 that all phases of instruction, training, and field
15 experience be completed before taking the appropriate
16 licensure examination. Candidates shall take the
17 appropriate National Registry examination. In prescribing
18 licensure testing requirements for honorably discharged
19 members of the armed forces of the United States under
20 this paragraph (2), the Department shall ensure that a
21 candidate's military emergency medical training, emergency
22 medical curriculum completed, and clinical experience, as
23 described in paragraph (2.5), are recognized.

24 (2.5) Review applications for EMS personnel licensure
25 from honorably discharged members of the armed forces of
26 the United States with military emergency medical

1 training. Applications shall be filed with the Department
2 within one year after military discharge and shall
3 contain: (i) proof of successful completion of military
4 emergency medical training; (ii) a detailed description of
5 the emergency medical curriculum completed; and (iii) a
6 detailed description of the applicant's clinical
7 experience. The Department may request additional and
8 clarifying information. The Department shall evaluate the
9 application, including the applicant's training and
10 experience, consistent with the standards set forth under
11 subsections (a), (b), (c), and (d) of Section 3.10. If the
12 application clearly demonstrates that the training and
13 experience meet such standards, the Department shall offer
14 the applicant the opportunity to successfully complete a
15 Department-approved EMS personnel examination for the
16 level of license for which the applicant is qualified.
17 Upon passage of an examination, the Department shall issue
18 a license, which shall be subject to all provisions of
19 this Act that are otherwise applicable to the level of EMS
20 personnel license issued.

21 (3) License individuals as an EMR, EMT, EMT-I, A-EMT,
22 or Paramedic who have met the Department's education,
23 training and examination requirements.

24 (A) The Department shall issue EMS personnel a
25 physical license, and all EMS personnel shall have
26 access to a digital license.

1 (B) A licensee shall possess a copy of a physical
2 license or a digital license.

3 (4) Prescribe annual continuing education and
4 relicensure requirements for all EMS personnel licensure
5 levels.

6 (5) Relicense individuals as an EMD, EMR, EMT, EMT-I,
7 A-EMT, PHRN, PHAPRN, PHPA, or Paramedic every 4 years,
8 based on their compliance with continuing education and
9 relicensure requirements as required by the Department
10 pursuant to this Act. Every 4 years, a Paramedic shall
11 have 100 hours of approved continuing education, an EMT-I
12 and an advanced EMT shall have 80 hours of approved
13 continuing education, and an EMT shall have 60 hours of
14 approved continuing education. An Illinois licensed EMR,
15 EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHPA, PHAPRN, or
16 PHRN whose license has been expired for less than 36
17 months may apply for reinstatement by the Department.
18 Reinstatement shall require that the applicant (i) submit
19 satisfactory proof of completion of continuing medical
20 education and clinical requirements to be prescribed by
21 the Department in an administrative rule; (ii) submit a
22 positive recommendation from an Illinois EMS Medical
23 Director attesting to the applicant's qualifications for
24 retesting; and (iii) pass a Department approved test for
25 the level of EMS personnel license sought to be
26 reinstated.

1 (6) Grant inactive status to any EMR, EMD, EMT, EMT-I,
2 A-EMT, Paramedic, ECRN, PHAPRN, PHPA, or PHRN who
3 qualifies, based on standards and procedures established
4 by the Department in rules adopted pursuant to this Act.

5 (7) Charge a fee for EMS personnel examination,
6 licensure, and license renewal.

7 (8) Suspend, revoke, or refuse to issue or renew the
8 license of any licensee, after an opportunity for an
9 impartial hearing before a neutral administrative law
10 judge appointed by the Director, where the preponderance
11 of the evidence shows one or more of the following:

12 (A) The licensee has not met continuing education
13 or relicensure requirements as prescribed by the
14 Department;

15 (B) The licensee has failed to maintain
16 proficiency in the level of skills for which he or she
17 is licensed;

18 (C) The licensee, during the provision of medical
19 services, engaged in dishonorable, unethical, or
20 unprofessional conduct of a character likely to
21 deceive, defraud, or harm the public;

22 (D) The licensee has failed to maintain or has
23 violated standards of performance and conduct as
24 prescribed by the Department in rules adopted pursuant
25 to this Act or his or her EMS System's Program Plan;

26 (E) The licensee is physically impaired to the

1 extent that he or she cannot physically perform the
2 skills and functions for which he or she is licensed,
3 as verified by a physician, unless the person is on
4 inactive status pursuant to Department regulations;

5 (F) The licensee is mentally impaired to the
6 extent that he or she cannot exercise the appropriate
7 judgment, skill and safety for performing the
8 functions for which he or she is licensed, as verified
9 by a physician, unless the person is on inactive
10 status pursuant to Department regulations;

11 (G) The licensee has violated this Act or any rule
12 adopted by the Department pursuant to this Act; or

13 (H) The licensee has been convicted (or entered a
14 plea of guilty or nolo contendere) by a court of
15 competent jurisdiction of a Class X, Class 1, or Class
16 2 felony in this State or an out-of-state equivalent
17 offense.

18 (9) Prescribe education and training requirements in
19 the administration and use of opioid antagonists for all
20 levels of EMS personnel based on the National EMS
21 Educational Standards and any modifications to those
22 curricula specified by the Department through rules
23 adopted pursuant to this Act.

24 (d-5) An EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN,
25 PHAPRN, PHPA, or PHRN who is a member of the Illinois National
26 Guard or an Illinois State Trooper or who exclusively serves

1 as a volunteer for units of local government with a population
2 base of less than 5,000 or as a volunteer for a not-for-profit
3 organization that serves a service area with a population base
4 of less than 5,000 may submit an application to the Department
5 for a waiver of the fees described under paragraph (7) of
6 subsection (d) of this Section on a form prescribed by the
7 Department.

8 (d-10) A person who is not an EMS personnel may operate an
9 EMS vehicle pursuant to this Act if the following requirements
10 are met: (i) the person meets the requirements of Section
11 11-1421 of the Illinois Vehicle Code; (ii) 2
12 Department-licensed EMS personnel are present and have met
13 educational requirements prescribed by the Department; and
14 (iii) the clinical condition of the patient necessitates the
15 involvement of additional licensed personnel to ensure
16 appropriate assessment, treatment, and patient safety. If a
17 waiver is issued by the Department, the person who is not an
18 EMS personnel may operate the EMS vehicle if only one EMS
19 personnel is present. Upon request, the Department may issue a
20 retroactive waiver when appropriate.

21 The education requirements prescribed by the Department
22 under this Section must allow for the suspension of those
23 requirements in the case of a member of the armed services or
24 reserve forces of the United States or a member of the Illinois
25 National Guard who is on active duty pursuant to an executive
26 order of the President of the United States, an act of the

1 Congress of the United States, or an order of the Governor at
2 the time that the member would otherwise be required to
3 fulfill a particular education requirement. Such a person must
4 fulfill the education requirement within 6 months after his or
5 her release from active duty.

6 (e) In the event that any rule of the Department or an EMS
7 Medical Director that requires testing for drug use as a
8 condition of the applicable EMS personnel license conflicts
9 with or duplicates a provision of a collective bargaining
10 agreement that requires testing for drug use, that rule shall
11 not apply to any person covered by the collective bargaining
12 agreement.

13 (f) At the time of applying for or renewing his or her
14 license, an applicant for a license or license renewal may
15 submit an email address to the Department. The Department
16 shall keep the email address on file as a form of contact for
17 the individual. The Department shall send license renewal
18 notices electronically and by mail to a licensee who provides
19 the Department with his or her email address. The notices
20 shall be sent at least 60 days prior to the expiration date of
21 the license.

22 (Source: P.A. 104-362, eff. 8-15-25.)