

May 12, 2010

Texas Air Medical Stakeholders,

As you are aware the stakeholders of the State of Texas identified the need for more oversight and rules by the Department of State Health and Human Services (DSHS) for Air Medical Providers in 2006. The GETAC Air Medical Committee appointed an Alternate Survey Process (ASP) Work Group (now known as Texas Air Medical Licensure Work Group) to develop a solution based on aviation and patient safety best practices and to define what an equivalent, but non-preempted, licensing process could look like.

After extensive research, we recommend an enhanced State Rule that follows current Air Medical, EMS and Business Practices, to be verified through a Licensure Process. This Licensure Rule, with an independent site survey, will ensure responsibility and consistency of our Air Medical providers in their endeavor to provide quality care to patients. This solution, however, will not dictate the level of care provided, but rather will validate the Providers process for initiating and sustaining their program in line with industry standards.

There are multiple component sections within our proposed draft Rule for 157.12 and 157.13 that include, Planning and Preparation; Credentialing of Air Medical Providers; Professional Development; Protocol Standards of Care; Operational Standards; Communication Center Standards; Base and Facility Standards; Safety Standards; Quality Improvement; Committee Involvement; Qualified Medical Direction; and, Defined Critical Failures to Accreditation.

During the Air Medical Committee Meeting on April, 2010 the Texas Air Medical Committee completed the initial Rules review. The Air Medical Committee and Air Medical Licensure Work Group has begun the next process of focusing on critical elements and removing specifics from the Rules to the Guidelines Document in order to enable the DSHS to be presented with Rules that are more direct and permit DSHS to effectively regulate Air Medical providers. These edits are expressed in the Rules Drafts by Comments and Strike Throughs, and represent the initial process of distillation of the Rules towards final drafts.

During Work Group meeting in Lubbock, Texas in April 2010 several suggestions for discussion and deliberation were documented for consideration by the Air Medical Committee and Stakeholders at the May 2010 meeting. You will find these observations in comment bubbles to the right of the proposed Rule within 157.12 and apply to both 157.12 and 157.13.

As the Air Medical Licensure Work Group works to complete its review and draft of the Rules with the Air Medical Committee, the Air Medical Licensure Work Group wants Air Medical Stakeholders to freely comment and express their needs and concerns over the content and intent of these Draft Rules. The Air Medical Licensure Work Group looks forward to completing its task prior to the August GETAC meetings for final presentment to the Air Medical Committee and review by the GETAC for rulemaking.

Thank you for your time and dedication to the Air Medical Industry. We look forward to your contribution, ideas and solutions.

Regards,



Alicia Wiren LP, FP-C

GETAC Air Medical Committee

Texas Air Medical Licensure Work Group, Chair