



WESTCHESTER REGIONAL EMERGENCY MEDICAL ADVISORY COMMITTEE

POLICY STATEMENT

Supersedes/Updates: WREMAC Credentialing Policy Adopted 2/2002; Amended: 11/2002, 1/2003

No. 05-01

Date: 21 March 2005

**Re: Credentialing of
ALS Providers**

Pages: 10

Section 1: PROGRAM ADMINISTRATION

Any New York State Certified EMT-Intermediate or Paramedic (ALS provider) who is sponsored by a certified ALS agency authorized to operate in the Westchester Region, Aero-Medical Personnel affiliated with a helicopter service that is domiciled in the Westchester Region, or any Physician wishing to obtain applicable Medical Control privileges in the Westchester Region, must be evaluated by the criteria established by the Westchester Regional Emergency Medical Advisory Committee (WREMAC).

Section 2: - MAC CERTIFICATION CRITERIA

Advanced level providers shall be required to pass a two-part WREMAC credentialing exam. The exam shall be scenario based. The first part is written and will test the comprehension of the WREMAC treatment protocols. Part two is a dynamic oral exam administered by a WREMAC certified physician. Advanced providers graduating from Paramedic or Intermediate Training Programs shall be given credit for an oral graduation test if given by a WREMAC certified physician. No tests will be administered to providers recertifying if they have satisfied all protocol update, call audits and continuing medical education requirements to the satisfaction of his/her Primary Agency and its Medical Director.

Section 3: - MAC CERTIFICATION PROCESS

1. Written examinations are administered at the Westchester Regional EMS (WREMS) Office located at 4 Dana Rd., Valhalla, NY. Off-site exams may be conducted for large groups upon request. Pre-registration is required. Exams are only administered to those who are currently working/volunteering in the Westchester Region for an ALS agency.

2. An Application must be completed and submitted prior to the test being administered.

3. Each applicant must bring with them:

- A valid NYS DOH certification card or official On-Site scoring verification¹
- Government Issued Photo ID (i.e. driver's license, passport, etc.)
- Primary ALS Agency Support Form

4. A passing grade of 80% or better must be obtained. If the ALS provider does not achieve a passing grade the first time, he/she may take the exam a second time. The retest must be at least five (5) business days after the initial exam date. If the score is still below 80%, he/she must be remediated by a representative of the Primary ALS Agency and wait five (5) additional business days to retest. Written documentation of remediation must be presented to the Regional office prior to their next exam. A third failure will result in a retest waiting period of ninety (90) days. A fourth failure results in a one (1) year wait for a retest.

¹ Providers presenting On-site scoring verification who successfully test will be required to present a valid NYS DOH certification card within the expiration date noted on the receipt or be subject to revocation of WREMAC privileges.

5. After meeting certification requirements, a photo-identification card will be issued by the WREMAC to the ALS provider. The ALS provider's identification number will be his/her New York State certification number preceded by a letter designating his/her level of certification (ie. P = Paramedic, I = Intermediate). The card will clearly indicate level of certification and ability to perform Special Procedures, as defined by the WREMAC. The ALS provider's Primary ALS Agency's NYS DOH EMS agency code number shall be printed on the back.

6. A WREMAC CME / CA folder will be created and forwarded to the Primary ALS Agency. While the Primary ALS Agency shall be custodian, the folder and any records contained therein will remain the property of the WREMAC.

6. A listing of all WREMAC credentialed providers will be maintained on the Regional Office's website at www.wremaco.org.

Section 4: MAINTAINING MAC CERTIFICATION

The expiration date of the WREMAC card shall coincide with the NYS DOH certification card. To qualify for recertification, an ALS provider must complete forty-eight (48) continuing medical education (CME) hours and twenty-four (24) call audit (CA) hours every three (3) years. These numbers shall be prorated if the provider has been certified for less than three (3) years, 1.3 CME and .66 CA per month. The CME and CA are to be completed as per sections 5 and 6 of this policy. A recommended minimum of 25% of the required CME and CA should be completed yearly.

Section 5: CONTINUING MEDICAL EDUCATION (CME)

1.The CME training must be completed in various specific categories. Teaching, attending courses, seminars or other continuing medical education sessions relating to the field of prehospital care, can fulfill these credits. The hour requirements are based on a three (3) year or thirty-six (36) month credentialing period and will be prorated for anything less as per section 10 of this policy. The category requirements are as follows:

Category	Hrs	Examples
Preparatory / Operations	8	EMS Systems and Roles and Responsibilities, The Well-Being of the EMT, Illness and Injury Prevention, Medical / Legal Issues, Ethics, General Principles of Pathophysiology, Venous Access; Ambulance Operations, Medical Incident Command, Rescue Awareness and Operations, Hazardous Materials Incidents, Crime Scene Awareness
Airway	6	Endotracheal Intubation, Capnography, Advanced Adjuncts, Management / Ventilation
Trauma	10	Trauma Systems / Mechanism of Injury, Hemorrhage Control, Shock, Soft Tissue Trauma, Burns, Head / Facial Trauma, Spinal Trauma, Thoracic / Abdominal Trauma, Musculoskeletal Trauma
Medical	18	Pulmonary, Cardiology, Neurology, Endocrinology, Allergies / Anaphylaxis, Gastroenterology, Renal / Urology, Toxicology, Environmental Conditions, Infectious and Communicable Diseases, Behavioral and Psychiatric Disorders, Gynecology / Obstetrics
Special Considerations	6	Neonatology, Pediatrics, Geriatrics, Abuse and Assault, Patients with Special Challenges; Specialty Care Transports
TOTAL	48	

2. Credit will be issued for all Regionally approved training courses. The Regional Medical Director must approve any courses not included on the pre-approved course list (see Section 9). It is recommended that notice be given to the WREMS office in advance, in order that you may be advised of potential credits for that program. The REMSCO and Medical Control Hospitals will offer CME programs throughout the year.

3. In order to receive credit, the student must have documentation of attendance and completion of the course. All regionally approved courses must submit an attendance sheet to the WREMS office as soon as possible following the delivery of the program. Each student should have a WREMAC CME form signed by the instructor. An attendance sheet with the students name on it must be forwarded to the WREMS office.

4. CME may also be earned through instruction. In order to receive CME credits through instruction, you must be a credentialed instructor. Personnel credentialed as instructors by the American Heart Association, American Red Cross, American Safety and Health Institute, National Safety Council, or the New York State Department of Health (CLI or CIC only) are pre-approved to claim CME credit through instruction. Personnel with instructor credentials not listed above, may seek approval through the WREMSCO Medical Director. CME credit will be granted in the same category as listed on the CME roster.

5. In order to receive credit for teaching, the instructor must have a WREMAC CME form signed by the supervising instructor (i.e. – CIC, Course Director, etc) and attach a copy of the course roster. This information is then to be verified by the agency and the CME form must be co-signed by a representative from the agency.

Section 6: CALL AUDITS (CA)

1. ALS CA must be conducted by a WREMAC approved:

- Physician, or
- AEMT-P working under the auspices of a physician. (The AEMT-P must be specifically approved by the WREMAC to act in this capacity.)

2. ALS CA shall be conducted in a manner similar to grand rounds, utilizing the model of case presentation. WREMAC has established the following guidelines for ALS call audits:

- All cases may be presented by ALS providers
- Cases should be rotated among ALS providers
- Hospital follow-up is encouraged as an educational tool
- When possible, call audits should address an academic theme (i.e. chest pain)
- Call audits should be a minimum of one (1) hour in duration
- Call audits should be paired with a CME topic

3. All ALS audits shall be reported to the Westchester Regional EMS (WREMS) office. An approved sign-in sheet documenting the attendance will be forwarded to WREMS upon the completion of the audit.

4. An Agency Medical Director may accept up to fifty (50) percent of the required number of CA conducted by Medical Control physicians from other than the Westchester Region. Please note the following:

- The Agency Medical Director has the option of either accepting or not accepting out of region Call Audits.
- Physician contact hours, described and utilized in the NYC and Hudson Valley Regions are not acceptable. The policy requirement remains for the Call Audit format as described above.
- Out of region Call Audits are only acceptable if conducted on or after November 1, 2002.
- Out of region Call Audit participation sheets must be endorsed by the Agency Medical Director and maintained on file consistent with the current requirements for agency maintenance of CME and Call Audit documentation.
- The provider attending the out of region call audit is responsible to have a Westchester WREMAC student participation sheet completed and endorsed by the conducting physician.

5. A provider may gain ALS Call Audit credit hours by completing “Bed-Side Call Audits” with a Westchester Regional Medical Control Physician in the ER immediately following an emergency transport. The Westchester WREMAC has established the following guidelines regarding “Bed-Side Call Audits”:

- The Medical Control Physician must be comfortable with the review that has occurred and he/she has the sole discretion to award or not to award this contact time, as well as elect not to review calls due to volume in the emergency department.
- Each occurrence is worth 0.25 hours ALS Call Audit hours.
- The maximum number allowed is sixteen (16) occurrences, or four (4) ALS Call Audit hours.
- A "Bed-Side Call Audit" must take place within the Westchester Regional EMS system.
- A "Bed-Side Call Audit" must be properly documented on a Westchester WREMAC student participation sheet completed and endorsed by the conducting Westchester Regional Medical Control Physician.

6. ALS providers may request CA credit for Quality Improvement (QI) Committee participation that involves direct interaction with a Regional Medical Control Physician. CA credit will be awarded on an hour for hour basis up to a maximum of 8.0 credit hours. CA credit for QI Committee participation will be awarded only if the following requirements are fulfilled:

- The ALS provider submits written documentation to the WREMSCO office that includes the Medical Control Physician's signature verifying the ALS provider's active QI Committee involvement.
- The agency that utilizes the ALS provider as a QI Committee member has submitted a current WREMAC approved QI plan to the WREMS office.
- The ALS provider submits a completed approved Westchester WREMAC student participation sheet to the WREMS office that includes the Medical Control Physician's signature verifying the ALS provider's attendance to QI committee meetings.

Section 7: REPORTING SYSTEM

1. All CME programs conducted throughout the Westchester Region must be pre-approved. Programs that are run routinely are approved for CME credit as outlined in the schedule later in this document. New programs are approved after a course outline has been submitted and CME credits are assigned. These programs will be maintained for future reference at the WREMS office and need not be submitted for approval again unless there is a change to the course content. Other programs offered by various agencies, institutions or instructors could be approved on an individual basis once a course outline has been submitted. The Regional Medical Director will determine the credit for each program submitted.

2. To receive CME and CA credit, an official WREMAC attendance roster must be mailed to the WREMS office with the appropriate boxes filled in. The WREMS office will keep track of all information submitted. In addition, individuals need to secure documentation of their attendance either by way of a completion certificate or preferably on a WREMAC student participation sheet. This document needs to be submitted to the Primary Agency that the ALS provider is affiliated with. The Agency representative can be scheduled to meet with the WREMS office staff to audit these records. (See Section 8.)

3. All ALS agencies operating within the Westchester Region will be furnished with one WREMAC ALS provider jacket (folder) for each ALS provider that designates the agency as their primary affiliation. The ALS provider jacket will be used to maintain all of the ALS provider's CME documentation and any applicable WREMAC related records throughout the ALS provider/agency relationship.

4. Advanced providers are responsible for ensuring that all CME/CA documentation is filed with their Primary ALS Agency. EMS agencies designated by a provider as Primary Agency shall be responsible for recording and confirming his/her records of CME/CA completed.

5. An annual report shall be sent by each Primary ALS Agency to the Agency's Medical Director for review and signature. The Agency Medical Director will sign and forward the report to the WREMAC by January 1st of each year. All records shall be maintained by the Agency for five (5) years.

6. WREMS Office will conduct periodic sample auditing of Primary ALS Agency records for the REMAC. Any Primary ALS Agency failing to submit the annual report may be subject to a mandatory audit of all of its ALS credentialed staff.

Section 8: RE – CREDENTIALING

1. The expiration date of the WREMAC card shall coincide with the NYS certification card. The WREMS office will notify ALS providers prior to their expiration the number of CME and CA required to be completed for recertification.

2. Re-certifying ALS providers shall complete the appropriate WREMAC application and provide copies of required documentation to the WREMAC. At the end the ALS provider’s credentialing period, the Primary ALS agency must have on file the ALS provider’s CME / CA documentation contained within the ALS provider’s WREMAC folder. If an ALS provider/agency relationship should end, regardless of the reason, the ALS agency will be required to send the ALS provider’s WREMAC folder, its contents and the WREMAC photo ID to the WREMS office.

3. ALL CME verification will be maintained and coordinated by the ALS provider’s primary affiliated agency. It is the responsibility of the ALS provider to complete all mandatory WREMAC CME requirements and to provide their primary affiliated agency with all verification of CME completion. The ALS provider will not be notified by the Westchester Regional EMS Office to do so. WREMAC credentials are only valid when accompanied by current New York State ALS provider certification. It is the responsibility of the ALS provider to submit current verification of their valid New York State ALS provider certification, letter(s) of employment/agency verification and photo identification or any changes of such to the Westchester Regional EMS Office.

4. The WREMS office may request to review the following for accuracy and compliance for any ALS provider recertification:

- Any ALS provider who hasn’t shown to be in compliance as per the WREMAC database or who demonstrates discrepancies (examples include: duplications of CME documentation, illegible or incomplete documentation, etc.)
- An additional 20% random selection of all remaining ALS provider’s CME / CA documentation.

5. Although, all EMS agencies must monitor their own personnel for compliance, the WREMAC will be the definitive governing body for determining whether ALS providers are active, in “good standing” and subsequently are credentialed to practice ALS privileges in the Westchester Region. It is strongly suggested that ALS agencies contact the WREMS office to verify the status of all ALS provider’s WREMAC credentials. Announcements of Westchester Regional suspensions and revocations of practicing privileges will be distributed at the beginning of each month to all the ALS agencies and medical control facilities, as well as being posted on the website.

Section 9: PRE APPROVED CME PROGRAMS

EMT-I/EMT-CC/EMT-P REFRESHER:

NOTE: Challenge and final NYS DOH written and/or practical exams **are not** eligible for CME credit.

Full Refresher (Hour For Hour CME Credit)

CPR review /refresher
Pathophysiology review
Airway management
Patient Assessment

Trauma Management
Pulmonary and Cardiology
General Medical
Operations

Challenge Refresher (Hour For Hour CME Credit)

CPR review /refresher class
 Misc. class update(s)
 Individual classes attended

Miscellaneous CME Programs	Credit Hours (Max Hrs.)
CPR Instructor Course	16
CPR review /refresher course	3 (max 2 classes q 3yrs)
Basic Trauma Life Support-original	16
Basic Trauma Life Support-refresher	8
Pre-Hospital Trauma Life Support-original	16
Pre-Hospital Trauma Life Support-refresher	8
Advanced Cardiac Life Support-original	16
Advanced Cardiac Life Support-refresher	8
Pediatric Advanced Life Support-original	16
Pediatric Advanced Life Support-refresher	8
Neonate Advanced Life Support-original	16
Neonate Advanced Life Support refresher	8
New York State CLI, CIC or CIU	20
CEVO or EVOC driving instruction	16
OSHA annual refresher training (ie. Blood Borne Pathogens, Respiratory Protection, HAZMAT Awareness)	3 (max 3 per year)
Pre-Hospital Treatment of Traumatic Brain Injury - Provider	4
Pre-Hospital Treatment of Traumatic Brain Injury – Instructor	6

NOTE: All current and future courses or programs that are approved by the following organizations will be given primary consideration when a request is made to the WREMS office for CME credit:

- American Heart Association (AHA)
- American Red Cross (ARC)
- American Safety and Health Institute (ASHI)
- Fire and Emergency Training Network (FETN)
- National Association of Emergency Medical Technicians (NAEMT)
- National Safety Council (NSC)
- National Ski Patrol Outdoor Emergency Care (NSPOEC)
- New York State Department of Health (NYSDOH)

Section 10: PRO-RATING CME / CA CREDIT REQUIREMENTS

1. Obtaining WREMAC certification after the beginning of their three (3) year NYS Certification period:
 - a. ALS providers that obtain WREMAC certifications and begin to function in the Westchester region after the start of the three (3) year NYS certification cycle will receive pro-rated CME / CA requirements based on the date the ALS provider successfully completes the WREMAC certification requirements. (See Figure 1.)
2. Requests for periods of inactivity:
 - a. ALS providers that become inactive or anticipate becoming inactive in the Westchester Region for ninety (90) days or more, regardless of the reason, must notify the WREMS office in writing of

- b. This written notification should be made as soon as possible and must include the requested date for the inactivity to begin as well as the estimated duration.
 - c. Upon receipt of this notification, the requesting ALS provider and all affiliated agencies will receive written confirmation of such from the WREMS office and the ALS provider will be placed on the inactive ALS provider list.
 - d. The ALS provider may request in writing to become active again at anytime provided their WREMAC certification has not expired during the period of inactivity. If the ALS provider's WREMAC certification expires during the period of inactivity or if the period of inactivity exceeds a continuous twelve (12) month duration, the ALS provider will be required to complete the WREMAC certification process in its entirety.
 - e. The ALS provider must provide written documentation of all CME(s) / CA(s) obtained during the respective credentialing period as well as a current letter of employment/agency verification, prior to becoming re-activated.
 - f. Upon receipt of this information, the ALS provider and all affiliated agencies will receive written confirmation of such from the WREMS office and the ALS provider will be re-activated.
 - g. The ALS provider will be responsible for obtaining only CME / CA credits for the time period that they were active in the Westchester Region. (See Figure 1).
3. Process for pro-rating CME / CA credits:
- a. Pro-Rated CME / CA credit will only be awarded if all of the above listed requirements are met.
 - b. CME credit will be pro-rated at a rate of 1.33 CME credits per month. (See Figure 1).
 - c. CA credit will be pro-rated at a rate of .66 CA credit per month. (See Figure 1).

Figure 1: Pro-Rated Total CME / CA Credits

Enter After Month	Total CME	Total CA
1	47	23
2	45	22
3	44	22
4	43	21
5	41	20
6	40	20
7	39	19
8	37	18
9	36	18
10	35	17
11	33	17
12	32	16
13	31	15
14	29	15
15	28	14
16	27	13
17	25	13
18	24	12

Enter After Month	Total CME	Total CA
19	23	11
20	21	11
21	20	10
22	19	9
23	17	9
24	16	8
25	15	7
26	13	7
27	12	6
28	11	5
29	9	5
30	8	4
31	7	3
32	5	3
33	4	2
34	3	1
35	1	1
36	0	0

- d. CME Categories will be pro-rated at a rate of:

<u>Category</u>	<u>Per Month</u>
Prep / Ops	0.167
Airway	0.125
Trauma	0.208
Medical	0.375
Special Considerations	0.125

Figure 2: Pro-Rated CME Credits By Category

Enter After Month	Prep / Ops	Airway	Trauma	Medical	Spec	Total CME
1	8	6	10	17	6	47
2	8	6	9	17	6	45
3	7	5	9	16	5	44
4	7	5	9	16	5	43
5	7	5	9	15	5	41
6	7	5	8	15	5	40
7	6	5	8	14	5	39
8	6	5	8	14	5	37
9	6	4	7	13	4	36
10	6	4	7	13	4	35
11	6	4	7	12	4	33
12	5	4	7	12	4	32
13	5	4	6	11	4	31
14	5	4	6	11	4	29
15	5	3	6	10	3	28
16	4	3	6	10	3	27
17	4	3	5	9	3	25
18	4	3	5	9	3	24
19	4	3	5	8	3	23
20	4	3	4	8	3	21
21	3	2	4	7	2	20
22	3	2	4	7	2	19
23	3	2	4	6	2	17
24	3	2	3	6	2	16
25	2	2	3	5	2	15
26	2	2	3	5	2	13
27	2	1	2	4	1	12
28	2	1	2	4	1	11
29	2	1	2	3	1	9
30	1	1	2	3	1	8
31	1	1	1	2	1	7
32	1	1	1	2	1	5
33	1	0	1	1	0	4
34	0	0	1	1	0	3
35	0	0	0	0	0	1
36	0	0	0	0	0	0

Section 9: NON-COMPLIANCE OF CME /CA REQUIREMENTS BY A CREDENTIALLED WREMAC PROVIDER

1. At the end of the credentialing cycle, an ALS provider must have completed all required CME / CA. The provider, following the specific reporting requirements of his or her Primary ALS Agency, will have furnished all required documentation subject to review by the WREMS office. If not, the following actions will then take place:

a. Voluntary Suspension of Advanced Life Support Privileges.

If at the end of the credentialing cycle a provider has been found to be deficient in the required CME / CA credit hours to maintain his or her credentials, the Primary ALS Agency may voluntarily restrict his or her ALS privileges. If this option is chosen, the following must occur:

- The WREMAC must be notified in writing prior to the provider’s expiration date.
- The provider must be restricted to providing BLS level care only and may not be used as the qualifying staff member on an EMS unit that qualifies it as an ALS unit.

- A Provider declaring a voluntary suspension will then be given thirty (30) days to complete all deficient CME / CA hours.
- Once completed and verified, the Primary ALS Agency will forward said documentation to WREMS. Upon receipt of the required documentation the suspension will be lifted, and the individual returned to a normal credentialed status without restriction.

CME / CA secured during the suspension period for the expressed purpose of completing deficient CME / CA requirements may only be applied to the previous credentialing period, and may not be used in the new credentialing cycle.

b. Involuntary Suspension of Advanced Life Support Privileges.

If a provider or Primary ALS Agency does not elect to voluntarily suspend the ALS privileges of any ALS provider known to be deficient in required CME /CA contact hours it may result in mandatory suspension or termination of all WREMAC credentials. A mandatory audit of all the Primary ALS Agency's records will be scheduled. If it is determined that a provider or multiple providers from that service do not have valid documentation supporting completion of CME / CA requirements, the following will occur:

- The Primary ALS Agency will immediately submit to a mandatory audit of all of its ALS credentialed staff.
- Any providers found during the audit to be deficient in their CME / CA requirements will be immediately suspended for sixty (60) days. During this time these individuals cannot work as, or be counted as, ALS providers in the Westchester Region.
- Providers suspended in this manner will have until the end of this period to make up all required CME / CA hours.
- Providers who fail to re-qualify by the end of thirty (30) days will not be eligible for reinstatement until the Primary ALS Agency Medical Director has met² with the Regional Medical Director, and both Physicians agree to the reinstatement.³)
- Any provider who has gone through an involuntary suspension will be subject to a mandatory CME / CA audit on the next reporting cycle.

c. Revocation of Advanced Life Support Privileges.

If a provider fails to re-qualify for their ALS privileges in the aforementioned manner sixty (60) days following the end of the credentialing cycle, the following will occur:

- ALS privileges will be revoked.
- Revocation of privileges will result in a mandatory period of three (3) months (after the date of revocation) before the individual can apply for privileges.
- Prior to applying for privileges, the Regional Medical Director and the Medical Director of the provider's Primary ALS Agency will meet⁴ to determine if the provider has satisfied all CME requirements for the preceding reporting cycle, as well as completing any other educational requirement the Medical Directors feel is appropriate before allowing the individual to complete a written and physician interactive Protocol examination.⁵

d. Notification of the Suspension or Revocation of a Provider's ALS privileges.

Any provider who has had either a suspension or a mandatory revocation of his or her privileges, will have his or her name removed from the list of credentialed ALS providers listed on the WREMSCO website. In addition, a letter will be sent to both the agency and the agency Medical Director of the individual's primary service announcing his/her suspension or revocation. Notification will be made to all ALS services within the Regional System regarding any suspension or revocation of Regional Credentialing. Upon successful re-qualification the individual's name will be returned to the listing.

e. Disciplinary Action against an Agency using providers without WREMAC ALS privileges to provide ALS care.

Any agency found to be using non-credentialed, suspended or revoked individuals to provide ALS

² The terms of the meeting shall be at the discretion of the Regional Medical Director and may be fulfilled through direct telephone communication.

³ In the case that both positions are filled by the same Physician, the WREMSCO Chair will select an alternate WREMAC Physician to represent the Region.

⁴ See Footnote #2

⁵ See Footnote # 3

level care, will be immediately reported to the WREMS Program Coordinator and to the WREMAC Chair. The following process will then take place:

- The Regional Medical Director will ensure that the service immediately ceases to utilize the individual(s) in question.
- A mandatory meeting will be scheduled for no more than five (5) business days after the reported violation is received by the WREMS Program Coordinator. The meeting must involve the WREMAC Chair, the WREMS Program Coordinator, the Medical Director of the Service in question, the Chief Operating Officer of the agency in question, and two additional WREMAC members appointed by the WREMAC Chair and are not affiliated with the agency and/or the agency's primary area of operation.⁶
- At this meeting the involved service must provide a written plan of corrective action for review by the WREMS Program Coordinator and the WREMAC.
- The WREMAC Chair, in consultation with the WREMS Office and WREMAC representatives present, will decide if any further action is indicated, or if the matter is to be remanded to the full WREMAC for possible revocation of the service's qualification to provide ALS level care.

Section 10 – APPEALS FOR WREMAC CREDENTIALING ACTIONS

1. An advanced provider who is unable to meet the required CME/CA for re-certification, due to unforeseen or special circumstances, may appeal to the WREMAC Credentialing Sub-committee. The appeal process is as follows:

- A written petition, requesting re-certification or an extension of the deadline, must be filed not less than thirty (30) days prior to the termination of the provider's certification period.
- The petition must include letters of support from an officer of the provider's Primary ALS Agency and its Medical Director.
- The provider must have proof of continuous NYS DOH certification as an advanced provider.
- The Credentialing Sub-committee will review the petition, and may request to have the provider, a Primary ALS Agency representative and the Agency Medical Director present during the review.
- If the Credentialing Committee denies the application, the Agency Medical Director may appeal to the WREMAC Chair to have the full WREMAC consider the petition. The determination of the WREMAC shall be final.
- As long as NYS DOH certification remains valid, action to suspend or revoke WREMAC credentialing of the provider shall be deferred until completion of the committee review and appeal process, if any.

2. An advanced provider who has received action to suspend or revoke his or her WREMAC credentialing due to a failure to meet the required CME/CA for re-certification, due to unforeseen or special circumstances, may appeal to the WREMAC Credentialing Sub-committee. The appeal process is as follows:

- A written appeal, requesting re-evaluation of the action must be filed not less than thirty (30) days following the action in question.
- The petition must include letters of support from an officer of the provider's Primary ALS Agency and its Medical Director.
- The provider must have proof of continuous NYS DOH certification as an advanced provider.
- The Credentialing Sub-committee will review the petition, and may request to have the provider, a Primary ALS Agency representative and the Agency Medical Director present during the review.
- If the Credentialing Committee denies the application, the Agency Medical Director may appeal to the WREMAC Chair to have the full WREMAC consider the petition. The determination of the WREMAC shall be final.
- The action to suspend or revoke WREMAC credentialing of the provider shall be remain in effect until or unless decided otherwise during the committee review and appeal process.

⁶ In the case that both positions are filled by the same Physician, the WREMSCO Chair will select an alternate Physician to represent the Region.