

Mobile Integrated Healthcare/Community Paramedicine (MIH/CP) Frequently Asked Questions:

What is MIH, and what is CP?

"Mobile Integrated Healthcare" and "MIH" means the provision of non-emergent healthcare using patient centered, mobile resources in the out of hospital environment. **An entity within Virginia advertising or providing Mobile Integrated Healthcare to the public must be licensed as an Emergency Medical Services (EMS) agency and in good standing with the Virginia Office of EMS (OEMS).**

"Community Paramedicine" and "CP" means **Paramedic level** EMS providers operating in expanded roles by assisting with public health and primary healthcare to include preventative services to underserved populations in the community. The goal is to improve access to care and avoid duplicating existing services. **An entity within Virginia advertising or providing Community Paramedicine to the public must be licensed as an EMS agency in good standing with the Virginia OEMS.**

The OEMS has adopted the opinion that there is a distinction between MIH and CP.

Additional pertinent definitions can be found in the Virginia EMS Regulations.

<https://law.lis.virginia.gov/admincode/title12/agency5/chapter31/section10/>

Is my agency required to provide MIH or CP service?

No, there is no requirement for an agency to provide the service. The process for an agency to be able to provide MIH or CP service is **completely voluntary**.

What steps are involved in an agency begin able to provide MIH or CP service?

First, agency representatives need to review the "MIH-CP in Virginia White Paper", which can be found on the MIH-CP page of the OEMS website.

Next, the agency is required to complete the "MIH-CP Letter of Intent" (LOI) document, which can also be found on the MIH-CP page of the OEMS website. The LOI does require the signature of the chief officer of the agency, as well as the agency Operational Medical Director (OMD). The LOI is then sent via email to Tim Perkins, CHaTR Division Director at tim.perkins@vdh.virginia.gov .

What steps are involved in an agency begin able to provide MIH or CP service? (Cont.)

After receipt the LOI undergoes an internal review for completeness, as well as ensuring the information included in the LOI is within the Virginia EMS Regulations. If there are items that need to be addressed by the agency, then OEMS will return the LOI (with the suggested changes/edits) via email to the individual that sent the original LOI.

In addition, each LOI will be reviewed by staff of the Virginia Department of Health (VDH) Office of Licensure and Certification (OLC), to ensure that the information contained in the LOI does not violate any policy or regulation related to the provision of Home Health Care. Upon OLC approval, the agency will then receive notification that the LOI was accepted, and the agency may go forward with their MIH or CP program.

Agencies completing the LOI may be subject to inspection by the OEMS to verify information contained within the LOI.

Should the agency MIH or CP plan serve to replace the agency's 911 response?

Absolutely not. The expectation of OEMS is that the applicant agency is able to respond to 100% of their 911 requests **prior** to consideration of an MIH or CP program. A MIH or CP program is designed to augment or supplement the agency's capabilities, but not to replace the agency's ability to respond to their 911 calls.

Is OEMS providing a pathway for an agency to be reimbursed or otherwise compensated for the provision of MIH or CP service?

No. OEMS will provide guidance, and will assist in facilitating discussion, but the role of the OEMS in the financial aspect of MIH-CP will be the same as it is for ground and air transports.

Will there be a requirement for specialized training or certification for an agency or their personnel in order for the agency to provide MIH or CP service?

No. The expectation of OEMS is for agencies and providers to function within the Virginia EMS Regulations pertaining to EMS agencies and providers. Providers are expected to remain within the scope of practice for their certification, and the agency is expected to stay within the scope of the level of their licensure.