

Pat Quinn, Governor LaMar Hasbrouck, MD, MPH, Director

422 South Fifth Street, Fourth Floor . Springfield, Illinois 62701-1824 . www.idph.state.il.us

MEMORANDUM

TO: EMS System Coordinators and TNS Course Coordinators

FROM: Jack Fleeharty, RN, EMTP, Division Chief, EMS and Highway Safety

DATE: July 9, 2012

SUBJECT: Licensure Fees, Renewal Fees, and the Introduction of the On-line Fee Payment System

Please be advised that starting in September 2012, individuals who apply for initial licensure or for renewal will be charged an EMS licensing fee as identified in the EMS and Trauma Center Code, Section 515.460(a-f), which became effective August 30, 2011. The Department will be issuing renewal notices this month for those applicants and will provide the individual with a PIN number and the address of the EMS website where he/she will find the on-line licensing and renewal link.

The renewal notice also directs the individual to notify their EMS System Coordinator or Trauma Nurse Course Coordinator that he/she is applying for renewal. The System or TNS Course Coordinator can then go into the EMS Licensing Data Base and verify the individual meets the requirements for renewal and enter the system authorization.

Another change on the renewal notice is a felony conviction statement. EMT's who report a felony conviction will not be able to complete their application on-line and will be required to contact the Department.

Provided are some EMS on-line system screenshots so EMS System Coordinators and TNS Course Coordinators will know what to expect. The on-line system will allow applicants or individuals renewing to do the following: Pay initial license fees, pay renewal license fees, pay late fees, and/or update address information.

Individuals who receive either initial notification of having passed a licensure exam or have received a license renewal notice will be able to access their records by using their confirmation number (PIN) or the last four digits of their social security number. Once an applicant accesses his/her record, he/she will verify his/her address, child support status, and felony conviction statement. After the required information is completed the individual will then be directed to an on-line fee payment page where he/she will be able to pay the required fee with a credit card. When the transaction is approved the individual will be provided with a confirmation page which can be printed for his/her personal records. Following the transaction, individuals will be directed to close their browser.

Persons without a debit/credit card or who wish to renew through regular procedures: Individuals need to complete their renewal forms and return them to IDPH, Division of EMS and Highway Safety, Attention Licensing, via regular mail with the fee enclosed. The individual will need to notify their EMS System Coordinator or Trauma Nurse Course Coordinator that he/she is applying for renewal. The System or TNS Course Coordinator can then go into the EMS Licensing Data Base and verify the individual meets the

requirements for renewal and enter the system authorization. IDPH will only accept an organization's/institution's check, certified check, cashier's check, bank money order, or postal money order. Personal checks will not be accepted and will be returned along with the renewal application.

Organization/Institution is paying for an individual's license fee or a group of individual license fees: The organization must include the following information: a list that identifies the name, license number, and the amount included/paid for each individual. The Department will return any organization's/institution's check without a list identifying the names and fees applicable for renewal or initial licensure. The organization must provide a copy of the licensee's completed renewal notice with the organization's information. IDPH will accept an organization's/institution's check, certified check, cashier's check, bank money order, or postal money order.

Duplicate licenses must be requested through the Department and are not available through the on-line process. Applicable fees may only be paid by organization/institution check, certified check, cashier's check, bank money order, or postal money order. Personal checks will not be accepted and will be returned.

Reciprocity applications will be handled through paper applications available on our EMS website utilizing the same process currently established. Applicable fees may only be paid by an organization's/institution's check, certified check, cashier's check, bank money order, or postal money order. Personal checks will not be accepted and will be returned.

Volunteer license fee waiver applications: EMS System Coordinators can request a waiver of the licensing fee for individual EMT's and First Responders who serve exclusively as a volunteer for units of local government or not-for-profit organizations that serve a service area with a population base of less than 5,000, by providing a waiver request to the Department. The Department will soon have a standardized, state-approved form available for distribution to the EMS systems.

Vehicle and Ambulance Provider License Information: The on-line fee payment system allows for vehicle service provider agencies to utilize a credit card to pay for ambulance license renewal fees. Vehicle service providers will be able to log onto the website and select the vehicle(s) that are due for renewal and pay the fee(s) for the vehicle(s) needing renewed. Vehicle inspections will still have to be completed and entered into the EMS Licensing System for the renewal of ambulance licensure to be completed. New or replacement vehicles cannot be paid via the on-line fee payment system.

System email notifications to EMS System Coordinators and TNS Course Coordinators

The Department is hereby requesting that all EMS System Coordinators and Trauma Course Coordinators <u>verify</u> with the Department a current email address* to receive EMS Licensing System Notifications, that will be generated when an individual selects his/her EMS System or TNS Program Hospital as the affiliation for renewing his/her license. Ideally, EMS Systems and Trauma Nurse Programs should establish a <u>permanent</u> email address for this notification purpose so that changes to the Coordinator position do not result in lost notifications. The <u>permanent</u> email address provided for verifications should include the system's name and system state number (an example of a viable email address might be NorthwestComm0907@NCH.org).

*Please contact <u>Amanda.D.Arnold@illinois.gov</u> to provide the email address verification for these notifications, as soon as possible.

Included are the following attachments:

Renewal notice that an individual will receive [the system will generate a name, PIN #, Level of Licensure, Renewal Fee, Due Date and Individual ID # (license #)].

Copy of ambulance (vehicle) renewal notice

Copy of the Administrative Code Section 515.460 Fees

A screen shot of the on-line initial licensing and license renewal screen available on the webpage

A screen shot of the Record Identification page an individual will use to access his/her records

Questions or concerns regarding this notification can be directed to your State Regional Coordinator or to the IDPH, Division of EMS and Highway Safety at 217-785-2080.



COMPLETED

Emergency Medical Services (EMS) Systems Renewal Notice/Child Support/Personal History Statement

SAMPLE

ON-LINE RENEWAL AND PAYMENT CAN BE MADE AT www.idph.state.il.us/ems.

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The following statements MUST be completed.	
☐ I am up-to-date with child support payments.	
☐ I am more than 30 days delinquent in complying with a co	ourt-ordered child support order.
☐ I do not have to pay child support.	
☐ I have NOT been convicted of a felony.	
☐ I HAVE been convicted of a felony.	
An additional fee and authorization for release of information	in your own words, of the circumstances surrounding the incident n must be submitted to the Department to obtain a criminal history ent agency. The release form and fee schedule can be found at
Date of Birth Social S	Security Number
Month Day Year	
Driver's License Number	Phone Number
	e application and all supporting documents submitted by me in are true, correct and complete. Failure to so certify shall result in
Signature	Date
with the appropriate fee, to the address provided below. Proof EMS System Coordinator or Trauma Nurse Specialist Course	, , , , , , , , , , , , , , , , , , ,
If you are an independent, this form and proof of continuing e	education hours MUST be submitted to the address below.
License renewal will not be processed until all in	formation and payment are completed and received.
Name/Address Change	Return to:
Name	Illinois Department of Public Health Division of EMS and Highway Safety
Address	Attention: Licensure Section 422 South Fifth Street, Third Floor Springfield, Illinois 62701

City, State, ZIP

SAMPLE



Emergency Medical Services (EMS) Systems
Ambulance License Renewal

Provider	Number:
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PIN:

Highest Level of Care:

Provide Any Address Changes Above

Submit Renewal Fees at Least Two (2) Weeks Prior to Expiration Date to Allow for Processing

License renewal of the vehicle(s) listed below is required prior to the lapse date indicated. Renewal(s) and payment may be made on-line at www.idph.state.il.us/ems. A fee of \$25 per vehicle is required prior to issuance of an Illinois Department of Public Health ambulance license. A fee of \$2,500 shall be submitted for all applicants with more than 100 vehicles.

Reminder: These are your annual relicensure fees. Any additional or replacement vehicle(s) will also require an additional \$25 fee to be submitted at the time added. No fee is charged for licenses issued for upgrades or downgrades to vehicle(s). A separate renewal notice will be sent for non-transport providers.

You will be receiving information from the Ambulance Compliance Section Chief regarding your inspection (s). If you have questions, please contact 217-785-2080.

<u>Vehicle Number</u>	Year	<u>Make</u>	<u>VIN</u>	Level of Care	Lapse Date
18		Ambulance			
		Ambulance			
		Ambulance			

Submit to: Illinois Department of Public Health Division of Accounting Services Validation Unit PO Box 4263 Springfield, Illinois 62708

Joint Committee on Administrative Rules

ADMINISTRATIVE CODE

TITLE 77: PUBLIC HEALTH CHAPTER I: DEPARTMENT OF PUBLIC HEALTH SUBCHAPTER f: EMERGENCY SERVICES AND HIGHWAY SAFETY PART 515 EMERGENCY MEDICAL SERVICES AND TRAUMA CENTER CODE SECTION 515.460 FEES

Section 515.460 Fees

- a) The following fees shall be submitted to the Department at the time of application for examination, initial licensure or certification, licensure or certification renewal, duplicate license, or reciprocity:
 - 1) EMT-B licensure: \$45
 - 2) EMT-B renewal: \$20
 - 3) EMT-B examination: \$20
 - 4) EMT-I licensure: \$45
 - 5) EMT-I renewal: \$30
 - 6) EMT-I examination: \$30
 - 7) EMT-P licensure: \$60
 - 8) EMT-P renewal: \$40
 - 9) EMT-P examination: \$40
 - 10) Trauma Nurse Specialist licensure: \$50
 - 11) Trauma Nurse Specialist renewal: \$25
 - 12) Trauma Nurse Specialist examination: \$25 (see Section 515.750(f))
 - 13) Emergency Communications Registered Nurse licensure: \$55
 - 14) Emergency Communications Registered Nurse renewal: \$20
 - 15) Emergency Medical Dispatcher licensure: \$30
 - 16) Emergency Medical Dispatcher renewal: \$20

- 17) Pre-Hospital RN licensure: \$30
- 18) Pre-Hospital RN renewal: \$20
- 19) Lead Instructor licensure: \$40
- 20) Lead Instructor renewal: \$20
- 21) First Responder licensure: \$55
- 22) First Responder renewal: \$20
- 23) Duplicate license: \$10
- 24) Reciprocity: \$50
- Fees for reinstatement of a license or certification will be equal to the amount of the initial license or certification fee.
- b) An EMT who exclusively serves as a volunteer for units of local government or a not-for-profit organization that serves a service area with a population base of less than 5,000 may submit an application to the Department for waiver of these fees on a form prescribed by the Department. (Section 3.50(d)(9) of the Act)
- c) A First Responder who exclusively serves as a volunteer for units of local government or a not-for-profit organization that serves a service area with a population base of less than 5,000 may submit an application to the Department for a waiver of these fees on a form prescribed by the Department. (Section 3.60(b)(7) of the Act)
- d) Fees shall be paid by certified check or money order made payable to the Department. Personal checks or cash will not be accepted.
- e) If a candidate does not achieve a passing grade on the written examination, the fee for the retest is the same as for initial examination.
- f) All fees submitted for licensure examinations are not refundable.

(Source: Added at 35 Ill. Reg. 15278, effective August 30, 2011)

Illinois Department of Public Health

Emergency Medical Services (EMS) Systems Licensing

Welcome to the Illinois Department of Public Health, Division of EMS and Highway Safety's website.

Individual licensees may utilize this site to pay initial EMS licensing fees, pay EMS renewal licensing fees,

update address information, and/or for Ambulance Providers to pay Vehicle Fees. Please contact the Division of EMS and Highway Safety at 217-785-2080 or at DPH.EMTLIC@illinois.gov with questions or for more information.

Please click one of the following links:

For EMS Licensees:

Pay INITIAL License Fee(s)

Pay RENEWAL License Fee(s) and RENEW my License

Update Address Information

For Ambulance Service Providers:

Pay Vehicle Fees

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Illinois Department of Public Health

Emergency Medical Services (EMS) Systems Licensing

Welcome to the Illinois Department of Public Health, Division of EMS and Highway Safety's on-line licensing site. Licensees may utilize this site if all criteria are met as outlined in the letter accompanying your license renewal notice. Please contact the Division of EMS and Highway Safety at 217-785-2080 or at <u>DPH.EMTLIC@illinois.gov</u>with questions or for more information.

NOTICE:If you are renewing as an "Independent", you cannot renew online. Please contact the Division at 217-785-2080 or at DPH.EMTLIC@illinois.govwith questions or for more information.

NOTICE:If you have ever been convicted of a felony, you cannot renew online. Please contact the Division at 217-785-2080 or at DPH.EMTLIC@illinois.govwith questions or for more information.

Please enter the following information:

License Nu (printed on	mber your renewal for	m) *	
Online Ren (printed on	ewal PIN your renewal for	rm) *	urayinati, in the SE, and
Last 4 digit Number	s of Social Securi	ty	
	- 112 L.M - 127		
	Back	Login	

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