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Volume: XXXVI Issue: 17 Publication date: 9/9/2025 Number of pages: 1 (ALD Use Only) Sequence No. 84.15

Issuing agency name and address: NM Department of Health, 1190 St. Francis Dr, Suite N-4095, P.O. Box 26110, Santa Fe NM 87502

Agency DFA code: 665

Contact person's name: Christopher Woodward

Phone number: 505-690-5987

E-mail address: chris.woodward@doh.nm.gov

Type of rule action:

New [ ] Amendment [ ] Repeal [✓] Emergency [ ] Renumber [ ]

(ALD Use) Recent filing date: 11/30/2017

Title number: 7 Title name: Health

Chapter number: 27 Chapter name: Emergency Medical Services

Part number: 2 Part name: Licensing of Emergency Medical Services Personnel

Amendment description (If filing an amendment):

Amendment's NMAC citation (If filing an amendment):

Are there any materials incorporated by reference? Yes [ ] No [X]

Please list attachments or Internet sites if applicable.

If materials are attached, has copyright permission been received? Yes [ ] No [ ] Public domain [ ]

Specific statutory or other authority authorizing rulemaking:

9-7-6(E) NMSA 1978; 24-10B-4 NMSA 1978; 24-10B-5 NMSA 1978

Notice date(s): 5/6/2025

Hearing date(s): 6/6/2025

Rule adoption date: 8/26/2025

Rule effective date: 9/9/2025

Concise Explanatory Statement For Rulemaking Adoption:

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Findings required for rulemaking adoption:

Findings MUST include:

- Reasons for adopting rule, including any findings otherwise required by law of the agency, and a summary of any independent analysis done by the agency;

- Reasons for any change between the published proposed rule and the final rule; and

- Reasons for not accepting substantive arguments made through public comment.

See Statement of Reasons for Adoption, attached.

Issuing authority (If delegated, authority letter must be on file with ALD):

Name:

Christopher D Woodward

Check if authority has been delegated

X

Title:

Assistant General Counsel

Signature: (BLACK ink only OR Digital Signature)

Christopher Woodward

Digitally signed by Christopher Woodward
Date: 2025.08.28 11:46:27 -06'00'

Date signed:

8/28/2025

STATE OF NEW MEXICO
BEFORE THE SECRETARY OF HEALTH

IN THE MATTER OF PROPOSED REPEAL AND REPLACEMENT OF 7.27.2, 7.27.4, 7.27.5, 7.27.6, AND 7.27.11 NMAC

STATEMENT OF REASONS FOR ADOPTION OF PROPOSED REPEAL AND REPLACEMENT OF 7.27.2, 7.27.4, 7.27.5, 7.27.6, AND 7.27.11 NMAC

The Cabinet Secretary for the New Mexico Department of Health, Gina DeBlassie ("Secretary"), adopts the proposed repeal and replacement of parts 7.27.2, 7.27.4, 7.27.5, 7.27.6, and 7.27.11 NMAC, for the reasons stated below. This decision is based on the rulemaking record in this matter, which includes Exhibits 1 through 24, the recording of the hearing, and the Report and Recommendation of the Hearing Officer, Jared Najjar, dated July 14, 2025.

In support of this action, the Secretary finds the following:

1. The Department of Health ("Department") is authorized to promulgate regulations as may be necessary to carry out the duties of the Department and its divisions. NMSA 1978, Section 9-7-6(E).

2. Pursuant to the Emergency Medical Services Act (EMS Act) at NMSA 1978, § 24-10B-5, the Department is responsible for adopting licensing requirements for all persons who provide emergency medical services within the state of New Mexico, irrespective of whether the services are remunerated.

3. Pursuant to the EMS Act at NMSA 1978, § 24-10B-4, the Department is also responsible for: adoption of rules for emergency medical services medical direction upon the recommendation of the medical direction committee; approval of continuing

education programs for emergency medical services personnel; adoption of rules pertaining to the training and licensure of emergency medical dispatchers and their instructors; adoption of rules, based upon the recommendations of the air transport advisory committee, for the certification of air ambulance services; and adoption of rules pertaining to authorization of providers to honor advance directives, such as emergency medical services do not resuscitate forms, to withhold or terminate care in certain pre-hospital or interfacility circumstances.

4. By letter dated April 14, 2025, the Secretary designated Mr. Najjar to serve as hearing officer for the purpose of conducting the hearing and submitting a recommendation regarding the proposed rule. Exhibit 22.

5. The purpose of the proposed repeal and replacement of rules 7.27.2, 7.27.5, 7.27.6, and 7.27.11 NMAC is to implement the EMS Act, NMSA 1978, § 24-10B-1 *et seq.*, by adopting rules concerning licensing of emergency medical services personnel (7.27.2 NMAC) and their scopes of practice (7.27.11 NMAC); rules concerning the certification of air ambulance services (7.27.5 NMAC); and rules concerning EMS advance directives (7.27.6 NMAC).

6. The purpose of the proposed repeal and replacement of rule 7.27.4 NMAC is to implement the purpose of the EMS Fund Act, NMSA 24-10A-1 *et seq.*, by adopting rules regulating programs under that statute.

7. Notice of the June 6, 2025 hearing concerning the proposed rule replacements was provided to the public in accordance with the Department of Health Act at NMSA 1978, Section 9-7-6(E), and the State Rules Act at NMSA 1978, § 14-4-5.2, which included publication in the Albuquerque Journal newspaper on May 6, 2025, and

publication in the New Mexico Register on May 6, 2025. *See* Exhibit 20 (Affidavit of Publication in the Albuquerque Journal); Exhibit 21 (Affidavit of Publication in the NM Register).

8. The proposed rule was posted on the New Mexico Sunshine Portal website at http://statenm.secure.force.com/public/SSP_RuleHearingSearchPublic in accordance with NMSA 1978, § 14-4-5.4(A). *See* Exhibit 23 (Affidavit of Notice to the Public).

9. The proposed rule was also posted on the Department of Health website at http://www.nmhealth.org/about/asd/cmo/rules/, and an Internet link to that website was included within the published notice of rulemaking in accordance with NMSA 1978, § 14-4-5.2(C). *See* Exhibit 23 (Affidavit of Notice to the Public).

10. A public rule hearing was held via the Internet-based video conference platform Microsoft Teams on June 6, 2025 in accordance with NMSA 1978, Section 9-7-6(E).

11. Members of the public were afforded the opportunity to submit data, views, and arguments on the proposed rule orally and in writing, in accordance with NMSA 1978, Section 14-4-5.3, and those comments were received by the Hearing Officer until the close of the rule hearing.

12. Oral comments were received from the public during the hearing, and written comments from the public were entered into the record of the hearing as Exhibit 24.

13. The following substantive modifications were made to the proposed rule text after the rule hearing, based on public comments:

Rule (NMAC)	Location	Edit/Adjustment	Justification
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		"processes"	connotation than intended by this usage

14. The Department received a comment on behalf of the EMS Medical Direction Committee that recommended against the amendment to the Reciprocity rule 7.27.2.10(A) NMAC, which will allow an individual licensed in another state to apply for reciprocity if they meet the requirement (among various others) that, "if the applicant has joined an EMS agency as a volunteer or employee and this is verified by agency leadership, the agency's medical director may verify the applicant's competency in lieu of the applicant taking a bureau exam".

15. The Department believes that this amendment is appropriate, and that it could prove beneficial to EMS services and reciprocity applicants. The text was proposed by the Statewide Emergency Medical Services Advisory Committee to expedite the reciprocity application process. Although concerns were raised regarding potential liability or legal issues that might arise, this text would not *require* medical directors to verify an applicant's competency, but would instead allow them to do so. A medical director who is uncomfortable verifying an applicant's competency may opt against it.

16. The Department received a comment regarding 7.27.5.7 NMAC, proposing that the definition of "critical care provider" be revised to include "respiratory therapists". To address this, and rather than editing the definition of "critical care provider", the Department revised the definition of "critical care" at 7.27.5.7 NMAC to include respiratory therapist as an example of an "additional provider licensed at or above the ALS level of care or specifically trained in the area of care required".

17. The Department received multiple public comments regarding 7.27.5.15(C)(10) NMAC, proposing that the Air Medical Transport Advisory Committee (AMTAC) make recommendations on standards for the Regional Trauma Advisory Councils (RETRACs) concerning air ambulance protocols, or proposing that the AMTAC should exclusively evaluate instances of alleged noncompliance by air ambulance services, rather than RETRACs.

18. In response, the Department revised 7.27.2.15(C)(10) NMAC to state, "Air ambulance certification may be denied, suspended, or revoked, or subject to other disciplinary action, based on the following grounds: ... (10) failure of a service to comply with a rotor wing response protocol or the fixed/rotor wing inter-facility transportation protocol *developed by the air medical transport advisory committee and implemented by a regional trauma advisory committee*, or any other bureau protocol or patient care-related policy as outlined in these rules". (Emphasis added.) This text was included to acknowledge the respective roles of AMTAC and the RETRACs.

19. The Department received various public comments asserting that portions of the air ambulance enforcement rule section 7.27.5.15 NMAC were either too vague, too broad, or left too much discretion to the agency. However, the Department drafted those rule provisions broadly, to provide sufficient discretion to the agency to render case-by-case determinations.

20. For example, whether the conduct of air medical transport personnel constitutes a "significant threat to the health or safety of individuals receiving emergency care", pursuant to 7.27.5.15(C)(19) NMAC, will vary depending on the facts and circumstances of each case. The Department cannot specify in the rule every scenario that could

reasonably necessitate intervention by the EMS Bureau; and according to the text of the rule must be broad to enable the agency sufficient discretion.

21. Similarly, whether repeated delays in transport of critical patients by an air medical transport provider warrants enforcement action under 7.27.5.15(B)(19)(b) NMAC will vary depending on individual facts and circumstances. The text as written provides NMDOH discretion to assess each incident according to individual facts and circumstances.

22. The Department received public comment regarding 7.27.5.15(D)(3) NMAC, requesting that the Department not deem air ambulance services ultimately responsible for the actions of their staff. Here again, the agency has discretion in determining whether to pursue disciplinary action in each case; but the Department believes that it is important that it be able to hold air ambulance services accountable for the actions of their staff.

23. The Department received public comment regarding the air ambulance hearings rule section 7.27.5.15(H) NMAC, expressing concern that a delay of up to 20 days leading up to a hearing on an immediate suspension would be harmful to licensees. While the Department understands the concern raised, it believes that the 20-day period is reasonable, and that a hearing conducted within 20 days would be sufficiently prompt.

24. This public comment included a request that the air ambulance service be allowed to continue its operations pending the outcome of a hearing. However, allowing continued operations in this situation would mean that the Department could never immediately suspend an air ambulance service's license. The Department must reserve the ability to immediately suspend a license if circumstances warrant it, particularly when

an air ambulance service's continued operation would present a threat to the health and safety of the public.

25. The Department received public comments from the AMTAC and others, suggesting that the AMTAC could establish a Performance Improvement Committee (PIC) to play a role in evaluating the performance of a licensed air medical transport service. The Department did not include any revisions to the rule based on these proposals, firstly because the Department does not agree that the RETRAC should be divested of its role in evaluating the performance of air medical transport providers; but also because any such subcommittee of the RETRAC may be created outside of the rule.

26. The Department received comments concerning the Air Ambulance Licensing rule 7.27.5 NMAC, alleging that portions of the rule are preempted by the federal Airline Deregulation Act (ADA) of 1978, 49 U.S.C. 41713 *et seq*. The Department disagrees with those comments.

27. The ADA at 49 U.S.C. 41713 states in pertinent part that "a State, political subdivision of a State, or political authority of at least 2 States may not enact or enforce a law, regulation, or other provision having the force and effect of law related to a price, route, or service of an air carrier that may provide air transportation under this subpart."

28. The provisions of 7.27.5 NMAC do not "relate[] to a price, route, or service of an air carrier" within the terms of 49 U.S.C. 41713, because they do not purport to regulate prices, routes, or types of services that may be offered by an air ambulance service. For this reason, the rule is not preempted.

29. The Secretary finds that the finished rules fall within the scope of the rulemaking proceeding, are a logical outgrowth of the notice given and comment received, and that

members of the public were afforded a fair opportunity to present their views on the contents of the final plans. *See* 1.24.25.14(C) NMAC; *see also* N.M. Att'y Gen. Op. 87-59 (1987) (*citing BASF Wyandotte Corp. v. Costle*, 598 F.2d 637, 642 (1st Cir. 1979)); *see also Wylie Bros. Contracting Co. v. Albuquerque-Bernalillo Cty. Air Quality Control Bd.*, 1969-NMCA-089, ¶ 39, 80 N.M. 633, 642.

30. The Secretary finds that the Hearing Officer has appropriately considered the proposed rules and the public comments received, and finds that the recommendations of the Hearing Officer are reasonable and appropriate; and the Secretary adopts the Hearing Officer's recommendations and incorporates the Hearing Officer's Report and Recommendation by this reference.

31. The Secretary finds that the proposed rules are consistent with the statutory purposes of the New Mexico Department of Health, including but not limited to those expressed in the Department of Health Act, NMSA 1978, Section 9-7-3; the Emergency Medical Services Act, NMSA 1978, Section 24-10B-1 through -13; and the EMS Fund Act, NMSA 1978, Section 24-10A-1 through -10.

32. The Secretary further finds that the rule promulgation process satisfied the requirements of the State Rules Act, NMSA 14-4-1 through -11 and the New Mexico Attorney General's Default Procedural Rule for Rulemaking at 1.24.25 NMAC.

33. The Secretary has familiarized herself with the rulemaking record, and finds that the proposed rules are appropriate and consistent with the authorizing law; and the proposed repeal and replacement of rules 7.27.2, 7.27.4, 7.27.5, 7.27.6, and 7.27.11 NMAC is hereby adopted.

NEW MEXICO DEPARTMENT OF HEALTH

Signed by:
Gina DeBlassie
2B5F58D60AD7441...

Gina DeBlassie
Cabinet Secretary

Aug 26, 2025 | 9:46 AM MDT

Date

The New Mexico Department of Health approved the repeal of its rule 7.27.2 NMAC - Licensing of Emergency Medical Services Personnel (filed 11/30/2017) and replaced it with 7.27.2 NMAC - Licensing of Emergency Medical Services Personnel adopted on 8/26/2025, and effective 9/9/2025.

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Volume: XXXVI Issue: 17 Publication date: 9/9/2025 Number of pages: 37 (ALD Use Only) Sequence No. 84.16

Issuing agency name and address: NM Department of Health, 1190 St. Francis Dr, Suite N-4095, P.O. Box 26110, Santa Fe NM 87502

Agency DFA code: 665

Contact person's name: Christopher Woodward

Phone number: 505-690-5987

E-mail address: chris.woodward@doh.nm.gov

Type of rule action:

New [✓] Amendment [ ] Repeal [ ] Emergency [ ] Renumber [ ]

(ALD Use) Recent filing date: 11/30/2017

Title number: 7 Title name: Health

Chapter number: 27 Chapter name: Emergency Medical Services

Part number: 2 Part name: Licensing of Emergency Medical Services Personnel

Amendment description (If filing an amendment):

Amendment's NMAC citation (If filing an amendment):

Are there any materials incorporated by reference?

Yes [ ] No [X]

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9-7-6(E) NMSA 1978; 24-10B-4 NMSA 1978; 24-10B-5 NMSA 1978

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Concise Explanatory Statement For Rulemaking Adoption:

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- Reasons for adopting rule, including any findings otherwise required by law of the agency, and a summary of any independent analysis done by the agency;

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- Reasons for not accepting substantive arguments made through public comment.

See Statement of Reasons for Adoption, attached.

Issuing authority (If delegated, authority letter must be on file with ALD):
Name:

Christopher D Woodward

Check if authority has been delegated

X

Title:

Assistant General Counsel

Signature: (BLACK ink only OR Digital Signature)

Christopher Woodward

Digitally signed by Christopher Woodward
Date: 2025.08.28 11:45:33 -06'00'

Date signed:

8/28/2025

STATE OF NEW MEXICO
BEFORE THE SECRETARY OF HEALTH

IN THE MATTER OF PROPOSED REPEAL AND REPLACEMENT OF 7.27.2, 7.27.4, 7.27.5, 7.27.6, AND 7.27.11 NMAC

STATEMENT OF REASONS FOR ADOPTION OF PROPOSED REPEAL AND REPLACEMENT OF 7.27.2, 7.27.4, 7.27.5, 7.27.6, AND 7.27.11 NMAC

The Cabinet Secretary for the New Mexico Department of Health, Gina DeBlassie ("Secretary"), adopts the proposed repeal and replacement of parts 7.27.2, 7.27.4, 7.27.5, 7.27.6, and 7.27.11 NMAC, for the reasons stated below. This decision is based on the rulemaking record in this matter, which includes Exhibits 1 through 24, the recording of the hearing, and the Report and Recommendation of the Hearing Officer, Jared Najjar, dated July 14, 2025.

In support of this action, the Secretary finds the following:

1. The Department of Health ("Department") is authorized to promulgate regulations as may be necessary to carry out the duties of the Department and its divisions. NMSA 1978, Section 9-7-6(E).

2. Pursuant to the Emergency Medical Services Act (EMS Act) at NMSA 1978, § 24-10B-5, the Department is responsible for adopting licensing requirements for all persons who provide emergency medical services within the state of New Mexico, irrespective of whether the services are remunerated.

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4. By letter dated April 14, 2025, the Secretary designated Mr. Najjar to serve as hearing officer for the purpose of conducting the hearing and submitting a recommendation regarding the proposed rule. Exhibit 22.

5. The purpose of the proposed repeal and replacement of rules 7.27.2, 7.27.5, 7.27.6, and 7.27.11 NMAC is to implement the EMS Act, NMSA 1978, § 24-10B-1 *et seq.*, by adopting rules concerning licensing of emergency medical services personnel (7.27.2 NMAC) and their scopes of practice (7.27.11 NMAC); rules concerning the certification of air ambulance services (7.27.5 NMAC); and rules concerning EMS advance directives (7.27.6 NMAC).

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21. Similarly, whether repeated delays in transport of critical patients by an air medical transport provider warrants enforcement action under 7.27.5.15(B)(19)(b) NMAC will vary depending on individual facts and circumstances. The text as written provides NMDOH discretion to assess each incident according to individual facts and circumstances.

22. The Department received public comment regarding 7.27.5.15(D)(3) NMAC, requesting that the Department not deem air ambulance services ultimately responsible for the actions of their staff. Here again, the agency has discretion in determining whether to pursue disciplinary action in each case; but the Department believes that it is important that it be able to hold air ambulance services accountable for the actions of their staff.

23. The Department received public comment regarding the air ambulance hearings rule section 7.27.5.15(H) NMAC, expressing concern that a delay of up to 20 days leading up to a hearing on an immediate suspension would be harmful to licensees. While the Department understands the concern raised, it believes that the 20-day period is reasonable, and that a hearing conducted within 20 days would be sufficiently prompt.

24. This public comment included a request that the air ambulance service be allowed to continue its operations pending the outcome of a hearing. However, allowing continued operations in this situation would mean that the Department could never immediately suspend an air ambulance service's license. The Department must reserve the ability to immediately suspend a license if circumstances warrant it, particularly when

an air ambulance service's continued operation would present a threat to the health and safety of the public.

25. The Department received public comments from the AMTAC and others, suggesting that the AMTAC could establish a Performance Improvement Committee (PIC) to play a role in evaluating the performance of a licensed air medical transport service. The Department did not include any revisions to the rule based on these proposals, firstly because the Department does not agree that the RETRAC should be divested of its role in evaluating the performance of air medical transport providers; but also because any such subcommittee of the RETRAC may be created outside of the rule.

26. The Department received comments concerning the Air Ambulance Licensing rule 7.27.5 NMAC, alleging that portions of the rule are preempted by the federal Airline Deregulation Act (ADA) of 1978, 49 U.S.C. 41713 *et seq*. The Department disagrees with those comments.

27. The ADA at 49 U.S.C. 41713 states in pertinent part that "a State, political subdivision of a State, or political authority of at least 2 States may not enact or enforce a law, regulation, or other provision having the force and effect of law related to a price, route, or service of an air carrier that may provide air transportation under this subpart."

28. The provisions of 7.27.5 NMAC do not "relate[] to a price, route, or service of an air carrier" within the terms of 49 U.S.C. 41713, because they do not purport to regulate prices, routes, or types of services that may be offered by an air ambulance service. For this reason, the rule is not preempted.

29. The Secretary finds that the finished rules fall within the scope of the rulemaking proceeding, are a logical outgrowth of the notice given and comment received, and that

members of the public were afforded a fair opportunity to present their views on the contents of the final plans. *See* 1.24.25.14(C) NMAC; *see also* N.M. Att'y Gen. Op. 87-59 (1987) (*citing BASF Wyandotte Corp. v. Costle*, 598 F.2d 637, 642 (1st Cir. 1979)); *see also Wylie Bros. Contracting Co. v. Albuquerque-Bernalillo Cty. Air Quality Control Bd.*, 1969-NMCA-089, ¶ 39, 80 N.M. 633, 642.

30. The Secretary finds that the Hearing Officer has appropriately considered the proposed rules and the public comments received, and finds that the recommendations of the Hearing Officer are reasonable and appropriate; and the Secretary adopts the Hearing Officer's recommendations and incorporates the Hearing Officer's Report and Recommendation by this reference.

31. The Secretary finds that the proposed rules are consistent with the statutory purposes of the New Mexico Department of Health, including but not limited to those expressed in the Department of Health Act, NMSA 1978, Section 9-7-3; the Emergency Medical Services Act, NMSA 1978, Section 24-10B-1 through -13; and the EMS Fund Act, NMSA 1978, Section 24-10A-1 through -10.

32. The Secretary further finds that the rule promulgation process satisfied the requirements of the State Rules Act, NMSA 14-4-1 through -11 and the New Mexico Attorney General's Default Procedural Rule for Rulemaking at 1.24.25 NMAC.

33. The Secretary has familiarized herself with the rulemaking record, and finds that the proposed rules are appropriate and consistent with the authorizing law; and the proposed repeal and replacement of rules 7.27.2, 7.27.4, 7.27.5, 7.27.6, and 7.27.11 NMAC is hereby adopted.

NEW MEXICO DEPARTMENT OF HEALTH

Signed by:
Gina DeBlassie
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Gina DeBlassie
Cabinet Secretary

Aug 26, 2025 | 9:46 AM MDT

Date

TITLE 7 HEALTH
CHAPTER 27 EMERGENCY MEDICAL SERVICES
PART 2 LICENSING OF EMERGENCY MEDICAL SERVICES PERSONNEL

7.27.2.1 ISSUING AGENCY: New Mexico department of health (DOH), emergency medical systems bureau (EMSB).
[7.27.2.1 NMAC - Rp, 7.27.2.1 NMAC, 9/9/2025]

7.27.2.2 SCOPE: These rules apply to New Mexico emergency medical services, including the service directors and medical directors of those services; approved New Mexico EMS education programs and graduates of approved New Mexico EMS education programs; New Mexico licensed EMS personnel including those previously licensed; persons trained, certified, or licensed in another state or territory seeking to acquire licensure in New Mexico; EMS licensing commission; individuals certified with the national registry of emergency medical technicians; and any other entity associated with the licensing of emergency medical services personnel in New Mexico.
[7.27.2.2 NMAC - Rp, 7.27.2.2 NMAC, 9/9/2025]

7.27.2.3 STATUTORY AUTHORITY: These rules are promulgated pursuant to the following statutory authorities: the New Mexico Department of Health Act, Subsection E of Section 9-7-6 NMSA 1978, which authorizes the secretary of the department of health to "make and adopt such reasonable and procedural rules and regulations as may be necessary to carry out the duties of the department and its divisions"; the Emergency Medical Services Act, Subsection A of Section 24-10B-5 NMSA 1978, which authorizes the department to adopt and enforce licensure requirements by regulation; and Paragraph (3) of Subsection B of Section 24-10B-5 NMSA 1978, which authorizes the department to establish a schedule of reasonable fees for application, examination, licensure and regular renewal thereof.

A. Administration: Administration and enforcement of these rules is the responsibility of the emergency medical systems bureau of the center for health protection, public health division, department of health.

B. Guidelines: In the absence of specific direction in the law or these rules as to the standard of practice, the current national standard for emergency cardiac care (ECC), the national highway traffic safety administration of the United States department of transportation standard curriculum, and the EMT code of ethics, as adopted in 1978 by the national association of emergency medical technicians, shall serve as guidelines.

C. Use of certain terms prohibited: The use of "licensed emergency medical dispatcher", "licensed emergency medical dispatch instructor", "licensed emergency medical services first responder", "licensed emergency medical technician (EMT)-basic", "licensed EMT-intermediate", or "licensed EMT-paramedic", or display of the "star of life" except as allowed in the United States department of transportation (US-DOT) trademark specifications, or similar terms or emblems connoting expertise in basic or advanced life support by any person not licensed hereunder is hereby prohibited. This includes use of the graphic utilized by the bureau as the state patch and emblem of New Mexico EMS. See Emergency Medical Services Act, Paragraph (1) of Subsection C of 24-10B-5 NMSA 1978.
[7.27.2.3 NMAC - Rp, 7.27.2.3 NMAC, 9/9/2025]

7.27.2.4 DURATION: Permanent.
[7.27.2.4 NMAC - Rp, 7.27.2.4 NMAC, 9/9/2025]

7.27.2.5 EFFECTIVE DATE: September 9, 2025, unless a later date is cited at the end of a section.
[7.27.2.5 NMAC - Rp, 7.27.2.5 NMAC, 9/9/2025]

7.27.2.6 OBJECTIVE: These rules will inform the emergency medical services community of licensure requirements for emergency medical services personnel. It is the purpose of these rules to provide for the licensure of emergency medical dispatchers, emergency medical dispatch-instructors, emergency medical services first responders, and emergency medical technicians, and to assist in the provision of a comprehensive system of emergency medical services in the state of New Mexico.
[7.27.2.6 NMAC - Rp, 7.27.2.6 NMAC, 9/9/2025]

7.27.2.7 DEFINITIONS:

A. Definitions beginning with "A":

(1) **"Academy"** means a separately funded emergency medical services education program administered through the department of emergency medicine of the university of New Mexico school of medicine.

(2) **"Act"** means the Emergency Medical Services Act, Section 24-10B-1, *et seq.*, NMSA 1978.

(3) **"Advance directive"** means a written instruction, such as a living will, durable power of attorney for health care, or emergency medical services do not resuscitate form recognizable under state law and relating to the provision of health care when an individual is incapacitated.

(4) **"Advisory committee"** means the statewide emergency medical services advisory committee appointed by the secretary of health.

(5) **"Ambulance service"** means any provider of ambulance service subject to the jurisdiction of the department of health pursuant to and subject to the jurisdiction of the New Mexico department of transportation, pursuant to the Ambulance Standards Act, Section 65-6-1, *et seq.*, NMSA 1978, Article XI of the New Mexico Constitution, the Municipal Transit Law Section 3-52-1, *et seq.*, NMSA 1978, and other laws.

(6) **"Applicant"** means a person who has indicated an intention to gain licensure as an EMS first responder, emergency medical dispatcher, emergency medical dispatcher instructor, or an EMT in the state of New Mexico, as evidenced by submission of the proper fees, documentation, and bureau approved application form.

(7) **"Approved emergency medical services education program"** means an emergency medical services education program that is sponsored by a post-secondary educational institution, accredited by a national educational accrediting organization for emergency medical services or active in the accreditation process and is approved by the joint organization on education committee and participates in the joint organization on education committee.

B. Definitions beginning with "B":

(1) **"Basic emergency medical technician"** or **"EMT-B"** means a provider who has been licensed by the department to provide patient care according to the current scopes of practice.

(2) **"Bureau"** means the emergency medical systems bureau of the center for health protection of the New Mexico department of health.

(3) **"Bureau approved"** means any course, form, or official document that has received the approval of the bureau for use in an education or licensure context.

C. Definitions beginning with "C":

(1) **"Cardio-pulmonary resuscitation (CPR)"** means training required for licensure that meets the intent of the current national emergency cardiac care (ECC) guidelines for professional rescuers, as approved by the bureau.

(2) **"Certified emergency medical service"** means an organization that meets minimum standards to provide emergency services and is approved by the bureau, including emergency medical dispatch agencies, pre-hospital or inter-facility care services, and special event services organized to provide emergency medical services.

(3) **"Contact hour"** means a unit of measurement of 60 minutes of bureau-approved organized learning experience which is designed to meet educational objectives for continuing education.

(4) **"Commission"** means the New Mexico emergency medical services licensing commission appointed by the secretary of health.

(5) **"Continuing education"** or **"CE"** means EMS education that is approved by the bureau and is required every two years for renewal of licensure.

(6) **"Controlled substance"** means a controlled substance as defined in the New Mexico Controlled Substance Act, Section 30-31-2 NMSA 1978.

(7) **"Conviction"** means an adjudication of guilt, and does not include a deferred adjudication that results in dismissal of a charge or an adjudication that is expunged.

(8) **"Curriculum"** means a program of study utilizing approved minimum curricula content based on the national standard curriculum for EMS as published by the national highway and traffic safety administration (NHTSA) and approved by the joint organization on education for formal education courses required for EMS first responder, EMT-basic, EMT-intermediate, and EMT-paramedic.

D. Definitions beginning with "D":

(1) **"Department"** means the New Mexico department of health (DOH).

(2) **"Disqualifying criminal offense"** means a criminal offense identified in Section 7.27.2.18 NMAC.

(3) **"Distance education - asynchronous", also known as distributive education** means a method of delivering training and education that does not require an educator and student to interact in real time.

This may include computer-based-training and education, self-study modules, recorded broadcasts via satellite, internet, or other media, and other methods of out-of-classroom didactic education that includes an evaluation component.

(4) **"Distance education - synchronous"** means a method of delivering training and education via electronic media that links an educator and students, allowing them to interact in real time despite being in different places. This includes live, instructor interactive satellite broadcasts, or webcasts that allow for live video, audio, or other immediate feedback, and communication between the instructor and the students.

E. **Definitions beginning with "E":**

(1) **"Emergency medical dispatcher"** or **"EMD"** means a person who is trained and licensed pursuant to Subsection G of Section 24-10B-4 NMSA 1978 to receive calls for emergency medical assistance, provide pre-arrival medical instructions, dispatch emergency medical assistance and coordinate its response.

(2) **"Emergency medical dispatch agency"** or **"EMDA"** means any organization, or a combination of organizations working cooperatively, that routinely accepts calls for emergency medical assistance and employs emergency medical dispatch priority reference system (EMDPRS) techniques.

(3) **"Emergency medical dispatch priority reference system"** or **"EMDPRS"** means a medically approved reference system used by an emergency medical dispatch agency (EMDA) to dispatch aid to medical emergencies, which includes systematized caller interrogation; systematized pre-arrival instructions to the caller based upon protocols matching the dispatcher's evaluation of injury or illness severity; and prioritized vehicle response.

(4) **"Emergency medical services"** or **"EMS"** means the services rendered by licensed providers in response to an individual's need for immediate medical care to prevent loss of life or aggravation of physical or psychological illness or injury.

(5) **"Emergency medical services first responder"** or **"EMSFR"** means a person who is licensed by the department, and who functions within the emergency medical services system to provide initial emergency aid according to the current scopes of practice.

(6) **"Emergency medical services instructor/coordinator"** or **"EMT-I/C"** means an individual who has met the qualifications of the joint organization on education and has been approved by an EMS education institution to conduct and instruct EMS education programs.

(7) **"Emergency medical technician"** or **"EMT"** means a provider who has been licensed by the department to provide patient care according to the current scopes of practice.

(8) **"Examination attempt"** means an attempt to successfully complete the bureau approved EMS licensing examination. An attempt constitutes taking a written or practical examination. Retests of either a written or practical examination are considered an examination attempt.

F. **Definitions beginning with "F": Fully licensed"** means an individual licensed to practice medical patient care at a specified level.

G. **Definitions beginning with "G": "Graduate license"** means a license issued to graduates of a bureau approved EMS education program used for performing EMS duties under supervision and direct observation prior to full licensure. The graduate license shall be valid for a period of up to six months from the date of course completion or until failure of any part of the bureau approved licensing examination.

H. **Definitions beginning with "H": [RESERVED]**

I. **Definitions beginning with "I":**

(1) **"Immediate suspension"** means (except in reference to summary suspension) the immediate suspension of an EMS provider license that is made pursuant to a preliminary injunction, in accordance with this rule and the Uniform Licensing Act at Subsection A of Section 61-1-25.1 NMSA 1978.

(2) **"Initial licensure"** means the first time a person is licensed in New Mexico as an EMD, EMD instructor, EMS first responder, EMT, or subsequent licensure of a previously licensed New Mexico EMT, who has retaken a full curriculum or accomplished re-entry procedures to regain an expired license.

(3) **"Intermediate emergency medical technician"** or **"EMT-I"** means a provider who has been licensed by the department to provide patient care according to the current scopes of practice.

J. **Definitions beginning with "J": [RESERVED]**

K. **Definitions beginning with "K": [RESERVED]**

L. **Definitions beginning with "L": "License"** means a full, temporary or graduate license issued by the department to all EMDs, first responders, and EMTs pursuant to the Emergency Medical Services Act, Section 24-10B-5 NMSA 1978.

M. **Definitions beginning with "M":**

(1) **"Medical control"** means supervision provided by or under the direction of physicians to providers by written protocols or direct communication.

(2) **"Medical direction"** means guidance or supervision provided by a physician to a provider or emergency medical services system and which includes authority over and responsibility for emergency medical dispatch, direct patient care and transport of patients, arrangements for medical control and all other aspects of patient care delivered by a provider.

(3) **"Medical direction committee"** means a committee of physicians and EMTs, appointed by the secretary of health to advise the bureau on all matters relating to medical control and medical direction.

(4) **"Medical director"** means a physician who is responsible for all aspects of patient care provided by an EMS system or EMS provider service, in accordance with 7.27.3 NMAC.

(5) **"Moral turpitude"** means conduct contrary to justice, honesty, modesty or good morals including such acts as fraud, theft, sexual assault, and other similar behavior.

N. Definitions beginning with "N": "National registry" means the national registry of emergency medical technicians based in Columbus, Ohio.

O. Definitions beginning with "O":

(1) **"Offline medical control"** means performing EMS actions or medication administration under standing orders or protocols.

(2) **"Online medical control"** means direct voice contact with a medical control physician.

(3) **"Out-of-state transition course"** means a standardized education course required and approved by the bureau for an out-of-state EMT applicant seeking licensure in New Mexico.

P. Definitions beginning with "P":

(1) **"Paramedic"** or **"EMT-P"** means a provider who has been licensed by the department to provide patient care according to the current scopes of practice.

(2) **"Physician"** means a doctor of medicine or doctor of osteopathy who is licensed or otherwise authorized to practice medicine or osteopathic medicine in New Mexico.

(3) **"Protocol"** means a predetermined, written medical care plan approved by the medical director and includes standing orders.

(4) **"Provider"** means a person who has been licensed by the department to provide patient care pursuant to the Emergency Medical Services Act.

Q. Definitions beginning with "Q": [RESERVED]

R. Definitions beginning with "R":

(1) **"Re-entry"** means a process for a person, whose license has been expired for less than two years, to accomplish a given set of requirements to re-enter a previously held level of licensure.

(2) **"Regional office"** means an emergency medical services planning and development agency formally recognized and supported by the bureau.

(3) **"Re-instatement"** means a process for those persons who have completed the renewal requirements but fail to renew licensure by March 31st, to have their licensure reinstated between April 1st and May 31st of the expiration year.

(4) **"Renewal"** means re-licensure every two years after completion of all requirements for specified levels prior to expiration of licensure.

(5) **"Retest"** means licensing examination given after failure of the applicant's initial examination.

S. Definitions beginning with "S":

(1) **"Secretary"** means the New Mexico secretary of health.

(2) **"Special skills"** means a set of procedures or therapies that are beyond the usual scope of practice of a given level of licensure and that have been approved by the medical direction committee for use by a specified provider.

(3) **"Standing orders"** means strictly defined written orders for actions, techniques or drug administration, signed by the medical director, to be utilized when communication has not been made with an online medical control physician.

(4) **"State emergency medical services medical director"** means a physician designated by the department to provide overall medical direction to the statewide emergency medical services system, whose duties include serving as a liaison to the medical community and chairing the medical direction committee.

(5) **"Summary suspension"** means the immediate suspension, in accordance with this rule, of an individual's EMS provider license without a hearing when evidence in the department's possession indicates that the licensee has either been adjudged mentally incompetent by a final order or adjudication by a court of

competent jurisdiction, or pled guilty or no contest (nolo contendre) to, or been found guilty of, a disqualifying criminal offense.

T. Definitions beginning with "T": "Temporary license" means a license issued by the department to applicants that are fully licensed in another state or certified with the national registry of EMTs, as determined by the bureau. The temporary license shall be valid for a period of up to six months from the date issued, or until failure of any part of the licensing examination.

U. Definitions beginning with "U": [RESERVED]

V. Definitions beginning with "V": [RESERVED]

W. Definitions beginning with "W": [RESERVED]

X. Definitions beginning with "X": [RESERVED]

Y. Definitions beginning with "Y": [RESERVED]

Z. Definitions beginning with "Z": [RESERVED]

[7.27.2.7 NMAC - Rp, 7.27.2.7 NMAC, 9/9/2025]

7.27.2.8 GENERAL LICENSURE:

A. Authorizations to practice: No person shall function as or represent themselves as an emergency medical services provider or offer, whether or not for compensation, any services described within the scopes of practice, unless currently licensed as an emergency medical dispatcher (EMD), emergency medical dispatcher instructor (EMD-I), EMS first responder, or EMT under these rules. This provision is enforceable by civil action and criminal prosecution as provided by state law.

B. Licensing agency: As provided by law, the agency responsible for the licensure of an EMD EMD-I, EMS first responder, and EMTs in New Mexico is the emergency medical systems bureau of the center for health protection of the department of health.

C. Eligibility: Initial licensure as an EMD, EMD-I, EMS first responder, or EMT is open to all persons who have met the requirements prescribed in these rules, whether or not they are affiliated with an ambulance service, fire department, rescue service, or other emergency medical service in New Mexico, and irrespective of their monetary remuneration for such service. Applicants for licensure must complete the criminal history background screening process as described at Section 24-10B-5.2 NMSA 1978.

D. The New Mexico registry of emergency medical services personnel: The New Mexico registry of emergency medical services personnel is established and maintained at the bureau. The registry is a database containing contact and other relevant licensure information for all licensed New Mexico EMS licensees.

E. Authorized classifications: The six classifications of fully licensed EMS providers that are recognized in the New Mexico registry of emergency medical services personnel are as shown below. The most recently attained level of provider licensure will be shown on the person's certificate and licensure card. This section does not apply to a graduate license.

(1) Emergency medical dispatcher (EMD).

(2) Emergency medical dispatcher instructor (EMD-I).

(3) Emergency medical services first responder (EMSFR).

(4) Emergency medical technician - basic (EMT-B).

(5) Emergency medical technician - intermediate (EMT-I).

(6) Emergency medical technician - paramedic (EMT-P).

F. General education standards: New Mexico EMS education programs shall meet the education standards for approval by the joint organization on education and EMS bureau. The joint organization on education and EMS bureau shall periodically evaluate the education standards in each approved EMS education program, which may include an on-site inspection and review for compliance with the standards outlined in this section. Failure to maintain compliance with these standards may result in the loss of the approved program status, as determined by the joint organization on education. The joint organization on education and EMS bureau approved New Mexico EMS education program shall:

(1) when requested by the bureau or joint organization on education, submit a report to the joint organization on education and the EMS bureau that contains the following elements:

(a) number of courses that were instructed by the education program by level of education, i.e., EMS first responder, EMT-basic, EMT-intermediate, EMT-paramedic, EMS instructor-coordinator;

(b) pass/fail rate of each course of instruction where students are enrolled to receive course completion certificates, including the name of the course and the name of the instructor-coordinator;

(c) aggregate pass/fail rate of each level of EMS instruction where students are enrolled to receive course completion certificates;

(d) list of current instructor-coordinators employed with the bureau approved education program;

(e) list of new instructor-coordinators employed with the education program over the time period of the report;

(f) any changes in the status of any instructor-coordinator;

(g) any changes to the EMS curriculum at any level of instruction;

(h) summary of any quality improvement activities accomplished during the time period of the report;

(i) list of clinical skills required for course completion by level, if applicable;

(j) list of satellite campuses; and

(k) contact information of key staff with the education program;

(2) be accredited by a national education accrediting organization for emergency medical services;

(3) utilize approved minimum curricula content based on the national standard curriculum for EMS as published by the national highway and traffic safety administration (NHTSA) and approved by the joint organization for education committee (JOE);

(4) have, at a minimum, an administrative director, an EMS medical director, and a lead instructor-coordinator for each EMS licensing or refresher course;

(5) ensure that an instructor-coordinator is in attendance at all didactic and practical education sessions, with substitution permissible as approved by the joint organization;

(6) inform the bureau if an instructor/coordinator is terminated due to inappropriate conduct or negligence; the bureau shall be notified by the education program of the termination within 10 working days;

(7) develop and utilize an instructional quality assurance program to review course and instructor effectiveness; a copy of the quality assurance program shall be provided to the joint organization on education and the EMS bureau; complaints, reports, or course trends may indicate the need for a quality assurance review by the joint organization on education and the EMS bureau;

(8) submit to the bureau for approval, refresher course curricula that follow the New Mexico refresher course blueprints as outlined in 7.27.2.11 NMAC of these rules, whether the course is conducted by the education program or through a service education agreement, which has been approved by the education program;

(9) use distributive and distance education for initial formal education courses as deemed necessary by the approved EMS education program, based on the education guidelines provided by the joint organization on education committee;

(10) review and approve any formal EMS courses and course content that will allow graduates to apply for EMS licensure in the state of New Mexico, prior to delivery by an instructor-coordinator;

(11) ensure that all affiliated instructor-coordinators are approved by the joint organization on education;

(12) ensure that a formal preceptor program is developed and utilized for all field and clinical education; the preceptor program shall include the following standards:

(a) EMS providers functioning as preceptors within an EMS service have written approval from the EMS service director, the EMS service medical director, the education program service director, and the education program medical director; preceptors shall be licensed as a provider at or above the student's level of education; preceptors shall ensure that only approved skills, commensurate with the student's scope of education, are performed by the student under direct observation by the approved preceptor;

(b) students practicing in a field education environment shall function under a formal field preceptorship agreement between the EMS service and the education program;

(c) students performing field or clinical skills as part of a bureau approved EMT-intermediate or EMT-paramedic education program must be fully licensed at a minimum of the New Mexico EMT-basic level, or have been granted special permission by the EMS bureau; and

(d) students from approved New Mexico EMS education programs may participate in a field education environment (which includes both clinical and internship experience) within the state of New Mexico; EMS educational programs based out of state must be nationally accredited by an EMS bureau approved accrediting organization, and obtain permission from the EMS bureau and JOE for their students to participate in a field education environment within the state of New Mexico. Out-of-state based students performing field or clinical skills as part of a bureau approved EMT-intermediate or EMT-paramedic education program must be fully licensed at a minimum of their state's EMT-basic level, or have been granted special permission by the EMS bureau;

G. Education program instructor-coordinator standards: Approved New Mexico EMS education

programs shall maintain instructor-coordinator standards to ensure quality of instruction. Instructor-coordinators shall:

(1) be affiliated with an approved EMS education program;

(2) successfully complete an instructor-coordinator education course that meets or exceeds the national standard curriculum for EMS instructor-coordinators as published by NHTSA and approved by the joint organization on education and the EMS bureau;

(3) be currently licensed as a New Mexico EMS provider; and

(4) shall meet the qualifications for instructor-coordinators as established by the joint organization on education committee.

H. Scope of practice: The scope of practice for each level of licensure is found in 7.27.11 NMAC and shall be updated at least annually and issued by the bureau in accordance with the EMS Act, Paragraph (4) of Subsection C of Section 24-10B-7 NMSA 1978. Licensed EMDs, EMSFRs and EMTs shall only perform those skills, techniques, medications, and procedures found within the New Mexico scope of practice and as authorized by the service medical director (also see EMS medical direction rule 7.27.3 NMAC).

I. Training and education required: As outlined in the New Mexico scopes of practice, prior to utilizing any new skill, technique, medication, or procedure designated as "service medical director approved", it shall be documented by the service director, medical director, or bureau approved EMS education program that the EMS provider has been appropriately trained to administer the medications or perform the skills, techniques, medications, or procedures. Additionally, each EMS provider must have a signed authorization from the services medical director on file at the EMS services headquarters, or administrative offices.

J. Medical direction approval/control required: Medical control is required for certain skills and medications use at all levels of EMS as outlined in the New Mexico scopes of practice. Those EMS personnel who function without medical direction shall only perform those skills, techniques, and procedures that do not require medical director approval. Any person who is issued a temporary or graduate license shall only administer the medications or perform the skills, techniques, medications, and procedures for the approved level, as established by the medical direction committee and found in the applicable scope of practice.

K. Special skills: Special skills, which are all considered advanced life support, are skills outside the usual scope of practice for a level of licensure. EMS services or systems that wish to apply for special skills authorization shall submit a written application as set forth in 7.27.11.10 NMAC. Services or systems may apply for any skill at any level. Personnel who successfully complete a special skills program shall be authorized to utilize advanced skills and drugs only with medical director approval and under the medical control of the EMS system that received the program approval.

L. Licensing application procedures: Persons seeking New Mexico licensure in any of the six classifications shall apply using the appropriate forms as provided by the bureau and present the required documentation, which shall remain in the person's licensure file. Applications and forms can be obtained from the bureau.

M. Licensure periods and expiration dates: The length of an EMS license varies depending on the date that an individual is licensed, but is (on average) approximately 24 months in length. The expiration date for every license is March 31 of a given year. Requirements for renewal of licensure shall be completed prior to the March 31 expiration date. License expiration dates are as follows:

(1) **Licenses issued in January through June:** A license that is issued on a date in January through the end of June will expire March 31 in the second year after the year in the license was issued. For example, if an initial license is issued on February 28, 2025, the license will expire on March 31, 2027.

(2) **Licenses issued in July through December:** A license that is issued on a date in July through the end of December will expire March 31 in the third year after the year in which the license was issued. For example, if an initial license is issued on October 14, 2025, the license will expire on March 31, 2028.

N. New Mexico EMS bureau approved licensing examinations: All EMS candidates must successfully complete the bureau approved licensing examination.

(1) The initial licensing examination shall be completed within 12 months based from the date of course completion. Successful completion of the licensing examination process that results in the issuance of a license shall be completed within 24 months based from the date of course completion. Should a candidate fail to become licensed within 24 months, not complete the initial licensing examination attempt within 12 months of course completion, or fail to successfully complete the bureau approved licensing examination within six attempts, the candidate must complete a new initial education course. The EMS bureau chief or designee may approve an initial licensing testing extension on a case-by-case basis.

(2) Applicants for state licensure shall pay the appropriate licensing fee upon submission of

application to the bureau (see 7.27.2.13 NMAC for a complete description of licensing fees).

(3) There will be no refund of fees, except in unusual circumstances as determined by the bureau.

O. Graduate license for all EMT levels: The function of the EMS graduate license is to grant graduates of a bureau approved EMS education program authorization to practice skills commensurate with their scope of training and education in the field setting under the direct observation and supervision of a New Mexico EMS provider licensed at or above the graduate's education program level. The graduate license shall only be used under approved medical direction. The EMS service director and the EMS service medical director shall identify and maintain a list of approved preceptors. The graduate licensee shall be fully supervised by the preceptor when performing patient care. The preceptor will be responsible for all patient care including patient care activities in the patient compartment when transporting to a medical facility. This will necessitate a vehicle driver in addition to the licensed EMT preceptor and the graduate licensee. During a mass casualty incident, the graduate licensee shall only provide assessment and treatment at the level for which the graduate licensee is fully licensed; if the graduate licensee is not fully licensed at a lower level, they shall only provide non-medical assistance. The EMS graduate license shall remain in effect for a period of six months after the course completion date or until failure of any portion of the bureau approved licensing examination. A graduate license may not be upgraded to full licensure. Individuals holding a graduate license who wish to obtain full licensure must apply for and complete all aspects of an initial licensing application, including payment of fees. All applicants for graduate licensure shall:

(1) submit a completed bureau approved license application form, including completing the criminal background check;

(2) provide evidence of current bureau approved CPR certification;

(3) provide evidence of current bureau approved ACLS certification (paramedic only);

(4) provide a course completion certificate from a bureau approved EMS education program; and

(5) pay all licensure fees as required by these rules.

P. Americans with Disabilities Act: When requested by an applicant who otherwise meets the minimum qualifications, the department shall reasonably accommodate the qualified person with disabilities in the licensure process, in accordance with the Americans with Disabilities Act and other applicable state and federal laws. Persons requiring accommodations must make an advance request at least 30 calendar days prior to the EMS bureau scheduled activity. The request for accommodation shall be forwarded to the bureau for consideration of such an accommodation, to include supporting documentation from the applicant's health care provider and a medical or professional diagnosis.

Q. Recognition of out-of-state licensure for emergency incidents and other short term and mission specific situations: During emergency situations and other short term and mission specific situations, the bureau may waive initial licensure requirements for out-of-state EMS personnel based on the following:

(1) an individual or agency must be responding to a specific emergency incident;

(2) an individual or agency shall contact the EMS bureau prior to beginning EMS operations in New Mexico;

(3) the individual or agency shall provide evidence (copies) of individual certification or licensure from another state or the national registry;

(4) if wildland fire, an individual or agency shall provide a national wildland fire "request for recognition" form;

(5) an individual or agency shall provide evidence of agency medical direction, written medical protocols and scope of practice; the bureau may restrict the provided scope of practice;

(6) the individual or agency shall contact the local EMS system for coordination of services; and

(7) the maximum approved time for out-of-state licensure for a specific emergency incident is 30 days and may be renewed on a case-by-case basis.

[7.27.2.8 NMAC - Rp, 7.27.2.8 NMAC, 9/9/2025]

7.27.2.9 INITIAL LICENSURE:

A. General: This section specifies requirements for initial licensure. This section applies to all applicants who are graduates of bureau approved EMS education programs. Any person applying for New Mexico licensure from out-of-state, other programs, or with national registry certification shall meet the requirements for licensure described in Section 7.27.2.10 NMAC. Specific time periods apply for EMS licensing examinations, according to Subsection O of 7.27.2.8 NMAC. Initial licensure may only be obtained as described in this section;

initial licensure requirements are not subject to waiver.

B. Licensed emergency medical dispatcher (EMD): Licensure as an emergency medical dispatcher in New Mexico is mandatory for all persons who provide pre-arrival medical instructions to the emergency and non-emergency caller.

(1) An applicant for licensure as an EMD shall:

(a) be 18 years of age, and be of good character;

(b) provide evidence of a current bureau approved CPR certification; or, if physically unable to be CPR certified, provide written documentation of current knowledge and practical applications of CPR, as defined in these rules;

(c) successfully complete an EMD education course, which has been approved by the bureau, that meets or exceeds the U.S. department of transportation (USDOT) standards for EMD, within the previous 12 months;

(d) meet all other licensing requirements found in 7.27.2.8 NMAC of these rules;

(e) submit the required application and licensure fees as required by these rules; and

(f) provide a valid personal (i.e., non-service or business) address in the application materials.

(2) Persons who do not have a certificate of completion from a New Mexico approved EMD education program but are currently certified or licensed in another state as an EMD, or have successfully completed an equivalent out-of-state EMD education course as determined by the bureau, within the previous 12 months, may apply for licensure by submitting an application along with documentation of current out-of-state certification or licensure, or an out-of-state EMD course completion certificate.

(3) Upon recognition by the bureau, the person may be fully licensed as an EMD.

C. Licensed EMD-instructor: An applicant for licensure as an EMD-instructor shall:

(1) be a licensed EMT-basic, or higher level of licensure; or, if physically unable to be licensed as an EMT-basic, provide verification of successful course completion from an EMT-B education program;

(2) have graduated from high school or possess a general education diploma (GED);

(3) be 18 years of age, and be of good character;

(4) provide evidence of a current bureau approved CPR certification; or, if physically unable to be certified for CPR, provide written documentation of current knowledge and practical applications of CPR, as defined by these regulations;

(5) be currently licensed as an EMD;

(6) have successfully completed, within the previous 12 months, an EMD-instructor education course from an EMD program which is approved by the bureau;

(7) provide a valid personal (i.e., non-service or business) address in the application materials; and

(8) meet all other licensing requirements found in 7.27.2.8 NMAC of these rules, and submit the required application and licensure fees as required by these rules.

D. Licensed emergency medical services first responder: An applicant for licensure as an EMS first responder shall meet the following requirements:

(1) the applicant shall be of good character; and

(2) the applicant shall be at least 18 years of age; or the applicant shall be at least 16 years of age and meet the following requirements:

(a) be affiliated with a service, and shall submit a letter of support from the service director;

(b) shall notify the bureau, in writing, of any change of service affiliation; and

(c) shall submit a notarized parental or guardian consent;

(3) all applicants shall meet the following requirements:

(a) submit a completed, bureau approved license application form;

(b) provide evidence of current bureau approved CPR certification;

(c) present a certificate of completion from an EMSFR course completed within the previous 24 months at a bureau approved EMS education program;

(d) successfully complete the bureau approved EMSFR licensing examination within six attempts; the initial licensing examination shall be completed within 12 months from the date of course completion; successful completion of the licensing examination process that results in the issuance of a license shall be completed within 24 months from the date of course completion; the EMS bureau may, at the discretion of the EMS bureau chief, accept successful completion of the approved EMSFR course final as completion of an EMSFR

licensing examination;

(e) provide documentation of successful completion of an approved exam, which may include a copy of national registry of EMTs emergency medical responder certification card or, in approved circumstances, a copy of the course completion certificate acquired after bureau approved course and examination completion;

(f) provide a valid personal (i.e., non-service or business) address in the application materials;

(g) meet all other licensing requirements found in 7.27.2.8 NMAC of these rules; and

(h) pay all licensure fees as required by these rules.

E. Emergency medical technician basic (EMT-B): An applicant for licensure as an EMT-B shall meet the following requirements:

(1) the applicant shall be of good character; and

(2) the applicant shall be at least 18 years old; or

(3) the applicant shall be at least 17 years of age and meet the following requirements:

(a) be affiliated with an EMS service, and shall submit a letter of support from the service director;

(b) shall notify the bureau, in writing, of any change of service affiliation; and

(c) shall submit a notarized parental or guardian consent;

(4) all applicants who are graduates of a bureau approved EMS education program may apply for graduate licensing, which allows them to work temporarily under direct supervision, as outlined in 7.27.2.8 NMAC of these rules;

(5) all applicants applying to be licensed, shall meet the following requirements:

(a) submit a completed, bureau approved license application form;

(b) provide evidence of current bureau approved CPR certification;

(c) present a certificate of completion from an EMT-B course completed at a bureau approved EMS education program, and accomplished within the previous 24 months;

(d) successfully complete the bureau approved EMT-B licensing examination within six attempts; the initial licensing examination shall be completed within 12 months based on the date of course completion; successful completion of the licensing examination process that results in the issuance of a license shall be completed within 24 months based on the date of course completion;

(e) provide documentation of successful completion of an approved exam, which may be a copy of national registry of EMTs emergency medical technician certification card acquired after bureau approved course and examination completion;

(f) provide a valid personal (i.e., non-service or business) address in the application materials;

(g) meet all other licensing requirements found in 7.27.2.8 NMAC of these rules;

(h) pay all licensure fees as required by these rules.

G. Emergency medical technician-intermediate (EMT-I): An applicant for licensure as an EMT-I shall meet the following requirements:

(1) the applicant shall be at least 18 years old, and be of good character;

(2) the applicant shall submit a completed, bureau approved license application form;

(3) the applicant shall provide evidence of current bureau approved CPR certification;

(4) the applicant shall be fully licensed as an EMT-basic;

(5) the applicant shall present a certificate of completion from an approved EMT-I course completed at a bureau approved EMS education program, and accomplished within the previous 24 months;

(6) the applicant shall successfully complete the bureau approved EMT-I licensing examination within six attempts; the initial state licensing examination shall be completed within 12 months based on the date of course completion; successful completion of the licensing examination process that results in the issuance of a license shall be completed within 24 months based on the date of course completion;

(7) the applicant shall provide documentation of successful completion of an approved exam, which may include a copy of national registry of EMTs advanced emergency medical technician certification card acquired after bureau approved course and examination completion;

(8) the applicant shall provide a valid personal (i.e., non-service or business) address in the application materials;

(9) the applicant shall meet all other licensing requirements found in 7.27.2.8 NMAC of

these rules;

(10) the applicant shall pay all licensure fees as required by these rules; and

(11) all applicants who are graduates of a bureau approved EMS education program may apply for graduate licensing which allows them to work temporarily under supervision, as outlined in 7.27.2.8 NMAC of these rules.

H. Emergency medical technician paramedic (EMT-P): All applicants applying to be licensed at the EMT-P level shall meet the following requirements:

(1) the applicant shall be at least 18 years old, and be of good character;

(2) the applicant shall present, at a minimum, a high school diploma or general education diploma (GED);

(3) the applicant shall submit a completed bureau approved license application form;

(4) the applicant shall be fully licensed as an EMT-B or EMT I;

(5) the applicant shall provide evidence of current bureau approved CPR certification;

(6) the applicant shall present proof of current bureau approved education which meets or exceeds the current national standard for advanced cardiac life support (ACLS) on emergency cardiac care (ECC);

(7) the applicant shall provide a valid personal (i.e., non-service or business) address in the application materials;

(8) the applicant shall pay all licensure fees as required by these rules;

(9) the applicant shall submit a certificate of completion from the education program; successful completion of the EMT-P education program must have been accomplished within the previous 24 months;

(10) the applicant shall successfully complete the bureau approved EMT-P licensing examination;

(11) the applicant shall submit a copy of national registry of EMTs paramedic certification card acquired after bureau approved course and examination completion;

(12) the applicant shall meet all other licensing requirements found in 7.27.2.8 NMAC of these rules; and

(13) all applicants who are graduates of a bureau approved EMS education program may apply for graduate licensing which allows them to work temporarily under direct supervision, as outlined in 7.27.2.8 NMAC.

I. Surrendering a license in order to downgrade to a lower level of licensure: EMS personnel may petition the bureau to surrender their current license and downgrade to a lower level of licensure in accordance with the following:

(1) the provider shall be in good standing at the current level of licensure;

(2) the provider shall meet the eligibility and renewal requirements (if doing this at the time of renewal) for the lower EMS level (i.e., CE, CPR, criminal background check, etc.); and

(3) if the provider requests that the downgraded license be upgraded to the original level of licensure, the provider shall meet the re-entry requirements to reacquire the original level of licensure in accordance with Subsection L of 7.27.2.11 NMAC of this rule.

[7.27.2.9 NMAC - Rp, 7.27.2.9 NMAC, 9/9/2025]

7.27.2.10 RECIPROCITY:

A. Individuals who are currently licensed or certified in another state or governmental jurisdiction may apply for New Mexico EMS licensure as provided in this section. Individuals holding a certification with the national registry of EMTs at any level must also be licensed/certified by a state or other recognized jurisdictional authority to be eligible for reciprocity, unless otherwise approved by the bureau. The individual shall meet the following requirements:

(1) the individual shall submit an application for the appropriate licensure level along with a copy of a current state certification/licensure card;

(2) the individual shall provide a copy of a current bureau approved CPR certification card;

(3) if applying for the EMT-P level, the individual shall provide a copy of current bureau approved education which meets or exceeds the current national standard for advanced cardiac life support (ACLS) on emergency cardiac care (ECC);

(4) the individual shall pay the appropriate out-of-state reciprocity fee as required by these rules; there will be no refund of fees, except in unusual circumstances; as determined by the bureau;

(5) if applying for the EMSFR, EMT-B and EMT-I level, the individual shall successfully

complete a bureau approved transition course for out-of-state applicants, as determined by the EMS bureau;

(6) if the applicant has joined an EMS agency as a volunteer or employee and this is verified by agency leadership, the agency's medical director may verify the applicant's competency in lieu of the applicant taking a bureau exam; if the applicant is not associated with an EMS agency, they must successfully complete the New Mexico reciprocity written examination at the appropriate licensure level within three attempts and if, requested by the EMS bureau, successfully demonstrate appropriate practical skills proficiency; the initial state reciprocity examination shall be completed within nine months from the date the application was received at the EMS bureau; successful completion of the examination process that results in the issuance of a NM EMS license shall be complete within 12 months from the date the application was received at the EMS bureau; and

(7) the individual shall meet all other licensing requirements found in 7.27.2.8 NMAC of these rules.

B. Additional provisions:

(1) **Frequency:** an out-of-state reciprocity application for an individual will only be accepted once in a 12-month time period.

(2) **Temporary licensure:** a reciprocity applicant may be granted a temporary license to practice at the appropriate licensure level for a period of up to six months or until failure of any part of the reciprocity examination, whichever occurs first.

(a) While under a temporary license, those applicants seeking full New Mexico licensure at the EMSFR, EMT-B, or EMT-I level shall complete a bureau approved out-of-state transition course and complete the New Mexico reciprocity examination; applicants applying at the EMT-P level shall complete the New Mexico paramedic reciprocity examination;

(b) Applicants holding a temporary license shall be fully licensed when they have successfully completed New Mexico EMS reciprocity examination at the appropriate licensure level and remit payments of required fees, all applicants are required to keep their out-of-state license or certification current until the New Mexico reciprocity process is successfully completed;

(c) Temporary licenses issued to out-of-state reciprocity candidates shall only be issued once during a 12-month period;

(d) Temporary licensure commences on the issue date of the temporary license from the bureau;

(e) A temporary license may be issued only upon application and payment of required fees.

(3) **Seasonal licensure:** an out-of-state EMS caregiver may apply for a seasonal license. A seasonal license will allow the caregiver to provide care at a scope of practice approved by the bureau, not to exceed the New Mexico scope of practice. The following requirements apply:

(a) seasonal licenses issued to applicants for a seasonal license shall be issued once in a 12-month period, unless otherwise determined by the bureau for good cause; the seasonal license is valid for three months from the date of issue, except as otherwise approved by the bureau;

(b) the applicant must provide proof of licensure from another state, unless otherwise determined by the bureau;

(c) applicants for a seasonal license must show proof of New Mexico medical direction provided by a medical director in accordance with 7.27.3 NMAC, and provide the bureau with the medical director approved protocols; and

(d) the applicant must submit a completed application with appropriate fees.

[7.27.2.10 NMAC - Rp, 7.27.2. 10 NMAC, 9/9/2025]

7.27.2.11 LICENSURE RENEWAL: All licensed New Mexico EMS providers are required to renew their license every two years. Current renewal documents and information may be obtained from the bureau, website, or by requesting them from the bureau. Individuals renewing their New Mexico EMS provider's license shall submit verification of the required number of continuing education (CE) hours, as described for each licensure level. Required certification or education, such as *advanced cardiac life support* (ACLS) or cardiopulmonary resuscitation (CPR), may each be used once to fulfill a portion of the CE hour requirement during each two year renewal period. Additional cards may not be used for additional CEs. New Mexico license renewal requirements may not match those of national registry or other states; it is the individual's responsibility to assure their completed CE meets the requirements of other states or the national registry if they want to renew those certifications and licensures. A maximum of one-half of the required number of CEs necessary for renewal for each level may come from asynchronous distance/distributive learning programs as defined later in this rule. This may differ from the

requirement for maintaining national registry certification.

A. Receipt of licensure renewal from the EMS bureau: Licensing renewal is the responsibility of each individual licensee. A renewal applicant shall provide a valid personal (i.e., non-service or business) address in the application materials. If an individual licensee fails to notify the bureau of a change of address within one year from the date of relocation, as determined by the bureau, a bad address fee may be assessed by the bureau. For individuals who have submitted their complete licensure renewal packet to the bureau in a timely manner, the bureau will review the renewal requests in the order they are received.

(1) If there is a delay in notification from the bureau about the status of the licensure renewal beyond the expiration of the license, the individual shall remain licensed until:

(a) notified by the bureau that the license application has been denied or the license expired without renewal; or

(b) they receive their license from the bureau or the bureau website lists the individual as licensed.

(2) If an individual's renewal application is incomplete, the individual shall be notified by the bureau by electronic mail.

(3) If an individual licensee is notified that a renewal problem exists with their license, and the license has expired, the individual shall not remain licensed, and their name will be removed from the list of those licensed on the bureau website.

B. Renewal deadlines: Specific renewal requirements must be completed prior to licensure expiration. Required CPR and ACLS certifications and education must be current at the time of renewal. In order to pay the standard renewal fees, renewal applications must be received by the bureau by the last day of February prior to expiration of licensure. Renewal applications received after the last day of February, but before March 31, will be accepted but will be assessed a higher fee as described later in this rule.

(1) Once the renewal period is announced to be open, the applicant may submit the completed renewal application to the bureau as soon as requirements are complete; the completed renewal application shall be submitted no later than the final month of licensure. A standard renewal fee is assessed for renewal applications submitted prior to the final month of licensure.

(2) Renewal applications received during the final month of licensure will be accepted, but will be assessed a higher renewal fee due to the requirement for speedier processing.

(3) Applications for renewal of licensure shall be submitted no later than the last day of licensure (March 31st).

C. Mandatory updates: The bureau may require mandatory updates to education in any given year of licensure. Mandatory updates may include required content hours during specific continuing education courses or other mandatory classes.

D. Audits: The bureau may require full documentation of continuing education, including copies of certification cards, course completion certificates, and any other relevant documents from any individual applying for renewal of their license.

E. Waivers: The licensing commission may, for good cause shown, waive portions of these rules pertaining to licensure renewal pursuant to 7.27.2.14 NMAC of these rules. Persons requesting waivers for licensure renewal shall submit requests in writing to the EMS licensing commission, in care of the bureau.

F. Inactive or limited scope status: A licensee who is not currently providing care through an EMS provider service and does not have a service medical director may request that the bureau designate the licensee as being on inactive status, which will remain in effect until the bureau is notified of the applicant obtaining medical direction. No patient care should be performed until the inactive status is removed by the bureau.

G. Licensed emergency medical dispatcher (EMD): Renewal for a licensed EMD is required within each licensure period. Documentation must show that all renewal requirements have been completed before expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification must be current at the time of renewal. If the EMD is concurrently licensed as an EMT-B, EMT-I, or EMT-P, the renewal dates for EMD licensure may be adjusted by the bureau to match the renewal dates for the EMT-B, EMT-I, or EMT-P license. The following requirements are necessary for a person to renew their EMD license. The renewal applicant shall:

(1) submit copies of course completion certificates or verification showing a minimum of 20 contact hours of CE activity; of which at least 10 hours shall be medical subjects/skills of bureau approved CE activity and 10 hours of dispatch related subjects/skills, unless the EMD is also licensed at the EMT-B, EMT-I, or EMT-P level; the EMD may then use those contact hours of CE activity obtained during the renewal period for the EMT-B, EMT-I, or EMT-P licensure toward the medical renewal requirements;

(2) provide evidence of current bureau approved CPR certification and education; or, if

physically unable to be certified for CPR, provide written documentation of current knowledge and practical applications of CPR; and

(3) submit required application and payment of all license renewal fees as required by these rules.

H. Licensed emergency medical dispatcher-instructor: Renewal of a licensed EMD-instructor is required within each licensure period. Documentation must show that all renewal requirements have been completed prior to expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification must be current at the time of renewal. The following requirements are necessary for a person to renew their EMD-I license. The renewal applicant shall:

(1) submit verification from a bureau approved EMD education program showing that the EMD- instructor is current and in good standing with the approved EMD education program;

(2) submit verification of completion of all EMD CE renewal requirements;

(3) submit a copy of current licensure at the EMT-B or higher level;

(4) provide evidence of current bureau approved cardiopulmonary resuscitation (CPR) education or certification; or, if physically unable to be certified for CPR, provide written documentation of current knowledge and practical applications of CPR; and

(5) submit the required application and payment of all licensure renewal fees as required by these rules.

I. Emergency medical services first responder: Renewal of the EMSFR license is required within each licensure period. Documentation must show that all renewal requirements have been completed prior to expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification shall be current at the time of renewal. The following requirements are necessary for a person to renew their license. The renewal applicant shall:

(1) submit a completed renewal application;

(2) submit verification of a minimum of twenty contact hours of bureau approved CE activity consisting of the following subjects and minimum hours per subject:

(a) preparatory/operations, two hours;

(b) airway and ventilation, three hours;

(c) cardiovascular emergencies, two hours;

(d) medical emergencies, four hours;

(e) trauma emergencies, four hours;

(f) special considerations, five hours, two of which must consist of pediatric content;

(3) provide evidence of current bureau approved cardiopulmonary resuscitation education or certification;

(4) provide a statement of verification, signed by the service medical director, that the applicant is competent in all EMSFR skills listed in the current scopes of practice that require medical direction; and

(5) submit payment of all licensure renewal fees as required by these rules.

J. Emergency medical technician basic (EMT-B): Renewal of the EMT-B license is required within each licensure period. Documentation must show that all renewal requirements have been completed prior to expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification shall be current at the time of renewal. The following requirements are necessary for an EMT-B to renew their license; portions of a bureau approved EMT-I or EMT-P course may, within the bureau's discretion, fulfill CE requirements. The renewal applicant shall:

(1) submit a completed renewal application;

(2) submit verification of a minimum of 40 contact hours of bureau approved CE activity, consisting of the following subjects and minimum hours per subject:

(a) preparatory/operations, four hours;

(b) airway and ventilation, six hours;

(c) cardiovascular emergencies, six hours;

(d) medical emergencies, eight hours;

(e) trauma emergencies, eight hours;

(f) special considerations, eight hours, four of which must consist of pediatric content;

(3) provide evidence of current bureau approved cardiopulmonary resuscitation (CPR) education or certification;

(4) provide a statement of verification, signed by the service medical director, that the

applicant is competent in all EMT-basic skills listed in the current scopes of practice that require medical direction; and

(5) submit payment of all licensure renewal fees as required by these rules.

K. Emergency medical technician intermediate (EMT-I): Renewal of the EMT-I license is required within each licensure period. Documentation must show that all renewal requirements have been met prior to expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification shall be current at the time of renewal. The following requirements are necessary for an EMT-I to renew their license; provided that portions of a bureau approved EMT-P course may, within the bureau's discretion, fulfill CE requirements. The renewal applicant shall:

(1) submit a completed renewal application;

(2) submit verification of a minimum of 50 contact hours of bureau approved CE activity, consisting of the following subjects and minimum hours per subject:

(a) preparatory/operations, four hours;
(b) airway and ventilation, eight hours;
(c) cardiovascular emergencies, six hours;
(d) medical emergencies, 12 hours;
(e) trauma emergencies, 10 hours;
(f) special considerations, 10 hours, five of which must consist of pediatric content.

(3) provide evidence of current bureau approved cardiopulmonary resuscitation (CPR) education or certification; and

(4) provide a statement of verification, signed by the service medical director, that the applicant is competent in all EMT-intermediate skills listed in the current scopes of practice that require medical direction; and

(5) submit payment of all licensure renewal fees as required by 7.27.2.13 NMAC of these rules.

L. Emergency medical technician paramedic (EMT-P): Renewal of the EMT-P license is required within each licensure period. Documentation must show that all renewal requirements have been completed on or before expiration of licensure. Cardiopulmonary resuscitation (CPR) education/certification and advanced emergency cardiac care education/advanced cardiac life support (ACLS) certifications shall be current at the time of renewal. The following requirements are necessary for an EMT-P to renew their license. The renewal applicant shall:

(1) submit a completed renewal application;

(2) submit verification of a minimum of 60 contact hours of bureau approved CE activity at any level, consisting of the following subjects and minimum hours per subject:

(a) preparatory/operations, six hours;
(b) airway and ventilation, eight hours;
(c) cardiovascular emergencies, 10 hours;
(d) medical emergencies, 14 hours;
(e) trauma emergencies, 10 hours;
(f) special considerations, 12 hours, six of which must consist of pediatric content;

(3) provide a statement of verification, signed by the service medical director, that the applicant is competent in all EMT-paramedic skills listed in the current scopes of practice that require medical direction.

(4) submit proof of current bureau approved education which meets or exceeds the current national standards for advanced emergency cardiac care education, or advanced cardiac life support (ACLS) certification;

(5) provide evidence of current bureau approved cardiopulmonary resuscitation (CPR) education or certification; and

(6) submit payment of all licensure renewal fees as required by 7.27.2.13 NMAC of these rules.

M. Re-attaining a license after expiration for all categories: The bureau provides three methods for expired licensees to regain their licensure: reinstatement, re-entry, and re-licensure.

(1) **Reinstatement:** Those persons who have completed the renewal requirements but failed to renew licensure by March 31st, may apply for reinstatement between April 1st and May 31st of the expiration year. A complete renewal application for reinstatement must be received at the bureau by May 31st. Applications for reinstatement submitted after March 31 will be assessed an additional late fee (see fees, 7.27.2.13 NMAC).

(2) **Re-entry:** A person whose license is expired, who does not meet the circumstances of Paragraph (1) of Subsection M of 7.27.2.11 NMAC, but whose date of expiration of the previously held license is less than two years, may re-enter EMS at the previously held or lower level if the person left EMS in good standing and successfully completes the requirements below. The re-entry process may only be attempted once; if a candidate for re-entry does not successfully complete the exam within two testing attempts, the re-entry candidate shall complete a full licensure course at the appropriate licensure level to be eligible for NM EMS licensure. The individual shall:

(a) for basic, intermediate and paramedic, complete a minimum of half of the number of hours of bureau approved continuing education at the appropriate level within the 12 months preceding the date of application for re-entry; the number and subjects of CEs must equal a minimum of half of the requirements for renewal of the level for which the individual is applying for, as described herein;

(b) for first responder, complete a minimum of 10 hours of bureau approved continuing education within the 12 months preceding the request for re-entry; the number and subjects of CEs must equal a minimum of half of the requirements for renewal of the first responder level as described herein;

(c) provide evidence of current bureau approved cardiopulmonary resuscitation (CPR) education or education, which may not be used as part of the CE hour requirement;

(d) successfully complete an approved New Mexico licensing examination and other practical examinations, as determined by the bureau, at the appropriate provider licensure level (maximum of two examination attempts allowed), if applicable;

(e) if EMD or EMD-I applicant, provide verification of a minimum of 10 contact hours of bureau approved CE activity, of which five hours shall be medical subjects/skills and five hours shall be dispatch related subjects/skills of bureau approved CE activity;

(f) if an EMT-P applicant, provide evidence of bureau approved advanced emergency cardiac care education/advanced cardiac life support (ACLS) certification education which may not be used as part of the CE hour requirement; and

(g) submit required application and payment of licensure fees as identified for the appropriate level in 7.27.2.13 NMAC of these rules.

(3) **Re-licensure:** A person whose license has been expired for more than two years from the date of expiration shall be considered an initial licensure applicant. To become licensed, a person must complete the requirements of 7.27.2.9 NMAC of these rules.

N. Expiration of licensure: All New Mexico EMS personnel whose licensure expires on March 31st of any given year will receive notification of EMS license expiration, and that they are no longer authorized to perform patient care. The bureau will send this notice to the email address of record notifying the former licensee of expiration during the first week of April, remove the former licensee from the bureau website list of licensed personnel, and notify the national registry of EMTs if applicable.

O. Bureau approved continuing education: Continuing education (CE) credit may be granted for any education that has been approved in advance by the bureau. All individuals or EMS services wishing to grant CE credit to licensed EMDs, EMD-Is, EMSFRs, EMTs, and paramedics in New Mexico shall submit the appropriate documentation to the bureau at least 30 days in advance. Bureau approved CEs must include information that addresses the New Mexico scope of practice. CEs submitted to the bureau for approval after education has been completed may be denied, and will be reviewed for approval or disapproval on a case-by-case basis. Application for CE approval shall be made utilizing the bureau's "notification of intent to conduct a CE program" application form available online from the bureau. Information regarding CEs may be found on the bureau website.

(1) **Purpose:** Continuing education is designed to meet three main objectives:

(a) to provide exposure to new and current trends in the area of patient care;

(b) to review areas of patient assessment and management that are not used on a frequent basis; and

(c) to meet licensure renewal requirements.

(2) **Continuing education categories:** The EMS bureau has adopted the CE category designations similar to those published by many states and national EMS organizations. A more detailed explanation of these categories can be found in the "EMS CE user's guide" available from the bureau. The CE categories are:

(a) preparatory and operations topics: preparatory topics include roles and responsibilities, well-being of the EMT, injury prevention, medical/legal issues, ethics, anatomy/physiology, principles of pathophysiology, principles of pharmacology, IV therapy and medication administration, therapeutic communications; operations topics include ambulance operations, medical incident command, rescue awareness and

operations, hazardous materials incidents, crime scene awareness;

(b) airway and ventilation;

(c) cardiovascular emergencies: general topics include treatment of cardiac arrest; post resuscitation care, congestive heart failure, ventricle assist devices, acute coronary syndrome, multi-lead ECG, myocardial infarction, general cardiology, stroke (stroke may also be considered neurology/medical emergency);

(d) medical emergencies: general topics include pulmonary, neurology, endocrinology, allergies and anaphylaxis, gastroenterology, urology/renal, toxicology, hematology, environmental conditions, infectious and communicable diseases, behavioral and psychiatric disorders, gynecology, obstetrics;

(e) trauma emergencies: general topics include kinematics, blunt trauma, penetrating trauma, hemorrhage and shock, soft tissue trauma, burns, head and facial trauma, spinal trauma, thoracic trauma, abdominal trauma, musculoskeletal trauma; and

(f) special considerations: general topics include neonatology, pediatrics, geriatrics, abuse and neglect, patients with special challenges, acute interventions for the home health care patient.

(3) **Forms of CE:** The following forms of CE are currently recognized by the bureau. The bureau reserves the right to approve additional forms of CE as necessary. More detailed information may be found in the "EMS CE user's guide" available from the bureau.

(a) Classroom instruction: Standard instructor-student relationship in the classroom or field setting.

(b) Pre-approved courses: A list of national and statewide recognized certification courses that are pre-approved for CE credit is found in the CE guide available online and from the bureau. Individuals completing any of these courses need only to submit their course completion certificate or card when renewing their licenses. Courses that are approved by a bureau approved nationally recognized CE course approval entity are, at the discretion of the bureau, pre-approved for credit in New Mexico.

(c) EMS related college courses: Credit may be awarded to individuals who are attending college courses relevant to EMS. Individuals who are interested in receiving credit should submit a copy of their unofficial student transcript and course syllabus. The EMS bureau will determine relevance and the number of CE hours allowed.

(d) Teaching bureau approved courses: Licensed individuals who teach bureau approved courses may receive the same number of CE hours as students who are taking the program; refer to the "EMS CE user's guide" for a more complete description.

(e) Field or clinical preceptorship: A maximum of 20 hours of CE may be allowed for EMS preceptor activities; documentation of preceptor activities must be on letterhead from an approved New Mexico EMS education institution or EMS service director.

(f) Asynchronous distance/distributive education learning programs: This is a method of delivering training and education that does not require an educator and student to interact in real time. This may include EMS videos, computer-based-education, self-study modules, recorded broadcasts via satellite, internet, or other media, and other methods of out-of-classroom didactic education that includes a student evaluation component (i.e.: post course test/quiz). A maximum of one-half of the required number of CEs necessary for renewal for each level may come from asynchronous distance/distributive learning programs. Please note, this may differ from the requirement for maintaining national registry certification. The licensing commission may waive, or authorize the EMS bureau to waive, this maximum upon receipt of a waiver request.

(g) Synchronous distance education learning programs: This is a method of delivering training and education via electronic media that links an educator and students, allowing them to interact in real time despite being in different places. This includes live, instructor interactive satellite broadcasts or webcasts that allow for live video, audio, or other immediate feedback and communication between the instructor and the students. There is no limit to the number of CE hours a licensed individual may obtain through this method. The CE certification must document that the offering was provided and completed via a live broadcast. The decision regarding a CE being accepted as synchronous distance learning is discretionary and rests with the EMS bureau alone.

(h) EMS agency/fire department medical director courses: The medical director may conduct CE courses without a bureau approved CE number. All other requirements for conducting an EMS CE course must be followed, and records must be maintained by the agency/department CE coordinator, including class roster and teaching outlines. CEs submitted as medical director courses must include the physician's signature.

(i) On-the-job education/staff meetings: A maximum of eight hours of CE will be accepted for agency/department staff meetings, job orientation classes, take home work sheets, etc., for each renewal period;

(j) Meetings/committees: A maximum of eight hours of CE will be accepted for attending EMS related committees/meetings for each renewal period.

(k) Unacceptable CE: CEs obtained for completing evaluations for any EMS classes or conferences, participating in EMS related surveys, etc., will not be accepted.

(4) **Record keeping:** Once approval of a CE program is obtained and the course is presented, records of attendance must be maintained. The bureau may audit the CE records of an approved CE program. Attendance records with original signatures of course participants and a copy of any course presentation material must be kept for a minimum of 36 months by the service, for bureau audit purposes.

(a) In order for participating EMS personnel to receive credit, each individual shall be given a certificate, letter of attendance/completion, or copy of course attendance roster and advised to retain it until their licensure renewal. Many EMD Agencies (EMDA) and EMS services have computerized records of their personnel concerning CE. The EMS bureau will recognize CE summary documentation, on letterhead, from EMDA or EMS service directors, education coordinators, medical directors, or CE coordinators with appropriate original signatures.

(b) Course completion letters, certificates, and course rosters shall contain the following information:

(i) location and date of the CE program;
(ii) title and short description of the class or course;
(iii) number of actual contact hours (half hour increments are acceptable);
(iv) CE category;
(v) name of participant;
(vi) CE coordinator's name with designation "CE coordinator" placed after the name;
(vii) signature of CE coordinator;
(viii) the statement: "reviewed and approved by the New Mexico EMS bureau for CE";
(ix) method of delivery (classroom, asynchronous, or synchronous distance program); and
(x) EMS bureau approval number.

(5) **CE audits for EMS services and personnel:** The bureau may periodically perform audits of CE programs. These audits are usually provided as a way for services to evaluate their current program, identify areas in which the program excels, as well as areas that may be problematic. The following types of CE audits may be conducted by the bureau:

(a) **CE course audit:** this audit evaluates the actual class or course being conducted; the purpose of this audit is to provide written feedback to the instructor on presentation, content, and participant evaluations conducted at the end of the class; this audit is usually unannounced;

(b) **CE recordkeeping audit:** this audit evaluates the CE program sponsor recordkeeping process; records of prior classes or courses conducted are inspected for completeness and feedback is provided to the CE program sponsor that identify areas for improvement; CE program sponsors will be given at least five days advance notification of these audits; records that will be inspected include:

(i) original copies of attendance rosters with the signatures of course participants;
(ii) course presentation materials/outlines or learning objectives;
(iii) handouts that were given to participants;
(iv) any evaluation tools, including written exams or practical skill forms; and
(v) CE approval letter or approval numbers;

(c) CE complaint audit: this audit is a preliminary investigation conducted by the EMS bureau based on a complaint concerning falsification of the CE process.

(6) **Refreshers:** The EMS bureau does not require a refresher certificate for renewal, but refresher certificates from approved New Mexico EMS education institutions may be used to satisfy an equivalent number of hours for the CE requirement. The refresher documentation submitted must describe the number of CE hours for each CE category, and the number of synchronous and asynchronous hours that were delivered in the class. If a portion of the refresher was completed in an online or other asynchronous distance/distributive education format, the CE hours will be categorized as asynchronous CE by the bureau, and will count towards the maximum number of asynchronous education. For a formal refresher certificate from entities other than New Mexico

approved institutions to be accepted for CEs, the course curriculum must be approved prior to an applicant completing the refresher.
[7.27.2.11 NMAC - Rp, 7.27.2.11 NMAC, 9/9/2025]

7.27.2.12 IDENTIFICATION OF EMS PERSONNEL: Licensed EMDs, EMD- Is, EMSFRs, EMTs, and paramedics will receive one digital license certificate, and one uniform patch (if available).

A. The bureau shall charge a reasonable fee for replacement of lost documents. The bureau shall also charge a reasonable fee for additional uniform patches, pursuant to 7.27.2.12 NMAC of these rules.

B. Licensed EMDs, EMD-Is, EMSFRs, EMTs, and paramedics shall be listed as fully licensed on the bureau's list of licensed personnel, and upon demand, present proof of this listing and licensure status.

C. Licensed EMDs, EMD-Is, EMSFRs, EMTs, and paramedics shall promptly notify the bureau of any changes of name, address or EMS employment/affiliation status.

D. All volunteer, paid, and career EMS agencies regulated by the DOT or the EMS bureau that utilize EMS caregivers to perform patient care are required to verify the license of any volunteer or career EMS caregiver via direct contact with the EMS bureau or by accessing the bureau's license verification list. National Registry certification does not constitute licensure. Any other organization, business, or individual that employs or otherwise utilizes licensed EMS caregivers to provide medical care utilizing emergency medical dispatchers or emergency medical technicians including paramedics is strongly advised to verify the New Mexico license of the emergency medical dispatchers or emergency medical technicians via direct contact with the bureau or by accessing the bureau's license verification list.
[7.27.2.12 NMAC - Rp, 7.27.2.12 NMAC, 9/9/2025]

7.27.2.13 FEES:

A. Examination, licensure, renewal and assorted fees: The bureau shall charge reasonable fees for the examination, licensure, and renewal of licensed EMS providers in New Mexico, according to the following schedule.

(1) In-state application fees will apply to individuals who have completed an EMS licensing course through a bureau approved New Mexico EMS education program.

(2) Reciprocity and seasonal licensure application fees will apply to individuals applying for licensure through the reciprocity and seasonal process education.

B. Initial license fees:

DESCRIPTION	IN-STATE APPLICATION FEE	RECIPROCITY & SEASONAL APPLICATION FEE
Licensed EMD	$25.00	$50.00
Licensed EMD-instructor	$35.00	$70.00
Licensed EMS first responder	$25.00	$50.00
Licensed EMT-basic	$65.00	$130.00
Licensed EMT-intermediate	$75.00	$150.00
Licensed EMT-paramedic	$85.00	$170.00

C. Reciprocity & re-entry examination re-test fees:

DESCRIPTION	RE-TEST FEE FOR IN-STATE AND OUT OF STATE APPLICATION
First responder examination retest fee	$25.00
EMT-basic examination fee	$30.00
EMT-intermediate written/practical examination fee	$35.00
EMT-paramedic written/practical examination fee	$40.00

D. Licensure renewal application fees:

DESCRIPTION	FEE TYPE	FEE
Licensed EMD	standard fee	$20.00
	March renewal fee	$60.00

Licensed EMD-instructor	standard fee	$25.00
	March renewal fee	$75.00
Licensed EMS first responder	standard fee	$20.00
	March renewal fee	$60.00
Licensed EMT-basic	standard fee	$30.00
	March renewal fee	$90.00
Licensed EMT-intermediate	standard fee	$40.00
	March renewal fee	$120.00
Licensed EMT-paramedic	standard fee	$50.00
	March renewal fee	$150.00

E. Reinstatement application fees:

DESCRIPTION	FEE
Licensed EMD	$120.00
Licensed EMD-instructor	$150.00
Licensed EMS first responder	$120.00
Licensed EMT-basic	$180.00
Licensed EMT-intermediate	$240.00
Licensed EMT-paramedic	$300.00

F. Re-entry application fees:

DESCRIPTION	FEE
Licensed EMD	$60.00
Licensed EMD-instructor	$75.00
Licensed EMS first responder	$60.00
Licensed EMT-basic	$90.00
Licensed EMT-intermediate	$120.00
Licensed EMT-paramedic	$150.00

G. Miscellaneous fees:

DESCRIPTION	FEE
Additional patches-each	Bureau cost
Bad check fee-each occurrence	$20.00
National healthcare practitioner query fee-each occurrence as determined by the bureau	$15.00
Bad address fee-each occurrence, as determined by the bureau	$20.00

H. Use of fees: Fees collected by the bureau under these rules shall be used expressly for licensing related operations.

I. Payment of fees: State fees shall be made payable to the bureau by check, money order or other bureau approved method of payment. Licensure and examination fees are due and payable at the time of licensure application. Licensure applications will not be processed until payment of the required fees.

J. Waiver of fees: Applicants for licensure under these rules who, for good cause, are unable to pay the licensure fees may petition the bureau for a waiver. Applications for fee waiver under these rules shall be submitted to the bureau in the form of a written letter, and shall document the exact nature of the applicant's inability to pay. Waiver requests shall be submitted to the EMS bureau chief or designee for approval.
[7.27.2.13 NMAC - Rp, 7.27.2.13 NMAC, 9/9/2025]

7.27.2.14 ENFORCEMENT:

A. EMS licensing commission:

(1) Statutory basis: The emergency medical services licensing commission is established pursuant to Section 24-10B-5.1 NMSA 1978.

(2) Duties: The duties of the commission are to:

(a) provide a forum for the receipt of public comment regarding emergency medical services licensing matters;

(b) oversee the bureau's licensing and enforcement functions;

(c) receive complaints, direct investigations, and authorize the initiation of actions by the bureau regarding contemplated refusal to grant initial licensure and for disciplinary actions against licensees; and

(d) grant waivers, for good cause shown, of regulations pertaining to licensure renewal.

(3) **Organization:** Members of the commission are appointed by the secretary as provided by law.

(a) Commission members shall serve until their successors have been appointed by the secretary.

(b) In the event of a vacancy on the commission by resignation or removal, the bureau shall immediately notify the secretary so as to expedite the appointment of a new commission member. The secretary shall appoint such vacancies.

(c) The commission may recommend to the secretary removal of any commission member for the following reasons:

(i) failing to attend or otherwise participate in two consecutive meetings without a valid reason; or

(ii) any other good cause.

(d) The commission shall elect a chair and vice-chair annually. The term of office begins with the meeting at which the officer is elected.

(e) The bureau shall serve as staff for the commission.

(4) **Commission meetings:** The commission shall meet as needed, but not less than semi-annually.

(a) Commission meetings for receipt of public comment regarding emergency medical services licensing functions and oversight of the bureau's licensure function shall be subject to the Open Meetings Act, Section 10-15-1, *et seq.*, NMSA 1978.

(b) Meetings pertaining to the issuance, suspension, renewal or revocation of a license, or other personnel matters, are closed meetings as provided by the Open Meetings Act.

(c) A meeting notice resolution, consistent with the provisions of the Open Meetings Act, shall be adopted by the commission and shall be reviewed in November of each year at a regularly scheduled meeting of the commission.

(d) Minutes of meetings shall be taken and maintained in accordance with the Open Meetings Act.

(e) A commission member may attend a meeting of the commission via telephone or other teleconferencing technology, if it otherwise difficult or impossible for the member to attend in person.

(5) **Receipt of public comment:** There shall be an opportunity for receipt of public comment regarding licensure matters, in writing or orally, at each open commission meeting.

(a) Written public comment intended for consideration by the commission shall be mailed to the bureau. The comments must include the person's name, address, and telephone number, if available. Unidentified comments may or may not be considered by the commission.

(b) The commission, upon receipt of public comments, may make an appropriate recommendation to the bureau to take action based on those comments.

(6) **Oversight:** During each regularly scheduled meeting, the bureau will provide a report of its licensure functions to the commission. Commission members may, at any time, request information about licensure functions from the bureau.

B. **Complaint/incident procedures:** Any person may communicate a written complaint or knowledge of an incident to the bureau or the commission.

(1) When the bureau has knowledge of a complaint that may affect a person's license, it shall notify the chair of the commission as soon as practicable.

(2) Similarly, when the commission has knowledge of a complaint or incident affecting licensure, it shall notify the bureau.

(3) Other complaints, which would not affect licensure, will be directed to, and examined by the bureau.

(4) The bureau shall communicate to the chair or designee its opinion as to whether or not an investigation of the complaint should be initiated.

(5) Upon knowledge of a complaint, the chair, or designee, after consultation with other

members of the commission, as feasible, shall authorize that an investigation be conducted.

(6) The chair or designee shall direct the course of the investigation through periodic communication with the bureau as necessary.

(7) If an investigation indicates that the complaint may affect a person's license, the licensee shall be notified that the bureau is conducting an investigation, unless extenuating circumstances reasonably preclude notification.

(a) At the conclusion of the bureau's investigation, the bureau shall report its findings to the commission in a closed meeting at which a majority of commission members participate, either in person or by means of a conference telephone or other similar communications equipment.

(b) The commission, after consideration of the bureau's report, may authorize the initiation of an action by the bureau regarding contemplated refusal to grant initial licensure, or for disciplinary action against a licensee, by a majority vote of commission members participating in the closed meeting. The commission may immediately authorize a cease and desist order for any of the grounds for disciplinary action identified in this rule.

(c) **Summary suspension:** The commission may authorize the bureau to summarily suspend an EMS provider's license or place a licensee on probation without a hearing if the individual has been adjudged mentally incompetent by a final order or adjudication by a court of competent jurisdiction, or if the individual has pled guilty to or been found guilty of a disqualifying criminal offense.

(d) **Preliminary injunction for immediate suspension:** When the commission finds that evidence in the department's possession indicates that a licensee poses a clear and immediate danger to the public health and safety if the licensee continues to practice, the commission may authorize the bureau to seek a preliminary injunction for the immediate suspension of the individual's license. The injunction may be sought in the district court in the county in which the principal office of the licensee is located or, if the principal office is not in New Mexico, in the district court for Santa Fe county. If the injunction is granted, an expedited administrative hearing regarding the suspension of the license or probation of the licensee shall be held, in accordance with Subsection G of Section 7.27.2.14 NMAC.

(e) Upon receipt of authorization from the commission to initiate an action, the bureau may deny, suspend or revoke licensure or take other disciplinary action, in accordance with this rule.

C. Conduct of investigations: Investigations shall be conducted by the bureau or its agent(s).

(1) Preliminary investigations: When the bureau receives information that might form the basis for disciplinary action against a person, it shall begin a preliminary investigation. This is a fact finding, information gathering investigation that will attempt to determine for the commission whether justification exists for the commission to authorize the bureau to initiate an action or to conduct a formal investigation. The results of the preliminary investigation will be presented to the commission.

(2) Formal investigations: Formal investigations are authorized by the commission for the purpose of obtaining additional information to allow the commission to determine if it will authorize the bureau to initiate an action. The results of the formal investigation will be presented to the commission. Notice will be given to the person who is the subject of the formal investigation unless extenuating circumstances exist which would reasonably preclude notification.

D. Subpoena authority: In accordance with Subsection C of Section 24-10B-5. 1 NMSA 1978 of the EMS Act and Subsection A of Section 61-1-4 NMSA 1978 of the Uniform Licensing Act, the EMS licensing commission or the bureau, pursuant to the commissions authorization may, subject to the rules of privilege and confidentiality recognized by law, require the furnishing of information, the attendance of witnesses, and the production of books, records, papers or other objects necessary and proper for the purposes before it, and may take sworn statements of witnesses, including parties.

E. Waivers: The commission, upon good cause or for extenuating circumstances shown by a licensee, may grant a waiver of a specific regulation or regulations pertaining to licensure renewal for that licensee.

(1) A licensee shall demonstrate good cause to the commission by submitting written justification that identifies any extenuating circumstances, to the bureau. The licensee shall include any reasonable supporting documentation relevant to the request.

(2) The bureau shall distribute the submitted written justification and supporting documentation to the members of the commission prior to their next meeting.

(3) The commission, as soon as practicable, shall determine if good cause exists to grant a waiver by a majority vote of commission members meeting in a closed meeting. To accomplish this, the commission shall evaluate the documentation and, if necessary, review other pertinent documentation requested from the licensee.

(4) The commission may also meet with the licensee at a closed meeting of the commission prior to rendering its decision as to whether good cause exists to grant a waiver.

(5) If the commission grants the waiver to the licensee, it shall direct the bureau to take appropriate action to implement the terms and conditions of the waiver.

(6) A licensee applying for a waiver shall be notified by the bureau of the commission's decision in writing within 20 calendar days of receipt of the commission's decision.

(7) The chair or his designee, with a recommendation from the bureau, may authorize a temporary waiver for licensure renewal, where they feel it may be justified, i.e., loss of employment, pecuniary interests, etc., subject to subsequent commission review and approval.

F. Impaired practitioner program: An EMT who voluntarily self-identifies to the bureau or the impaired practitioner committee that he is experiencing a physical or mental impairment shall be considered for the impaired practitioner program ("diversion program"). Consideration may not result in participation in the diversion program. Also, any impaired-EMT who the bureau, with the advice of the commission, determines may benefit from the impaired practitioner program may be compelled to attend the impaired practitioner committee.

(1) The bureau, with the advice of the commission, may appoint an impaired-EMT rehabilitation committee to organize and administer a program that will:

(a) serve as a diversion program to which the bureau may refer licensees in lieu of, or in addition to, other disciplinary action taken by the bureau under these regulations; and

(b) be a source of referral for EMTs who, on a voluntary basis, desire to avail themselves of treatment for behavioral health based or chemical-dependence impairments.

(2) The impaired practitioner committee shall be composed as a minimum of:

(a) one bureau staff member;

(b) one commission member;

(c) one mental health specialist; and

(d) one physician.

(3) The impaired practitioner committee shall:

(a) arrange evaluations for EMTs who request participation in the diversion program;

(b) review and designate treatment facilities and services to which EMTs in the diversion program may be referred;

(c) receive and review information concerning the status and progress of participants in the diversion program;

(d) publicize the diversion program in coordination with EMS professional organizations and the bureau; and

(e) prepare and provide reports as needed to the bureau and the commission.

(4) Each EMT entering the diversion program shall be informed of the procedures applicable to the diversion program, of the rights and responsibilities associated with participation in the diversion program and of the possible consequences of failure to participate in the diversion program. Failure to comply with any treatment requirement of the diversion program may result in termination of the diversion program participation. The bureau shall report termination of diversion program participation to the commission. Participation in the diversion program shall not be a defense against, but may be considered in mitigating any disciplinary action authorized by the commission and taken by the bureau. The commission is not precluded from authorizing the bureau to commence a disciplinary action against an EMT who is participating in the diversion program or has been terminated from the diversion program.

G. Denial, suspension, and revocation: A license may be denied, suspended, or revoked, or may be subject to other disciplinary action, in accordance with the following:

(1) upon authorization by the commission, the bureau may suspend, revoke, or refuse to issue any license, or take other disciplinary action, in accordance with the provisions of the EMS Act, Subsection B of Section 24-10B-5 NMSA 1978 and the Uniform Licensing Act, Section 61-1-1, *et seq.*, NMSA 1978, for any of the reasons outlined below;

(2) if final disciplinary action is taken against a licensed EMS provider by the bureau, upon authorization from the commission, the bureau may publish the action in a periodical or other medium that has statewide distribution, and will notify the national registry of EMTs and other appropriate certification or licensing entities of the disciplinary action;

(3) grounds for denial, suspension, revocation or other disciplinary action are:

(a) misconduct in obtaining licensure;

(b) fraud, deceit, misrepresentation in obtaining licensure, including, but not limited to, cheating on an examination or attempting to subvert the initial or renewal licensing process;

(c) unprofessional conduct, whether committed while on duty or off duty, to include, but not limited to, the following:

(i) dissemination of a patient's health information to individuals not entitled to such information and where such information is protected by law from disclosure;

(ii) falsifying or altering patient records or personnel records;

(iii) misappropriation of money, drugs, or property;

(iv) obtaining or attempting to obtain any fee for patient services for one's self or for another through fraud, misrepresentation, or deceit;

(v) aiding, abetting, assisting or hiring an individual to violate the EMS Act or these duly promulgated rules;

(vi) failure to follow established procedure and documentation regarding controlled substances;

(vii) failure to make or keep accurate, intelligible entries in records as required by law, policy and standards for the practice of pre-hospital emergency care;

(viii) failure to report an EMS provider who is suspected of violating the New Mexico Emergency Medical Services Act or these rules;

(ix) intentionally engaging in sexual contact with or toward a patient;

(d) conviction for a disqualifying criminal offense, when the conviction relates directly to the profession or the practice of emergency medical services;

(e) a plea of guilty or no contest (nolo contendere) to a criminal charge for an offense identified in 7.27.2.18 NMAC, when the offense relates directly to the profession or the practice of emergency medical services;

(f) negligence in the delivery of emergency medical services to include, but not limited to:

(i) practicing outside the standard of care, scope of licensure or without appropriate medical direction;

(ii) malpractice;

(iii) incompetence in performance of pre-hospital emergency medical functions, whether direct patient care or the administration or management of that care. An EMS provider is under legal duty to possess and to apply the knowledge, skill and care that is ordinarily possessed and exercised by other EMS providers of the same licensure status and required by the generally accepted standards of the profession; the failure to possess or to apply to a substantial degree such knowledge, skill and care constitutes incompetence for purposes of disciplinary proceedings. It shall not be necessary to show that actual harm resulted from the act or omission or series of acts or omissions, so long as the conduct is of such a character that harm could have resulted to the patient or to the public;

(iv) patient abandonment: patient abandonment occurs when the EMS provider has accepted the patient assignment thus establishing a provider-patient relationship and then severs the relationship without giving reasonable notice to a qualified person who can make arrangements for the continuation of care;

(g) unauthorized disclosure of medical or other confidential information;

(h) physical or mental incapacity which could result or has resulted in performance of emergency medical service duties in a manner which endangers the health and safety of the patient or others;

(i) any demonstrated pattern of alcohol or other substance abuse; or any single instance of alcohol or substance abuse in the performance of emergency medical services duties;

(j) failure to successfully complete the impaired practitioner program; or failure to meet the terms and conditions of an impaired practitioner agreement;

(k) failure to meet licensure requirements;

(l) dispensing, administering, or distributing of a controlled substance, other than as authorized in the applicable scope of practice, or diversion of a controlled substance;

(m) failure to report revocation, suspension, denial, or other adverse actions taken in any other state or jurisdiction affecting the ability to practice emergency medical services;

(n) misrepresentation of the level of licensure or certification;

(o) performing duties as a licensed EMT without being licensed by the bureau to perform the authorized scope of practice for a level of licensure, including practicing after expiration of a license;

(p) any false, fraudulent, or deceptive statement in any document connected with the practice of emergency medical services, including, but not limited to, documents associated with:

(i) initial licensure;

(ii) renewal licensure;

(iii) licensure certificates, wallet cards; or

(iv) continuing education;

(q) failure to cooperate with an investigation, including but not limited to, failure to furnish the commission or bureau with information requested, or to appear for an interview as requested;

(r) inappropriate conduct or negligence by a licensed EMT who is also a registered instructor-coordinator;

(s) failure to comply with a judgment and order for child support or a warrant relating to paternity or child support proceedings issued by a district or tribal court, as provided in the Parental Responsibility Act, Section 40-5A-1 *et seq.*, NMSA 1978;

(t) failure to notify the bureau in writing of the entry against the licensee or applicant, at any time in any state or jurisdiction, of either a felony conviction or entry of a guilty plea or plea of nolo contendere to the same, or a misdemeanor conviction involving the use, dispensation, administration or distribution of a drug, the use of alcohol, sexual contact, or the possession or use of a weapon, or a guilty plea or plea of nolo contendere to the same, within 10 calendar days of the conviction or entry of the plea;

(u) intimidating, threatening, or taking any adverse action against a person for providing information to the bureau or commission, either directly or through an agent;

(v) impersonating an agent or employee of the bureau; and

(w) issuing non-sufficient funds check for the payment of licensing related fees.

(4) the provisions of the New Mexico Criminal Offender Employment Act, Section 28-2-1 *et seq.*, NMSA 1978, shall apply to disciplinary actions proposed pursuant to this rule;

(5) procedures for enforcement of the Parental Responsibility Act:

(a) the New Mexico human services department (HSD) shall issue to the bureau a certified list of obligors (meaning persons who have been ordered to pay child support pursuant to a judgment and order for support issued by a district or tribal court) not in compliance with their judgment and order of support;

(b) upon determination by the bureau that the name and social security number of an applicant for licensure, a licensed person, or licensee, appears on the certified list, the bureau shall require that applicants for licensure provide a statement of compliance from HSD to the bureau no later than 48 hours prior to scheduled attendance at a state EMS examination site; or provide a statement of compliance from HSD to the bureau no later than the close of business, 60 days from the date of the letter of notification. If the applicant fails to provide a statement of compliance, the bureau shall be authorized by the commission to issue a notice of contemplated action to deny the application. Persons currently licensed shall provide the bureau with a statement of compliance from HSD by the earlier of the application for licensure renewal or a specified date not to exceed 60 days. If the licensed person fails to provide the statement of compliance, the bureau shall be authorized by the commission to issue a notice of contemplated action to take appropriate action;

(c) upon authorization by the commission to issue a notice of contemplated action concerning violation of the Parental Enforcement Act, the bureau shall serve upon an applicant for licensure or licensee a notice of contemplated action in accordance with the Uniform Licensing Act stating that the bureau has grounds to take such action, and that the bureau shall take such action unless the applicant or licensed person mails a letter (certified mail, return receipt requested) within 20 days after service of the notice requesting a hearing, or provides the bureau, within 30 days of receipt of the notice of contemplated action, a statement of compliance from HSD; if the applicant or licensed person disagrees with the determination of non-compliance, or wishes to come into compliance, the applicant or licensed person shall contact the HSD child support enforcement division;

(d) in any hearing under this paragraph, the following standards shall apply:

(i) a statement of non-compliance is conclusive evidence that requires the bureau to take appropriate action, unless the applicant or licensee provides the bureau with a subsequent statement of compliance, which shall preclude the bureau from taking any further action under this section;

(ii) when an action is taken against an applicant or licensee solely because the applicant or licensed person is not in compliance with a judgment and order for support, the order shall state that the application, license shall be reinstated upon presentation to the bureau of a subsequent statement of compliance.

(e) the secretary may also include in the order any other conditions necessary to comply with requirements for reapplication and re-issuance of licensure, including, but not limited to, requiring a surcharge fee of $50, in addition to any other applicable fees;

(6) **right to a hearing:** in accordance with the provisions of the Uniform Licensing Act, Sections 61- 1-1, *et seq.*, NMSA 1978, every applicant or person licensed, shall be afforded notice and opportunity for a hearing, before the department shall have authority to take action, the effect of which would be to deny permission to take an examination for licensure for which application has been duly made, or to deny, suspend, or revoke a certification or license, or take other disciplinary action; exception:

(a) a person whose license is summarily suspended or immediately suspended may request an expedited hearing before a hearing officer appointed by the secretary to contest the action, by depositing in the mail a certified return receipt letter addressed to the bureau that contains a request for a hearing within 30 days after service of either the notice of summary suspension or the court order granting a preliminary injunction for the immediate suspension (as applicable);

(b) upon receipt of a timely request for a hearing, the department shall appoint a hearing officer and schedule a hearing, in accordance with the hearings portion of this rule;

(7) **records management:** a licensing record is maintained for every licensed EMT in New Mexico; any request for records maintained by the bureau will be processed in accordance with the Inspection of Public Records Act; if the bureau begins a preliminary or formal investigation, a separate confidential record will be created containing all investigatory material;

(a) **confidentiality:** the commission and the bureau will take every precaution to ensure that preliminary and formal investigations are conducted in a confidential manner; if the commission authorizes the bureau to initiate an action, all records not exempt from disclosure under the Inspection of Public Records Act, Sections 14-2-1, *et seq.*, NMSA 1978, will be placed in the licensee's licensing record, if one exists;

(b) **records confidentiality:** in accordance with the Emergency Medical Services Act at Section 24-10B-4.1 NMSA 1978, any files or records in the possession of the bureau, a regional office or a provider containing identifying information about individuals requesting or receiving treatment or other health services and any unsubstantiated complaints received by the bureau regarding any provider shall be confidential and not subject to public inspection; such files, records and complaints may be subject to subpoena for use in any pending cause, in any administrative proceeding, or in any of the courts of this state, unless otherwise provided by state or federal law.

H. Unlicensed activity: In accordance with the Uniform Licensing Act at Section 61-1-3.2 NMSA 1978, a person who, while not holding an active NM EMT license, engages in the performance of emergency medical services in New Mexico may be subject to a civil monetary penalty imposed by the department of health, in an amount not to exceed $10,000 for each violation. A person who is subject to a proposed monetary penalty for unlicensed activity shall be entitled to notice from the bureau and an administrative hearing, and the provisions of Section 7.27.2.15 NMAC shall apply as though the person was a licensee or applicant appealing a proposed disciplinary action.

I. Enforcement of education standards:

(1) **Process for non-compliance:** The bureau will make every attempt to resolve non-compliance of education standards at the lowest level possible. The following process shall be utilized:

(a) the bureau will notify the approved New Mexico education program, in writing, of any suspected or reported non-compliance of education standards received by complaint, report or course trends;

(b) the approved New Mexico education program will provide a plan to correct items of noncompliance and will submit the plan to the bureau in writing within 30 days;

(c) the bureau will re-evaluate the plan and progress reports for compliance of the education standards in three month increments until the problem is resolved; and

(d) if the bureau determines that non-compliance has not been adequately resolved, the bureau may initiate an enforcement action against the education program or the licensed EMT who is an instructor-coordinator.

(2) **Complaint/incident procedures:** Any person may communicate a complaint or knowledge of an incident to the bureau. Complaints shall be submitted in signed written form to the bureau. The bureau may begin an investigation if there is sufficient cause.

(a) When a complaint is received by the bureau, written acknowledgment shall be made within 10 working days and the bureau staff shall decide whether or not a preliminary or formal investigation of the complaint shall be initiated.

(b) Approved New Mexico EMS education programs being formally investigated shall receive written notification within 10 working days after a decision is made to begin a formal investigation.

(c) At the conclusion of the bureau's formal investigation, the bureau may report its findings to the investigated education program in written form. If the bureau investigation warrants an enforcement

action, the education program will be given a notice of contemplated action.

(d) If no investigation is warranted, the education program or person filing a complaint will be notified, as determined by the bureau.

(3) **Investigations:** The bureau shall normally conduct preliminary and formal investigations.

(a) **Preliminary investigations:** When the bureau receives information that forms the basis for an enforcement action, it shall begin a preliminary investigation. This is a fact finding, information gathering investigation that will attempt to determine for the bureau whether justification exists to initiate an action or to conduct a formal investigation.

(b) **Formal investigations:** Formal investigations are for the purpose of obtaining additional information to allow the bureau to determine if it will initiate an action. Notice will be given of the formal investigation, unless extenuating circumstances exist which would reasonably preclude notification.

(c) **Confidentiality:** The bureau will take every precaution to insure that preliminary and formal investigations are conducted in a confidential manner.

(d) **Records:** An official record is maintained for every approved New Mexico EMS education program. If the bureau begins a preliminary or formal investigation, a separate confidential record will be created containing all investigation material. If the bureau initiates an action, all records not exempt from disclosure under the Inspection of Public Records Act, Sections 14-2-1, *et seq.*, NMSA 1978, will be placed in the education program's official record. Any request for records maintained by the bureau will be processed in accordance with the Inspection of Public Records Act.

(4) **Grounds for enforcement actions:** Enforcement actions may result in an action taken against an approved New Mexico EMS education program or an instructor-coordinator affiliated with the education program. These enforcement actions may result in the following actions:

(a) probation or suspension of the education program for a specified period of time;

(b) non-recognition of an education program course;

(c) withdrawal of approval status of a education program by the bureau;

(d) under 7.27.2.14 NMAC, a licensing action may be initiated against an instructor-coordinator when the bureau determines that there may be inappropriate conduct or negligence; grounds for enforcement actions include, but are not limited to the following:

(i) failure to comply with law or rules including but not limited to the failure to properly educate students on the licensure process; failure to comply with the education standards or non-compliance with a education standard found in these rules;

(ii) falsifying documents to include use of any false, fraudulent, or deceptive statement in any document;

(iii) failure to cooperate with an investigation to include failure to furnish the bureau with requested information, as provided by law;

(iv) failure of students or instructors to function within the approved New Mexico scopes of practice, New Mexico treatment guidelines and the drug formulary, as approved by the medical direction committee;

(v) failure to report required documentation including patient care data and annual education reports.

(5) **Right to appeal:** Any approved New Mexico EMS education program may appeal a decision by the bureau to take an enforcement action.

(6) **Notice of contemplated action:** When the bureau contemplates taking any action specified in this section, it shall serve upon the approved New Mexico EMS education program a written notice containing a statement of the grounds or subject upon which the proposed action is based and the rule(s) violated.

(7) **Right to hearing:** The approved New Mexico EMS education program may request a hearing before a hearing officer appointed by the secretary to contest the proposed enforcement action, by mailing a certified return receipt letter addressed to the bureau within 20 days after service of the notice.

(8) **Hearing:** Upon receipt of a timely request for a hearing, the department of health shall appoint a hearing officer and schedule a hearing, to be held in Santa Fe, New Mexico, within 45 working days of receipt of the timely request for a hearing.

(9) **Notice of hearing:** The department shall notify the approved New Mexico EMS education program of the date, time, and place of the hearing, the identity of the hearing officer, and the subject matter of the hearing, not less than 30 days prior to the date of the hearing.

(10) **Hearing officer duties:** The hearing officer shall preside over the hearing, administer

oaths, take evidence, decide evidentiary objections, and rule on any motions or other matters that arise prior to the hearing.

(11) **Discovery:** Upon written request to another party, any party is entitled to: obtain the names and addresses of witnesses who will or may be called by the other party to testify at the hearing; and inspect and copy any documents or items, which the other party will or may introduce in evidence at the hearing.

(12) **Conduct of hearing:** Hearings are open to the public unless either party makes a request for closed meeting.

(13) **Hearing officer written report and recommendation(s):** The hearing officer shall make a written report and recommendation(s) to the secretary containing a statement of the issues raised at the hearing proposed findings of fact and conclusions of law, and a recommended determination. The hearing officer or designee shall record the hearing by means of a mechanical sound recording device provided by the department for a record of the hearing. The hearing officer written report shall be submitted to the secretary no later than 30 working days after the close of the hearing.

(14) **Secretary's determination:** The secretary shall render a final determination within 45 calendar days of the submission of the hearing officer's written report. A copy of the final decision shall be mailed to the appealing party by certified mail, return receipt requested. A copy shall be provided to legal counsel for the bureau.

[7.27.2.14 NMAC - Rp, 7.27.2.14 NMAC, 9/9/2025]

7.27.2.15 HEARINGS:

A. Right to appeal: A licensee or applicant may appeal a decision by the department to take a disciplinary action against the licensee or applicant under this rule.

B. Right to hearing:

(1) A licensee or applicant may request a hearing before a hearing officer appointed by the secretary to contest a proposed action under this rule, by mailing a written request for hearing via certified letter, return receipt requested, to the bureau within 20 days after service of the notice of the contemplated action.

(2) Exception; summary suspensions, and immediate suspensions pursuant to an injunction: a licensee may request a hearing to contest either the summary suspension of the individual's license, or the immediate suspension of the individual's license pursuant to a court-ordered preliminary injunction, by mailing a certified letter that contains a request for hearing, return receipt requested, to the bureau within either 30 days after service of the notice of the summary suspension or 30 days after service of the court order granting a preliminary injunction for immediate suspension. If a licensee or applicant fails to request a hearing in the time and manner required by this section, the licensee or applicant shall forfeit the right to a hearing, and the proposed action shall become final and not subject to judicial review.

C. Scheduling the hearing:

(1) **Appointment of hearing officer:** Upon the bureau's receipt of a timely request for a hearing, the department shall appoint a hearing officer and schedule a hearing.

(2) **Hearing date:**

(a) The hearing shall be held not more than 60 days and not less than 15 days from the date of service of the notice of the hearing.

(b) Exception for summary suspensions, and immediate suspensions pursuant to an injunction; expedited hearing: In the event that the bureau summarily suspends an individual's license or obtains a preliminary injunction immediately suspending an individual's license, the department shall afford the individual an expedited hearing within 15 days of the date of the bureau's timely receipt of the licensee's request for a hearing, except as otherwise specified in an order granting a preliminary injunction or as reasonably requested by the licensee.

(3) **Notice of hearing:**

(a) The department shall notify the licensee or applicant of the date, time, and place of the hearing and the identity of the hearing officer, and shall identify the statute(s) and regulation(s) authorizing the department to take the contemplated action (unless previously disclosed), within 20 days of the bureau's timely receipt of the request for hearing.

(b) Exception for summary suspensions, and immediate suspensions pursuant to an injunction: In the event that the bureau summarily suspends an individual's license or obtains a preliminary injunction immediately suspending an individual's license, the department shall notify the individual of the expedited hearing not less than seven days prior to the scheduled date of the expedited hearing.

(4) **Hearing venue:**

(a) The hearing shall be held in the county in which the person whose license is involved maintains his residence, or at the election of the hearing officer, in any county in which the acts complained of occurred. In any case, the hearing officer may, with the agreement of the parties, hold the hearing in some other county, or by remote video or telephonic conference.

(b) Exception: Hearings in cases involving initial licensure shall be held in Santa Fe, New Mexico.

D. Method of service: Any notice or decision required to be served under this section may be served either personally or by certified mail, return receipt requested, directed to the licensee or applicant at the last known mailing address (or, if service is made personally, by the last known physical address) shown by the records of the bureau. If the notice or decision is served personally, service shall be made in the same manner allowed by the rules of civil procedure for the state district courts of New Mexico. Where the notice or decision is served by certified mail, it shall be deemed to have been served on the date borne by the return receipt showing delivery, or the date of the last attempted delivery of the notice or decision, or the date of the addressee's refusal to accept delivery.

E. Excusal of the hearing officer:

(1) Peremptory excusal: A party shall have the ability to excuse one hearing officer. The party may request the peremptory excusal by submitting to the secretary a motion for peremptory excusal at least 20 days prior to the date of the hearing, or at least five days prior to the date of an expedited hearing concerning the summary suspension or immediate suspension of an individual's license.

(2) Excusal for good cause shown: A party may request that a hearing officer be excused for good cause shown by submitting to the secretary a motion of excusal for good cause at least 20 days prior to the date of the hearing, or at least five days prior to an expedited hearing concerning the summary suspension or immediate suspension of an individual's license.

F. Hearing officer duties: The hearing officer shall conduct the hearing, rule on any motions or other matters that arise prior to the hearing, and issue a written report and recommendation(s) to the secretary following the close of the hearing.

G. Official file: Upon appointment, the hearing officer shall establish an official file which shall contain all notices, hearing requests, pleadings, motions, written stipulations, evidence, briefs, and correspondence received in the case. The official file shall also contain proffered items not admitted into evidence, which shall be so identified and shall be separately maintained. Upon conclusion of the proceeding and following issuance of the final decision, the hearing officer shall tender the complete official file to the department for its retention as an official record of the proceedings.

H. Powers of hearing officer: The hearing officer shall have all the powers necessary to conduct a hearing and to take all necessary action to avoid delay, maintain order, and assure development of a clear and complete record, including but not limited to the power to: administer oaths or affirmations; schedule continuances; direct discovery; examine witnesses and direct witnesses to testify; subpoena witnesses and relevant books, papers, documents, and other evidence; limit repetitious and cumulative testimony; set reasonable limits on the amount of time a witness may testify; decide objections to the admissibility of evidence or receive the evidence subject to later ruling; receive offers of proof for the record; take notice of judicially cognizable facts or take notice of general, technical, or scientific facts within the hearing officer's specialized knowledge (provided that the hearing officer notifies the parties beforehand and offers the parties an opportunity to contest the fact so noticed); direct parties to appear and confer for the settlement or simplification of issues, and otherwise conduct pre-hearing conferences; impose appropriate evidentiary sanctions against a party who fails to provide discovery or who fails to comply with a subpoena; dispose of procedural requests or similar matters; and enter proposed findings of fact and conclusions of law, orders, reports and recommendations. The hearing officer may utilize his or her experience, technical competence, or specialized knowledge in the evaluation of evidence presented.

I. Minimum discovery; inspection and copying of documents: Upon written request to another party, any party shall have access to documents in the possession of the other party that are relevant to the subject matter of the appeal, except confidential or privileged documents.

J. Minimum discovery; witnesses: The parties shall each disclose to each other and to the hearing officer, either orally or in writing, the names of witnesses to be called, together with a brief summary of the testimony of each witness. In situations where written statements will be offered into evidence in lieu of a witness's oral testimony, the names of the persons making the statements, and a brief summary of the statements shall be disclosed. The parties shall also exchange exhibit lists and exhibits to be offered at hearing, by the deadline established by the hearing officer.

K. Depositions: Depositions may be taken by any party after service of notice in accordance with the Rules of Civil Procedure for the district courts. Depositions may be used as in proceedings governed by those rules.

L. Subpoenas: A party may have subpoenas and subpoenas duces tecum (to compel discovery and the attendance of witnesses and the production of relevant books, papers, documents and other evidence) issued as of right prior to the commencement of a hearing upon making written request therefor to the hearing officer. The issuance of such subpoenas after the commencement of the hearing rests in the discretion of the hearing officer.

M. Subpoena limits; service: Geographical limits upon the subpoena power shall be the same as if the hearing officer were a district court sitting at the location at which the hearing or discovery proceeding is to take place. The method of service shall be the same as that under the rules of civil procedure for the district courts, except that rules requiring the tendering of fees shall not apply to the department.

N. Pre-hearing disposition: The subject matter of any hearing may be disposed of by stipulation, settlement or consent order, unless otherwise precluded by law. Any stipulation, settlement, or consent order reached between the parties shall be written and shall be signed by the hearing officer and the parties or their attorneys.

O. Postponement or continuance: The hearing officer, at his or her discretion, may postpone or continue a hearing upon his or her own motion, or upon the motion of a party, for good cause shown. Notice of any postponement or continuance shall be given in person, by telephone, or by mail to all parties within a reasonable time in advance of the previously scheduled hearing date.

P. Conduct of hearing: Hearings shall be open to the public; provided, however, that hearings may be closed in whole or in part to prevent the disclosure of confidential information, including but not limited to health information protected by state and federal laws.

Q. Telephonic testimony: Upon timely notice to the opposing party and the hearing officer, and with the approval of the hearing officer, the parties may present witnesses by telephone or live video (if available).

R. Legal representation: A licensee or applicant may be represented by an attorney licensed to practice in New Mexico, or by a licensed EMT, or both. The department may be represented by a department employee or an attorney licensed to practice in New Mexico, or both.

S. Recording: The hearing officer or a designee shall record the hearing by means of a mechanical sound recording device provided by the department for a record of the hearing. Such recording need not be transcribed, unless requested by a party who shall arrange and pay for the transcription.

T. Burden of proof: Except as otherwise provided in this rule, the department has the burden of proving by a preponderance of the evidence the basis for the proposed action. Exception in denied application cases: in cases arising from the denial of permission to take a licensing examination for which application has been properly made, denial of a license for any cause other than failure to pass an examination, or denial of a license for which application has been properly made on the basis of reciprocity or endorsement or acceptance of a national certificate of qualification, the applicant shall bear the initial burden of proving by a preponderance of the evidence the applicant's qualifications.

U. Order of presentation; general rule: Except as provided in this rule, the order of presentation for hearings in all cases shall be:

(1) **appearances:** opening of proceeding and taking of appearances by the hearing officer;

(2) **pending matters:** disposition by the hearing officer of preliminary and pending matters;

(3) **opening statements:** the opening statement of the department; and then the opening statement of the party challenging the department's action or proposed action;

(4) **cases:** the department's case-in-chief, and then the case-in-chief of the party challenging the department's action;

(5) **rebuttal:** the department's case-in-rebuttal;

(6) **closing argument:** the department's closing statement, which may include legal argument; and then the closing statement of the party opposing the department's action or proposed action, which may include legal argument; and

(7) **close:** close of proceedings by the hearing officer.

V. Order of presentation in denied application cases: The order of presentation in cases arising from the denial of permission to take a licensing examination for which application has been properly made, denial of a license for any cause other than failure to pass an examination, denial of a license for which application has been properly made on the basis of reciprocity or endorsement or acceptance of a national certificate of qualification, and any other case in which the applicant or licensee bears the burden of proof shall be:

(1) **appearances:** opening of proceeding and taking of appearances by the hearing officer;

(2) **pending matters:** disposition by the hearing officer of preliminary and pending matters;

(3) **opening statements:** applicant's or licensee's opening statement; and then the opening statement of the department;

(4) **cases:** the applicant's or licensee's case-in-chief, and then the department's case-in-chief;

(5) **rebuttal:** the applicant's or licensee's case-in-rebuttal;

(6) **closing argument:** the applicant's or licensee's closing statement, which may include legal argument; and then the department's closing statement, which may include legal argument; and

(7) **close:** close of proceedings by the hearing officer.

W. Admissible evidence; rules of evidence not applicable: The hearing officer may admit evidence and may give probative effect to evidence that is of a kind commonly relied on by reasonably prudent persons in the conduct of serious affairs. Rules of evidence, such as the New Mexico rules of evidence for the district courts, shall not apply but may be considered in determining the weight to be given any item of evidence. The hearing officer may at his or her discretion, upon his or her motion or the motion of a party or a party's representative, exclude incompetent, irrelevant, immaterial, or unduly repetitious evidence, including testimony, and may exclude confidential or privileged evidence.

X. Objections: A party may timely object to evidentiary offers by stating the objection together with a succinct statement of the grounds for the objection. The hearing officer may rule on the admissibility of evidence at the time an objection is made or may receive the evidence subject to later ruling.

Y. Official notice: The hearing officer may take notice of any facts of which judicial notice may be taken, and may take notice of general, technical, or scientific facts within his or her specialized knowledge. When the hearing officer takes notice of a fact, the parties shall be notified either before or during the hearing of the fact so noticed and its source, and the parties shall be afforded an opportunity to contest the fact so noticed.

Z. Record content: The record of a hearing shall include all documents contained in the official file maintained by the hearing officer, including all evidence received during the course of the hearing, proposed findings of fact and conclusions of law, the recommendations of the hearing officer, and the final decision of the secretary.

AA Written evidence from witnesses: The hearing officer may admit evidence in the form of a written statement made by a witness, when doing so will serve to expedite the hearing and will not substantially prejudice the interests of the parties.

BB. Failure to appear: If a party who has requested a hearing or a party's representative fails to appear on the date, time, or location announced for a hearing, and if no continuance was previously granted, the hearing officer may proceed to hear the evidence of such witnesses as may have appeared or may accept offers of proof regarding anticipated testimony and other evidence, and the hearing officer may further proceed to consider the matter and issue his report and recommendation(s) based on the evidence presented; and the secretary may subsequently render a final decision. Where a person fails to appear at a hearing because of accident, sickness, or other cause, the person may within a reasonable time apply to the hearing officer to reopen the proceeding, and the hearing officer may, upon finding sufficient cause, fix a time and place for a hearing and give notice to the parties.

CC. Hearing officer written report and recommendation(s): The hearing officer shall submit a written report and recommendation(s) to the secretary that contains a statement of the issues raised at the hearing, proposed findings of fact and conclusions of law, and a recommended determination. Proposed findings of fact shall be based upon the evidence presented at the hearing or known to all parties, including matters officially noticed by the hearing officer. The hearing officer's recommended decision is a recommendation to the secretary of the New Mexico department of health and is not a final order.

DD. Submission for final decision: In accordance with the Uniform Licensing Act at Subsection B of Section 61-1-7 NMSA 1978, and except as otherwise agreed upon by the parties, the hearing officer's report and recommendation(s) shall be submitted together with the complete official file to the secretary of the New Mexico department of health for a final decision no later than 30 days after the hearing.

EE. Secretary's final decision: In accordance with the Uniform Licensing Act at Subsection B of Section 61-1-13 NMSA 1978, the secretary shall render a final decision within 90 days after the close of the hearing. The final decision shall contain a statement informing the applicant or licensee of their right to judicial review and the time within which such review must be brought (see below). A copy of the final decision shall be mailed to the appealing party by certified mail, return receipt requested, within 15 days after the final decision is rendered and signed. A copy shall be provided to legal counsel for the bureau.

FF. Right to judicial review: Pursuant to Section 39-3-1.1 NMSA 1978, a licensee or applicant who is entitled to a hearing under this rule and who is aggrieved by an adverse final decision may obtain a judicial review of the decision by filing in state district court a notice of appeal within 30 days of the entry of the final decision by the secretary.

GG. Court-ordered stay: Filing for judicial review shall not itself stay enforcement of the final

decision. Any party may petition the court whose jurisdiction has been properly invoked for an order staying enforcement.

[7.27.2.15 NMAC - Rp, 7.27.2.15 NMAC, 9/9/2025]

7.27.2.16 CRIMINAL HISTORY SCREENING:

A. Authority; use of criminal history information: The emergency medical services (EMS) bureau is authorized to obtain the criminal history records of applicants and licensees, and to exchange fingerprint data directly with the federal bureau of investigation, department of public safety (DPS) and any other law enforcement agency or organization. The EMS bureau shall require fingerprinting of applicants and licensees for the purposes of this section. Information regarding felonies may form the basis of a denial, suspension or revocation of licensure, and other disciplinary action when the conviction relates directly to the profession or the practice of emergency medical services.

B. Procedure for applicants and licensees:

(1) If an applicant or licensee otherwise meets the application and eligibility requirements, then the bureau shall require the applicant or licensee to submit a request to the federal bureau of investigation, DPS or a DPS designated vendor for a current criminal history screening through the national crime information center ("NCIC"). The applicant or licensee shall undergo the criminal history screening when first applying for either initial or renewal licensure after the effective date of this rule, and every four years thereafter.

(2) The department shall provide applicants and licensees with the department's originating agency identification (ORI) number for the purposes of criminal history screening.

(3) An applicant or licensee shall provide to DPS or a DPS designated vendor a criminal background screening request, fingerprints, and supporting documentation including an authorization for release of information to the department in accordance with the procedures of DPS or the DPS designated vendor.

(4) DPS or the DPS designated vendor will review state records and also transmit the fingerprints to the federal bureau of investigation for a national screening. The results of the screening will be made available to the department for review.

(5) Applicants and licensees shall bear any costs associated with ordering or conducting criminal history screening. Fees are determined by and payable to DPS or a DPS designated vendor. Fees cannot be waived by the department.

(6) The EMS bureau may, within its discretion, waive the criminal history screening requirements of this section for an applicant or licensee who has submitted to, and provided proof of, an equivalent criminal history screening through DPS or through the DPS designated vendor within the previous nine months and was found to have no criminal convictions.

(7) The EMS bureau shall comply with applicable confidentiality requirements of the DPS and the federal bureau of investigation regarding the handling and dissemination of criminal history information.

C. EMS bureau review of criminal history screening information:

(1) The EMS bureau shall conduct a review of applicants and licensees with an associated history of felonies. The bureau may require the submission of additional information in writing from the applicant or licensee in order to determine whether to pursue disciplinary action. Such information may include (but not be limited to) evidence of acquittal or dismissal, information concerning conviction of a lesser included crime, or evidence of rehabilitation.

(2) The Criminal Offender Employment Act, Section 28-2-1 *et seq.*, NMSA 1978 shall govern any consideration of criminal records required or permitted by this section. In accordance with Section 28-2-4 NMSA 1978 of that act, the following provisions shall apply: If an applicant or licensee has been convicted of a felony, or if the applicant has pled guilty or nolo contendre to a felony offense, and if the criminal offense relates directly to the profession or the practice of emergency medical services, the department may deny, suspend, or revoke licensure, or take other disciplinary action, on the basis of the conviction(s) or plea(s). The burden of proof shall rest with the applicant or licensee to prove that he or she has been sufficiently rehabilitated.

(3) Factors that may be considered by the EMS bureau in determining whether to pursue disciplinary action against a licensee or applicant on the basis of the individual's criminal history may include, but shall not be limited to:

(a) the total number of convictions, or the total number of guilty or no contest (nolo contendere) pleas entered;

(b) the time elapsed since the most recent conviction or plea;

(c) the circumstances and severity of the crime(s), including whether drugs or violence were involved;

(d) activities evidencing rehabilitation, including but not limited to completion of probation and completion of drug or alcohol rehabilitation programs;

(e) any false or misleading statements made by the applicant or licensee in an application or other materials; and

(f) evidence concerning whether an applicant or licensee poses a risk of harm to the health and safety of patients or the public.

(4) An applicant or licensee whose license is denied, suspended, or revoked, or who is otherwise made the subject of a contemplated disciplinary action based on information obtained in a criminal history background screening, shall be entitled to review the information obtained pursuant to this section and to appeal the decision pursuant to the Uniform Licensing Act, Section 61-1-1 *et seq.*, NMSA 1978, in accordance with department rules.

[7.27.2.16 NMAC - Rp, 7.27.2.16 NMAC, 9/9/2025]

7.27.2.17 REVOCATION:

A. Effect of revocation of NM EMS licensure:

(1) Any person whose New Mexico EMSFR, EMT-B, EMT-I, or EMT-P licensure was revoked shall be ineligible to apply for EMSFR, EMT-B, EMT-I, or EMT-P licensure, except as otherwise permitted by this rule section.

(2) Any person whose New Mexico EMD or EMD-I licensure was revoked shall be ineligible to apply for EMD or EMD-I licensure, except as otherwise permitted by this rule section.

(3) A person whose NM EMS licensure was previously revoked cannot utilize the re-entry or reciprocity processes to become relicensed.

B. Application for preliminary approval for licensure after revocation:

(1) A person whose New Mexico licensure was revoked no less than five years ago and whose application for relicensure is prohibited as stated above (hereafter, a "revoked individual") may request preliminary approval for licensure at the first responder, EMT basic or EMD level by submitting a preliminary approval application to the EMS bureau.

(2) A revoked individual who applies for preliminary approval for licensure shall submit all documentation that they wish to be considered in support of the request, including any records to demonstrate rehabilitation. Records that demonstrate rehabilitation are materials that demonstrate that it is likely that the revoked individual will not engage in conduct that is the same or similar to that which resulted in the revocation, and which demonstrate that the revoked individual warrants the public trust.

(3) At all times in this licensure process, the burden shall rest solely with the revoked individual to demonstrate their rehabilitation and their fitness to practice emergency medicine.

(4) The EMS bureau's receipt of an application for preliminary approval for licensure of an individual whose license was previously revoked shall in no way guarantee that the application will be granted or that the revoked individual will be permitted to apply for licensure.

C. Final decision on application for preliminary approval for licensure after revocation:

(1) The EMS bureau shall review the application for preliminary approval and shall submit that application and any attached materials to the licensing commission for its consideration in the closed session of a regularly scheduled meeting of the commission. The EMS bureau shall make a recommendation to the licensing commission to grant or deny the application, and the commission shall review the application, during a closed meeting at which a majority of commission members participate, either in person or by means of a conference telephone or similar communications equipment. The licensing commission shall authorize the EMS bureau to grant or deny the application for preliminary approval for licensure by a majority vote of the commission members in attendance.

(2) Upon receiving authorization from the commission to grant or deny an application for preliminary approval for licensure, the bureau may render the final decision via written notice to the applicant.

(3) The bureau's grant or denial of an application for preliminary approval for licensure constitutes the final administrative action on that application, and, except as otherwise provided by law, that decision shall not be subject to any further proceeding or appeal. Nothing in this rule section conveys a right of action to any person with respect to a final decision concerning licensure after revocation, and nothing in this rule generates a right of judicial appeal with respect to that decision.

(4) A revoked individual whose application for preliminary approval for licensure is denied shall be prohibited from applying for licensure, and may not thereafter reapply for preliminary approval for licensure, until the passage of at least three years from the date of the denial.

(5) A revoked individual whose application for preliminary approval for licensure is granted may apply for licensure, and shall complete all applicable requirements of the rule in order to become licensed at this initial level and all subsequent levels of desired licensure.

D. Effect of licensure after revocation: The licensure after revocation process enables a revoked individual to again obtain NM EMS licensure. This licensure does not constitute reinstatement, revival or renewal of a license that was previously issued or revoked. The record of a revoked individual's prior revocation shall remain a part of their EMS licensing file, and shall remain a matter of public record, without regard to the outcome of the preliminary approval process.

[7.27.2.17 NMAC - N, 12/12/2017; Rp, 9/9/2025]

7.27.2.18 DISQUALIFYING CRIMINAL OFFENSES:

A. Disqualifying criminal offenses include criminal offenses in any jurisdiction (including but not limited to state and federal jurisdictions) for any of the following felonies or their equivalents, any aggravated form of the following felony offenses, and any offense whose elements would otherwise satisfy the criteria for the following felony offenses. Any such criminal offense may disqualify an applicant or licensee from receiving or retaining a license to practice as an EMS provider, in accordance with this rule.

(1) Physical Harm to Others:

(a) Section 30-2-1 NMSA 1978, "Murder".
(b) Section 30-2-3 NMSA 1978, "Manslaughter".
(c) Section 30-3-1 NMSA 1978, "Assault".
(d) Section 30-3-4 NMSA 1978, "Battery".
(e) Section 30-3-7 NMSA 1978, "Injury to pregnant woman".
(f) Section 30-3-9.2 NMSA 1978, "Aggravated assault upon a health care worker".
(g) Section 30-3-9.2 NMSA 1978, "Battery upon a health care worker".
(h) Section 30-3-12 NMSA 1978, "Aggravated assault against a household member".
(i) Section 30-3-15 NMSA 1978, "Aggravated battery against a household member".
(j) Section 30-6-1 NMSA 1978, "Abandonment or abuse of a child".
(k) Section 30-4-1 NMSA 1978, "Kidnapping".
(l) Section 30-4-3 NMSA 1978, "False imprisonment".
(m) Section 30-9-19 NMSA 1978, "Sexual assault".
(n) Section 30-22-17 NMSA 1978, "Assault by prisoner".
(o) Section 30-22-22 NMSA 1978, "Aggravated assault upon a peace officer".
(p) Section 30-22-23 NMSA 1978, "Assault with intent to commit violent felony upon a peace officer".
(q) Section 30-22-24 NMSA 1978, "Battery upon a peace officer".
(r) Section 30-47-4 NMSA 1978, "Abuse of a care facility resident".
(s) Section 30-47-5 NMSA 1978, "Neglect of a care facility resident".
(t) Section 30-47-6 NMSA 1978, "Exploitation of a care facility resident".

(2) Property Damage:

(a) Section 30-3-18 NMSA 1978, "Criminal damage to property of a household member".
(b) Section 30-7-5 NMSA 1978, "Dangerous use of explosives".
(c) Section 30-15-1 NMSA 1978, "Criminal damage to property".
(d) Section 30-15-1.1 NMSA 1978, "Unauthorized graffiti on personal or real property.
(e) Section 30-17-5 NMSA 1978, "Arson and negligent arson".

(3) Fraud:

(a) Section 30-16-6 NMSA 1978, "Fraud".
(b) Section 7-1-73 "NMSA 1978, Tax fraud".
(c) Chapter 59a, Article 16c NMSA 1978, felony violations of the Insurance Fraud Act.
(d) Section 30-28-2 "NMSA 1978, "Conspiracy".
(e) Section 30-44-4 NMSA 1978, "Falsification of documents" under the Medicaid Fraud Act.

(f) Section 30-44-5 NMSA 1978, "Failure to retain records in connection with the Medicaid Fraud Act".

(g) Section 30-44-6 NMSA 1978, "Obstruction of investigation in connection with the Medicaid Fraud Act".

(h) Section 30-44-7 NMSA 1978, "Medicaid fraud".

(i) Section 30-51-4 NMSA 1978, "Money laundering".

(4) **Theft:**

(a) Section 30-14-8 NMSA 1978, "Breaking and entering".

(b) Section 30-16-1 NMSA 1978, "Larceny".

(c) Section 30-16-2 "NMSA 1978, Robbery".

(d) Section 30-16-3 NMSA 1978, "Burglary".

(e) Section 30-16-20 NMSA 1978, "Shoplifting".

(f) Section 30-16-24.1 NMSA 1978, "Theft of identity".

(g) Section 30-16-26 NMSA 1978, "Theft of a credit card".

(h) Section 30-16-11 NMSA 1978, "Receiving stolen property".

(i) Section 30-47-6 NMSA 1978, "Exploitation of a care facility resident's property".

(5) **Financial Crimes:**

(a) Section 30-16-8 NMSA 1978, "Embezzlement".

(b) Section 30-16-9 NMSA 1978, "Extortion".

(c) Section 30-16-10 NMSA 1978, "Forgery".

(d) Section 30-41-1 NMSA 1978, "Soliciting and receiving illegal kickbacks".

(e) Section 30-42-4 NMSA 1978, "Racketeering".

(6) **Drug Offenses:**

(a) Section 30-31-20 NMSA 1978, "Trafficking of controlled substances".

(b) Section 30-31-21 NMSA 1978, "Distribution to a minor".

(c) Section 30-31-22 NMSA 1978, "Intentionally distributing or possessing with intent to distribute a controlled substance.

(d) Section 30-31-23 NMSA 1978, "Possession of controlled substances".

(e) Section 30-31-24 NMSA 1978, "Violations of the administrative provisions of the Controlled Substances Act".

(f) Section 30-31-25 "NMSA 1978, Engaging in other acts prohibited by the Controlled Substances Act".

(g) Section 30-31-25.1 NMSA 1978, "Delivering drug paraphernalia to a person under eighteen years of age and who is at least three years the person's junior".

(h) Section 30-31A-4 NMSA 1978, "Manufacturing, distributing or possessing with intent to distribute an imitation controlled substance".

(i) Section 30-31A-5 NMSA 1978, "Intentionally selling an imitation controlled substance to a person under the age of eighteen years".

(j) Section 30-31A-6 NMSA 1978, "Intentionally possessing an imitation controlled substance with the intent to distribute".

(k) Section 30-31B-12 NMSA 1978, "Certain violations of the Drug Precursor Act".

(l) Section 30-6-3 NMSA 1978, "Contributing to the delinquency of a minor".

(m) Section 30-22-13 NMAC, "Furnishing drugs or liquor to a prisoner".

(7) **Sex Crimes:**

(a) Section 30-37A-1 NMSA 1978, "Unauthorized distribution of sensitive images".

(b) Section 30-37-3.2 NMSA 1978, "Child solicitation by electronic communication device".

(c) Section 30-37-3.3 NMSA 1978, "Criminal sexual communication with a child".

(d) Section, 30-52-1 NMSA 1978, "Human trafficking".

(e) Section 30-9-11 NMSA 1978, "Criminal sexual penetration".

(f) Section 30-9-12 NMSA 1978, "Criminal sexual contact".

(g) Section 30-9-13 NMSA 1978, "Criminal sexual contact of a minor".

(h) Section 30-9-14.3 NMSA 1978, "Aggravated indecent exposure".

(i) Section 30-6A-3 NMSA 1978, "Sexual exploitation of children".

(j) Section 30-6A-4 NMSA 1978, "Sexual exploitation of children by prostitution".

(k) Subsection P of Section 29-11A-4 NMSA 1978, "Failure to register as required by sex offender registration and notification act".

(8) **Abuse of animals:**

(a) Section 30-18-1 NMSA 1978, "Cruelty to animals or extreme cruelty to animals".

(b) Section 30-18-3 NMSA 1978, "Unlawful branding of animals".

(c) Section 30-18-6 NMSA 1978, "Transporting stolen livestock".

(d) Section 30-18-9 NMSA 1978, "Dog fighting or cock fighting".

(e) Section 30-18-12 NMSA 1978, "Injury to livestock".

(9) **Miscellaneous:**

(a) Section 30-3A-3 NMSA 1978, "Stalking".

(b) Section 30-20-12 NMSA 1978, "Use of telephone to terrify, intimidate, threaten, harass, annoy or offend another.

(c) Section 30-22-7 NMSA 1978, "Unlawful rescue" (defined as "intentionally, and without lawful authority, rescuing any person lawfully in [the] custody or confinement" of a law enforcement officer).

(d) Section 66-8-102 NMSA 1978, "Driving under the influence of intoxicating liquor or drugs".

(e) Section 61-6-20 NMSA 1978, "Practicing medicine without a license".

(f) Section 61-6-25 NMSA 1978, "Making a false statement under oath or submitting a false affidavit, in connection with the Medical Practice Act".

(g) Section 26-1-26 NMSA 1978, "Violation of the New Mexico Drug, Device and Cosmetic Act".

(h) Section 12-10-20 NMSA 1978, "Failure to comply with proclamation of the governor made under Riot Control Act".

(i) Section 30-3-19 NMSA 1978, "Threatening a judge or immediate family member of a judge".

(j) Section 30-7-16 NMSA 1978, "Receipt, transport, or possession of a firearm or destructive device by certain persons".

(k) Section 30-16D-6 NMSA 1978, "Altering an engine number or other numbers".

(l) Section 30-22-4 NMSA 1978, "Harboring or aiding a felon".

(m) Section 30-22-5 NMSA 1978, "Tampering with evidence".

(n) Section 30-22-8 NMSA 1978, "Escape from jail".

(o) Section 30-22-9 NMSA 1978, "Escape from penitentiary".

(p) Section 30-22-11 NMSA, "Assisting escape".

(q) Section 30-22-12 NMSA, "Furnishing articles for prisoner's escape".

(r) Section 30-22-16 NMSA 1978, "Possession of deadly weapon or explosive by a prisoner".

(s) Section 30-24-1 NMSA 1978, "Bribery of a public officer or employee".

(t) Section 30-24-2 NMSA 1978, "Demanding or receiving a bribe by a public officer or employee".

(u) Section 30-24-3 NMSA 1978, "Bribery or intimidation of a witness".

(v) Section 30-24-3.1 NMSA 1978, "Acceptance of a bribe by a witness".

(w) Sections 1-20-1 through -24 NMSA 1978, A violation of the Election Code.

(10) **Attempt, solicitation, conspiracy:** Sections 30-28-1 through -3 NMSA 1978, An attempt, solicitation or conspiracy involving any offense identified in this section.

B. The foregoing list of disqualifying offenses shall not limit the ability of the department to deny, suspend, revoke, or take other disciplinary action against an applicant or licensee for any other basis described in department rule. An individual may be subject to such disciplinary action irrespective of whether they were convicted of a crime for the conduct, and irrespective of whether the crime for which they were convicted is listed as a disqualifying criminal offense.

[7.27.2.18 NMAC - N, 9/9/2025]

History of 7.27.2 NMAC:

Pre-NMAC History:

Material in this part was derived from that previously filed with the commission of public records - state records

center and archives as:
DOH Regulation 9/5/2004 (CHSD), Regulations Governing the Certification and Licensing of Emergency Services Personnel, filed 10/25/1995.

History of Repealed Material: 7 NMAC 27.2, Certification and Licensing of Emergency Medical Services Personnel (filed 11/26/1996) repealed 09/13/2001.
7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 08/30/2001) repealed 01/01/2006.
7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 12/16/2005) repealed 12/15/2008.
7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 12/2/2008) repealed 10/30/2012.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel (filed 10/15/2012) repealed 8/15/2004.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, (filed 7/28/2014), repealed 12/12/2017.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, (filed 11/30/2017), repealed 9/9/2025.

Other History:
DOH Regulation 9/5/2004 (CHSD), Regulations Governing The Certification and Licensing of Emergency Medical Services Personnel (filed 10/25/1995), was renumbered and reformatted to and replaced by 7 NMAC 27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel, effective 01/01/1997.
7 NMAC 27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 11/26/1996) was replaced by 7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel, effective 09/13/2001.
7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 08/30/2001) was replaced by 7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel, effective 01/01/2006. 7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 12/16/2005) was replaced by 7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, effective 12/15/2008.
7.27.2 NMAC, Certification and Licensing of Emergency Medical Services Personnel (filed 12/2/2008) was replaced by 7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, effective 10/30/2012.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel (filed 10/15/2012) was replaced by 7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, effective 8/15/2014.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel (filed 7/28/2014) was replaced by 7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, effective 12/12/2017.
7.27.2 NMAC, Licensing of Emergency Medical Services Personnel (filed 11/30/2017) was replaced by 7.27.2 NMAC, Licensing of Emergency Medical Services Personnel, effective 9/9/2025.