

Mark King Initiative (MKI)

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Preface

Mr. Mark E. King (1953-2006) was the State EMS Director for West Virginia, a former National Registry Board member and an EMS provider for over 25 years. It was his vision to see States require EMS providers to maintain their National EMS Certification to advance professionalism in the EMS field and promote National EMS Standards. It is in recognition of this vision and contributions to the EMS community that this initiative is named in his honor.

Intent

The intent of this policy is to establish an expedient and politically feasible method for a state to adopt the National Registry EMS Certification as the basis for State EMS licensure. States wishing to re-adopt the National Registry as the basis for initial state licensure frequently encounter difficulty transitioning to use of the National Registry because there are many formerly Nationally Certified EMS providers who, although State licensed, have not maintained their certification. In a Mark King Initiative (MKI) state, this policy allows the National Registry to reinstate a lapsed national certification if the individual has maintained unrestricted state licensure at or above the level of the last National Certification held.

Scope

This policy defines the authority of the Executive Director to approve MKI requests by State EMS agencies. Any variation in defined criteria requires National Registry Board of Directors approval.

Definitions

MKI – Mark King Initiative; the reinstatement process governed by this policy.

State EMS agency – The state governmental organization with authorized jurisdiction for the licensure of EMS providers.

NCCR- National Continued Competency Requirements; the component of recertification requirements that contain defined content according to current National Registry recertification standards. Also known as the National Component.

Designated Authorizing Agency – Governmental EMS authorizing agencies recognized by the NREMT according to the National Registry Designated Authorizing Agency Policy.

Recertification – the process used to renew a National Registry certification.

Re-licensure – the process used to renew a State-issued EMS credential, whether called a license or certification by the State.

Policy

Consideration of State EMS Agency Application

A State EMS agency must request participation in the MKI in writing. Participation must be applied consistently to all levels licensed by the State EMS agency. MKI for a Designated Authorizing Agency must be approved by the National Registry Board.

The Executive Director may approve requests for MKI according to the following criteria.

1. The Executive Director must find that the State EMS re-licensure requirements are substantially similar (see criteria below) to National Registry recertification requirements.
2. The Executive Director must find that the State has incorporated the requirement for current National Registry EMS Certification as a part of the initial licensure and re-licensure process into the applicable state rule-making process (such as rules, regulations or legislation) for all levels of EMS personnel licensed by the State EMS agency.
 - Policies that can be changed at the sole discretion of the State EMS Director do not meet this standard.
 - State EMS Agency EMS personnel licensing rules and this policy must work as a “ratchet.” Those previously certified must renew their national certification within two State licensure cycles and continuously maintain National Registry certification thereafter for continued state licensure.
 - The State EMS Agency must adopt current National Registry certification as requirement for reciprocity. Reciprocity cannot be used as a path to MKI reinstatement.
3. Any variation must be approved by the National Registry Board of Directors.

Based on these considerations, the National Registry and the State EMS Agency with jurisdiction will document the terms and findings of the MKI program in a memorandum of agreement signed by the Executive Director of the National Registry and the Director (or equivalent) of the State EMS Agency.

Substantial Similarity of Re-licensure and Recertification Requirements

State re-licensure requirements must currently be substantially similar to National Registry recertification requirements to qualify for MKI. For continuing education (CE) comparison, the following apply:

1. In cases where the licensure period is not two years, an annual equivalent will be used for comparison to National Registry recertification. National Registry standards will therefore be expressed as 8 hours annually for EMR, 20 hours annually for EMT, 25 hours annually for AEMT and 30 hours annually for paramedic. States must require, at minimum, this annual equivalent hours of total continuing education.
2. States must include a requirement for defined content that approximates the current National Continued Competency Requirements (National Component) with deficiencies that total no more than 50% variation in the annual equivalent hours.
3. Distributive education limits are not evaluated.
4. If new re-licensure requirements are instituted to meet this standard, the new State procedures must have been in place for all providers to have applied the requirements for at least one licensure cycle before that provider can use MKI.

Implementation of MKI

MKI may only apply if the candidate has maintained licensure at or above the last level of National Registry certification with no current restrictions on practice. MKI will reinstate the level of National Registry certification last held.

Certification levels that have experienced transition in the National EMS Education Standards (such as EMT-I 99) will be transitioned as appropriate for the then-current transition plan. MKI cannot be used to circumvent transition plans that require re-examination.

Tracking of Non-Certified Personnel

The State EMS agency may request that the National Registry track State licensed providers who have not completed National Registry certification.

1. This is intended as a path to allow continued state licensure for previously licensed EMS providers who have never been Nationally Certified until removed from the system through attrition.
2. Non-certified EMS personnel covered by this provision must use current National Registry recertification requirements and fees.
3. The State EMS agency licensing EMS personnel may add non-certified state licensed providers through the use a proficiency examination only through exceptional circumstances approved by the Executive Director such as:
 - a. Circumstances in which legislation, court ruling, or executive order presents a mandatory action for the State EMS agency that is not consistent with National Registry certification eligibility requirements.
 - b. This does not apply to non-accredited paramedic training programs as a National Registry Paramedic eligibility requirement, which is covered by the applicable policy and would require specific Board action.

Rationale

This initiative is a reinstatement process. All providers wishing to be reinstated must have been previously certified by National Registry of Emergency Medical Technicians at or above the certification level being requested and if the provider has demonstrated continued competency to the State EMS Agency licensing agency by a method substantially similar to that used by the National Registry.

Related Policy and Procedures

Designated Authorizing Agency Policy

MKI Procedure

References

Institute for Credentialing Excellence (I.C.E). (2021). *NCCA accreditation standards*.

- Standard 2: Governance
- Standard 6: Information for Candidates

- Standard 7: Program Policies

International Organization for Standardization. (2012). *ISO/IEC 17024:2012: Conformity assessment - General requirements for bodies operating certification of persons.*

- Standard 8: Certification Scheme
- Standard 9: Certification Process Requirements

Document History

2017-05-19	Created and approved (v1)
2024-08-21	Update for criminal convictions project, Resolution 21-08 Fitness to Practice (v2)
2024-09-25	Approved by the Executive Director after Board review (v2).