I. System member relicensure requirements

A. The licensee must submit verification of meeting all relicensure requirements to the Resource Hospital at least 30 days prior to the license expiration date.

B. The Resource Hospital must receive verification that the licensee has completed the following requirements within their licensure cycle:

1. **CE hours**: The System has defined the number and nature of CE hours to be accrued each year for relicensure in System Policy C2 Continuing Education.
   
   a. **All CE hours must be completed and verification of relicensure eligibility submitted to the Resource Hospital a minimum of 30 days prior to the licensure expiration date** to allow adequate time for renewal processing unless compelling extenuating circumstances apply.
   
   b. Those licensees with insufficient yearly CE hours documented by the System-specified due date will have EMS privileges in the NWC EMSS suspended until verification has been received. Notices of intent to suspend and Suspension will be sent in accordance with System Policy D-1; System Due Process/Disciplinary Action (Suspensions).

2. **A current CPR certificate** that covers:
   
   a. Adult one-rescuer CPR,
   
   b. Adult foreign body airway obstruction management,
   
   c. Pediatric one-rescuer CPR,
   
   d. Pediatric foreign body airway obstruction management, and
   
   e. Adult two-rescuer CPR, and
   
   f. AED.

C. The licensee must make attestation relative to their child support and felony conviction status on the IDPH RENEWAL NOTICE or ON-LINE (see renewal steps)

1. A renewal notice/child support statement will be mailed by IDPH to each licensee at their last known address in the state database at least 60 days prior to the current license expiration. **If the person’s name, address or other information is incorrect, this can cause the renewal notice to be undeliverable.**
   
   a. **Address changes must be made ON LINE in the IDPH database below.**
   
   b. **Name changes must be processed with the IDPH EMS Division per the mail.** The licensee must submit copies of legal documents acceptable to IDPH that verifies the name change. Contact the IDPH office in Springfield at 217-785-2080 to get information on processing a name change.

2. System members may elect to use their employer’s EMS/EMD agency address as their contact address for IDPH correspondence relative to their EMS license while employed by a System member if authorized by the EMS/EMD agency.

3. **If a System member (business) receives an IDPH renewal notice for an employee, the System member will mail, email, or fax the notice to the employee with sufficient advance notice for appropriate processing.**

4. **It is the licensee’s sole responsibility to immediately change their official mailing address in the IDPH database to their home location when they leave that employment for any cause.**
If a System member (business) receives an IDPH renewal notice for a former employee, the System member will mail, email, or fax the notice to the former employee at the former employee’s address, email address, or fax number last known by the System member, with sufficient advance notice for appropriate processing or return the renewal notice to IDPH.

If a renewal notice/child support statement is not received within 45 days of the license expiration date, contact the Provider EMSC or go online to the IDPH EMS website to obtain a blank form.

**D. Renewal STEPS:**

To renew ON-LINE: Go to [https://emslicensing.dph.illinois.gov/Clients/ILDOHEMS/Private/OnlineServices.aspx](https://emslicensing.dph.illinois.gov/Clients/ILDOHEMS/Private/OnlineServices.aspx)

1. The renewal notice contains a PIN # that is needed to renew online. This is the easiest and fastest way to renew and can expedite processing time. If you lost the renewal notice, contact IDPH at the phone number above to get your PIN number.

2. Select renew license (if currently licensed) or Pay INITIAL fee (if new)

3. Answer the felony conviction and child support questions. IDPH requires the licensee to certify on the renewal application form, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. (Section 10-65(c) of the Illinois Administrative Procedure Act [5 ILCS 100/10-65(c)]).

4. The Northwest Community EMS System number is 0907.

5. **Pay fee by credit card.** See below for fee schedule for renewal. The software is programmed to charge the correct fee.

<table>
<thead>
<tr>
<th>Fee type</th>
<th>EMT</th>
<th>AEMT or EMTI</th>
<th>Paramedic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relicensure</td>
<td>$20</td>
<td>$30</td>
<td>$40</td>
</tr>
</tbody>
</table>

6. **Once you have completed your part of the renewal process: Contact your Provider EMS Coordinator (PEMSC) to inform them. The PEMSC will then contact the NWC EMSS EMS Administrative Director by e-mail to verify if you are up to date or delinquent in your CE.**

7. If up to date, the EMS Admin Director will complete the processing of your renewal in the IDPH database. The license will NOT be renewed until the Resource Hospital (NCH) NWC EMSS office confirms the CE as being completed.

8. If delinquent in CE, child support and/or felony conviction attestation or fee payment, you cannot be renewed.

**To renew by MAIL (Slow and not recommended):**

9. IDPH will not accept personal checks or cash. If you are paying fees by certified check or money order, answer the child support and felony conviction questions on the renewal notice received in the mail and submit with your payment to the IDPH address printed on the form before the deadline as listed on the renewal notice.

10. Inform your PEMSC that you are submitting a written packet in the mail to IDPH. They may want a copy of the signed written notice & check for your EMS file prior to mailing to IDPH.
II. **Independent Renewal:**

A. A licensee functioning within a State-approved EMS System should be renewed by the Primary System of affiliation. If the EMS MD does not recommend a System member for relicensure, he or she shall submit all reasons for denial in writing to the member and IDPH.

B. A licensee that is not affiliated with an EMS system is considered independent. A licensee who is not recommended for relicensure by an EMS MD must also file independently to the Regional IDPH EMS Coordinator assigned to their geographic area. See the Independent Renewal Form. Contact information for the appropriate IDPH Regional EMSC may be obtained by calling IDPH at 217-785-2080.

III. **License expiration:** The license of an EMT, Paramedic, or PHRN who has failed to submit all required renewal paperwork to the Resource Hospital (NWC EMS System Office) on time and/or has not paid their relicensure fee shall terminate on the day following the expiration date shown on the license.

A. **RENEWAL WITHIN 60 DAYS OF EXPIRATION:** An EMT, Paramedic, PHRN whose license has expired may, within 60 days after licensure expiration, submit all relicensure materials and fees as required by the EMS Rules plus a late fee of $50 in the form of a certified check or money order (cash or personal check will not be accepted) payable to the Illinois Dept. of Public Health. If all materials are in order and there is no disciplinary action pending against the EMT, Paramedic, or PHRN, IDPH will process the relicensure.

B. **VERY IMPORTANT:** If verification of child support/felony conviction status; verification of completed CE by EMS System, and/or verification of relicensure payment are submitted and received later than 60 days after the license expiration date, but within 36 months of the lapse date, see below for actions to be taken under Reinstatement.

IV. **REDUCTION TO EMT or Emergency Medical (FIRST) Responder status:** At any time prior to the expiration date of the current license, a licensee may revert to EMT or Emergency Medical (First) Responder status for the remainder of the license period. **Steps:**

A. The licensee must make this request in writing with the date and their signature on the letter and submit to the Resource Hospital (NWC EMS System Office).

B. They must show that they are current with all CE for the existing level of licensure up to the date requesting a reduction in status unless extenuating circumstances apply that will be considered on a case-by-case basis by the EMS Administrative Director and EMS MD.

C. Include a letter of authorization from their employer chief/EMS CEO

D. Submit (relinquish) the original copy of their current EMS license. If they are not in possession of the original copy of the current license, they must attest to that fact in writing in their request to reduce status.

E. Include a current and signed Renewal notice (child support statement).

F. To reduce status at the time of relicensure, the individual must meet the requirements for EMT or Emergency Medical (First) Responder relicensure.

G. There is a $10 fee to reduce licensure when requested other than at the time of renewal. If downgrading at the time of relicensure, only the renewal fee is required.

V. **REQUESTS FOR EXTENSION:** Licensure may be extended by IDPH only when appropriate documentation substantiating hardship is provided accompanied by a recommendation from the EMS MD. To request an extension, submit the IDPH EMT Extension Form to the NWC EMS System Office for processing with IDPH. (See state letter explaining extension considerations)
VI. **REINSTATEMENT AFTER 60 DAYS OF EXPIRATION**

A. An Illinois licensed Emergency Medical Technician or Paramedic whose license has been expired for more than 60 days but less than 36 consecutive months may apply for reinstatement by the Department. (Section 3.50(d)(5) of the Act)

B. Reinstatement shall require the following:

1. The applicant shall submit satisfactory proof of completion of continuing medical education and clinical requirements in accordance with the following:
   a. Continuing education in accordance with Sections 515.560 or 515.570 or 515.580.
   b. EMT training in accordance with Section 515.500, 515.510, or 515.520.
   c. Continuing education requirements in the NWC EMSS will be individually determined (Education Action Plan or EAP) by the EMS MD and EMS Administrative Director based on the length of time the individual has been lapsed.
   d. Candidates for reinstatement must make up all missed mandatory classes per System Policy M2.
   e. Candidates must have a current CPR certificate as specified in I.B.2.
   f. Candidates must make up the content and hours of missed CE classes in keeping with System policy C2. If a paramedic or EMT class is in session, they are encouraged to audit the classes that cover the missed content for their desired scope of practice. If an entry level class is not in session, they may complete the CE class credit questions.

2. The applicant shall submit a positive recommendation in writing from an EMS Medical Director attesting to the applicant’s clinical qualifications for retesting. The EMS MD shall verify that the applicant has demonstrated competency of all skills at the level of license sought to be reinstated.
   a. In the NWC EMSS, this may be accomplished by a combination of strategies defined by the EMS MD or designee including participating in EMT or paramedic class or System entry skills labs; or direct observation and evaluation by a Peer I or II educator depending on the level of licensure to be regained and the skills to be demonstrated.
   b. For high risk skills, like intubation, the candidate may be required to complete rotations in the operating room where they are to demonstrate intubation competency under the direct supervision of an anesthesiologist.
   c. The education plan may also specify clinical rotations in selected hospital units depending on the time the candidate’s license has been lapsed.

3. The applicant shall pass a Department-approved test for the level of EMT license sought to be reinstated, in accordance with Section 515.530 of this Part. (Section 3.50(d)(5) of the Act. (eff. August 30, 2011)
a. Candidates will be required to take the State of Illinois Exam following the application process as specified by Continental Testing Services. Once approved by the EMS MD to take the exam, instruction for registration can be obtained from the NWC EMS System Office.

b. Testing fees in place at the time the exam is taken must be paid by the individual directly to CTS. Current fee structure:

<table>
<thead>
<tr>
<th>Fee type</th>
<th>EMT</th>
<th>AEMT or EMTI</th>
<th>Paramedic</th>
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</thead>
<tbody>
<tr>
<td>Testing</td>
<td>$20</td>
<td>$30</td>
<td>$40</td>
</tr>
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</table>

4. A reinstatement licensure fee, in an amount prescribed by IDPH (money order, cashier’s or organizational check only) made payable to the Illinois Department of Public Health will be assessed for applicant seeking reinstatement of a previously expired license expired more than 60 days but less than 36 consecutive months.

<table>
<thead>
<tr>
<th>Fee type</th>
<th>EMT</th>
<th>AEMT or EMTI</th>
<th>Paramedic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reinstatement</td>
<td>$45</td>
<td>$45</td>
<td>$60</td>
</tr>
</tbody>
</table>

5. Once the exam is passed, IDPH will issue a new license and the individual will returned to good standing in the System.

VII. CHANGE OF STATUS: IDPH requires the Resource Hospital (NWC EMS System Office) to maintain a current database of all EMS personnel including name, address, level of licensure, license status (active or inactive), CE hours, and expiration date. If any licensed/certified EMS personnel change name or address they must notify the Resource Hospital (NWC EMS System Office) within 20 days of the change so it can be appropriately processed within the IDPH database within 30 days. If an EMT, paramedic or PHRN retires or leaves a System EMS agency for any reason, the change in status must be provided to the Resource Hospital (NWC EMS System office) within 30 days. Notification can be in person, or by mail, fax or electronic mail.