



# INLAND COUNTIES EMERGENCY MEDICAL AGENCY POLICY AND PROTOCOL MANUAL

Reference No. 5040  
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## REQUIREMENTS FOR COLLECTION AND SUBMISSION OF EMS DATA

### I. PURPOSE

To establish requirements for the collection and submission of data to the ICEMA Data System by EMS providers using their own electronic health record (EHR) system as required by State regulations and ICEMA policy.

### II. POLICY

All EMS providers shall utilize an EHR system that is compliant with CEMESIS and NEMESIS and contain any additional data elements required by ICEMA. EMS providers must submit data to the ICEMA Data System to maintain compliance with medical control to ensure the continuity of patient care within the ICEMA region.

### III. RESPONSIBILITIES OF EMS PROVIDERS

- EMS providers using their own EHR system, and their vendor(s) must maintain a system that:
  - Contain provisions for the electronic transfer of the patient care between EMS providers and hospitals at the time of transfer of care that:
  - Ensures all required data is submitted to the ICEMA Data System with transfer of patient care to a subsequent EMS provider or hospital.
  - Ensures all required data is submitted to the ICEMA Data System when the record is completed and/or locked.
  - Resubmits all records, if opened and changed for any reason, at the time of the next scheduled submission of data.
- EMS providers using their own EHR system must:
  - Initiate and complete an ePCR as outlined in ICEMA Reference # 5030- Requirements for Patient Care Reports.
  - Notify ICEMA of any system outages more than 60 minutes by e-mailing the ICEMA Duty Officer.
  - Use the same version of CEMESIS and NEMESIS used by ICEMA.
    - Ensure that data element numbers match those in the ICEMA Data System.
  - Coordinate any updates to the current versions of CEMESIS and NEMESIS when implemented by ICEMA to coincide with the upgrade implementation date.
  - Include validation rules that ensure that all required data elements are captured in the ePCR.
  - Allow the California Hospital Hub to access their EHR system.

- EMS providers using their own EHR system must provide ICEMA with a detailed list of all:
  - Data elements and field values currently active in the EMS provider's EHR system.
  - Documentation must show relationship between data elements and field values in the EMS provider's EHR system with those on the ICEMA Data System.
  - Validation rules implemented on the EMS provider's EHR system.
- EMS providers using their own EHR system must submit and demonstrate a process for the electronic transfer of patient care between sending and receiving EMS field personnel at the time of transfer of patient care to ICEMA for approval 90 days prior to implementation that includes:
  - A process that creates a unified record between the sending and receiving EMS providers.
  - The ability to upload an ePCR for transfer to the other responding EMS providers that:
    - Is available for use by EMS Providers using the ICEMA Data System at the time of transfer of patient care, and
    - Allows EMS field personnel utilizing the ICEMA Data System to use the standard user interface (Transfer-Upload/Download functions).
  - Demonstrates the accuracy and validity of all submitted data.
  - Ensures that all ICEMA required data elements and field values are included in the EMS provider's input/output form.
- EMS providers using their own EHR system must make any ICEMA requested changes or additions to their data sets and input forms and maintain the ability to integrate data with the ICEMA Data System within the time periods specified below:
  - Make any changes or additions in priority data elements and/or values within 24 hours of notification (weekdays only). Priority items are defined as those that are necessary to comply with State regulations or medical control.
  - Make any changes or additions of non-priority data elements and/or values within five (5) days of notification.
  - Ensure that all changes in either priority and non-priority data sets are implemented in the EMS provider's input/output forms at the time of the change and provide a copy of the EMS provider's revised input/output forms to ICEMA.
  - EMS providers whose data is not accepted by the State or national data repositories will be excluded from further data submissions until the EMS provider can demonstrate that it is compliant with CEMSIS and/or NEMSIS standards or as required by State and/or federal regulations.

#### **IV. RESPONSIBILITIES OF DISPATCH CENTERS USING COMPUTER AIDED DISPATCH (CAD)**

- When CAD data is used to populate the ePCR, all dispatch centers that dispatch EMS providers using their own EHR system must submit CAD data to ICEMA in an electronic format that will:
  - Include all data elements as described in the current *NEMSIS CAD Data Standard* and submitted in a format that is compatible with the ICEMA Data System.
  - Be submitted concurrently with the medical aid request or the initiation of the response.
  - Include required data for all emergency and non-emergency medical aid requests.

#### **V. REFERENCES**

<b>NUMBER</b>	<b>NAME</b>
5030	Requirements for Patient Care Reports