

Emergency Medical Services (EMS) Systems Fee Schedule

Under Section 515.460 of the Illinois Administrative Code, the following fees shall be submitted at the time of application for examination, initial licensure, licensure renewal, reinstatement, reciprocity or duplicate license request:

FEE TYPE	EMT-B	A-EMT/EMT-I	EMT-P	TNS	ECRN	EMD	PHRN	LEAD INST.	FRD
Examination Fee*	\$20*	\$30*	\$40*	\$25					
Initial Licensure Fee*	\$45*	\$45*	\$60*	\$50	\$55	\$30	\$30	\$40	\$55
Renewal Fee*	\$20*	\$30*	\$40*	\$25	\$20	\$20	\$20	\$20	\$20*
Reinstatement Fee*	\$45*	\$45*	\$60*						
Reciprocity Fee*	\$50*	\$50*	\$50*			\$50			
Duplicate License Fee	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Late Fee	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50

^{*}An EMT may submit an application to IDPH for a waiver of the initial fee or renewal fee if he/she:

- is a member of the Illinois National Guard
- an Illinois State Trooper,
- exclusively serves as a volunteer for units of local government with a population base of less than 5,000 or
- is a volunteer for a nonprofit organization that serves a service area with a population base of less than 5,000

Application and payment for the State of Illinois examination can be submitted online at www.continentaltesting.net.

Reinstatement and reciprocity fee(s) must be submitted with application or the application will not be processed. Fee(s) in the form of cashier's check, money order, or organizational check, made payable to the Illinois Department of Public Health, should be mailed to the address provided below. **Personal checks or cash will not be accepted.**

Illinois Department of Public Health EMS and Highway Safety 422 South Fifth Street, Third Floor Attn: Licensure Section Springfield, Illinois 62701