

Meeting called to order by Chairman Rosenberg

Minutes – Call for any additions or corrections to the minutes – none

Motion by Mark Buchholtz and second by Adam Cole to approve the minutes.

Motion carried.

State Medical Director Report – Dr. Chizmar

Thank you to everyone for their assistance with the recent nursing home evacuation in Bowie. Commercial services played an integral role in the event and sincere appreciation to those that helped.

2022 Protocols are out and posted on the website. $8 \frac{1}{2} \times 11$ and the spiral bond ones are available. The pocket protocols are delayed due to a paper supply chain issue. They are currently being printed and should be available in the near future.

Updates on COVID 19 – BA5 variant is the dominant variant at this time. Just over 500 patients in the hospitals with COVID. MIEMSS has not changed its guidance on PUI patients and encourages mask use for all patient interactions.

Infectious Disease – Monkey Pox. 48 cases in Maryland and 126 in DC. Health Department has limited supply of vaccines and it will be used for high risk cases only. One page guidance document posted on the MIEMSS website.

Vasopressors on a locked/fixed pump. Looking to clarify the protocol, moving vasopressors on a fixed pump to the BLS level. Discussion.

Dr. Lawner – This is not meant to change the scope of practice. Only to allow flexibility for the de-escalation of care.

Tyler Stroh – Another consideration should be pain management for hospice patients.

Dr. Chizmar – Until this is clarified in the protocols, this can be done under Portable Out Patient Fixed Medication Pump protocol.

SOCALR Report – Scott Legore

Introduction of Kenny Barajas, Chief of Health Services and Special Programs

Renewal Inspections continue – we are now using the new equipment checklists



Base Inspections are continuing. Working to get these caught up post COVID.

Data Import – Scott Barquin continues to work with services on data import issues. He is focusing on ePin #s for transport nurses and other staff for identification in our system.

Equipment Update – New equipment checklist are now in play. Please ensure your units have the updated equipment and medications.

Airway Grant – the application period closes August 1st. Any ALS service can apply for reimbursement up to \$150 per unit for the extraglottic airways

Pat Gainer – update on the interfacility transport study for Medicaid patients

Representatives for commercial services are Jimmy Pixton, Deb Ailiff, Jason Skidmore and Danny Platt

The first meeting is scheduled for two weeks from today and will have representatives from commercial services, hospitals, and Health Department.

Will provide updates as this progresses.

The report is due to the legislature by December 1st.

Randy Linthicum

Thank you to the services that participated in the Larkin Chase nursing home evacuation. We have identified some best practices during the After Action Review. We are going to revisit the Ambulance Strike Team concept for future events.

MEMRAD – This is the system we utilize to alert and collect information for the hospitals. In the process of switching vendors and hope to include commercial services in the updated system. More to follow on this.

Clinician Services – Bev Witmer

Update on the July 1st Imagetrend glitch. If you run across any of your clinicians that have an expiration date issue, please email Licensure Support.

Reciprocity application – we have identified an issue where the training verification form is getting held up in the system. Please email the form directly to Licensure Support.



Also, if your service would like to get invoiced for the application fee instead of waiting for the applicant to pay, we can do that and will set it up.

Regulation Review – Why are we looking at regulation changes?

Most of the regulations are over 10 years old.

They are wordy, long and sometimes confusing.

Goal is to make them concise and easier to read.

More importantly, make them applicable to current practices.

This is a long process that involves multiple steps.

Two regulations for review and comment today (See attachments)

30.04.05.02 – Continuing Education course eligibility

No Feedback

30.02.02.07 – Licensure Renewal

Question (Will Rosenberg) – Why does MIEMSS require National Registry for EMTs for initial certification but does not require it for renewal?

Dr. Chizmar – National Registry was put in place as a standardized testing format. The agreement at the time did not require a clinician to maintain it for renewal due to scope of requirements.

Discussion

Motion by Will Rosenberg – CASAC supports changing regulations to require National Registry recertification for EMTs with a provision that allows grandfathering those EMTs that do not have National Registry certification. 2^{nd} by Teddy Baldwin. Motion carried

Additional discussion on topic.

PEMAC – no report

SEMSAC – no report



MIH - no report

Old Business - none

New Business - none

Good of the Committee

Cyndy Wright Johnson – There will be a PEPP course in mid-October in Central Maryland. Details are being finalized.

Nominations for MIEMSS awards are open and available on the MIEMSS website.

Motion to adjourn.

Attendees

In Person – Will Rosenberg, Scott Legore, Dr. Tim Chizmar, Bev Witmer, Randy Linthicum, Dr. Ted Delbridge, and Kenny Brajas

Virtual – Adam Cole, Bobby Harsh, Cyndy Wright Johnson, Gary Rains, Jill Dannenfelser, Dr. Ben Lawner, Mark Buchholtz, Pat Gainer, Tyler Stroh, Susan Rainey, Teddy Baldwin, Adam Malizio, Cory Skidmore, Kate Passow, Kelly Poe, Leigha McGuin, Libby Allen, Mike Moretti, Sarah Sette, Donald Scott, John Damiani, and David Taylor

30.04.05.02

- .02 Entities Approved to Offer Continuing Education Courses Eligible for Credit under COMAR 30.02.02.07.
- A. Continuing education courses offered to meet the requirements of COMAR 30.02.02.07 shall be provided by or sponsored by:
- (1) EMS Board approved education programs
- (2) EMS operational programs;
- (3) Hospitals accredited by the Joint Commission; or
- (4) An entity offering or providing nationally-accredited EMS-related continuing education

.07 Renewal.

- A. At least 8 weeks before the expiration date of each license or certificate, MIEMSS shall mail renewal notices to each EMS clinician whose license or certificate is expiring. The renewal notice shall be sent to the EMS clinician's most recent address on file with the MIEMSS Office of EMS Clinician Services, based on the initial application or information as updated by the EMS clinician under Regulation .06F this chapter.
- B. The renewal notice shall state the date the current licensure or certification expires.
- C. An EMS clinician who wishes to renew a license or certificate before the expiration date shall submit a completed application to MIEMSS on a form approved by MIEMSS at least 2 weeks before the expiration date together with verification of any required affiliation including verification of protocol currency.
- D. If applying for renewal as an emergency medical responder, the individual shall submit to MIEMSS evidence of:
- (1) Current active status registration as an emergency medical responder or higher with the National Registry of Emergency Medical Technicians; or
- (2) Documentation of successful of:
 - (a) 8 hours of continuing education in categories designated by the State EMS Medical Director; and
 - (b) The most 3 recent years of Annual EMS Protocol Updates; and

A MIEMSS-approved skills competency verification.

- E. If applying for renewal as an emergency medical technician, the individual shall submit to MIEMSS evidence of:
- (1) Current active status registration as an emergency medical technician or higher with the National Registry of Emergency Medical Technicians; or
- (2) Documentation of successful completion of:
 - (a) 20 hours of continuing education in categories designated by the State EMS Medical Director; and
 - (b) The most 3 recent years of Annual EMS Protocol Updates; and
 - (c) A MIEMSS-approved skills competency verification.

- F. If applying for renewal as a CRT the individual shall submit to MIEMSS evidence of:
- (1) Current active status registration as a paramedic with the National Registry of Emergency Medical Technicians, including the 2 most recent years of Annual EMS Protocol Updates and any MIEMSS-assigned ALS education; or
- (2) Documentation of successful completion of:
 - (a) 60 hours of continuing education equivalent to the requirements of a paramedic meeting the National Continued Competency Program with the National Registry of Emergency Medical Technicians, including the 2 most recent years of Annual EMS Protocol Updates and any MIEMSS-assigned ALS education; and
 - (b) A MIEMSS-approved skills competency verification.
- G. If applying for renewal as a paramedic, the individual shall submit to MIEMSS evidence of current active status registration as a paramedic with the National Registry of Emergency Medical Technicians, including the 2 most recent years of Annual EMS Protocol Updates and any MIEMSS-assigned ALS education
- H. If applying for renewal as an EMD the individual shall submit evidence of:
- (1) Continued, active status certification as an EMD by an approved national EMD organization; or
- (2) Successful completion of 24 hours of approved EMD-related continuing education offered by an approved EMD educational program.
- J. MIEMSS may extend a license or certificate for up to 6 months upon receipt of a written request for an extension before the expiration date.
- K. Upon completion of the requirements for renewal, the individual shall receive a certificate or license valid for the appropriate certification or licensure period minus the period of any extension.