# Commercial Ambulance Frequently Asked Questions 

Commercial Ambulance Services are required to comply with all applicable local, State, and federal laws and regulations. The following web links are provided to assist you with the compliance process. Please note: the following laws are not all that are required and you will need to verse yourself thoroughly on all the requirements outlined in COMAR 30.09- Commercial Ambulance Services regulations.

## General

## Question 1

What is a Commercial Ambulance Service?
A. Commercial Ambulance Service means an individual, firm, partnership, limited liability company, corporation, association, or organization engaged in the business of transporting, by ambulance, individuals who are sick, injured, wounded, or otherwise incapacitated.

## Question 2

What are the fees for becoming a licensed commercial ambulance service?
A. There are fees associated with applying for and becoming licensed as a commercial ambulance service. The licensing fee pertains to each individual vehicle within your company and differs based on whether the vehicles are licensed as BLS, ALS, Neonatal or SCT. There are also miscellaneous fees. See the Fee Schedule for more details.

## Question 3

What equipment is required on my commercial ambulance(s)?
A. All licensed commercial ambulances must be equipped with a required minimum of emergency medical supplies. Some of the required supplies depend on the level of ambulance licensure (BLS, ALS). See the Equipment List for more details.

## Question 4

How do I become a licensed Commercial Ambulance Service in Maryland?
A. To become a licensed Commercial Ambulance Service in Maryland is a multi-step process and requires an application to the State Office of Commercial Ambulance Licensing and Regulation in accordance with COMAR 30.09.04.05.

It is recommended that you refer to the Maryland Checklist for New Businesses published by the Maryland Department of Assessments and Taxation as the first step in preparing to become a licensed commercial ambulance service. It is also recommended that you complete your business plan and written policies prior to acquiring your ambulance(s).

## Initial steps include:

- Retaining a Maryland licensed physician as the Medical Director in accordance with COMAR 30.03.03.03
- Obtaining a federal tax identification number and registration with the Maryland Department of Assessments and Taxation in accordance with COMAR 30.09.04.03
- Owning or operating at least one ambulance in accordance with COMAR 30.09.04.02
- Acquiring proper general liability and Worker's Compensation insurance in accordance with COMAR 30.09.04.06
- Properly staffing and equipping ambulances in accordance with COMAR 30.09.04.02


## Required written policies include:

- CLIA (Clinical Laboratory Improvement Amendment) certificate or waiver in accordance with CDC standards 42 CFR 493 - this is for ALS services only.
- Complaint Policy in accordance with COMAR 30.09.09.04
- Exposure Control Plan from blood-borne pathogens in accordance with OSHA standards 29 CFR §1910.1030
- Hazard Communication Plan in accordance with OSHA standards 29 CFR §1910.1200
- Mechanical failure policy in accordance with COMAR 30.09.08.05
- Medical Device Reporting Plan in accordance with FDA standards 21 CFR 803
- Respiratory Protection Plan in accordance with OSHA standards 29 CFR §1910.134
- Quality Assurance Plan approved by the Medical Director in accordance with COMAR 30.03.04.02


## Operation requirements include:

- Maintaining training records for new employee orientation and continuing education with required elements in accordance with COMAR 30.09.08.04
- Maintaining accurate records of employee communicable disease history, immunization records and annual PPD in accordance with COMAR 30.09.08.04
- Medical Review Committee established in accordance with COMAR 30.03.04.03
- Quality Assurance Officer established in accordance with COMAR 30.03.04.08


## References:

Maryland Checklist for New Businesses: http://www.dat.state.md.us/sdatweb/checklist.html Small Business Administration: http://www.sba.gov

## Definitions

## Question 1

What is a Basic Life Support (BLS) Provider?
A. "Basic life support provider" means an individual certified by the EMS Board as a first responder or an EMT-B.

## Question 2

What is an Advanced Life Support (ALS) Provider?
A. "Advanced life support provider" means an individual certified by the EMS Board as EMT-P or CRT.

## Question 3

What is Specialty Care Transport (SCT)?
A. Specialty care transport means the transport of a patient who either:

- Requires care or monitoring commensurate with the scope of practice of a physician or registered nurse and beyond the scope of a paramedic credentialed to provide SCT; or,
- Requires ongoing care or monitoring that is within the scope of a paramedic who is credentialed to provide SCT as defined in the Maryland Medical Protocols for EMS providers and who does not currently need or is not anticipated to need intervention during transport that would be beyond the scope of a paramedic credentialed to provide SCT under the Maryland Medical Protocols for EMS providers.


## Question 4

What is the difference between a BLS, ALS, Neonatal, and SCT license?
A. BLS "Basic life support" licensed commercial ambulance shall be staffed by two basic life support providers of which one is an EMT-B.

ALS "Advanced life support" licensed commercial ambulance shall be staffed by two individuals with at least one of those individuals licensed as an EMT-P or CRT.

A "Neonatal" licensed commercial ambulance shall be staffed by at least one registered nurse or physician that specializes in the advanced care of neonates.

SCT "Specialty care transport" licensed commercial ambulance shall be staffed with at least an EMT-P who has successfully completed a paramedic specialty care transport course and a registered nurse or physician with advanced training or certification in the care of specialty care patients.

## Required Policies \& Plans

## Question 1

What is a CLIA (Clinical Laboratory Improvement Amendment) certificate or waiver?
A. The CLIA Amendment of 1988 requires that any "laboratory" that performs procedures to determine, measure, or otherwise describe the presence or absence of various substances or organisms in the body be issued a certificate. Blood glucose tests that are typically performed by EMS operational programs qualify as one of the procedures that fall under CLIA legislation. Refer to CDC standards 42 CFR 493.

Your organization may do one of two things to be compliant with CLIA:

1) Apply for a Certificate of Registration.
2) Apply for a Certificate of Waiver to perform only the waived tests listed at Sec. 493.15(c), of which obtaining a blood glucose sample with a glucose monitoring device cleared by the FDA specifically for home use is applicable.

## Question 2

What is a Complaint Policy?
A. A complaint policy is a procedural plan that will be implemented if a customer, healthcare facility, employee, or any other citizen that comes in contact with your service is dissatisfied. This complaint can be made through a written or spoken medium. COMAR 30.09.09.04 requires that all commercial ambulance services have a written complaint policy in order to maintain licensure.

## Question 3

What is an Exposure Control Plan?
A. An Exposure Control Plan is a written document that identifies the job tasks that may expose employees to infectious materials and the methods your organization implements to reduce potential exposures. The plan also includes your company's in-service training on bloodborne pathogens, procedures for reporting and following-up on exposures and employee vaccinations and records.

## Question 4

What is a Hazard Communication Plan?
A. A Hazard Communication Plan is a written policy that evaluates the potential hazards of chemicals in your company's workplace and provides information on the appropriate protective measures to your employees. This policy may include lists of hazardous chemicals, the posting of material safety data sheets (MSDS), labeling of containers of chemicals such as biohazard waste, and the development and implementation of employee training programs regarding hazards of chemicals and protective measures from these hazards.

## Question 5

What is a Respiratory Protection Plan?
A. A Respiratory Protection Plan is your company's written policies and procedures for controlling the exposure of your employees to occupational diseases caused by breathing contaminated air. In this plan, you will determine your employees' inherent risk and those engineering controls such as personal protective equipment that you will supply. This plan must address your service and you should choose only those respirators specific to your employees' potential exposure and needs.

## Question 6

What is a Mechanical Failure Policy?
A. A Mechanical Failure Policy is a written procedure for your employees to follow if a service vehicle breaks down or has serious mechanical issues such as a non-functioning air conditioning unit. This policy should address how to handle the mechanical failure with a patient in the compartment and without a patient in the compartment.

## Question 7

What is a Medical Device Reporting Plan?
A. A Medical Device Reporting Plan is a written policy that your service enacts if there is a device-related malfunction, injury or death. The Food and Drug Administration requires that any adverse event resulting from a medical device such as an Automated External Defibrillator (AED) must be reported no later than 30 calendar days after the day that you become aware of a reportable event.

## Question 8

What is a Quality Assurance Plan?
A. A Quality Assurance (QA) Plan is an organized method of auditing and evaluating care provided within an EMS system. COMAR Title 30 requires that all EMS operational programs have both a QA Plan and a QA Officer who institutes the plan within your organization.

As part of the QA plan, your organization must complete a 5-day and 35-day report to notify MIEMSS upon the discovery of a significant incident or complaint. According to COMAR Title 30, you must then have your Medical Review Committee review the complaint and determine the course of action. It is the duty of the Medical Review Committee to carry out the quality assurance plan with the participation of the EMS operational program medical director.

## Question 9

What is a Quality Assurance Officer?
A. A Quality Assurance Officer is the individual in your organization that is designated to:

- Implement the EMS operational program quality assurance plan.
- Develop strategies for improvement.
- Serve on the Medical Review Committee.
- Track and investigate customer complaints.
- Create remedial action plans for individual medical practice and system variances as directed by the Medical Review Committee.
- Complete reports to MIEMSS as required under COMAR 30.03.04.
- Ensure that issues regarding Advance Life Support providers are delegated to a member of the Medical Review Committee who is an Advanced Life Support provider for review if the QA officer is certified as an EMT-B.

MIEMSS requires that every EMS operational program have a Quality Assurance (QA) Officer that completes a QA Officer course within 6 months of taking over the position or has been serving as a QA Officer for the EMS operational program for a period of at least 5 years and successfully completing a QA Officer continuing education course annually.

