



**State EMS Board Meeting
February 13, 2024
9:00 a.m. – 11:00 a.m.
Virtual Meeting**

- I. Call to Order - Mr. Stamp, EMS Board Chair; Mr. Smothers, SEMSAC Chair
 - Call the role – Chairman Stamp
 - Approve minutes from November & December 2023 and the joint EMS Board /SEMSAC meeting on January 16, 2024.
- II. MIEMSS Report – Dr. Delbridge
- III. SEMSAC Report – Chairman Smothers
- IV. MSP Aviation Command – Major Tagliaferri
- V. R Adams Cowley Shock Trauma – Dr. Snedeker
- VI. MSFA Update
- VII. Old Business
 - 2024 EMS Protocol Updates – ACTION – Dr. Chizmar
- VIII. New Business
- IX. Adjournment

Adjourn to closed session to carry out administrative functions, to consult with counsel, to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(b) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (b) (13).



**State Emergency Medical Services Board
February 13, 2024
Video conference
Minutes**

Board Members Present: Clay B. Stamp, Chairperson; Dany Westerband, MD; Mary Alice Vanhoy, RN; Stephan Cox; William J. Frohna, MD; Eric Smothers; Jim Scheulen; Sally Showalter; Melissa Dunkerson

Board Members Absent: Tom Scalea, MD;

MFRI: Ms. Williams

MSPAC: Major Tagliaferri

RACSTC: Dr. Snedeker

MSFA: 2nd VP, Mr. Simpson

OAG: Mr. Malizio; Ms. Pierson; Ms. McAllister

MIEMSS: Dr. Delbridge; Dr. Chizmar; Mr. Abramovitz; Dr. Barajas; Mr. Bechtel; Mr. Bilger; Ms. Butler; Ms. Chervon; Mr. Cooney; Mr. Ebling; Ms. Gainer; Mr. Fiackos; Dr. Floccare; Ms. Gainer; Ms. Hammond; Mr. Huggins; Mr. Linthicum; Mr. Legore; Mr. Parsons; Mr. Robertson; Mr. Tandy; Mr. Tiemersma; Ms. Wilson; Ms. Witmer; Dr. Wooster; Ms. Wright-Johnson; Ms. Goff

Chairman Stamp called the meeting to order at 9:00 am and proceeded with calling the role. He thanked the MIEMSS staff for their hard work and for supporting the Board and the EMS system partners. He added that it was especially nice to join the EMS system partners in Annapolis to testify in support of the sustainability of the EMSOF.

Chairman Stamp asked for approval of the minutes from November & December 2023 and the joint EMS Board /SEMSAC meeting on January 16, 2024.

ACTION: Upon the motion made by Dr. Frohna, seconded by Mr. Smothers, the EMS Board unanimously approved the November & December 2023 and the joint EMS Board /SEMSAC meeting on January 16, 2024 EMS Board meeting minutes as written.

MIEMSS Report

Hospital Designations

UM Upper Chesapeake Medical Center – Aberdeen Freestanding Emergency Medical Facility has been designated as a Freestanding Emergency Medical Facility and an Acute Stroke Ready center.

A discussion ensued regarding the increased EMS transport times for specialty care patients in Cecil and Harford counties. Dr. Delbridge said that this would be monitored.

Patient Transfer of Care Intervals

Dr. Delbridge presented the data shared with HSCRC monthly that shows marked improvement in the patient transfer-of-care times from January 2023 to January 2024. He thanked the leadership and staff in the facilities that have made huge strides in moving closer and achieving a 30 minute transfer of patient care times from EMS to hospital emergency department staff.

Dr. Delbridge added that January 2024 has been a particularly busy time for hospital ED's as the number of respiratory patients increased significantly.

ED Patient Boarding

Dr. Delbridge said that the number of boarded ED patients is still concerning. Consistently, by mid-morning each day, approximately 20-25% of patients are boarded in the ED after completing their emergency department. Included in the number of boarded patients is 75-100 behavioral health patients.

Legislative updates

Dr. Delbridge said that the MSFA does a great job in tracking bills of interest during the legislative sessions. He gave an update on a few of the bills impacting EMS.

SB 210 extends the ability of Paramedics to administer COVID-19 vaccinations and influenza immunizations as part of public health outreach efforts conducted by a health department or hospital / hospital system until January 1, 2030. The bill would extend the sunset by 5-years. The hearing was held on January 24th. The Maryland Nurses Association and the Maryland Association of Counties supported the bill.

HB 380/SB 374 prohibits the State Emergency Medical Services Board from requiring that an applicant provide proof of lawful presence in the United States or have a Social Security number or individual taxpayer identification number as condition for licensure or certification. This change in regulations was made for health care occupations last year, but since EMS falls under the Education Article, it was missed.

EMSOF

Dr. Delbridge gave an over view of legislative efforts for ensuring the projected insolvency of the EMSOF in late 2025 or early 2026. Legislative Committee hearings on the EMSOF budget were conducted on January 26th and 29th.

Dr. Delbridge said that there is also legislative efforts to improve the funding stream for state trauma centers including SB 784:

SB 784 creates an 11% excise tax for licensed firearms dealers on sales involving firearms, firearm accessories, and ammunition. Revenues are to be distributed to the Maryland Trauma Physician Services Fund (44%); the R Adams Cowley Shock Trauma Center at the University of Maryland Medical System (29%); the Violence Intervention & Prevention Program (23%); the Survivors of Homicide Victims Grant Program (2%); and the Center for Firearm Violence Prevention & Intervention within the Maryland Department of Health (2%).

Dr. Delbridge said that access to the Physicians Trauma fund, managed by the Health Care Commission, receives a yearly fee of \$2.50 per vehicle registration. The statute that governs access to the fund by trauma centers is very restrictive. SB 784 does not address the statute.

HB 1439 modifies the Maryland Trauma Physician Services Fund (“Trauma Physician Fund”) with the goal of increasing funding to trauma physicians and other trauma health care practitioners and to trauma hospitals. In addition to various changes made to the existing Trauma Physician Services Fund statute to provide additional funding opportunities, HB 1439 also increases the motor vehicle registration fee surcharge from \$17.00 to \$24.50 per year, \$10 of which is to be paid to the Trauma Physician Fund. It also removes the Maryland State Police Aviation Command from continued funding by the Maryland Emergency Medical Services Operations Fund (MEMSOF).

A discussion regarding the components of the bill ensued.

HB 1038 increases vehicle registration fee surcharge from \$17 to \$24.50. Dr. Delbridge said this would sustain the EMSOF for two or three years.

SB 1092 introduced by Senator Guzzone increases the vehicle registration fee surcharge that supports various components of the statewide EMS system and distributes revenues from that surcharge to increase support to the Trauma Physician Services Fund, to provide funds to the R Adams Cowley Shock Trauma Center, with the balance to be paid to the Maryland Emergency Medical Services Operations Fund (MEMSOF).

Dr. Delbridge said that this is the most comprehensive bill to ensure the EMSOF solvency for all of the partners.

Dr. Delbridge said that MIEMSS, along with all of the EMSOF partners, will explore strategies for working with legislators to ensure the EMSOF solvency.

SB 1099 requiring the State Emergency Medical Services Board, in collaboration with the Maryland Department of Health, to develop and implement an initiative under the Public Access Automated External Defibrillator Program to require that naloxone be co-located with each automated external defibrillator placed in a public building.

This would require additional MIEMSS staff to implement this program.

HB 784 establishing the Task Force on Reducing Emergency Department Wait Times to monitor, discuss, and make recommendations for reducing emergency department wait times including legislative, regulatory, or other policy initiatives; and requiring the Task Force to report its findings and recommendations to the Governor and the General Assembly by January 1, 2026.

Dr. Delbridge said that HB784 would require MIEMSS to lead the taskforce. The bill stipulates the taskforce membership and would require reporting back to the legislature at a given time.

HB 1143 establishing the Maryland Emergency Department Wait Time Reduction Commission in the Maryland Institute for Emergency Medical Services Systems to enhance the overall effectiveness and responsiveness of emergency medical services; requiring the Maryland Institute for Emergency Medical Services Systems, with the advice of the Commission, and in consultation with certain entities, to develop certain standardized operational protocols and establish a system for monitoring certain emergency department performance; etc.

Dr. Delbridge said that as drafted, the bill requires the ED Wait Time Reduction Commission, staffed by MIEMSS, to develop strategies, including those to improve emergency department effectiveness, reduce wait times, and enhance patient care; facilitate sharing of best practices; and oversee the development and implementation of standardized protocols and operational efficiencies in hospital emergency departments. He added that if HB1143 passes as written, it would require significant financial support. MIEMSS has met with the sponsor to discuss. MIEMSS is preparing the fiscal note. Dr. Delbridge said MIEMSS is prepared to engage in any conversation regarding EMS and hospitals, but unless the proposed MIEMSS Commission would need the authority to effect changes in the system.

A discussion regarding the MHA taskforce on ED wait times, the proposed ED Wait Time Reduction Commission, and the financial impact to EMS ensued.

@HA and Alert status

Dr. Delbridge said that the @HA is working, but gets bogged down at times. MIEMSS is working on improvements to the system. The attempt to work with CRISP for real time ED data has stalled indefinitely due to the variability in the flow of ADT data. Upgrades to the CHATS system are no longer available making some information such as changes in nomenclature impossible. MIEMSS continues to work on changes to MEMRAD and anticipates the updates transferring CHATS to MEMRAD to be available in a few months. Dr. Delbridge added that MDH has access to CDC monies that MDH is using to create a portal for recording infectious disease parameters to the CDC. As part of the portal, there is hospital dashboard. MIEMSS plans to tag on to the contract for MHA to receive data that reports hospital capacity data.

SEMSAC

Chairman Smothers said that SEMSAC met in February. Chairman Smothers said that the 2023 cardiac arrest grants have been allocated with all requests being granted. The Chairman commended Rick Koch and the Regional Affairs team for their extraordinary diligence in allotting the grant.

Chairman Smothers thanked the Board, SEMSAC, and EMSOF partners for all of the work accomplished during the current legislative session.

MSPAC

Major Tagliaferri highlighted patient transports from several major incidents involving motor vehicle crashes, including a seriously injured MSP trooper. He said that these incidents show partnership between MSPAC, ground clinicians, hospitals, and trauma centers.

Major Tagliaferri said that MSPAC is working with MSP and MIEMSS AAG, Claire Pierson, regarding access to CRISP information. Apparently the issue with access stems from MSPAC not billing for transports. Major Tagliaferri said that MSPAC may need assistance from the Board in the future if access is not granted by CRISP.

R Adams Cowley Shock Trauma

Dr. Snedeker said that the legislative update is appreciated and that RACSTC plans to attend most of the hearings to explain the EMSOF coalition and the need for sustainable funding for the EMSOF and trauma centers moving forward.

MSFA update

A written report was distributed.

Chairman Smother said that work continues under the SAFER grant for recruiting for FD and EMS. He added that the MSFA is gearing up for the Convention in OC.

Chairman Smothers said that the MSFA Legislative team is doing an excellent job tracking relative legislative bills and keeping everyone informed. EMS Coalition meets every Monday. Many legislators are in attendance.

OLD BUSINESS

Maryland 2024 EMS Protocols

Dr. Chizmar requested the approval of the Maryland 2024 protocol changes presented to SEMSAC and the Board in January 2024 and recommended by SEMSAC at the February meeting for Board approval.

ACTION: Upon the motion made by Mr. Smothers, seconded by Dr. Chizmar, the EMS Board unanimously approved the updated Maryland 2024 EMS protocols.

New Business: N/A

Adjourn to closed session to carry out administrative functions, to consult with counsel, to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(b) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (b) (7).

The Board adjourned the open session by acclamation.

In closed session:

Board Members Present: Clay B. Stamp, Chairperson; Dany Westerband, MD; Mary Alice Vanhoy, RN; Stephan Cox; William J. Frohna, MD; Eric Smothers; Jim Scheulen; Sally Showalter; Melissa Dunkerson

Board Members Absent: Mary Alice Vanhoy, RN;

MIEMSS: Dr. Delbridge; Dr. Chizmar; Ms. Goff; Ms. Chervon

OAG: Mr. Malizio; Ms. Pierson; Mrs. McAllister

The Board considered:

(1) Disciplinary matters