I. Call to Order – Mr. Tiemersma
   - Call the roll

II. Approval of the February 3, 2022 SEMSAC meeting minutes

III. MIEMSS Report – Dr. Delbridge

IV. SEMSAC Chair Report – Chairman Tiemersma

V. MSPAC Report – Major Tagliaferri

VI. MSFA Update

VII. Committee Reports
   - ALS Report – Dr. Fillmore
   - BLS Report – Ms. Dousa
   - MIH Report – Chief Matz
   - Regional Affairs – Mr. Smothers

VIII. Old Business

IX. New Business
   - Pediatric Trauma Center Standards – INFORMATION/ACTION - Ms. Sette / Dr. Wooster
State EMS Advisory Council (SEMSAC)
April 7, 2022
Via Conference Call Only
Meeting Minutes

SEMSAC Members Present: Wayne Tiemersma, Chairperson; Eric Smothers, Vice Chairperson; Justin Orendorf; Scott Haas; Tim Kerns; Kathryn Burroughs; Jennifer Anders, MD; Linda Dousa; Michael Cox; Kathleen Grote; Lisa Tenney; Lisa Lyle; Tim Burns; Karen Vogel; Kristie Snedeker; Jim Matz; Wayne Dyott; Michael Rosellini; Major Tagliaferri; Gordon Wallace; Michael Millin, MD; Alan Butsch; Rosemary Kozar, MD; Linda Young, MD

SEMSAC Members Absent: Erik Abrahamson; Jeffrey Sagel, DO; Jeffrey Fillmore, MD; Elliott Haut, MD

MSFA: President McCrea

OAG: Ms. Sette; Mr. Malizio

MIEMSS: Ted Delbridge, MD; Pat Gainer; Tim Chizmar, MD; Jeannie Abramson; Mark Bilger; Becki Byrd; Michael Cooney; Bryan Ebling; Doug Floccare, MD; Dwayne Kitis; Scott Legore; Luis Pinet Peralta; Andy Robertson; Mustafa Sidik; Patrick Tandy; Cyndy Wright Johnson; Elizabeth Wooster; Sheile McAllister; Barbara Goff

Chairman Tiemersma called the meeting to order at 1:00 pm. The roll was called.

Chairman Tiemersma asked for approval of the February 3, 2022, SEMSAC meeting minutes.

ACTION: Upon the motion of Mr. Smothers, seconded by Mr. Matz, SEMSAC unanimously approved the February 3, 2022, SEMSAC minutes as written.

SEMSAC Report

Chairman Tiemersma said that the EMS Board met on March 8, 2022, and reviewed the Pediatric Trauma Regulations that would be presented to SEMSAC today.

MSPAC

A copy of the MSPAC written report was distributed.

Major Tagliaferri reported on the Maryland State Police Aviation Command’s current numbers of EMS providers and pilots (7 pilots are planning to retire this year), personnel recruitments, and ongoing projects and initiatives, including the Whole Blood Program, the MedHub Grant Project, the Unmanned Aircraft Systems Program, and hoist platform...
training. He added that 2 aircraft are undergoing heavy maintenance inspections; all other aircraft remain in service.

Major Tagliaferri reported year-to-date statistics on MSPAC missions (624) and aircraft flight hours.

Dr. Floccare said that one of the hurdles in starting the Whole Blood program is the availability of whole blood. MSP is supporting several Blood drives across the state.

**MIEMSS Report**

**COVID-19 Update**
Dr. Delbridge said that declining numbers of COVID-19 hospitalizations is approximately at the level of hospitalizations during July 2021. He added that approximately 45% of Maryland hospitals have zero COVID patients. The challenge is for hospitals to retain measures developed for mitigating the surge of patients during the COVID.

**Yellow Alerts**
Dr. Delbridge reported that utilization of Yellow Alerts was down in March, but has begun to creep up in April. In Region III, the median time to transfer a patient from EMS to hospital staff is 19 minutes; the 90th percentile is 47 minutes, and 5.4% of patient transfers of care occur within 60 minutes.

**Emergency Department (ED) Time**
Dr. Delbridge said as part of a quality measure, CMS collects data on a patient’s length of stay in an ED. Recent data shows that patients spend more time in Maryland ED’s that any other state. Patients spend 18% longer in a Maryland ED than the second highest wait time state (Delaware). This has an impact on EMS. Dr. Delbridge presented a slide showing the 90th percentile EMS transfer of care time by hospital.

**Emergency Regulations**
The order of completing certification requirements for EMT have been changed so that the written test, skills test, and internship can be taken in any order.

EMS clinicians allowed provisional status under the Governor’s Executive order, prior to August 2021, have until May 11, 2022, to complete requirements for full certification. EMS clinicians who received provisional status during January 2022, have until November 30, 2022, to complete requirements.

**Medicaid Supplemental Payment Program**
Dr. Delbridge said that Medicaid Supplemental Payment Program for EMS is to rebalance Medicaid reimbursement by providing the federal portion of Medicaid reimbursement, which is half of the remainder of allowable costs after Maryland Medicaid pays $100.00 per transport State portion. He explained the process for applying for reimbursement and the qualifying factors, include being a designated jurisdictional EMS operational program that is funded directly by public (tax) dollars; billing Medicaid for EMS transports; and documenting expenses that are paid with public funds. Fourteen jurisdictions qualified to receive federal reimbursement for costs incurred from October 2020 through June 2021. Projections indicate that the state (not including Baltimore City) will receive 40million+ dollars. Chief Matz said that, after the audit, Baltimore City Fire Department (BCFD) will receive 39.2 million over the nine-month period, and projections indicate the BCFD will receive approximately 50 million per year moving forward.
Critical Care Coordination Center (C-4)
Dr. Delbridge updated the number of patient cases handled by the C-4 to over 2700 in the past 15 months. The C-4 has CDC grant funding through June 2023.

Emergency Medical Technician Education Stipend
Acknowledging the commitment made by self-paying EMT students, Dr. Delbridge said that MIEMSS has established funding to provide a stipend for qualifying EMT students up to $2000 each. The funding will be distributed on an escalating scale culminating when the student passes the NREMT exam. Online applications opened on, April 1, 2022. This stipend is available for up to 500 students through June 2023.

EMS and Law Enforcement
Dr. Delbridge said that work continues with the Crisis Scene Collaboration Workgroup to develop a multi-disciplined guidance for EMS and law enforcement case interactions. The workgroup includes statewide law enforcement, EMS clinicians, crisis intervention personnel, attorneys, social workers, allied partners, and MIEMSS. MIEMSS anticipates having inter-disciplinary guidance and some law enforcement training by mid-summer.

Legislation

HB 286 extends the sunset on the authority of paramedics to administer influenza and 2019CoV from January 2023 to January 2025 and is awaiting the Governor’s signature.

SB 295 / HB 44 to increase Medicaid reimbursement to EMS reimbursement by $25 each fiscal year, beginning in fiscal 2025, until the rate is at least $175 is still in Committee. This bill also includes payment for Medicare patients who are not transported to a hospital.

SB 515 proposes to require the EMS Board to issue provisional certification to certain Department of Natural Resources Park Service personnel. Does not appear to be advancing in Committee.

SB 70 proposes to require the Emergency Medical System plan be modified to account for the treatment of service canines injured in the line of duty. Has been withdrawn.

HB 446 prohibits disclosure of the contents of written or oral communication regarding a peer support counseling session by a peer support specialist or a peer support participant; awaiting the Governor’s signature.

MSFA
A written report was distributed.

President McCrea said that the MSFA, in partnership with MIEMSS and the Mental Health Association of Maryland, is moving forward with its First Responders Mental Health awareness training. There is a 2-hour online portion and a 6-hour in-person instruction which will be held at the Level VFD on April 16th.

The MSFA’s 2022 Convention and Conference course information and registration are on the Convention website.
SEMSAC Committee Reports

**ALS Committee** – No Report

**BLS Committee**
Ms. Dousa said that the BLS Committee met on March 18, 2022.

EMT’s who were on extension during the pandemic need to complete the requirements for recertification or lapse.

The online training center has been updated to include courses from the Miltenberger and Winterfest conference through the end of December for con-ed.

MIEMSS will be conducting a Facilitator’s class for current Evaluators who plan to assist with EMT practical testing.

MIEMSS’ Clinician Services will be forming a committee to review and assess the current Internship Program for any needed updates.

The next meeting is May 20, 2022 at 9 am.

**MIH Committee**
Chief Matz said that the MIH Committee met on March 17, 2022. The Committee established formal agendas and meeting minutes. The Committee also voted on a Co-chairpersons, Zach Yerki from QA County DES and Avital Graves, PG County FD; the Secretary will be Jess Thomas from BCFD.

Refinement of the MIH curriculum and the ImageTrend MIH module were discussed.

Chief Matz said that Kathi Burroughs will be included on the invite for future meetings.

Chairman Tiemersma requested a report to SEMSAC on the MIH data.

**Regional Affairs Committee (RAC)**
Vice Chair Smothers said that the Regional Affairs Committee did not meet this morning. He reported that, as of today, all the cardiac grant funds have been distributed. Unused funds were reprogrammed for Region I cardiac grants.

Dr. Chizmar gave a brief overview of the Pediatric Seizure Study. He said that the Pedidose research protocol will be for use in Prince George’s County only and will be presented to the Board at the April meeting.

**Old Business** – N/A

**New Business** – N/A

**Pediatric Trauma Center Regulations**
A copy of the proposed Pediatric Trauma Center Regulation was distributed.
Dr. Wooster gave an overview of the changes included in the Pediatric Trauma Center regulations:

- Syntax and grammar changes throughout the document
- Additions
  - Capability of extracorporeal membrane oxygenation
  - Capability for all renal replacement therapies
  - Board certified/eligible radiology attending who provides interpretations of films within 30 minutes, in-house or Tele-radiology available 24/7
  - Policy for Procedural Sedation

Dr. Wooster said the following sections in the revised regulations are as follows:

- Trauma Program Manager (1.0 FTE) for trauma and burn
- Trauma Registry (Registrar 1.0 FTE for every 500-750 patients)
- Emergency Preparedness (follows closely with the Adult Trauma Standards)

Dr. Wooster said to please contact her at: ewooster@miemss.org with any questions or comments.

**ACTION:** Upon the motion of Mr. Smothers, seconded by Dr. Young, SEMSAC unanimously recommended that the EMS Board approve changes to the Pediatric Trauma Center regulations.

**Trauma Standard Regulations**

A copy was distributed.

Dr. Wooster said that MIEMSS proposes removing from the Trauma Standard regulation the auto transfusion equipment and capability being immediately available as it is outside the current treatment pathways. The equipment is no longer manufactured and replacement parts are not readily available.

**ACTION:** Upon the motion of M. Grote, seconded by Ms. Burroughs, SEMSAC unanimously recommended that the EMS Board approve changes to the Trauma Center regulations.

The meeting adjourned by acclamation.