

CASAC Meeting

Minutes – May 17, 2023



Meeting called to order by Chairman Rosenberg.

Approval of minutes – the minutes from the March meeting were sent out by SOCALR.

Are there any additions or corrections to the minutes? None

Motion to approve – Jim Pixton, Seconded by Jonathan Siegel

No objections to the motion – minutes approved

State Medical Director’s Report – Dr. Chizmar

STC: STC committee meeting was prior to this meeting. Spot on the agenda for that so we will discuss that later in this meeting.

Protocols: Protocol updates have been filmed and are in their editing phase, both ALS and BLS. Hope to push out the protocol updates within the next couple of weeks.

Legislation: Legislation regarding the ED Crowding Bill did not pass. It would have put a commission together of approximately 30 people to look at ED crowding, root causes, and best practices. However, it is our understanding that it did pass the Maryland Hospital Administration and they are still looking at the problem and compiling a report without the legislative bill passing. You may still hear it being discussed. It is not legislatively mandated, but it is legislatively driven. So people are going to continue to look at ED crowding.

AEDs: An AED Bill passed that would require large restaurants and large grocery stores with a certain gross revenue amount to have an AED on the wall starting on 2023 and no later than 01/01/2025. Interesting, all the same training requirements that are required for everybody else for public access AEDs were not part of the restaurant and grocery store bill. It was, in fact, a lower standard so our hope is that they will see that AEDs still get used and that training burden put on everybody else will come down in time.

Medicaid: Switching gears to Medicaid, we are continuing to have conversations with Medicaid around reimbursement for Commercial Ambulance Services with SNF. We understand currently that Medicaid will not reimburse you because they deem the transport to the ED as “not being an emergent transport”, but that ends of being poor utilization of resources. Dr. Chizmar touched base with Dr. Delbridge and he has an active email going with Medicaid on that. No additional information available on this subject at this time.

Medication: On the medication shortage front, we are tracking Albuterol and there have been sporadic shortages including Fentanyl and a little bit with Midazolam. Those are the ones that Dr. Chizmar has been hearing about most recently. If anyone else is dealing with a particular medication shortage that we can come up with a work around for, please let him know.

The EMS Board and SEMSAC did not meet this month. They will meet next month. No updates there.

SOCALR Report – Scott Legore

New Staff Members: Introduction of 2 new staff members First we hired an admin officer, Donna Geisel, who is also a paramedic so she will be helping out with inspections as well. Donna transferred from C4 and has spent many years working in Harford County. Sarah Pysell is coming to us from Frederick County, firefighter/paramedic, 21 years experience. Sarah will be our Western Maryland inspector and helping out with the larger services. Both of them are joining us at LifeStar and will be venturing out to Western Maryland.

Inspections and Licensing –May renewals have been scheduled and Marty is working on scheduling the June renewals now. No changes to the required equipment lists are coming with the July protocol updates.

Online renewal process – We are still moving forward on the online renewal application process. We ran into some internal roadblocks and we are working through them.

QA Review/Data Import – Nothing new to report, but if your service is moving towards the NEMSIS 3.5, please get in touch with Scott Barquin so he can make sure your data imports correctly. Scott Barquin added that everyone is set up and ready for when the state turns it on. Just an FYI, we are looking internally at how we accept the required monthly data. We don't have a time frame on that change yet. Working to try to make that a little easier process for both the internal and external users. Look for some changes to be coming.

Commercial Services Collage: We are looking to put together a Commercial Service Collage or Photo Arrangement that highlights all of the Commercial Services. If each service could submit a couple of photos that would be greatly appreciate.

Commercial Services Award: We are looking to create some type of Commercial Service Award category for next year's EMS Award. Would like everyone to think about what that would look like, such as a Community Outreach Program or recognizing an individual clinician with Commercial Services. None of the current awards are specific to Commercial Services. If we have some interest in that, we would like to put together a small committee to evaluate it. Think about that and get back to Scott. We have a year to come up with ideas.

Commercial Services Corner: We are also looking to add a little section in the MIEMSS newsletter, calling it the "Commercial Services Corner". Scott has added something for the upcoming newsletter. He would like the group to let us know what information they would like to see put out to all of the EMS people, such as FYI stuff or stats. We are looking for ideas.

PCRs and Crew Members: Scott Barquin spoke about the affiliations of your EMS crew members. Currently we have 34 licensed services and all but 6 import into Elite. Every single crew member has to be listed and have the correct MD state license number entered in your software in order for the information to come into our system correctly. If a number is not there,

Maryland RN number is on that paperwork, if an employee ID number is on that paperwork, it will not come into our system correctly. It will show a blank field. It gets worse as that report also goes into the hospital dashboard so it's not just your PCR that is missing the crew information, but the hospital report is missing all crew members. Your crew members must be in your software that matches up to the Maryland State system. If you could work on that field, it would be greatly appreciated.

EMS 50 Project: Todd Abramovitz is not here today. 2023 is the 50th year of EMS in Maryland. MIEMSS is looking at several projects. A timeline is in the making. We may be reaching out for information to add to the project. We may be looking for photos and/or interviews. We want to include Commercial Services in the timeline so we may be reaching out to you. If you have some photos or know of others that can help, please let us know.

Clinician Services – Bev Witmer – Not present. Messaged that she has nothing new to report.

Expiration Date Reminder: BLS expiration dates changed from June 30th to July 31st. December 31st dates changed to January 31st. Note: if the provider filed an extension and they will expire on June 30th, 2023, they will not be extended to the July 31st date.

PEMAC – Jill Dannenfelser

Nothing new to report from their meeting. They are looking at some protocols and will be continuing discussion on needle decompression. Discussion that the evidence is showing carrying a 14 gauge needle is a little long for a pediatric patient. They will come up with some suggestions and come back to present them back to this group.

SEMSAC – Danny Platt

Nothing new to report. There has been some discussion about a helicopter transport that may or should have waited for a Commercial Service. Still being reviewed.

Still waiting on official approval as representative from the Governor's office

MIH – Mark Buchhotlz - No report

SCT – Will Rosenberg

Meeting was prior to this one. Basically they broke it down that a "STC Solo Provider" means Solo Provider and a Nurse means nurse team. They discussing "stacking" interventions and the group agreed that STC Solo would be kept as a singular intervention and if they were stacked it would go to the appropriate team. Discussion about the changes to COMAR to possibly include Paramedic/RT, discussions about Antimicrobial OSP, and bringing in PEMAC for consideration of the removal of pediatrics as an eliminating factor. As well, as the removal of the language about going into an intensive care unit. There was discussion to include PEMAC in saline boluses for paramedics. Also, possibility of changing the Pediatric High Flow from 6 to 4 hours. Talked about CBI which is currently an EMT skill. Talked about bringing CBI up to a STC or

Nurse transport. Also, for PCR's and round trip appointments, to add LVADs as ALS only instead of critical care.

Regulatory Changes – Scott Legore needed to add one thing to his report. The proposed regulation changes for who can staff Neonatal and SCT units... went to the ADLR committee for the state to review. They require MIEMSS to submit a small Business Impact Statement before review. Working with Claire, that form has been submitted. Hopefully that will go out to review and we can get that into regulation in the near future.

Old Business – None

New Business – None

Motion to adjourn by Jill Dannenfelser, seconded by Jim Pixton. Meeting adjourned.

Attendance:

In Person: Will Rosenberg, Jim Pixton, Jonathan Siegel, Dr. Tim Chizmar, Scott Legore, Donna Geisel, Scott Barquin,

Virtual: Claire Pierson, Jill Dannenfelser, Tyler Stroh, Cynthia Wright-Johnson, Gary Rains, Jim Harsh, Kenny Barajas, Mary Bell, Randy Linthicum, Steven Hoffman, Teddy Baldwin, Danny Platt, Mark Buchholtz, Sarah Pysell, Devin Meyers, Jeffrey Huggins, Kelly Hammond, Leigha McGuin, Susan Rainey, Mike Moretti

Callers: #1 – John Damiani