



State Emergency Medical Services Board

July 13, 2021, 2021

Virtual Meeting

Agenda

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Clay B. Stamp, NRP
Chairman
Emergency Medical
Services Board*

*Theodore R. Delbridge, MD, MPH
Executive Director*

*410-706-5074
FAX 410-706-4768*

- I.** Call to Order – Chairman Stamp
 - Call the role
- II.** Approval of the minutes from the June 8, 2021 EMS Board minutes
- III.** MIEMSS Report – Dr. Delbridge
- IV.** SEMSAC Report – Mr. Tiemersma
- V.** MSPAC – Major Tagliaferri
- VI.** RACSTC – Dr. Snedeker
- VII.** MSFA Update – President Joel McCrea / Ms. Tomanelli
- VIII.** Old Business
- IX.** New Business
 - Minor Definitive Care Now – Salisbury FD – Dr. Chizmar
- X.** Adjourn to Closed Session

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
July 13, 2021
Via Video Conference Call Only
Minutes

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Board Members Present: Clay Stamp, Chairperson; Sherry Adams, Vice Chairperson; Stephan Cox; William J. Frohna, MD; Dany Westerband, MD; Sally Showalter, RN; Wayne Tiemersma; Mary Alice Vanhoy, RN; Mr. Scheulen; Dean E. Albert Reece, MD

OAG: Mr. Magee; Ms. Sette

RACSTC: Dr. Snedeker

MSFA: President McCrea; Ms. Tomanelli

MSPAC: Major Tagliaferri

Other: Chris Montera – ESO
Christopher Truitt – Salisbury FD
Charles Dolan – Salisbury FD & Tidal Health
David Phippin - Salisbury

MIEMSS: Dr. Delbridge; Ms. Gainer; Ms. Abramson; Ms. Aycock; Dr. Bailey; Mr. Bilger; Mr. Brown; Mr. Buckson; Ms. Byrd; Ms. Chervon; Dr. Chizmar; Dr. Floccare; Mr. Huggins; Mr. Legore; Ms. Mays; Ms. McAlister; Ms. Wright-Johnson; Ms. Goff

Chairman Stamp called the meeting to order at 9:00 am and proceeded with calling the role.

Chairman Stamp thanked Dr. Delbridge and the MIEMSS staff for the work they do every day. He said that all are proud of MIEMSS for the leadership shown during the pandemic. He also thanked the EMSOF partners for their continued commitment to the Maryland EMS System.

Chairman Stamp asked for approval of the June 8, 2021, EMS Board meeting minutes.

ACTION: A motion was made by Dr. Westerband, seconded by Mr. Scheulen, and unanimously approved by the Board to accept the June 8, 2021, minutes as written.

MIEMSS REPORT

Medicaid Supplemental Payment Program

Dr. Delbridge said that MIEMSS continues to work with MDH and CMS on the Medicaid Supplemental Payment Program to rebalance reimbursement by calculating the appropriate portion of federal reimbursement for the unreimbursed costs of providing services to Medicaid patients. He gave an overview of the qualifying factors, including being a designated jurisdictional EMS operational program that receives funds by public (tax) dollars directly; billing Medicaid for EMS transports; and documenting expenses.

Dr. Delbridge said that executed MOUs with Maryland Medicaid are due by July 15, 2021, and cost reports due 6-months thereafter to complete the cost accounting for reimbursement. Jurisdictions that do not qualify this year have the opportunity to redefine how funding flows through their system to be eligible in the future. MDH anticipates that an estimated an approximate 75 million dollar revenue infusion to EMS next Spring.

The Governor's Executive Order augmenting the EMS Workforce

The Executive Order enabled suspension of any provision of Sections 13-515, 13-516, or 13-517 of the Education Article, or of COMAR Title 30 to augment the workforce and improve the response to the state of emergency. **The Executive Order is rescinded as of August 15, 2021.**

Dr. Delbridge provided a status of the Public Notices under the Executive Order.

Public Notice #1

- Created provisional EMS clinicians
 - >1600
 - Emergency Regulations provide path for full credentialing by February 15, 2022
- Altered crew configuration of MIH teams
 - Single paramedic
 - Expires September 15, 2021

Public Notice #2

- Created Clinical Externs
 - >1500 nursing students
 - >100 respiratory care students
- Expire September 15, 2021

Public Notice #3

- Commercial Ambulance Service
 - Personnel requirement waiver possible
 - As long as patient needs met
 - Out-of-state licensure acceptable
- Expires September 15, 2021

Public Notice #4

- Created Provisional EMDs
 - Few
- Path to full credentialing by February 15, 2022

Public Notice #5

- Allowed EMT psychomotor testing to occur after completing the cognitive exam
- Expires August 15, 2021

Public Notice #6

- Allowed Paramedics and EMTs to vaccinate the public under appropriate supervision
- EMTs as vaccinators
 - Expires August 15, 2021
 - Option as laypeople per MDH order; not as EMS system

- Paramedics
 - New statute
 - May administer flu and COVID-19 vaccines to the public under appropriate circumstances

Public Notice #7

- Permitted EMS clinicians to provide non-EMS care at state-facilitated alternative care sites
 - BCCFH
- Expires August 15, 2021

Public Notice #8

- Extends all EMS clinician licenses and certification (that would have otherwise expired in April or June 2021) to October or December 2021, depending on level
- Remains in effect

Public Notice #9

- Allows commercial ambulance services to use non-certified (no medical qualification) personnel to drive a BLS ambulance
 - Early in assessment of effects
- Expires October 15, 2021

Emergency Viral Syndrome Pandemic Triage Protocol.

Dr. Delbridge said that the protocol assists EMS in identifying patients who are able to appropriately care for themselves at home, as opposed to being transported to an emergency department. Dr. Delbridge, Dr. Chizmar and Dr. Levy wrote a paper for publication on this protocol. Several states adopted the Maryland protocol. Dr. Chizmar and the Protocol Committee will evaluate the protocol for continuation.

Automatic External Defibrillators (AEDs)

Dr. Delbridge said that Maryland has a Public Access AED program defined in Education Article, §13-517 which established the Public Access AED program, provides that the EMS Board establish rules and regulations, the Board can delegate any responsibilities for the program to MIEMSS and offer immunity for acts of omission or commission if the rules are followed. The Board has delegated administration of the program to MIEMSS.

Dr. Delbridge gave an overview of the current Public Access AED registration process, which is administered by Ms. Rose in the Region IV office using an online registry program. Dr. Delbridge said that the current computer registry program is being challenged by a third party vendor that says that there is no evidence the Board designated MIEMSS as the administrating authority of the Public Access AED program. COMAR 30.06.02.04 states “*A facility seeking registration or renewal of registration shall submit an application and all required documentation to MIEMSS on the form required by MIEMSS*”. He added that MIEMSS reviewed the information requested on the online AED registry to assure only needed data is collected.

Dr. Delbridge said the Board reaffirmed delegation of responsibility to MIEMSS for administering the statewide Public Access AED program to include collection of information MIEMSS to be appropriate and necessary for administering the program an using the format and process for the collection of information by MIEMSS at the June 2021 meeting.

SEMSAC REPORT

Chairman Tiemersma the Regional Affairs continues work on closing out the cardiac arrest grant awards

MIH Educational Training - Draft

A copy of the draft curriculum was distributed.

Chairman Tiemersma said he and the MIH workgroup co-chair, Mr. Yerkie, presented the draft MIH Educational Training curriculum to SEMSAC for review at the SEMSAC meeting on July 1st. He said the curriculum cover page is a guideline for MIH training. EMS clinicians would not receive any new designations at the end of the training, but would receive a certificate.

Chairman Tiemersma gave an overview of the suggested revisions and additions in the guidelines and curriculum. He said that the number of training hours was discussed, but feels that this is the appropriate amount of time. He asked the Board to review the documents for comment.

Dr. Chizmar said an analogy would be that the Board has oversight and approval for the curriculum for the Specialty Care Transport (SCT) Paramedic for which they receive a certificate and then the Commercial Service credentials the Paramedic for SCT.

Chairman Stamp thanked Chairman Tiemersma and the MIH workgroup for the work on the MIH Educational Training and building a platform for MIH Training.

MSPAC

A written report was provided.

Major Tagliaferri said that MSPAC has started the replacement process for the Zoll Propaq defibrillator monitors. At the request of the EMS Board, MSPAC is splitting the purchase over FY22 and FY23 budget years. Total cost is \$662,031.84.

Major Tagliaferri highlighted some of the personnel vacancies, promotions, hires, and recruitment initiatives.

Major Tagliaferri reported on the aircraft maintenance schedule.

Major Tagliaferri announced the recent passing of Ret. F/Sgt Paul Crutchley after a lengthy illness at the age of 82. He said that Sgt. Crutchley was a US Navy veteran who joined the Maryland State Police in the late 1960s. In the mid-1970s, after obtaining a helicopter rating, he transferred to the Aviation Division Trooper 2. In the mid-1980s, Paul was back in Frederick flying at Trooper 3. He would serve as the assistant supervisor and later supervisor in charge of the section during some very difficult times, including the fatal crash in 1986, and the transition to the Dauphin helicopter. Paul retired in 1990 and returned as a civilian pilot flying eight more years.

RACSTC REPORT – No report

MSFA

A written report was distributed.

President McCrea brought greetings from the Officers and members of the MSFA. He said the virtual MSFA convention and conference went well. The new officers are Joel McCrea-President, Ben Kurtz-1st VP and Eric Smothers-2nd VP. He expressed the MSFA's appreciation to MIEMSS, Maryland Fire Chiefs and Shock Trauma for their contributions to the virtual Convention.

The next MSFA Executive Committee meeting will be held in person and live streamed at Western Enterprise Fire Company in Hagerstown on September 18th & 19th. Please send all reports to reports@msfa.org in advance of the meeting. If there are any questions, please reach out to Executive Committee Chairperson Doug Simpkins.

Chairman Stamp congratulated President McCrea on the election.

OLD BUSINESS – N/A

NEW BUSINESS – N/A

30.01.02.01 the Maryland Medical Protocols for Emergency Medical Services Providers - Incorporation by Reference

Dr. Delbridge requested the EMS Board to approve the Incorporation by Reference of the 2021 Maryland Medical Protocols for Emergency Medical Service (EMS) Providers.

ACTION: Upon the motion of Ms. Vanhoy, seconded by Mr. Tiemersma the EMS Board unanimously approved the Incorporation by Reference of the 2021 Maryland Medical Protocols for EMS Providers.

Ambulance Drivers – Proposed Amendments: COMAR 30.09.04.08

The proposed Emergency Regulation was distributed.

Dr. Delbridge said subsequent to the Governor's Emergency Executive Order, MIEMSS is proposing an emergency regulation to waive certain personnel requirements relevant for commercial ambulance services. The proposed Emergency Regulation will permit SOCALR to waive the personnel requirements for a licensed / certified driver for a BLS ambulance and to set requirements that must be met by a service seeking a waiver. The approval of a waiver would be at the discretion of MIEMSS; and if granted, would be for one-year with the option to request a renewal.

Dr. Delbridge said the original motivation for changing the regulation was to help ensure and augment the availability of commercial ambulances to move patients from one facility to another, thus avoiding protracted wait times. Utilizing non-certified drivers, a recent company noted an increase in availability of 758 unit hours over 7 days; a 27% increase.

The proposed Emergency Regulation would presumably be in effect before October 15th.

Ms. Sette added that this applies to BLS ambulances only. Other requirements include obtaining a Public Service Commission license, which requires a background check; and minimal competency training in infection control and other critical safety measures. Ms. Sette said that the emergency regulation would be good for 6 months unless an extension is requested. The emergency regulation is being requested in concurrence with processing a non-emergency (regular) modification to the regulation which would not be subject to expiration.

ACTION: Upon the motion of Mr. Scheulen, seconded by Mr. Tiemersma the EMS Board approved the proposed amendments to COMAR 30.09.04.08 on an emergency basis and regular basis.

Minor Definitive Care Now (MDCN) – Salisbury FD

Dr. Chizmar said that Charles Dolan and Chris Truitt from the Salisbury Fire Department were online to answer any questions.

Dr. Chizmar said Salisbury FD is proposing to serve as a second site for the MDCN Pilot Protocol, which was initially approved by the EMS Board for Baltimore City in 2018. The goal of the pilot protocol is to improve health outcomes for vulnerable populations and limit unnecessary ambulance transports. This would include low acuity patients (“alpha” dispatch), stable vital signs and low-acuity on EMS assessment. Patients located within the Salisbury Fire Department district must consent to participate in MDCN.

Staffing includes a Maryland-licensed Nurse Practitioner and a Maryland-licensed Paramedic. Both professionals will complete 40 hours (minimum) initial training and 8 hours of monthly training reviewing cases and training on skills.

Interventions include Medications / Prescriptions, minor procedures such as suturing, follow-up care instructions and follow-up appointments.

The quality improvement plan entails a 100% case review with Dr. Todd (jurisdictional medical director) along with a VP and population Health MD from TidalHealth and the Fire Chief and EMS Captain at Salisbury FD.

Salisbury FD will provide monthly reports for the first year with quarterly reports thereafter. Evaluations will be completed for ED visits for the same patient complaint within 72 hours.

Dr. Chizmar also provided an update on the Baltimore City MDCN data and statistics.

Captain Truitt thanked the EMS Board for their consideration with this initiative.

Vice Chair Adams said it should be clear that persons being served see this as an advantage and not as an equity issues that says people of color or disadvantaged populations are treated differently than everyone else. It is important to collect and report out on the treated population demographics for transparency.

Mr. Dolan said the intent for TidalHealth along with the Salisbury Fire Department is to perform some population health measures and to collect some data during patient visits. TidalHealth has been very involved with community vaccinations and will continue.

ACTION: Upon the motion of Dr. Westerband, seconded by Mr. Scheulen the EMS Board approved the Minor Definitive Care Now pilot protocol for Salisbury Fire Department.

ACTION: Upon the motion of Dr. Westerband, seconded by Ms. Vanhoy the EMS Board adjourned to closed session.

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).

In closed session:

Board Members Present: Clay B. Stamp, NREMT P, Chairperson; Sherry Adams, Vice Chairperson; Sally Showalter; Stephan Cox; William J. Frohna, M.D.; Wayne Tiemersma; Dany Westerband, M.D.; James Scheulen, NREMT P; Dean E. Albert Reece, M.D.

Board Members Absent: Mary Alice Vanhoy, RN

MIEMSS: Dr. Delbridge; Ms. Goff; Ms. Chervon; Mr. Brown

OAG: Mr. Magee; Ms. Sette.

In Closed Session:

1. The Board considered SEMSAC appointments; and
2. The Board considered disciplinary matters.