

**Maryland General Assembly
Department of Legislative Services**

**Proposed Regulations
Maryland Institute for Emergency Medical Services Systems
(DLS Control No. 14-070)**

Overview and Legal and Fiscal Impact

These regulations clarify requirements for the transport of neonatal patients (neonates) by commercial ambulance services, alter certain quality assurance process requirements, and alter staffing and equipment requirements for licensed neonatal commercial ambulances.

The regulations present no legal issue of concern.

There is no fiscal impact on State or local agencies.

Regulations of COMAR Affected

Maryland Institute for Emergency Medical Services Systems:

Commercial Ambulance Services: Neonatal Ambulance Service:
COMAR 30.09.12.02, and .04.-.07

Legal Analysis

Background

An independent State agency, the Maryland Institute for Emergency Medical Services Systems (MIEMSS) is governed by the State Emergency Medical Services Board (EMS Board) and charged with the coordination of all emergency medical services in the State. This includes planning, operations, evaluation, and research. MIEMSS coordinates and evaluates emergency medical services delivered in this State, licenses and regulates commercial ambulance services, and licenses and regulates individuals providing emergency medical services. In accordance with statutory requirements, these regulations were developed in coordination with the State Board of Nursing and in consultation with representatives of the ambulance services in Maryland.

Summary of Regulations

COMAR 30.09.12 concerns the operations of neonatal ambulance services and neonatal ambulances. Regulation .02 concerns requirements for neonatal commercial ambulance services. These regulations amend Regulation .02B to require an ambulance service transporting neonates, regardless of frequency, to obtain a neonatal commercial ambulance service license. In addition, the regulations amend Regulation .02D, concerning staff that a licensed commercial ambulance service transporting neonates must retain, to include one or more specified physicians who are board certified or are active candidates for board certification in neonatology. New

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Regulation .02G authorizes the transport of neonates to a perinatal center, pediatric unit, or pediatric intensive care unit or from one neonatal intensive care unit to another by a specialty care transport team with age appropriate competencies and equipment or by a neonatal transport team. New Regulation .02H authorizes neonates who have been discharged to home or are returning to a neonatal or pediatric intensive care unit from a referring hospital to be transported by a specialty care transport team with age appropriate competencies and equipment or by a neonatal transport team. New Regulation .02I requires neonates being transported from a neonatal or pediatric intensive care unit to another acute care hospital, rehabilitation hospital, or long term care to be screened by a specialty care team with age appropriate competencies and equipment or by a neonatal team prior to transport.

Regulation .04 concerns staffing requirements for neonatal licensed commercial ambulances. Regulation .04A(2) requires the ambulance to be staffed by a registered nurse or physician with advanced training in the care of neonates and, as of July 1, 2014, a State licensed healthcare provider who is medically qualified to care for the patient and has additional training needed to care for neonatal patients during interfacility transport. When more than one patient is transported simultaneously in the same ambulance, Regulation .04B requires at least one registered nurse or physician with advanced training in the care of neonates to be present for each patient and that each patient be secured in a separate patient restraint device appropriate for the patient's age and weight. The regulations also amend Regulation .04C concerning training and certification requirements for all personnel attending to neonatal patients. Specifically, the regulation requires personnel to complete and maintain current certification for the Neonatal Resuscitation Program and the S.T.A.B.L.E. Program (a program of stabilization care for newborn infants) and, if a physician, to maintain board certification in neonatology.

Regulation .05 concerns record-keeping and quality assurance requirements for neonatal transports. These requirements are in addition to those under COMAR 30.09.08. New Regulation .05C requires a licensed neonatal commercial ambulance service to have a specified quality assurance program required by COMAR 30.03.04.

Regulation .06 concerns equipment requirements for neonatal commercial ambulances. The regulations amend Regulation .06B, specifying the contents of written maintenance plans for medical devices used on neonatal commercial ambulances. New Regulation .06C requires all on-board medical devices to be secured. New Regulation .06D specifies that, if the ambulance is also licensed as a specialty care ambulance, the vehicle does not need to carry duplicates of required items. Former Regulation .06C, which specified the contents of a portable kit for each neonatal ambulance, is repealed. Regulation .06E, formerly Regulation .06D, provides an updated equipment list for neonatal ambulances. New Regulation .06F requires a neonatal transport service to provide a list of additional medications used by the service to the State Office of Commercial Ambulance Licensing and Regulation (SOCALR) and maintain that list on each ambulance when in use for a neonatal transport. New Regulation .06G requires the neonatal transport service to notify SOCALR in writing of any changes to the list of additional medications within seven days of the change. New Regulation .06H requires the ambulance to contain sufficient quantities of medications to care for one neonatal patient for the longer of one hour or two times the estimated time of transport.

Finally, these regulations repeal Regulation .07, concerning requests for waivers from the requirements under the chapter.

Legal Issue

The regulations present no legal issue of concern.

Statutory Authority and Legislative Intent

The EMS Board cites § 13-515 of the Education Article as authority for the regulations. Specifically, § 13-515(c)(1) requires the EMS Board, in consultation with representatives of the ambulance service in Maryland, to adopt regulations necessary to establish a periodic licensing system for ambulance services in the State. Moreover, § 13-515(c)(2) specifies minimum requirements for these regulations, including equipment and staffing requirements. More generally, § 13-508(a) authorizes the EMS Board to adopt regulations to carry out the provisions of Title 13, Subtitle 5, concerning emergency medical services.

The cited authority is correct and complete. The regulations comply with the legislative intent of the law.

Technical Corrections and Special Notes

As submitted, the statement of purpose does not reflect new staffing requirements for licensed neonatal commercial ambulances. In addition, the proposed regulations contain a number of formatting errors. The EMS Board has indicated it will revise the statement of purpose and the regulations accordingly. This analysis reflects that intent.

Fiscal Analysis

There is no fiscal impact on State or local agencies.

Agency Estimate of Projected Fiscal Impact

The regulations clarify quality assurance processes and required equipment for service providers who transport neonates by ambulance. MIEMSS advises that the regulations have minimal or no impact on State or local governments because MIEMSS already licenses and inspects these specialty care transport service providers who transport neonates by ambulance. Thus, the regulations do not increase the workload for either State or local governments and can be enforced and implemented with existing budgeted resources. The Department of Legislative Services concurs.

Impact on Budget

There is no impact on the State operating or capital budget.

Agency Estimate of Projected Small Business Impact

MIEMSS advises that none of the affected service providers is a small business, and further, most of the changes reflect current practices. Thus, the regulations have minimal or no economic impact on small businesses. The Department of Legislative Services concurs.

Contact Information

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