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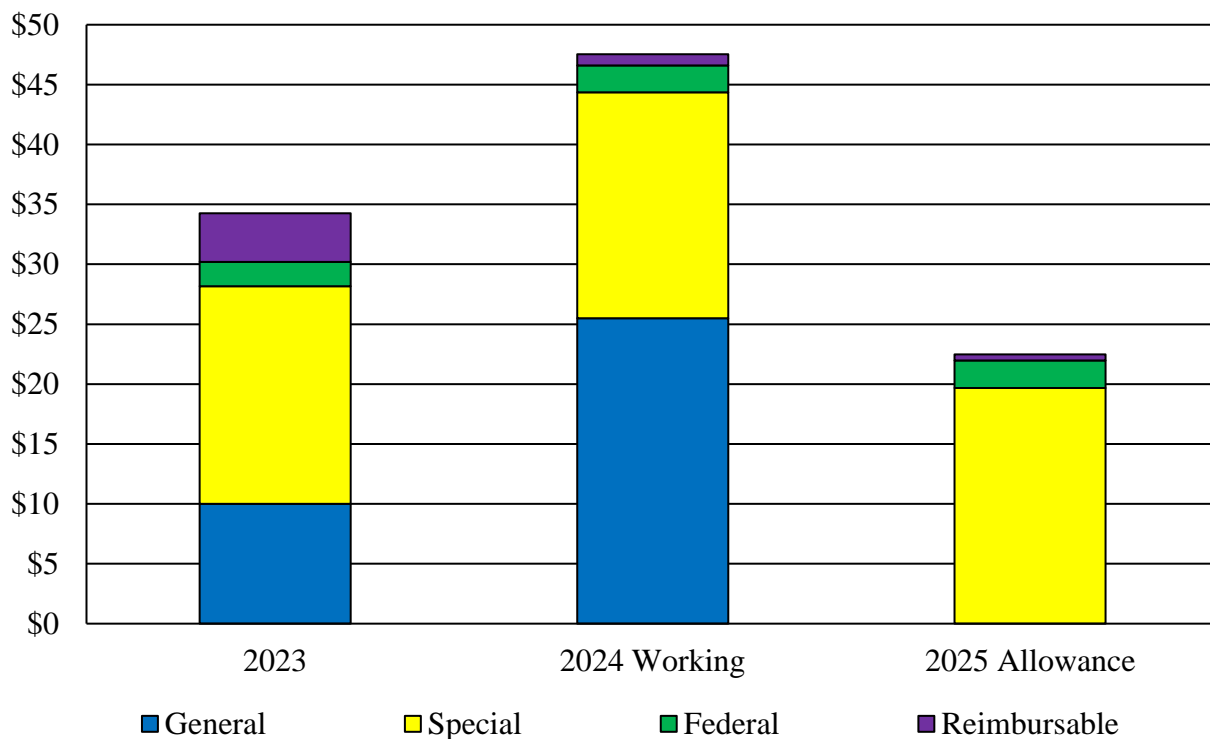
Maryland Institute Emergency Medical Services Systems

Program Description

The Maryland Institute for Emergency Medical Services Systems (MIEMSS) is an independent agency that oversees and coordinates all components of the statewide emergency medical services (EMS) system. MIEMSS also sets EMS guidance and designates hospital facilities as trauma centers across the State. The agency is led by an 11-member EMS board, 31-member EMS advisory council, 5 regional EMS councils, and several committees providing guidance on populations with specific health needs.

Operating Budget Summary

Fiscal 2025 Budget Decreases \$25.1 Million, or 52.7%, to \$22.5 Million
(\$ in Millions)



Note: The fiscal 2024 impacts of statewide salary adjustments appear in the Statewide Account in the Department of Budget and Management (DBM), and adjustments are not reflected in this agency’s budget. The fiscal 2025 impacts of the fiscal 2024 statewide salary adjustments appear in this agency’s budget. The fiscal 2025 statewide salary adjustments are centrally budgeted in DBM and are not included in this agency’s budget.

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- The fiscal 2025 allowance decreases by \$25.1 million compared to the fiscal 2024 working appropriation due mainly to the end of \$25.5 million in general fund support in fiscal 2024 to address insolvency issues in the Maryland Emergency Medical System Operations Fund (MEMSOF) and provide additional grant funding for the R Adams Cowley Shock Trauma Center (Shock Trauma).

Fiscal 2023

MIEMSS canceled more than \$2.2 million (mainly in reimbursable funds) at the end of fiscal 2023. Of the total cancellations, \$1.8 million can be attributed to unexpended costs for 3 staff positions at the Critical Care Coordination Center (C4) from November 9, 2022, to June 30, 2023. These positions would have increased pediatric capacity at C4 and were originally set to be funded with reimbursable funds from the Maryland Department of Health (MDH) Office of Preparedness and Response (OPR), available through the federal American Rescue Plan Act. The reimbursable funds were added to MIEMSS' fiscal 2023 appropriation by budget amendment and totaled \$1.97 million. These funds were intended to support the consultants performing daily consultations throughout the seven-month contract. The funds were subsequently canceled because the anticipated need for increased pediatric capacity did not materialize. **MIEMSS should comment on its efforts to continue C4 and its plans for the facility in the future.**

Fiscal 2024

Implementation of Legislative Priorities

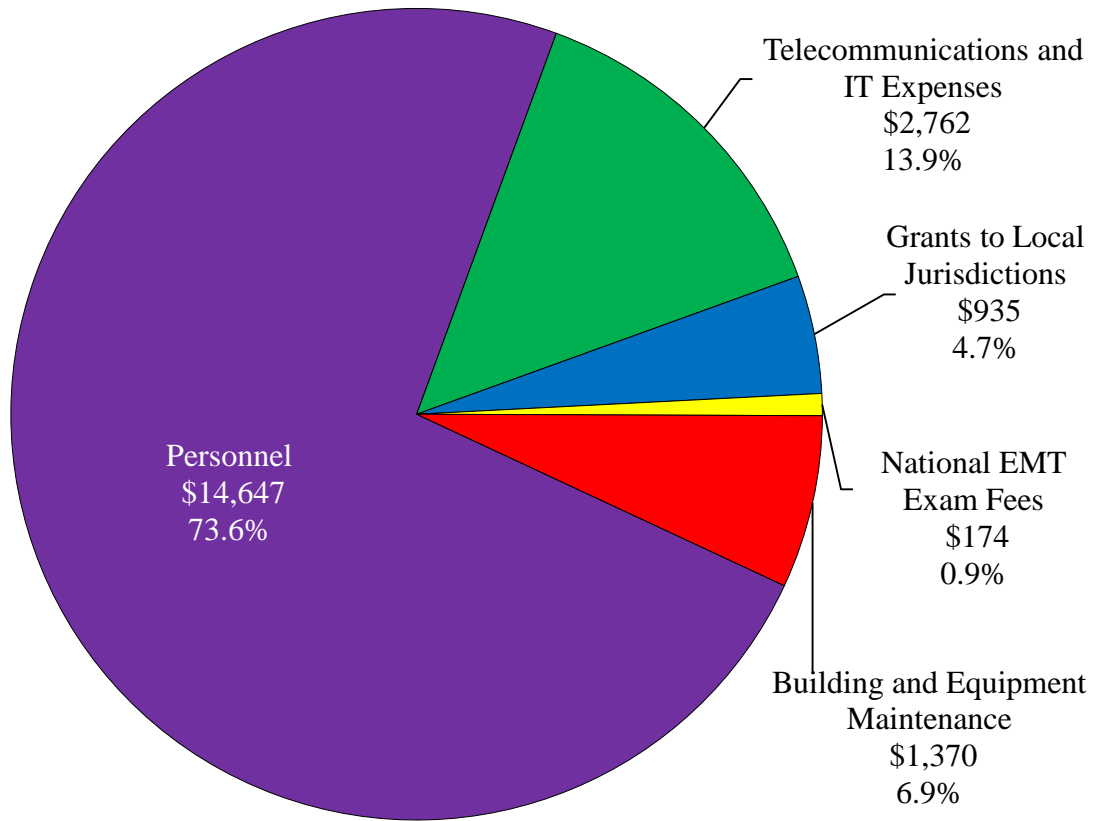
Section 19 of the fiscal 2024 Budget Bill (Chapter 101 of 2023) added \$25.5 million in general funds to the appropriation for MIEMSS to cover anticipated MEMSOF shortfalls in fiscal 2024 and 2025 and ensure that MEMSOF grants for Shock Trauma totaled \$8.7 million in fiscal 2024 and \$3.7 million in fiscal 2025. The Department of Budget and Management (DBM) and the Department of Legislative Services project a shortfall in MEMSOF beginning in fiscal 2026. MEMSOF provides funding to five EMS agencies, including MIEMSS. Further discussion of the MEMSOF forecast can be found in the MEMSOF budget analysis. MIEMSS reported that it is actively working with DBM to identify funding solutions to avoid future insolvency.

Fiscal 2025 Overview of Agency Spending

The fiscal 2025 allowance for MIEMSS totals \$22.5 million. As seen in **Exhibit 1**, personnel costs make up the largest portion of funding, with expenses totaling \$14.6 million, or 73.6%, of the total budget. This includes funding for 100.0 regular positions and 19.5 contractual full-time equivalents (FTE). Telecommunications costs comprise 13.9% of the allowance and enable coordination of the emergency medical communication systems. Grants to local

governments comprise \$935,000, or 4.7%, of the allowance. These grants support the acquisition of cardiac monitoring and defibrillator equipment (\$425,000), training for Advanced Life Support (\$310,000), and Emergency Medical Dispatch training (\$50,000).

Exhibit 1
Overview of Agency Spending
Fiscal 2025 Allowance
(\$ in Thousands)



EMT: emergency medical technician
IT: information technology

Note: The fiscal 2025 statewide salary adjustments are centrally budgeted in the Department of Budget and Management and are not included in this agency's budget.

Source: Governor's Fiscal 2025 Budget Books

Proposed Budget Change

The fiscal 2025 allowance decreases by \$25.1 million compared to the fiscal 2024 working appropriation. As seen in **Exhibit 2**, there is a decrease of \$25.5 million in general funds from fiscal 2024, accounting for more than 98% of the net change. This funding was an enhancement to cover anticipated shortfalls in MEMSOF in fiscal 2024 and 2025 and increase grant funding for Shock Trauma. Outside of this decrease, there is a net increase of \$443,968, driven mainly by a net increase in salary costs, partially offset by a decrease in grants to local jurisdictions for the purchase of naloxone.

Exhibit 2
Proposed Budget
Maryland Institute Emergency Medical Services Systems
(\$ in Thousands)

How Much It Grows:	<u>General</u>	<u>Special</u>	<u>Federal</u>	<u>Reimb.</u>	<u>Total</u>
	Fund	Fund	Fund	Fund	
Fiscal 2023 Actual	\$10,000	\$18,160	\$2,034	\$4,065	\$34,258
Fiscal 2024 Working Appropriation	25,500	18,844	2,264	915	47,524
Fiscal 2025 Allowance	<u>0</u>	<u>19,684</u>	<u>2,286</u>	<u>498</u>	<u>22,468</u>
Fiscal 2024-2025 Amount Change	-\$25,500	\$839	\$22	-\$417	-\$25,056
Fiscal 2024-2025 Percent Change	-100.0%	4.5%	1.0%	-45.6%	-52.7%

Where It Goes:

Personnel Expenses

	<u>Change</u>
Salary increases and associated fringe benefits including fiscal 2024 COLA and increments	\$748
Salaries and other fringe benefits for 2 new positions converted from existing contractual FTE positions	107
Turnover adjustments (decrease from 5.99% to 5.81%).....	20
Workers' compensation	2

Grants and Contracts

Service contracts for communications towers located all over the State	-50
Naloxone grants to local jurisdictions.....	-200
Telecommunications	-240
Fiscal 2024 enhancement to MEMSOF to cover anticipated shortfalls in fiscal 2024 and 2025 and provide the R Adams Cowley Shock Trauma Center with additional funding	-25,500

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Where It Goes:	<u>Change</u>
Other Changes	
Increased expenditures for contractual FTE who support EMS training and the National Capital Region Emergency Response System, partially offset by a net decrease of 0.64 FTE in fiscal 2025	92
Cost allocation.....	70
Other changes.....	-106
Total	-\$25,056

COLA: cost-of-living adjustment
 EMS: emergency medical services
 FTE: full-time equivalent
 MEMSOF: Maryland Emergency Medical System Operations Fund

Note: Numbers may not sum to total due to rounding. The fiscal 2024 impacts of statewide salary adjustments appear in the Statewide Account in the Department of Budget and Management (DBM), and adjustments are not reflected in this agency’s budget. The fiscal 2025 impacts of the fiscal 2024 statewide salary adjustments appear in this agency’s budget. The fiscal 2025 statewide salary adjustments are centrally budgeted in DBM and are not included in this agency’s budget.

MIEMSS should provide brief explanations for the decrease in grants to fund naloxone procurement for local jurisdictions and the decrease in telecommunications expenditures in the fiscal 2025 allowance compared to the fiscal 2024 working appropriation.

Personnel Data

	<u>FY 23 Actual</u>	<u>FY 24 Working</u>	<u>FY 25 Allowance</u>	<u>FY 24-25 Change</u>
Regular Positions	95.00	98.00	100.00	2.00
Contractual FTEs	<u>42.09</u>	<u>20.14</u>	<u>19.50</u>	<u>-0.64</u>
Total Personnel	137.09	118.14	119.50	1.36

Vacancy Data: Regular Positions

Turnover and Necessary Vacancies, Excluding New Positions	5.69	5.81%
Positions and Percentage Vacant as of 12/31/23	13.00	13.27%
Vacancies Above Turnover	7.31	

- As of December 31, 2023, MIEMSS had 13 vacancies, 7.31 above the vacancies needed to meet budgeted turnover in fiscal 2025. Of these vacancies, 4 positions had been vacant for one year or more, including 2 computer network specialists, an information technology director, and a deputy director position. **MIEMSS should comment on its efforts and recruitment activities to date to fill the 4 long-term vacancies and discuss the operational impacts of the vacancies.**
- The fiscal 2025 allowance includes 2 new positions created by converting existing contractual FTEs for an office secretary and a building security officer, both of which were currently filled as of January 26, 2024.

Key Observations

1. MIEMSS Co-staffs Commission to Study Trauma Center Funding in Maryland

MIEMSS oversees the designation of hospitals as trauma centers in line with the Code of Maryland Regulations. Maryland’s trauma care system includes nine adult trauma facilities, two pediatric facilities, and dozens of facilities for specialty referrals such as burn centers and neurotrauma facilities. Trauma centers are classified as one of four levels of care based on the services provided to patients, with the Primary Adult Resource Center and Level I having the highest standards. The adult and pediatric trauma centers in the State serve approximately 25,000 individuals annually. MIEMSS also carries memoranda of understanding with three out-of-state hospitals to administer services to patients requiring higher levels of care than can be provided by the nearest in-state trauma center. **Exhibit 3** lists the trauma centers in Maryland and the number of people served by each annually from June 2020 to May 2023.

Exhibit 3
Maryland Trauma System – People Served
June 2020 to May 2023

<u>Trauma Center</u>	<u>Trauma Level Designation</u>	<u>June 2020 to May 2021</u>	<u>June 2021 to May 2022</u>	<u>June 2022 to May 2023</u>
The Johns Hopkins Bayview Medical Center	II	3,816	2,663	2,413
The Johns Hopkins Medical System	I	1,717	2,206	2,620
Meritus Medical Center	III	2,426	2,763	2,984
R Adams Cowley Shock Trauma Center	PARC	5,958	5,160	5,674
Sinai Hospital of Baltimore	II	2,273	2,565	2,376
Suburban Hospital – Johns Hopkins Medicine	II	1,958	2,028	2,154
TidalHealth Peninsula Regional	III	1,662	1,822	2,211
University of Maryland Capital Region Medical Center	II	3,021	2,879	2,925

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<u>Trauma Center</u>	<u>Trauma Level Designation</u>	<u>June 2020 to May 2021</u>	<u>June 2021 to May 2022</u>	<u>June 2022 to May 2023</u>
UPMC Western Maryland	III	506	638	755
Children’s National Health System	PED	826	911	849
Johns Hopkins Pediatric Trauma Center	PED	762	894	1,027
Total		24,925	24,529	25,988

PARC: Primary Adult Resource Center
 PED: Pediatric trauma center
 UPMC: University of Pittsburgh Medical Center

Note: Children’s National Health System is located in Washington, D.C.

Source: Maryland Institute for Emergency Medical Services Systems

Chapters 341 and 342 of 2023 established the Commission to Study Trauma Center Funding (Commission) in Maryland to assess the adequacy of trauma center funding across the State for operating, capital, and workforce costs, and identify opportunities to improve funding mechanisms. State funding for trauma centers is generally overseen by the Maryland Health Care Commission (MHCC) through the Maryland Trauma Physician Services Fund (MTPSF) and the Health Services Cost Review Commission (HSCRC) through hospital regulated rate setting. This funding is discussed in more detail in the analysis for M00R01 – MDH Health Regulatory Commissions. The legislation, effective June 1, 2023, required MIEMSS and MHCC to staff the Commission using existing resources. The Commission is comprised of 2 members of the Maryland General Assembly (MGA); the Secretary of Health; the Executive Director of MIEMSS, the executive Director of MHCC; representatives from MIEMSS, MHCC, the Maryland Trauma Center Network, the Maryland Patient Safety Center, and HSCRC; and 5 representatives from trauma centers across the State.

The Commission to Study Trauma Center Funding is required to examine the following:

- current funding sources for State-designated trauma centers;
- MTPSF expenditures and revenues since its establishment;
- changes to approved uses of these funds over time;

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- statutory and regulatory requirements for trauma centers at the time the MTPSF was established;
- changes to statutory and regulatory requirements for trauma centers since the MTPSF was established;
- changes in staffing, recruitment, compensation, or other factors that would impact the funding needed to operate a trauma center in the State;
- the amount of funding needed to adequately fund trauma centers in the State;
- the funding mechanisms available to adequately fund trauma centers; and
- funding criteria that would impact the receipt of funds by existing or new trauma centers.

The Commission was required to submit a report to the Governor and MGA by December 1, 2023, with recommended changes to trauma center personnel, approved uses of the MTPSF, the necessary amount of funding to adequately fund trauma centers in Maryland, available funding mechanisms, and funding criteria. The Commission met five times between August and December 2023 and convened on January 31, 2024, to discuss the latest draft of the report. MIEMSS reported that the Commission’s final report submission has been delayed due to the availability of financial data from the trauma centers and anticipates submitting the final report shortly. The Commission presented its preliminary findings and recommendations at a House Appropriations Committee hearing on January 23, 2024. Draft recommendations related mainly to financing structures for trauma centers and those relevant to MIEMSS’s work included:

- to improve data systems to enable linkage of the MIEMSS trauma registry, HSCRC hospital data set, and the MHCC All-Payer Claims Database; and
- to evaluate use of trauma quality measures as a factor in awarding funds to trauma centers.

MIEMSS should provide an update on its progress to date to implement these two recommendations and comment on data currently being collected to measure the quality of trauma centers, measures that can be made available to the public, and additional measures that MIEMSS would consider useful in evaluating trauma centers.

Operating Budget Recommended Actions

1. Concur with Governor's allowance.

Updates

- ***Emergency Medical Technician (EMT) Stipend Program:*** MIEMSS received a COVID-19 Workforce Development grant from the U.S. Centers for Disease Control and Prevention, administered by MDH OPR for an EMT stipend program to drive recruitment and increase the number of EMTs in the State. Funding supports 500 stipend awards for EMT trainees in the State who complete their training. The grant funding expired June 30, 2023, and no additional funding was allocated in fiscal 2024 or 2025. MIEMSS continues to manage the program on a no-cost extension by reallocating funding from students who withdrew from the program to new trainees.

**Appendix 1
Audit Findings**

Audit Period for Last Audit:	July 23, 2018 – September 15, 2022
Issue Date:	March 2023
Number of Findings:	0
Number of Repeat Findings:	0
% of Repeat Findings:	0%
Rating: (if applicable)	N/A

The Office of Legislative Audits did not report any findings.

Appendix 2
MIEMSS Communications System Upgrade
Major Information Technology Development Project
Maryland Institute for Emergency Medical Services Systems

New/Ongoing: Ongoing								
Start Date: March 2018					Est. Completion Date: June 2026			
Implementation Strategy: Waterfall								
(\$ in Millions)	Prior Year	2024	2025	2026	2027	2028	Remainder	Total
GF	\$0.025	\$0.000	\$0.065	\$0.035	\$0.000	\$0.000	\$0.000	\$0.125
SF	11.850	0.000	0.000	.438	0.000	0.000	0.000	15.288
Total	\$11.875	\$0.000	\$0.065	\$3.473	\$0.000	\$0.000	\$0.000	\$15.413

- **Project Summary:** The MIEMSS Communications System Upgrade will update the statewide interoperable communications system from a circuit-switched, analog system operating with unsupported legacy equipment to a modern, Internet Protocol-based communications system.
- **Need:** The existing communications system is more than 20 years old and is based on technologies from the 1980s, which has resulted in MIEMSS being advised that only limited aspects of the system will continue to be supported due to age. Other aspects of the current system are based on copper wires that have been retired.
- **Observations and Milestones:** The project experienced delays primarily due to the COVID-19 pandemic. Delays included a pause in project operations and challenges coordinating relevant facility contacts, as well as disruptions to equipment supply chain and delivery. Phase I implementation in Southern Maryland began in May 2020. As of this writing, equipment installation for Phase I is complete, and MIEMSS plans to test the equipment in January 2024. Phase II implementation in Western Maryland is in progress, and Phase III will begin in the third quarter of fiscal 2024.
- **Changes:** MIEMSS is seeking a contract extension to June 2026, but anticipates completing the project prior to that date.

Appendix 3
Object/Fund Difference Report
Maryland Institute for Emergency Medical Services Systems

<u>Object/Fund</u>	<u>FY 23</u> <u>Actual</u>	<u>FY 24</u> <u>Working</u> <u>Appropriation</u>	<u>FY 25</u> <u>Allowance</u>	<u>FY 24 - FY 25</u> <u>Amount Change</u>	<u>Percent</u> <u>Change</u>
Positions					
01 Regular	95.00	98.00	100.00	2.00	2.0%
02 Contractual	42.09	20.14	19.50	-0.64	-3.2%
Total Positions	137.09	118.14	119.50	1.36	1.2%
Objects					
01 Salaries and Wages	\$ 10,919,128	\$ 11,585,930	\$ 12,463,792	\$ 877,862	7.6%
02 Technical and Special Fees	4,800,987	2,090,759	2,182,841	92,082	4.4%
03 Communication	2,630,159	2,939,013	2,761,749	-177,264	-6.0%
04 Travel	641,527	784,041	739,848	-44,193	-5.6%
06 Fuel and Utilities	198,340	140,424	198,339	57,915	41.2%
07 Motor Vehicles	272,280	284,994	319,742	34,748	12.2%
08 Contractual Services	3,269,317	2,390,388	2,268,453	-121,935	-5.1%
09 Supplies and Materials	271,033	139,902	228,432	88,530	63.3%
10 Equipment – Replacement	249,713	218,321	174,500	-43,821	-20.1%
11 Equipment – Additional	44,695	32,500	500	-32,000	-98.5%
12 Grants, Subsidies, and Contributions	10,784,666	26,735,000	935,000	-25,800,000	-96.5%
13 Fixed Charges	176,616	182,837	194,881	12,044	6.6%
Total Objects	\$ 34,258,461	\$ 47,524,109	\$ 22,468,077	-\$ 25,056,032	-52.7%
Funds					
01 General Fund	\$ 10,000,000	\$ 25,500,000	\$ 0	-\$ 25,500,000	-100.0%
03 Special Fund	18,159,501	18,844,473	19,683,596	839,123	4.5%
05 Federal Fund	2,034,456	2,264,148	2,286,027	21,879	1.0%
09 Reimbursable Fund	4,064,504	915,488	498,454	-417,034	-45.6%
Total Funds	\$ 34,258,461	\$ 47,524,109	\$ 22,468,077	-\$ 25,056,032	-52.7%

Note: The fiscal 2024 appropriation does not include across-the-board reductions. The fiscal 2025 allowance does not include cost-of-living adjustments.