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

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House Bill 934: Public Safety – 9-1-1 Emergency Telephone System

MIEMSS Position: Support with Amendment (Amendment Attached)

Rationale: HB 934 renames the existing Emergency Number Systems Board to be the Maryland 9–1–1 Board, expands Board responsibilities, and alters membership, including removing certain entities, such as the Maryland Institute for EMS Systems (MIEMSS) the Board. Removing MIEMSS ignores MIEMSS' role in Emergency Medical Services (EMS) medical communications; inter-agency medical response operations, coordination and collaboration; education and certification of 9-1-1 Specialists personnel; and use of NextGen 9-1-1- patient information for emergency medical care. HB 934 should be amended to ensure that MIEMSS continues to have representation on this reconstituted entity.

- The Maryland Institute for Emergency Medical Services Systems (MIEMSS) is an independent state agency statutorily responsible for the coordination of EMS in Maryland. MIEMSS is governed by the State EMS Board comprised of members appointed by the Governor.

- By statute, the EMS Board:

    - Licenses / certifies all Maryland EMS personnel, including Emergency Medical Dispatchers who serve as 9-1-1 Specialists at public safety answering points, to ensure they are able to respond effectively to medically-related 9-1-1 calls;
    - Approves all initial and continuing education programs for EMD personnel; and
    - Approves the Maryland Medical Protocols which direct EMS treatment of emergency patients.

  See Education Article §13-516 (a)(4) & (a)(7)(ii); §13-516(b) and (d); and COMAR 30.02.02.03G & 30.02.03.

- **MIEMSS is the agency that implements and carries out the directives of the State EMS Board. MIEMSS has been a member of the existing Emergency Number Systems Board since its inception.**

- NextGen 911 will enable multimedia communications, i.e., voice, text, photos, video, from 9-1-1 callers to public safety answering points which will help EMS provide faster, more effective responses to patients calling 9-1-1 for medical emergencies.

- Patient information available through NextGen 911 technologies will necessitate that MIEMSS modify initial training and continuing education requirements for EMDs; implement changes in State EMD certification; and incorporate patient condition information obtained from NextGen 9-1-1 technologies into the Maryland Medical Protocols that standardizes and directs basic and advanced EMS personnel in the treatment of emergency patients in the pre-hospital phase of care.

- **MIEMSS is responsible for the effective integration of patient information from NextGen 911 technologies into all phases of Maryland's Statewide EMS system and pre-hospital emergency medical care.**

- **HB 934 should be amended to ensure that MIEMSS continues to have representation on the reconstituted Emergency Number Systems Board, the Maryland 9-1-1 Board.**

MIEMSS Supports HB 934 with Amendments (See Attachment)

AMENDMENTS TO HOUSE BILL 934
(First Reading File Bill)

Amendment No. 1

On page 7, in lines 24 and 25, in each instance, strike "19" and substitute "20".

Amendment No. 2

On page 7, in line 29, after State; insert a bracket.

Amendment No. 3

On page 7, at the beginning of line 30, delete "(iii)" and insert "(I)".

Amendment No. 4

On page 8, at the beginning of line 2, insert a bracket.

Amendment No. 5

On page 8, in lines 3, 5, 8, 12, 16, 20, 22, 27 and 29, strike "(I)", "(II)", "(III)", "(IV)", "(V)", "(VI)", "(VII)," "(VIII)" and "(IX)" respectively, and substitute "(II)", (III)", "(IV)", "(V)", "(VI)", "(VII)", "(VIII)", "(IX)", "(X)", respectively.

Amendment No. 6

On page 9, in lines 1, 3, 5, 10, 12, 14, 18, and 21, , strike "(X)", "(XI)", "(XII)", "(XIII)", "(XIV)", "(XV)", "(XVI)", and (XVII)" respectively, and substitute"(XI)", "(XII)", "(XIII)", "(XIV)", "(XV)", "(XVI)", "(XVII)", and "(XVIII), respectively.

Amendment No. 7

On page 20, strike lines 31 through line 32.

Amendment No. 8

On page 20, in line 33, strike "(4)" and insert "(3)"

Amendment No. 9

On page 21, in lines 1, 2, 4, and 6, strike ("5"), "(6)", "(7)", and"(8)", respectively and substitute "(4)", "(5)", "(6)", and "(7)" respectively.

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March 3, 2020

The Honorable Shane E. Pendergrass
Chair, House Health & Government Operations
Room 241 House Office Building
Annapolis, Maryland 21401

Re: **Letter of Concern - HB 934: Public Safety – 9-1-1 Emergency Telephone System**

Dear Chair Pendergrass:

I am writing to provide you and the Committee with information specific to HB 934 and to explain how Next Gen 9-1-1 technologies could impact our emergency medical services (EMS) system, and why it is important that the Maryland Institute for Emergency Medical Services Systems (MIEMSS) be represented on the 9-1-1 Board. MIEMSS has conveyed to the Committee a position paper and amendment that seeks to ensure that MIEMSS continues to have representation on this reconstituted entity. Please accept this letter as a supplemental explanation to those materials.

HB 934 will rename the existing Emergency Number Systems Board to be the "Maryland 9–1–1 Board" and expand Board responsibilities to account for Next Gen 9-1-1 technologies, and to establish standards for education and for processing 9-1-1 requests for assistance among public safety answer points in Maryland. Further, HB 934 standardizes an additional fee charged by a county for 9-1-1 service to be a "County 9-1-1 fee."

HB 934 also alters the membership of the existing Emergency Number Systems Board by adding four members to represent county public safety answer points in each of four regions of the state; adds one representative each of a county fire service, a county emergency management service; and a county EMS service; adds one member to represent 9-1-1 specialists; adds one member with public finance experience selected from recommendations from the Maryland Association of Counties; adds one member to represent individuals with disabilities, assistive technology needs, seniors and those with language and accessibility needs; and adds three members of the public, one of whom must possess cybersecurity experience.

Significantly, HB 934 also removes from membership certain entities that currently serve on the existing Emergency Number Systems Board, one of which is the Maryland Institute for EMS Systems (MIEMSS). MIEMSS has been a member of the Emergency Numbers Board since its inception.

As you know, MIEMSS is an independent state agency statutorily responsible for the coordination of EMS in Maryland. MIEMSS is governed by the State EMS Board comprised of members appointed by the Governor. By statute, the State EMS Board – through MIEMSS – approves all initial and continuing education programs for Emergency Medical Dispatch personnel who serve as 9-1-1 Specialists at public safety answering points. See Education Article 13-516 (a)(4)(i). The State EMS Board – through MIEMSS – licenses all Emergency Medical Dispatchers who serve as 9-1-1 Specialists at public safety answering points. See Education Article 13-516 (a) (4) and (b) and COMAR 30.02.02.03G. Indeed,

"The Final Report of the Commission to Advance NG9-1-1 Across Maryland" specifically noted that:

> "…Maryland residents and visitors must be assured they will receive high quality 9-1-1 services during their time of need…9-1-1 specialists must be certified through the Maryland Institute for Emergency Medical Services Systems to be emergency medical dispatchers. They can triage medical calls and provide pre-arrival and post-dispatch instructions for events involving chocking, cardio-pulmonary resuscitation, childbirth, and the like…"
>
> "The Commission to Advance NG9-1-1 Across Maryland – Final Report," November 2018, pp 34-35.

HB 934 risks creating conflicts between MIEMSS, which is the State's licensing / certification entity for Emergency Medical Dispatchers, and the county public safety answering points that employ these individuals as 9-1-1 specialists. This is because HB 934 removes MIEMSS from the 9-1-1 Board membership while enabling the 9-1-1 Board to establish training standards for Next Gen 9-1-1 topics and minimum continuing education standards. Instead, HB 934 should be amended to retain MIEMSS' membership on the Board so that close collaboration can be ensured in the development and implementation of initial and continuing educational standards for NextGen 9-1-1 topics.

Further, as you know, NextGen 9-1-1 will enable multimedia communications – voice, text, photos, video – from 9-1-1 callers to public safety answering points. Patient information conveyed through NextGen 9-1-1 technologies will help EMS and other health care professionals provide faster, more effective emergency medical response. MIEMSS is responsible for the integration of patient information from NextGen 9-1-1 technologies into all phases of Maryland's Statewide EMS system and pre-hospital emergency medical care. MIEMSS is responsible for the development of the Maryland Medical Protocols for EMS. These protocols, approved by the State EMS Board, standardize and direct basic and advanced EMS personnel in the treatment of emergency patients in the pre-hospital phase of care. See Education Article 13-516 (d) and COMAR 30.02.03. MIEMSS will be the entity that determines how patient information gleaned through NextGen 911 technologies will be incorporated into the Maryland Medical Protocols for EMS.

Finally, the MIEMSS Communication Center – the Maryland Emergency Medical Resource Center & SYSCOM (for helicopter dispatch) – connects all county communications centers with mission critical resources (e.g., GO Team medical personnel for complex extrications at the scene of an incident); public safety and commercial helicopter resources; Poison Control; trauma centers and specialty hospital centers; and local requests for State assistance in the event of a mass casualty or disaster. Removal of MIEMSS membership ignores our significant role in EMS medical communications and inter-agency medical response operations, coordination and collaboration.

For these reasons, MIEMSS respectfully requests that HB 934 be amended to ensure that MIEMSS has representation on the 9-1-1 Board. Thank you kindly for your consideration.

Sincerely,

Theodore Delbridge, MD, MPH
Executive Director

Cc: Members, Health & Government Operations Committee