



# Montgomery County

## Office of Intergovernmental Relations

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HB 1143

DATE: February 28, 2024

SPONSOR: Delegates Bhandari, *et al.*

ASSIGNED TO: Health & Government Operations

CONTACT PERSON: Leslie Frey

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POSITION: FAVORABLE WITH AMENDMENT (Montgomery County Fire & Rescue Service)

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### Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols – Establishment

House Bill 1143 establishes the Maryland Emergency Department Wait Time Reduction Commission to enhance the overall effectiveness and responsiveness of emergency medical services. The Commission will be comprised the Secretary of Health; the Executive Director of the Maryland Institute for Emergency Medical Services Systems; the Executive Director of the Health Services Cost Review Commission; the Executive Director of the Maryland Health Care Commission; and the following members, appointed by the Governor: two health care experts; one emergency department staff person; one emergency medical professional; and one representative of a patient advocacy organization. By January 1 of each year, the Commission must report its findings and recommendations, including an update on the implementation of standardized protocols and operations efficiencies in hospital emergency departments. Montgomery County Fire Rescue Service (MCFRS) requests that this much needed bill be amended to include a leader from a high-volume Maryland EMS operational program representation on the Commission. Battalion Chief Ben Kaufman from the MCFRS Emergency Medical and Integrated Healthcare Services Section has participated on the Maryland Hospital Association's associated task force over the past year. MCFRS would welcome continued participation in working on this issue as a member of the Commission and requests an amendment to clarify that "emergency medical professional" under the bill means a leader from a high-volume Maryland EMS operational program such as Battalion Chief Kaufman.

Emergency Department (ED) crowding is a complex issue that results in multiple downstream and adverse effects on EMS systems, such as rendering our transport units unavailable to respond to other 911 calls while waiting at an ED for a bed to become available for a patient. Hospital delays also increase costs: Montgomery County has proactively dedicated an EMS supervisor to oversee the distribution of ambulances so that no hospital gets overwhelmed by the volume of ED patients. This comes at a direct cost to the County which is not reimbursed by the State or hospitals. Montgomery County also incurs costs from EMS personnel whose shifts extend into overtime due to prolonged waiting times to admit patients into the ED. If the problem of emergency department overcrowding throughout the State is not addressed, we will ultimately need more EMS units and personnel. Additionally, hospital delays impact our volunteer EMS personnel: being detained at the ED beyond the end of a volunteer shift makes it difficult for volunteers to get to their primary jobs on time. Local volunteer fire chiefs cite this problem as a bona fide recruitment and retention barrier.

MCFRS has been an innovator at exploring solutions to these issues. In addition to the transport supervisor, we implemented an alternative destination program and added telehealth services for treatment-in-place. However, we've had little success diverting a meaningful volume or the appropriate acuity of patients away from the emergency department. MCFRS strongly agrees with the need for the Commission proposed by House Bill 1143 but respectfully requests an amendment to clarify that "emergency medical professional" means a leader from a high-volume Maryland EMS operational program.