



BRANDON M. SCOTT  
MAYOR

*Office of Government  
Relations 88 State Circle  
Annapolis, Maryland 21401*

**SB0159**

February 18, 2026

**TO:** Members of the Senate Education, Energy, and the Environment  
**FROM:** Nina Themelis, Director of Mayor's Office of Government Relations  
**RE:** SB 0159 -Emergency Medical Services - Vehicles and Ambulances -  
Required Supplies, Reviews, and Complaints

**POSITION: OPPOSE**

Chair Feldman, Vice Chair Kagan and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **opposes** Senate Bill (SB) 159.

SB 159 requires the Maryland Institute for Emergency Medical Services Systems (MIEMSS) to coordinate statewide minimum equipment, supply, and medication requirements for Emergency Medical Services (EMS) vehicles. The bill also mandates that counties and municipalities operating or contracting EMS conduct quarterly reviews of ambulance performance data, certify and submit those reviews to MIEMSS, and establish a formal, accessible complaint filing and investigation system for ambulance services.

SB 159 would have a significant fiscal and administrative impact on the Baltimore City Fire Department (BCFD) due to an increase in operating costs due to a potential increase in EMS equipment and supplies, increased personnel expenses for quarterly ambulance performance reviews, and increased personnel expenses due to the requirements of the formal EMS complaint filing system as outlined below.

The BCFD responds to more than 160,000 EMS calls annually, operating thirty frontline transport units and ten peak-load units. Any statewide mandate that alters equipment, supply, or medication requirements would require review and modification of each vehicle's inventory, retraining of personnel, and potential procurement of new equipment across the fleet. Even modest changes per unit could result in aggregate costs in the hundreds of thousands

of dollars annually.

Additionally, MIEMSS already has established statewide clinical protocols, licensure requirements, and quality assurance standards for EMS providers. BCFD operates in full compliance with MIEMSS regulations and participates in ongoing clinical review and quality improvement processes. SB 159 creates duplicative oversight structures that may conflict with or unnecessarily layer additional reporting on top of existing regulatory frameworks.

Given Baltimore City's high-acuity call volume and dense urban response environment, administrative expansion required under SB 159 would necessitate reallocation of supervisory personnel away from the field operation and frontline EMS response. In a system already operating under workforce shortages and high demand, diverting trained EMS officers to administrative compliance functions will adversely impact response times and field supervision.

Additionally, EMS systems vary significantly across Maryland based on call volume, geography, hospital access, and operational models. SB 159 imposes a uniform statewide administrative model that may not reflect the operational realities of high-volume urban jurisdictions such as Baltimore City. Local governments are best positioned to tailor performance review and complaint resolution processes to their communities.

In addition to the concerns outlined above, SB 159 imposes new compliance and reporting mandates without a dedicated State funding mechanism.

The BCA supports the goal of accountability and providing a standard level of care for all who receive care through EMS, however, the requirements set forth by SB 159 are significant and would take significant financial and personnel resources to implement. While the legislation aims to advance that goal, it risks creating unintended consequences by diverting limited staff time from day-to-day operations and frontline response and duplicating existing protocols and requirements.

Due to the above reasons, the Baltimore City Administration respectfully requests an **unfavorable** committee report on Senate Bill 159.