THE ANNOTATED CODE OF THE PUBLIC GENERAL LAWS **OF MARYLAND**

Education

ENACTED BY CHAPTER 22, ACTS 1978

Prepared by the Editorial Staff of the Publishers Under the Supervision of

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1992

component of the Institute will be allocated to the Institute less overhead costs. Institute funds held by the Medical System Corporation are designated for specific purposes and will remain separate and earmarked as a dedicated Institute profit/cost center.

(c) Proper procedures and controls will be implemented by the Medical System Corporation to ensure the integrity and separation of Institute financial and statistical information.

(d) To the extent provided by the annual contract the Director of the Institute may utilize the administrative systems of the Medical System Corporation to support nonclinical components of the Institute.

(e) The field operations, research, educational, and general funded clinical component budgets of the Institute will, after coordination with appropriate representatives of the University of Maryland at Baltimore City, be submitted through the Chancellor and President for approval by the Board of Regents."

Section 5 of ch. 288 provides "that for the initial term of the Board of Directors, the Chairman of the Board of Regents will nomi-

nate 3 members, the President of the Senate will nominate 1 member, the Speaker of the House of Delegates will nominate 1 member, the Community Advisory Council Committee will nominate 1 member, and the Board of Regents through its Committee on Hospital and Health Services will nominate 15 persons for consideration by the Governor. Four of the initial terms shall be for 1 year; 4 for 2 years; 4 for 3 years; 4 for 4 years; and 5 for 5 years."

Section 6 of ch. 288 provides "that this act shall take effect June 1, 1984, and if the transfer date does not take place by June 1, 1985, this act shall be abrogated and of no further force and effect." Pursuant to § 13-1B-01 (t) of this article, the Board of Public Works determined the "transfer date" to be July 1, 1984.

Section 1, ch. 246, Acts 1988, effective July 1, 1988, repealed former § 13-103 of this article

Section 2 of ch. 246, effective July 1, 1988, transferred former § 13-110 of this article to be present § 13-103 of this article.

Cited in Davis v. Johns Hopkins Hosp., 86 Md. App. 134, 585 A.2d 841 (1991).

§ 13-103.1. Ambulance services.

- (a) Definitions. (1) In this section the following words have the meanings indicated.
- (2) "Ambulance" means any vehicle designed and constructed or modified and equipped to be used, maintained, or operated for the transportation of individuals who are sick, injured, wounded, or otherwise incapacitated.
- (3) (i) "Ambulance service" means any individual, firm, partnership, corporation, association, or organization engaged in the business of transporting by ambulance individuals who are sick, injured, wounded, or otherwise incapacitated.
- (ii) "Ambulance service" does not include the transporting of individuals in an ambulance owned, operated, or under the jurisdiction of a unit of State government, a political subdivision of the State, or a volunteer fire company or volunteer rescue squad.
- (4) "Director" means the Director of the Maryland Institute for Emergency Medical Services Systems at the University of Maryland.
- (5) "License" means a license issued by the Director to operate an ambulance service in the State.
- (b) License required. Unless issued a license under this section, an individual, firm, partnership, corporation, association, or organization may not operate an ambulance service in the State.
- (c) Regulations; minimum requirements. (1) The Director, in consultation with representatives of the ambulance service industry in Maryland, shall adopt regulations necessary to establish a periodic licensing system for ambulance services in the State.
 - (2) The regulations shall, at a minimum, require:

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- (i) Each ambulance operated by the ambulance service to be equipped with adequate equipment and supplies to:
 - 1. Care for the patients being transported; and

2. Communicate with the dispatcher;

- (ii) At least 1 individual, in addition to the driver, be in attendance on the ambulance during each transport who:
 - 1. Is certified by the State as an emergency medical technician; or
- 2. Has successfully completed a course of training determined by the Director to be substantially equivalent to the training necessary for certification as an emergency medical technician; and

(iii) Each ambulance operated by the ambulance service be inspected:

- 1. Once every 12 months by an inspection station licensed under § 23-103 of the Transportation Article and be issued an inspection certificate by the inspection station; or
- 2. In accordance with the requirements for the operation of an ambulance owned, operated, or under the jurisdiction of a unit of State government, a political subdivision of the State, or a volunteer fire company or volunteer rescue squad in the jurisdiction where the ambulance service is located.

(d) Qualifications for license. — To qualify for an ambulance service li-

cense, an applicant shall:

- (1) Pay to the Director an application fee established in accordance with this section; and
- (2) Meet the requirements of this section and all regulations adopted by the Director under this section.
- (e) Fees. (1) The Director shall set reasonable fees for the licensing and license renewal of ambulance services.
- (2) The fees charged by the Director shall be set in a manner that will produce funds sufficient to cover the actual direct and indirect costs of maintaining the licensing program under this section.
- (3) The total reasonable cost of maintaining the licensing program may not be more than the revenues generated by the fees for the licensing and license renewal for ambulance services.
- (f) Inspections. The Director may inspect the operating base, equipment, supplies, and company procedures necessary to ensure compliance with the requirements of this section and all regulations adopted by the Director under this section.
- (g) Denial of application, suspension or revocation of license. Subject to the hearing provisions of subsection (h) of this section, the Director may deny an application for an ambulance service license or suspend or revoke a license if the applicant or licensee violates any provision of this section or any regulation adopted by the Director under this section.
- (h) Hearings. Before the Director takes any final action under subsection (g) of this section, the Director shall give the person against whom the action is contemplated an opportunity for a hearing in accordance with the provisions of Title 10, Subtitle 4 of the State Government Article.
- (i) Waivers. The Director may waive the requirements of this section for any ambulance service:

- (1) Licensed in another state if the ambulance service provides adequate evidence that the ambulance service is licensed in the other state after meeting requirements that are at least as stringent as the licensing requirements of this State; or
- (2) That transports patients into this State only on an occasional basis as determined by the Director.

(j) Penalties. — A person who violates any provision of this section or any regulation adopted by the Director under this section is guilty of a misdemeanor and on conviction is subject to a fine not exceeding \$1,000.

(k) Preemption of local legislation. — This section preempts the authority of a county or municipal corporation to regulate any ambulance service with a base of operation located outside the county or municipal corporation that is licensed in accordance with the provisions of this section. (1990, ch. 618.)

§ 13-103.2. Emergency Medical Services Field Operations.

(a) Appropriations request. — (1) The University of Maryland at Baltimore, as part of its normal budget submission to the Governor, shall provide a separate request for the Emergency Medical Services Field Operations.

(2) The request shall be submitted as recommended for the Emergency Medical Services Field Operations by the Maryland Institute for Emergency Medical Services Systems.

(b) Funding. — (1) Funding for the Emergency Medical Services Field Operations shall be from:

(i) The surcharge imposed under § 13-954 of the Transportation Article;

(ii) General funds; and

(iii) Funds from any other source.

(2) Funds allocated to the Emergency Medical Services Field Operations not expended at the end of any fiscal year may not revert to the General Fund but shall revert to the Maryland Emergency Medical System Operations Fund established in § 13-955 of the Transportation Article.

(c) Approval of budget; format of budget requests; duties of Maryland Institute of Emergency Medical Services Systems. — (1) The budget of the Emergency Medical Services Field Operations shall be subject to the approval of the General Assembly.

(2) The budget submitted to the General Assembly for the Emergency Medical Services Field Operations shall be submitted in object and subobject detail with adequate justification for each line item.

(3) The Maryland Institute for Emergency Medical Services Systems:

(i) May allocate all funds for the Emergency Medical Services Field Operations in a manner that most effectively meets the needs of the Emergency Medical Services Field Operations; and

(ii) May not transfer funds to restore funding cuts imposed on the Emergency Medical Services Field Operations by the General Assembly.

(d) Duties of University of Maryland at Baltimore. — The University of Maryland at Baltimore:

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DeVries Tackles New Law On **Emergency Medical Services**

As Chairman of EMS Board, Lawyer Will Have Little Time Left Over For His Medical Malpractice Defense Work at Goodell, DeVries

BY CATHY HINESAUGH Dally Record Business Writer

Donald J. DeVries Jr. doesn't look like a running back, but the 46-year-old majoractice defense attorney will need some pretty good moves to keep control of the political football handed off to him this summer.

As chairman of Maryland's **Emergency Medical Services** Board, DeVries is charged with interpreting and implementing a new law that dared to tinker with one of the state's most sacred cows -- the R Adams Cowley Shock Trauma Center.

The law put an end to the question of who really owns the state's showcase trauma system. the citizens of Maryland or the University of Maryland Medical System.

The General Assembly's angwer: A little of both.

DeVries, a partner at Goodell, DeVries, Leech & Gray, hopes the new law has put an end to the game of political ping pong that came to a head last year. "But I don't know that the change In the governance system is really all that dramatic," he says.

"With anything in life, whenever you make a decision you

make someone unhappy," De- cal aspect [of Shock Trauma]." Vrice says of the legislature's conclusion that the relationships between the emergency medical system and its anchor Shock Trauma, and the University of Maryland and its medical corporation, were to say the least, a little muddy.

They got a whole lot dirtier when accusations started flying that the University of Maryland was trying to dllute the mission

of Shock Trauma from one of public service to that of a

When the smoke cleared, the executive director of Shock Trauma and the Maryland Institute for Emergency Medical Services System (MIEMSS) had been sent packing, and the University of Maryland system lost a good bit of its control over the state's trauma net-

"I hope it [the board] does not become a political football," De-Vries says. "I hope the legislation has taken away the politi-

MIEMSS' priorities

Under the law, Shock Trauma went from being dually run by the University of Maryland system and UMMS to being wholly controlled by UMMS, and the director of Shock Trauma was stripped of a dual role heading up MIEMSS.

Now, DeVries' board and, ultimately, the governor, decide MIEMSS' priorities.

"With anything

in life.

whenever you

make a decision

you make

someone

unhappy."

DONALD DEVRIES

"Maryland is now the first state to have its emergency medical system reporting directly to the governor. It shows the high priority the legislature places on maintaining this excellent system," DeVries says.

"I feel the system works well now. I think it's still the best system itn the country]. But the best can

always be made better," he says. Nevertheless, DeVrice is trending carefully. When speaking of the board's goals and nelorities, DeVries is vague and his

See DEVRIES page 7

DeVries

CONTINUED FROM PAGE 1

conversation is heavily laced with words like "consensus building."

"The board's going to make what it believes are the best decisions for the system and the state of Maryland," he says.

So far, little has changed with the way the EMS system is run and DeVries thinks that's just fine for now.

"The field providers [rescue workers] were concerned about what would happen on July 1" when the law went into effect. DeVrice sava.

"Now it's still business as usual and I think that has been reassuring," he says.

Transition work

Philip Hurlock, a board member and president of the Maryland State Firemen's Association, says he's pleased with Schaefer's choice of chairman, although he admits he'd never heard of DeVries before his appointment.

"I think he's going to look at the views from all sides," Hurlock says.

Despite DeVries low-key disclaimers, he admits the magnitude of the statute is "enormous" and says he's already contributed a tremendous amount of time to the beard

Shifting Shock Trauma solely into the UMMS system and severing the University of Maryland at Baltimore's ties with the EMS system have resulted in a lot of transition work, DeVries says. For instance, 48 university employees now fail under the state government's employee

And there's still that small matter of finding an executive director for the EMS board, DeVries says. Several local people have already thrown their hats into the ring, but a national search is also under way, he says. '

The board is also busy putting together a 27-person advisory council that will act as its principle advisory body. Once the council is un and running, DeVries hopes he can scale back the number of hours he's devoting to the board.

No stranger to civic activities, DeVrles admits this is slightly more than he bar-

After serving for five years on the board of trustees at South Baltimore General Hospital (now Harbor Hospital), De-Vries began his affiliation with Shock Trauma in 1988

"I got involved with the Shock Trauma Gala to chair the solicitation committee. which I agreed to do having no idea where all of this would lead." DeVries notes.

From there, DeVries moved to the center's board of visitors, which acts as an advisory body and fund raiser. In 1990, he was named chairman.

He also served as a member on two gubernatorial commissions dealing with medical malpractice and uncompensated medical care.

Time commitment

In late June, Schaefer announced De-Vries would head the new EMS board.

DeVries seems to be at a loss when asked why Schaefer tapped him - and not a doctor - for such a critical post.

"I assume the rationale was that I had a better understanding of the medical system" because of his 20 years of legal background, he says. And his skills at mediation will also help the board work through difficult problems, DeVrice says.

When his four-year term is up, DeVries insists he won't miss the glamorous world

By that time, he'll be more than ready to return to practicing law full-time at this five-year-old firm.

"There have been some weeks when I've done little but this. Fortunately my pariners have been supportive because I'm not spending nearly the amount of time practicing law that I used to," he

"When I was approached labout the appointment] I had to think long and hard about the time commitment." DeVries says. "But the opportunity to be involved at this critical functure will not come along William Donald Schaefer Governor Donald L. DeVries, Jr., Esq. Chairman, Emergency Medical Services Board

December 27, 1993

TO:

EMS Board Members

FROM:

Donald L. DeVries, Jr.

Chairman

Enclosed are the minutes from the December 7, 1993 meeting.

The next meeting of the Board is scheduled for January 11, 1994, 9-11 a.m., Dunning Hall basement. A parking pass to the Pratt Street garage is enclosed. Among the items on the agenda are:

1) Approval of the minutes

- 2) Overview of the process for development of the EMS Plan
- 3) Update on Executive Director search
- 4) Update on Advisory Council
- 5) Update on legislative matters
- 6) Other business

Please call John Murphy's office (706-0470) to confirm your attendance.

kb

William Donald Schaefer Governor

Donald L. DeVries, Jr., Esq. Chairman, Emergency Medical Services Board

EMERGENCY MEDICAL SERVICES BOARD December 7, 1993

MINUTES

BOARD MEMBERS PRESENT: Donald L. DeVries, Jr., Chair; Willie Blair, M.D.; Victor Broccolino, Chief John Frazier; Dennis Jones, RN; Philip Hurlock; Sheila Rhodes, M.D.; Ellen Waters; Donald E. Wilson, M.D.

BOARD MEMBERS ABSENT: Nelson Sabatini

OTHERS PRESENT:

MIEMSS - John Murphy, Richard Alcorta, M.D., Douglas Floccare, M.D., Robert Dubansky

Department of Health & Mental Hygiene - Tricia Slawinski

University of Maryland at Baltimore - Sue Gladhill

Department of Fiscal Services - Patrick Frank

Baltimore County Fire Department - Larry D'Elia, Wayne Tome, John Bell Maryland Fire and Rescue Institute - Russell Strickland

National Flight Paramedic Association - Walter A. Kerr

Maryland State Police - Lt. William Bernard, Lt. Robert McGainey, Lt. Gary Shields, Joseph Kuhn, Donna Hagey, TFC Dick Bruns, Corporal Bill Force, Corporal Guy Glendenning, Steven Proctor, Sgt. Douglas Dods, F/Sgt. Ronnie P. Creel

Introduction

The meeting was called to order by Donald L. DeVries, Jr., Chairman, at 9:45 a.m. The site was the Maryland State Police Aviation Headquarters at Martin State Airport.

Approval of the Minutes

The minutes of the meeting of November 2, 1993 were approved without exception.

Budget Meeting with Governor

On November 22, 1993, Mr. DeVries appeared before Governor Schaefer and Charles Benton, Secretary of Budget and Fiscal Planning, to present the FY 1995 budget. The MIEMSS FY 1995 budget was approved by the Governor and Secretary Benton. The approved budget was virtually the same as that presented and approved by the EMS Board, with minor adjustments as recommended by Budget Analyst Ed Quinn and with a line and budget for the Executive Director's position.

Overview of the 1994 Legislative Session

Mr. DeVries reported that while most special fund allocations have accommodations to revert earned interest back into their own funds, the interest accrued from the EMS Operations Fund currently reverts to the General Fund. It is believed that this was an oversight that could be changed by legislation.

Dr. Blair moved that the EMS Board initiate an administration bill to amend legislation establishing the EMS Fund so that interest accruing from the Fund revert to the EMS Fund. The motion was seconded by Chief Frazier and approved unanimously.

Mr. Murphy reported that he will be meeting with an Assistant Attorney General in the near future to initiate a draft of appropriate legislation.

Sue Gladhill, UMAB legislative liaison, reported that the HB 1222 as passed by the General Assembly included some errors and oversights that require amendment. The changes are technical in nature and include:

- 1) Commercial Ambulance program needs to be moved within the jurisdiction of the MIEMSS Executive Director;
- 2) a number of references to the "Director" need to be changed to "Executive Director";
- 3) Shock Trauma is improperly referred to as part of MIEMSS;
- 4) the fact that administrative support for personnel matters of MIEMSS will be the responsibility of the State Department of Personnel needs to be made clear; and
- 5) the law needs to be clearer that the University policies and procedures related to procurement for MIEMSS will remain in effect.

Ms. Gladhill reported that the University of Maryland System has approved in concept the changes necessary to address these oversights.

Mr. Broccolino moved that the EMS Board support these proposed changes. The motion was seconded by Dr. Wilson and approved unanimously.

Ms. Gladhill will provide a draft of the legislation to Board members. It is anticipated that the legislation would be initiated by the EMS Board and become an administration bill.

Old Business

Mr. Hurlock asked for a report on the status of MFRI and Shock Trauma requests for additional funds from the EMS Operations Fund. Mr. DeVries reported that the matter was discussed during the budget hearing before the Governor and that the Governor and Secretary appeared to be supportive of the increases.

New Business

None.

A motion to adjourn to executive session to discuss salary and personnel matters was made, seconded, and approved unanimously.

After the session, the Maryland State Police provided an overview of the aviation program.

The next meeting was scheduled for January 11, 1994, 9 a.m., Dunning Hall basement.