PS Item #2
March 17, 2025
Worksession

MEMORANDUM

March 12, 2025

TO: Public Safety (PS) Committee

FROM: Jim Ogorzalek, Legislative Attorney

SUBJECT: Bill 1-25, Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments

PURPOSE: Worksession – recommendation expected

Invited Attendees:
Ben Kaufman, Assistant Chief, Emergency Medical and Integrated Health Services
Biodun Ayo-Durojaiye, Emergency Medical Services Reimbursement Manager
Avital Graves, Mobile Integrated Health Manager

Bill 1-25 Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments was introduced on January 21, 2025. The Lead Sponsor is the Council President at the Request of the County Executive. The bill's co-sponsor is Councilmember Luedtke. A public hearing occurred on February 11, 2025.

As introduced, Bill 1-25 would:

(1) enable Fire and Rescue Services personnel to inquire about insurance coverage in certain situations;
(2) define certain terms related to the Emergency Medical Services Insurance Reimbursement Program; and
(1) generally amend the law governing the Emergency Medical Services Insurance Reimbursement Program.

Background

Currently, the County Code prohibits Fire and Rescue Service personnel from asking for information related to an individual's insurance coverage. The County Code also mandates that the County impose a reimbursement charge for emergency services transport. This bill would allow fire and rescue service personnel to ask for information related to an individual's insurance coverage for the limited purposes of providing transportation to an alternative destination or providing treatment in place.

Bill Specifics

The purpose of this bill is to expand the County's Emergency Medical Services Insurance Reimbursement Program to include treatment in place and to accommodate transportation to an alternative destination. The bill enables Fire and Rescue Services to ask for an individual's insurance information for the limited purposes of treatment in place and transport to an alternative destination, defines these and other terms, and generally amends the law governing the Emergency Medical Services Insurance Reimbursement Program to accommodate this broader scope. The bill generally conforms to recommendations made by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) and the Maryland Health Care Commission (MHCC), in a report directed by SB 682 (2018).

SUMMARY OF IMPACT STATEMENTS

Fiscal impact. According to the Office of Management and Budget, "This bill is expected to increase revenue by $15,000 per year, or $90,000 over six-years through the billing of Mobile Integrated Health treatment in place at $150 per visit with an average of 100 visits annually. The bill is not expected to impact expenses."

Racial equity and social justice. "The Office of Legislative Oversight (OLO) anticipates Bill 1-25 will have a minimal impact on racial equity and social justice (RESJ) in the County."

Economic impact. "The Office of Legislative Oversight (OLO) anticipates that Bill 1-25 would have an insignificant impact on economic conditions in the County in terms of the Council's priority indicators."

Climate assessment. "The Office of Legislative Oversight (OLO) anticipates Bill 1-25 will have no impact on the County's contribution to addressing climate change as the proposed actions will likely have no effect on response times and would only change a few procedures related to inquiring about an individual's insurance information."

SUMMARY OF PUBLIC TESTIMONY

The Council received testimony from one individual at public hearing unrelated to the substance of Bill 1-25.

ISSUES FOR THE COMMITTEE'S CONSIDERATION

N/A

This packet contains:	Circle #
Bill 1-25	1
County Executive Memo	7
Fiscal Impact Statement	26
Legislative Request Report	28

Economic Impact Statement 29
Climate Assessment 32
RESJ Impact Statement 35

Bill No.: 1-25
Concerning: Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments
Revised: 1/13/2025 Draft No.: 1
Introduced: January 21, 2025
Expires: December 7, 2026
Enacted:
Executive:
Effective:
Sunset Date: None
Ch.___, Laws of Mont. Co.___

COUNTY COUNCIL
FOR MONTGOMERY COUNTY, MARYLAND

By: Council President at the Request of the County Executive

AN ACT to:

(1) enable Fire and Rescue Services personnel to inquire about insurance coverage in certain situations;
(2) define certain terms related to the Emergency Medical Services Insurance Reimbursement Program; and
(3) generally amend the law governing the Emergency Medical Services Insurance Reimbursement Program.

By amending
Montgomery County Code
Chapter 21, Fire and Rescue Services
Article V, Section 21-23A

Boldface	*Heading or a defined term.*
Underlining	*Added to existing law by original bill.*
[Single boldface brackets**]**	*Deleted from existing law by original bill.*
Double underlining	*Added by amendment.*
[[Double boldface brackets**]]**	*Deleted from existing law or the bill by amendment.*
* * *	*Existing law unaffected by bill.*

The County Council for Montgomery County, Maryland, approves the following act:

Sec. 1. Section 21-23A is amended as follows:

21-23A. Emergency Medical Services [Transport] Insurance Reimbursement Program.

(a) *Obligation to **[**Transport**]** Provide Service.*

(1) The Fire and Rescue Service must provide emergency medical services **[**transport**]** under applicable medical protocols to each individual without regard to the individual's ability to pay.

(2) **[**Any personnel of the Fire and Rescue Service who respond to a request for an emergency medical services transport must not ask for any information relating to an individual's insurance coverage.**]** Fire and Rescue Service personnel may only ask for information relating to an individual's insurance coverage when it is reasonably necessary to provide transportation to an appropriate alternative destination, or to provide treatment in place.

(b) *Definitions*. In this Section the following terms have the meanings indicated:

(1) *Alternative destination* means a transport destination other than a hospital emergency department such as a behavioral health facility, primary care office, or urgent care.

[(1)**]** (2) *Emergency medical services **[**transport**]*** means medical care provided **[**transportation**]** by the Fire and Rescue Service of an individual by ambulance or other Fire and Rescue Service vehicle used for a similar purpose. *Emergency medical services **[**transport**]*** does not include transportation of an individual under an agreement between the County and a health care facility.

[(2)**]** (3) *Federal poverty guidelines* means the applicable health care poverty guidelines published in the Federal Register or otherwise issued by the federal Department of Health and Human Services.

[(3)**]** (4) *Fire and Rescue Service* means the Montgomery County Fire and Rescue Service and includes each local fire and rescue department.

(5) *Out of pocket expenses* means any co-payment, deductible, or uninsured portion of the cost of emergency medical services. *Out of pocket expenses* does not include funds recovered from a tortfeasor or their liability insurance.

[(4)**]** (6) *Program* means the Emergency Medical Services **[**Transport**]** Insurance Reimbursement Program.

(7) *Treatment in place* means medical treatment provided at the scene without transport and includes treatment provided in-person, via telehealth, or both.

(c) *Imposition of reimbursement.* The County must impose a reimbursement charge for any emergency medical services **[**transport**]** provided in the County, and, unless prohibited by other law, outside the County under a mutual aid agreement.

(d) *Liability for Reimbursement.* Subject to paragraph (e), each individual who receives **[**an**]** emergency medical services **[**transport**]** is responsible for paying for the emergency medical services **[**transport reimbursement**]**.

(e) *Hardship Waiver.*

(1) The Fire Chief must waive the emergency medical services **[**transport**]** reimbursement for any individual whose household

income is at or below 300 percent of the federal poverty guidelines. An individual must request a waiver on a form approved by the Fire Chief.

(2) The Fire Chief may deny a request for a waiver if the individual who claims financial hardship under this Section does not furnish all information required by the Fire Chief.

(f) *County Residents - Payment of Uninsured Portion of the Emergency Medical Services **[**Transport**]** Reimbursement.*

(1) County residents must not be required to pay any out-of-pocket expense relating to any emergency medical services **[**transport**]** because residents are deemed to have paid any co-payment, deductible, or uninsured portion of the cost of **[**each**]** emergency medical services **[**transport**]** through taxes paid to the County.

(2) Tax revenues the County receives must be treated as payment, on behalf of County residents, of the balance of each resident's portion of the emergency medical services **[**transport reimbursement**]** charge that is not covered by the resident's insurance.

(3) The County Council must annually transfer from the General Fund to the Consolidated Fire Tax District Fund an amount that the Council estimates will not be covered by residents' insurance as payment of all residents' uninsured portion of the emergency medical services **[**transport reimbursement**]** charge.

(g) *Restriction on Local Fire and Rescue Departments.* A local fire and rescue department must not impose a separate charge for **[**an**]** emergency medical **[**transport**]** <u>services</u>.

(h) *Use of Revenue.*

(1) Except for the transfer received from the General Fund under subsection (f), the revenues collected from the emergency medical services **[**transport**]** reimbursement must be used to supplement, and must not supplant, Fiscal Year 2013 expenditures appropriated in the annual operating budget resolution (not including any expenditures of revenue collected under this program in Fiscal Year 2013) for emergency medical services and other related fire and rescue services provided by the Fire and Rescue Service.

(2) The Fire Chief must create a dedicated account in the fire fund for the revenues collected from reimbursements under this Program. This amount must only be used for increased or enhanced fire and rescue services above the level appropriated in Fiscal Year 2013, as provided in paragraph (1), including new field service positions related to expansion of 4 person staffing or opening of new fire stations; increased training classes or capacity; facility maintenance and repair; new or replacement apparatus, gear, or equipment. Not more than 30**[**%**]** <u>percent</u> of this account may be spent for personnel costs.

(3) (A) **[**15%**]** <u>Fifteen</u> <u>percent</u> of the net Emergency Medical Services **[**Transport**]** Insurance Reimbursement Program revenue must be allocated under a procedure specified in the annual operating budget resolution for the benefit of local fire and rescue departments for:

(i) replacement or augmentation of apparatus owned

by a local fire and rescue department;

(ii) facilities owned by a local fire and rescue department;

(iii) training for volunteers;

(iv) gear and equipment for volunteers;

(v) administrative staff to support a local fire and rescue department;

(vi) volunteer recruitment and retention; and

(vii) volunteer stand-by support.

(B) Any administrative staff hired or retained by a local fire and rescue department using revenue allocated under this Section is not a County employee or a member of the separate merit system referred to in Section 21-16(a).

(i) *Regulations; Reimbursement Schedule.* The County Executive must adopt a regulation under method (2) to implement the emergency medical services **[**transport**]** reimbursement program. The regulation must establish a reimbursement schedule based on the cost of providing emergency medical services **[**transport**]**. The reimbursement schedule may include an annual automatic adjustment based on inflation, as measured by an index reasonably related to the cost of providing emergency medical services **[**transports**]**. The regulation may require each individual who receives **[**an**]** emergency medical services **[**transport**]** to provide financial information, including <u>all</u> the individual's insurance coverage, and to assign insurance benefits to the County.

* * *

OFFICE OF THE COUNTY EXECUTIVE

Marc Elrich
County Executive

MEMORANDUM

November 26, 2024

TO: Andrew Friedson, President
Montgomery County Council

FROM: Marc Elrich, County Executive

SUBJECT: Emergency Medical Services Transport Insurance Reimbursement Program – Proposed Amendments

I am recommending the enclosed amendments which will modernize the Emergency Medical Services (EMS) Transport Insurance Reimbursement legislation and increase reimbursements to the County and local fire and rescue departments. This is done by amending Montgomery County Code Article V, Chapter 21, Fire and Rescue Services, Section 21-23A.

These amendments are needed for the Montgomery County Fire and Rescue Services (FRS) to operationalize innovative services beyond just EMS transport. These services include treatment-in-place, mobile integrated healthcare, and transport to alternative destinations which are reimbursable by Medicare, Medicaid, managed care organizations, and private insurance companies.

These amendments would also allow personnel to ask for information related to an individual's insurance coverage, to provide alternative EMS services and defines out-of-pocket expenses. These changes will increase revenue and enhance innovation for FRS. For example, FRS has partnered with the Advanced Urgent Care at Kaiser Permanente to accept patients by ambulance, but they only accept Kaiser members. Also, certain managed care organizations offer specific services to their subscribers that EMS can facilitate. In the future, MCFRS may partner with a treatment-in-place provider who might only accept certain types of insurance. The current legislation does not define out-of-pocket expenses, and as a result, it has been interpreted that the county is not entitled to payment for EMS services included in settlements after motor vehicle accident cases.

Please reach out to Assistant Chief Ben Kaufman, Montgomery County Fire and Rescue Service at 240-421-6999 or Benjamin.Kaufman@montgomerycountymd.gov with any questions.

Enclosed: Bill XX-XX Emergency Medical Services Transport Insurance Reimbursement Program (Marked Up Copy)
Bill XX-XX Emergency Medical Services Transport Insurance Reimbursement Program (Clean Copy)
Bill XX-XX Fiscal Impact Statement
Bill XX-XX Legislative Request Report

cc: Earl Stoddard, Assistant Chief Administrative Officer, Office of the County Executive
Corey Smedley, Chief, Montgomery County Fire and Rescue Services
Jennifer Bryant, Director, Office of Management and Budget
Willie Morales, Fiscal and Policy Analyst III, Office of Management and Budget

Bill No.: XX-24
Concerning: Emergency Medical Services Transport Insurance Reimbursement Program
Draft No. & Date:
Introduced:
Expires:
Enacted:
Executive:
Effective:
Sunset Date:
Ch.____, Laws of Mont. Co.

COUNTY COUNCIL
FOR MONTGOMERY COUNTY, MARYLAND

By: Council President at the Request of the County Executive

AN ACT to:

(1) amend Section 21-23A, Emergency Medical Services Transport Insurance Reimbursement Program; and
(2) enable Fire and Rescue Services personnel to inquire about insurance coverage in certain situations.

By amending
Montgomery County Code
Chapter 21, Fire and Rescue Services
Article V, Section 21-23A

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Double underlining	*Added by amendment.*
[[Double boldface brackets**]]**	*Deleted from existing law or the bill by amendment.*
* * *	*Existing law unaffected by bill.*

The County Council for Montgomery County, Maryland, approves the following act:

Sec. 1. Section 21-23A is amended as follows:

21-23A. Emergency Medical Services Insurance Reimbursement Program.

(a) *Obligation to Provide Service.*

(1) The Fire and Rescue Service must provide emergency medical services under applicable medical protocols to each individual without regard to the individual's ability to pay.

(2) Fire and Rescue Service personnel may only ask for information relating to an individual's insurance coverage when it is reasonably necessary to provide transportation to an appropriate alternative destination, or to provide treatment in place.

(b) *Definitions*. In this Section the following terms have the meanings indicated:

(1) *Alternative destination* means a transport destination other than a hospital emergency department such as a behavioral health facility, primary care office or urgent care.

(2) *Emergency medical services* means medical care provided by the Fire and Rescue Service of an individual by ambulance or other Fire and Rescue Service vehicle used for a similar purpose. *Emergency medical services* does not include transportation of an individual under an agreement between the County and a health care facility.

(3) *Federal poverty guidelines* means the applicable health care poverty guidelines published in the Federal Register or otherwise issued by the federal Department of Health and Human Services.

(4) *Fire and Rescue Service* means the Montgomery County Fire and Rescue Service and includes each local fire and rescue

department.

(5) *Out of pocket expenses* means any co-payment, deductible, or uninsured portion of the cost of emergency medical services. *Out of pocket expenses* does not include funds recovered from a tortfeasor or their liability insurance.

(6) *Program* means the Emergency Medical Services Insurance Reimbursement Program.

(7) *Treatment in place* means medical treatment provided at the scene without transport and includes treatment provided in-person, via telehealth, or both.

(c) *Imposition of reimbursement.* The County must impose a reimbursement charge for any emergency medical services provided in the County, and, unless prohibited by other law, outside the County under a mutual aid agreement.

(d) *Liability for Reimbursement.* Subject to paragraph (e), each individual who receives emergency medical services is responsible for paying for the emergency medical services.

(e) *Hardship Waiver.*

(1) The Fire Chief must waive the emergency medical services reimbursement for any individual whose household income is at or below 300 percent of the federal poverty guidelines. An individual must request a waiver on a form approved by the Fire Chief.

(2) The Fire Chief may deny a request for a waiver if the individual who claims financial hardship under this Section does not furnish all information required by the Fire Chief.

(f) *County Residents - Payment of Uninsured Portion of the Emergency Medical Services Reimbursement.*

(1) County residents must not be required to pay any out-of-pocket expense relating to any emergency medical services because residents are deemed to have paid any co-payment, deductible, or uninsured portion of the cost of emergency medical services through taxes paid to the County.

(2) Tax revenues the County receives must be treated as payment, on behalf of County residents, of the balance of each resident's portion of the emergency medical services charge that is not covered by the resident's insurance.

(3) The County Council must annually transfer from the General Fund to the Consolidated Fire Tax District Fund an amount that the Council estimates will not be covered by residents' insurance as payment of all residents' uninsured portion of the emergency medical services charge.

(g) *Restriction on Local Fire and Rescue Departments.* A local fire and rescue department must not impose a separate charge for emergency medical services.

(h) *Use of Revenue.*

(1) Except for the transfer received from the General Fund under subsection (f), the revenues collected from the emergency medical services reimbursement must be used to supplement, and must not supplant, Fiscal Year 2013 expenditures appropriated in the annual operating budget resolution (not including any expenditures of revenue collected under this program in Fiscal

Year 2013) for emergency medical services and other related fire and rescue services provided by the Fire and Rescue Service.

(2) The Fire Chief must create a dedicated account in the fire fund for the revenues collected from reimbursements under this Program. This amount must only be used for increased or enhanced fire and rescue services above the level appropriated in Fiscal Year 2013, as provided in paragraph (1), including new field service positions related to expansion of 4 person staffing or opening of new fire stations; increased training classes or capacity; facility maintenance and repair; new or replacement apparatus, gear, or equipment. Not more than 30% of this account may be spent for personnel costs.

(3) (A) 15% of the net Emergency Medical Services Insurance Reimbursement Program revenue must be allocated under a procedure specified in the annual operating budget resolution for the benefit of local fire and rescue departments for:

(i) replacement or augmentation of apparatus owned by a local fire and rescue department;

(ii) facilities owned by a local fire and rescue department;

(iii) training for volunteers;

(iv) gear and equipment for volunteers;

(v) administrative staff to support a local fire and rescue department;

(vi) volunteer recruitment and retention; and

(vii) volunteer stand-by support.

(B) Any administrative staff hired or retained by a local fire and rescue department using revenue allocated under this Section is not a County employee or a member of the separate merit system referred to in Section 21-16(a).

(i) *Regulations; Reimbursement Schedule.* The County Executive must adopt a regulation under method (2) to implement the emergency medical services reimbursement program. The regulation must establish a reimbursement schedule based on the cost of providing emergency medical services. The reimbursement schedule may include an annual automatic adjustment based on inflation, as measured by an index reasonably related to the cost of providing emergency medical services. The regulation may require each individual who receives emergency medical services to provide financial information, including all the individual's insurance coverage, and to assign insurance benefits to the County.

(j) *Reporting.* The Fire Chief must submit a report to the County Executive and County Council not later than January 1 and July 1 of each year regarding implementation of the Program. The report should include:

(1) the number of calls for emergency medical services during the reporting period;

(2) the number and type of emergency medical services provided during the reporting period; and

(3) any other information relating to implementation of the Program that the County Executive or County Council request.

(k) *Patient Advocate.* The Office of Consumer Protection must employ a Patient Advocate to:

(1) develop and implement a program for customer service as a part of the Program;

(2) develop and staff a help desk for questions regarding the Program; and

(3) serve as a liaison with any vendor retained by the County to implement the Program to assure high quality customer service and prompt resolution of questions and concerns.

(l) *Outreach and Education Campaign.* The County Executive must implement a public outreach and education campaign before and during implementation of the Program. This campaign should include:

(1) informational mailers to County households;

(2) distribution of information through County internet and web-based resources;

(3) radio and television public service announcements;

(4) news releases and news events;

(5) information translated into Spanish, French, Chinese, Korean, Vietnamese, and other languages, as needed;

(6) extensive use of County Cable Montgomery and other Public, Educational, and Government channels funded by the County;

(7) posters and brochures made available at County events, on Ride-On buses and through Regional Service Centers, libraries, recreation facilities, senior centers, public schools, Montgomery College, health care providers, hospitals, clinics, and other venues; and

(8) special outreach to senior and “New American” communities.

_____ _____

Andrew Friedson, President, County Council Date

Approved:

_____ _____

Marc Elrich, County Executive Date

This is a correct copy of Council action.

_____ _____

Sara Tenenbaum, Clerk of the Council Date

APPROVED AS TO FORM AND LEGALITY

Office of the County Attorney

Elizabeth Haynos

By: Elizabeth Haynos, Assistant County Attorney

Bill No.: XX-24
Concerning: Emergency Medical Services Transport Insurance Reimbursement Program
Draft No. & Date:
Introduced:
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Ch.____, Laws of Mont. Co.

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21-23A. Emergency Medical Services [Transport] Insurance Reimbursement Program.

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(b) *Definitions*. In this Section the following terms have the meanings indicated:

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facility.

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[(3)] (4) *Fire and Rescue Service* means the Montgomery County Fire and Rescue Service and includes each local fire and rescue department.

(5) *Out of pocket expenses* means any co-payment, deductible, or uninsured portion of the cost of emergency medical services. *Out of pocket expenses* does not include funds recovered from a tortfeasor or their liability insurance.

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(c) *Imposition of reimbursement.* The County must impose a reimbursement charge for any emergency medical services [transport] provided in the County, and, unless prohibited by other law, outside the County under a mutual aid agreement.

(d) *Liability for Reimbursement.* Subject to paragraph (e), each individual who receives [an] emergency medical services [transport] is responsible for paying for the emergency medical services [transport reimbursement].

(e) *Hardship Waiver.*

(1) The Fire Chief must waive the emergency medical services

[transport] reimbursement for any individual whose household income is at or below 300 percent of the federal poverty guidelines. An individual must request a waiver on a form approved by the Fire Chief.

(2) The Fire Chief may deny a request for a waiver if the individual who claims financial hardship under this Section does not furnish all information required by the Fire Chief.

(f) *County Residents - Payment of Uninsured Portion of the Emergency Medical Services [Transport] Reimbursement.*

(1) County residents must not be required to pay any out-of-pocket expense relating to any emergency medical services [transport] because residents are deemed to have paid any co-payment, deductible, or uninsured portion of the cost of [each] emergency medical services [transport] through taxes paid to the County.

(2) Tax revenues the County receives must be treated as payment, on behalf of County residents, of the balance of each resident's portion of the emergency medical services [transport reimbursement] charge that is not covered by the resident's insurance.

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(g) *Restriction on Local Fire and Rescue Departments.* A local fire and rescue department must not impose a separate charge for [an]

emergency medical [transport] services.

(h) *Use of Revenue.*

(1) Except for the transfer received from the General Fund under subsection (f), the revenues collected from the emergency medical services [transport] reimbursement must be used to supplement, and must not supplant, Fiscal Year 2013 expenditures appropriated in the annual operating budget resolution (not including any expenditures of revenue collected under this program in Fiscal Year 2013) for emergency medical services and other related fire and rescue services provided by the Fire and Rescue Service.

(2) The Fire Chief must create a dedicated account in the fire fund for the revenues collected from reimbursements under this Program. This amount must only be used for increased or enhanced fire and rescue services above the level appropriated in Fiscal Year 2013, as provided in paragraph (1), including new field service positions related to expansion of 4 person staffing or opening of new fire stations; increased training classes or capacity; facility maintenance and repair; new or replacement apparatus, gear, or equipment. Not more than 30% of this account may be spent for personnel costs.

(3) (A) 15% of the net Emergency Medical Services [Transport] Insurance Reimbursement Program revenue must be allocated under a procedure specified in the annual operating budget resolution for the benefit of local fire and rescue departments for:

(i) replacement or augmentation of apparatus owned by a local fire and rescue department;

(ii) facilities owned by a local fire and rescue department;

(iii) training for volunteers;

(iv) gear and equipment for volunteers;

(v) administrative staff to support a local fire and rescue department;

(vi) volunteer recruitment and retention; and

(vii) volunteer stand-by support.

(B) Any administrative staff hired or retained by a local fire and rescue department using revenue allocated under this Section is not a County employee or a member of the separate merit system referred to in Section 21-16(a).

(i) *Regulations; Reimbursement Schedule.* The County Executive must adopt a regulation under method (2) to implement the emergency medical services [transport] reimbursement program. The regulation must establish a reimbursement schedule based on the cost of providing emergency medical services [transport]. The reimbursement schedule may include an annual automatic adjustment based on inflation, as measured by an index reasonably related to the cost of providing emergency medical services [transports]. The regulation may require each individual who receives [an] emergency medical services [transport] to provide financial information, including <u>all</u> the individual's insurance coverage, and to assign insurance benefits to the County.

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(l) *Outreach and Education Campaign.* The County Executive must implement a public outreach and education campaign before and during implementation of the Program. This campaign should include:

(1) informational mailers to County households;

(2) distribution of information through County internet and web-based resources;

(3) radio and television public service announcements;

(4) news releases and news events;

(5) information translated into Spanish, French, Chinese, Korean, Vietnamese, and other languages, as needed;

(6) extensive use of County Cable Montgomery and other Public, Educational, and Government channels funded by the County;

(7) posters and brochures made available at County events, on Ride-On buses and through Regional Service Centers, libraries, recreation facilities, senior centers, public schools, Montgomery College, health care providers, hospitals, clinics, and other venues; and

(8) special outreach to senior and "New American" communities.

_____ _____

Andrew Friedson, President, County Council Date

Approved:

_____ _____

Marc Elrich, County Executive Date

This is a correct copy of Council action.

_____ _____

Sara Tenenbaum, Clerk of the Council Date

APPROVED AS TO FORM AND LEGALITY

Office of the County Attorney

Elizabeth Haynos

By: Elizabeth Haynos, Assistant County Attorney

Fiscal Impact Statement

Office of Management and Budget

Bill XX-25	**Bill to Amend section 21-23A, Emergency Medical Services Transport Insurance Reimbursement Program**
Bill Summary	Amends Section 21-23A of the Emergency Medical Services Transport Insurance Reimbursement Program. The bill allows for inquiry of patient insurance coverage in certain situations, defines alternative destinations for low acuity patients, and modifies the definition of out-of-pocket expenses.
Fiscal Impact Summary	There are no anticipated expenditures associated with this bill. The projected revenue from Mobile Integrated Health reimbursement is expected to increase by approximately $15,000 per year.

Fiscal Year	2026	2027	2028	2029	2030	2031	Total
Personnel Costs	$0	$0	$0	$0	$0	$0	$0
Operating Expenses	$0	$0	$0	$0	$0	$0	$0
Total Expenditures	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**
Revenues	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$90,000**
Total Impact	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$15,000**	**$90,000**
FTE	0.00	0.00	0.00	0.00	0.00	0.00	

Fiscal Impact Analysis	This bill would allow for increased operational efficiency by allowing Fire & Rescue Service personnel to inquire about insurance coverage and transport to alternative destinations; bill for treatment in place care associated with Mobile Integrated Health vistis; and by defining out-of-pocket expenses associated with motor vehicle collisions. This bill is expected to increase revenue by $15,000 per year, or $90,000 over six-years through the billing of Mobile Integrated Health treatment in place at $150 per visit with an average of 100 visits annually. The bill is not expected to impact expenses.
Staff Impact	The bill is not expected to impact staff time or duties.
Actuarial Analysis	The bill is not expected to impact retiree pension or group insurance costs.
Information Technology Impact	The bill is not expected to impact the County Information Technology (IT) or Enterprise Resource Planning (ERP) systems.
Other Information	
Later actions that may impact revenue or expenditures if future spending is projected	The bill does not authorize future spending.
Ranges of revenue or expenditures that are uncertain or difficult to project	Revenue projections for newly defined out-of-pocket expenses are diffult to ascertain because the department does not track expenses reimbursed by insurance companies to liable parties.

Contributors	Daniel Zoberbier, MCFRS Biodun Ayo-Durojaiye, MCFRS Willie Morales, OMB Analyst

LEGISLATIVE REQUEST REPORT

Section 21-23A
Emergency Medical Services Transport Insurance Reimbursement Program

DESCRIPTION: The legislation amends Section 21-23A of the Montgomery County Code to modernize EMS reimbursement by including coverage for services beyond the transport of patients to a hospital.

PROBLEM: The current legislation limits reimbursement to only EMS transports, and it prohibits personnel from asking for any information relating to an individual's insurance coverage. The current legislation also does not define out of pocket expenses, and as a result it has been interpreted that the county is not entitled to payment for EMS services included in settlements after motor vehicle accident cases.

GOALS AND OBJECTIVES: The proposed amendment removes the word "transport", allows for personnel to ask for information relating to an individual's insurance coverage for the purposes of providing alternative EMS services, and defines out of pocket expenses. These changes will increase revenue and enhance innovation for FRS.

COORDINATION: Montgomery County Fire and Rescue Service

FISCAL IMPACT: Office of Management and Budget

ECONOMIC IMPACT: Office of Management and Budget

EVALUATION: N/A

EXPERIENCE ELSEWHERE: N/A

SOURCE OF INFORMATION: Assistant Chief Ben Kaufman, MCFRS

APPLICATION WITHIN MUNICIPALITIES: N/A

PENALTIES: N/A

Economic Impact Statement

Montgomery County, Maryland

Bill 1-25 Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments

SUMMARY

The Office of Legislative Oversight (OLO) anticipates that Bill 1-25 would have an insignificant impact on economic conditions in the County in terms of the Council's priority indicators.

BACKGROUND AND PURPOSE OF BILL 1-25

Montgomery County residents are not required to "pay any out-of-pocket expenses (co-payment, deductible, or uninsured portion of the cost of each emergency medical services transport) relating to emergency medical transport services" provided by Montgomery County Fire and Rescue Services (MCFRS).[1] However, the Emergency Medical Service (EMS) Law passed in January 2013 authorizes MCFRS to seek reimbursement for ambulance transports from private health insurance companies, Medicare, or Medicaid. Revenue from these reimbursements goes towards equipment, enhancement, and training for MCFRS.[2]

Currently, under County law, MCFRS personnel are not allowed to inquire about an individual's insurance coverage. Instead, the County contracts with a third party to seek reimbursement from health insurance providers after emergency transportation services are rendered.[3]

Bill 1-25 would allow MCFRS emergency responders to ask for information regarding an individual's insurance coverage. Specifically, emergency responders could only ask for insurance information when:[4]

- Providing transportation to an alternative destination other than a hospital emergency department, such as a behavioral health facility, primary care office, or urgent care; or
- Providing treatment in place.

According to the County Executive, these changes would allow MCFRS personnel to provide alternate emergency services like treatment-in-place, define out-of-pocket expenses for individuals receiving such treatments, and aid MCFRS in seeking reimbursement for emergency services transport from health insurance providers.[5] The Bill generally aligns with recommendations made by the Maryland Institute for Emergency

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[1] Montgomery County Code § 21-23A
[2] Montgomery County Emergency Medical Transport Services, Montgomery County Fire and Rescue Services, Accessed 1/23/2025.
[3] Bill 17-12, Fire and Rescue Service - Emergency Medical Services Transportation - Insurance Reimbursement, Montgomery County Council, Enacted May 15, 2012; Montgomery County Emergency Medical Transport Services FAQ, Montgomery County Fire and Rescue Services, Accessed 1/23/2025.
[4] Introduction Staff Report for Bill 1-25, Montgomery County Council, Introduced January 21, 2025.
[5] Ibid.

Medical Services Systems (MIEMSS) and the Maryland Health Care Commission (MHCC) in a report released in January 2019.[6]

Bill 1-25, Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments was introduced by the Council President at the request of the County Executive on January 21, 2025.[7]

INFORMATION SOURCES, METHODOLOGIES, AND ASSUMPTIONS

As required by 2-81B of the Montgomery County Code, this Economic Impact Statement evaluates the impacts of Bill 1-25 on residents and private organizations in relation to Council's priority economic indicators. In doing so, it examines whether the Bill would have a net positive or negative impact on overall economic conditions in the County.[8]

By allowing emergency responders to request insurance information under certain circumstances, the Bill may lead to some individuals being transported to urgent care or other health service providers instead of the emergency room. Since copays for emergency room visits can be higher than those for urgent care, this change could reduce out-of-pocket expenses for some individuals. However, the County lacks data to assess whether the policy change would significantly affect EMS transport destinations. Therefore, OLO anticipates that the Bill would have minimal impacts on private organizations, residents, and overall economic conditions in the County based on the indicators prioritized by the Council.

VARIABLES

Not applicable

IMPACTS

WORKFORCE ▪ TAXATION POLICY ▪ PROPERTY VALUES ▪ INCOMES ▪ OPERATING COSTS ▪ PRIVATE SECTOR CAPITAL INVESTMENT ▪ ECONOMIC DEVELOPMENT ▪ COMPETITIVENESS

Not applicable

DISCUSSION ITEMS

Not applicable

[6] "Coverage and Reimbursement for Emergency Medical Services Care Delivery Models and Uncompensated Services", Maryland Health Care Commission and Maryland Institute for Emergency Medical Services Systems, January 2019.
[7] Introduction Staff Report for Bill 1-25, Montgomery County Council, Introduced January 21, 2025.
[8] "Sec. 2-81B, Economic Impact Statements," Montgomery County Code.

CAVEATS

Two caveats to the economic analysis performed here should be noted. First, predicting the economic impacts of legislation is a challenging analytical endeavor due to data limitations, the multitude of causes of economic outcomes, economic shocks, uncertainty, and other factors. Second, the analysis performed here is intended to *inform* the legislative process, not determine whether the Council should enact legislation. Thus, any conclusion made in this statement does not represent OLO's endorsement of, or objection to, the Bill under consideration.

CONTRIBUTIONS

Stephen Roblin (OLO) prepared this report.

Climate Assessment

Office of Legislative Oversight

Bill 1-25: Public Safety – Emergency Medical Services – Insurance Reimbursement

SUMMARY

The Office of Legislative Oversight (OLO) anticipates Bill 1-25 will have no impact on the County's contribution to addressing climate change as the proposed actions will likely have no effect on response times and would only change a few procedures related to inquiring about an individual's insurance information.

BACKGROUND AND PURPOSE OF BILL 1-25

Montgomery County residents are not required to "pay any out-of-pocket expenses (co-payment, deductible, or uninsured portion of the cost of each emergency medical services transport) relating to emergency medical transport services" provided by Montgomery County Fire and Rescue Services (MCFRS).[1] However, the Emergency Medical Services (EMS) Law passed in January 2013 authorizes MCFRS to seek reimbursement for ambulance transports from private health insurance companies, Medicare, or Medicaid. Revenue from these reimbursements goes towards equipment, enhancement, and training for MCFRS.[2]

Currently, under County law, MCFRS personnel are not allowed to inquire about an individual's insurance coverage. Instead, the County contracts with a third party to seek reimbursement from health insurance providers after emergency transportation services are rendered.[3]

Bill 1-25 would allow MCFRS emergency responders to ask for information regarding an individual's insurance coverage. Specifically, emergency responders could only ask for insurance information when:[4]

- Providing transportation to an alternative destination other than a hospital emergency department such as a behavioral health facility, primary care office, or urgent care; or
- Providing treatment in place.

According to the County Executive, these changes would allow MCFRS personnel to provide alternate emergency services such as treatment-in-place, define out-of-pocket expenses for individuals receiving such treatments, and aid MCFRS in seeking reimbursement for emergency services transport from health insurance providers.[5] The Bill generally aligns with recommendations made by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) and the Maryland Health Care Commission (MHCC) in a report released in January 2019.[6]

Bill 1-25, Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments was introduced by the Council President at the request of the County Executive on January 21, 2025.[7]

Anticipated Impacts

The efficiency of emergency services, especially emergency response times, can contribute to a community's overall emergency preparedness and by extension, its climate resilience.[8] However, as the bill's proposed changes are unlikely to affect response times, OLO anticipates Bill 1-25 will have no impact on the County's contribution to addressing climate change, including the reduction and/or sequestration of greenhouse gas emissions, community resilience, and adaptative capacity.

Recommended Amendments

The Climate Assessment Act requires OLO to offer recommendations, such as amendments or other measures to mitigate any anticipated negative climate impacts.[9] OLO does not offer recommendations or amendments as Bill 1-25 is likely to have no impact on the County's contribution to addressing climate change, including the reduction and/or sequestration of greenhouse gas emissions, community resilience, and adaptative capacity.

Caveats

OLO notes two caveats to this climate assessment. First, predicting the impacts of legislation upon climate change is a challenging analytical endeavor due to data limitations, uncertainty, and the broad, global nature of climate change. Second, the analysis performed here is intended to inform the legislative process, not determine whether the Council should enact legislation. Thus, any conclusion made in this statement does not represent OLO's endorsement of, or objection to, the bill under consideration.

Purpose of Climate Assessments

The purpose of the Climate Assessments is to evaluate the anticipated impact of legislation on the County's contribution to addressing climate change. These climate assessments will provide the Council with a more thorough understanding of the potential climate impacts and implications of proposed legislation, at the County level. The scope of the Climate Assessments is limited to the County's contribution to addressing climate change, specifically upon the County's contribution to greenhouse gas emissions and how actions suggested by legislation could help improve the County's adaptative capacity to climate change, and therefore, increase community resilience.

While co-benefits such as health and cost savings may be discussed, the focus is on how proposed County bills may impact GHG emissions and community resilience.

CONTRIBUTIONS

OLO staffer Kaitlyn Simmons drafted this assessment.

[1] Montgomery County Code § 21-23A
[2] Montgomery County Emergency Medical Transport Services, Montgomery County Fire and Rescue Services, Accessed 1/23/2025.
[3] Bill 17-12, Fire and Rescue Service - Emergency Medical Services Transportation - Insurance Reimbursement, Montgomery County Council, Enacted May 15, 2012; Montgomery County Emergency Medical Transport Services FAQ, Montgomery County Fire and Rescue Services, Accessed 1/23/2025.
[4] Introduction Staff Report for Bill 1-25, Montgomery County Council, Introduced January 21, 2025.
[5] Ibid.
[6] "Coverage and Reimbursement for Emergency Medical Services Care Delivery Models and Uncompensated Services", Maryland Health Care Commission and Maryland Institute for Emergency Medical Services Systems, January 2019.
[7] Introduction Staff Report for Bill 1-25, Montgomery County Council, Introduced January 21, 2025.
[8] Disaster Resilience: A National Imperative, National Academies of Sciences, Engineering, and Medicine, 2012.
[9] Bill 3-22, Legislative Branch – Climate Assessments – Required, Montgomery County Council, Effective date October 24, 2022

Racial Equity and Social Justice (RESJ) Impact Statement

Office of Legislative Oversight

BILL 1-25: PUBLIC SAFETY – EMERGENCY MEDICAL SERVICES – INSURANCE REIMBURSEMENT – AMENDMENTS

SUMMARY

The Office of Legislative Oversight (OLO) anticipates Bill 1-25 will have a minimal impact on racial equity and social justice (RESJ) in the County. Bill 1-25 is not expected to change the current level of emergency medical services provided by Montgomery County Fire Rescue Service (MCFRS). It is also not expected to change the out-of-pocket cost of these services to County residents. Further, there is no indication additional revenue from this Bill will be used to address racial and social inequities or disparities in emergency medical services.

PURPOSE OF RESJ IMPACT STATEMENTS

RESJ impact statements (RESJIS) evaluate the anticipated impact of legislation on racial equity and social justice in the County. RESJ is a **process** that focuses on centering the needs, leadership, and power of Black, Indigenous, and other people of color (BIPOC) and communities with low incomes. RESJ is also a **goal** of eliminating racial and social inequities. Applying a RESJ lens is important to achieve RESJ.[1] This involves seeing, thinking, and working differently to address the racial and social inequities that cause racial and social disparities.[2]

PURPOSE OF BILL 1-25

Montgomery County residents are not required to "pay any out-of-pocket expenses (co-payment, deductible, or uninsured portion of the cost of each emergency medical services transport) relating to emergency medical transport services" provided by MCFRS.[3] However, the Emergency Medical Services (EMS) Law passed in January 2013 authorizes MCFRS to seek reimbursement for ambulance transports from private health insurance companies, Medicare, or Medicaid. Revenue from these reimbursements goes towards equipment, enhancement, and training for MCFRS.[4]

Currently, under County law, MCFRS personnel are not allowed to inquire about an individual's insurance coverage. Instead, the County contracts with a third party to request insurance coverage information from an individual after emergency transportation services are rendered to seek reimbursement from their health insurance provider.[5,6]

Bill 1-25 would allow MCFRS emergency responders to ask for information regarding an individual's insurance coverage. Specifically, emergency responders could only ask for insurance information when:[7]

- Providing transportation to an alternative destination other than a hospital emergency department such as a behavioral health facility, primary care office, or urgent care; or
- Providing treatment in place.

According to the County Executive, these changes would allow MCFRS personnel to provide alternate emergency services, define out-of-pocket expenses for individuals receiving such treatments, and aid MCFRS in seeking reimbursement for emergency services transport from health insurance providers.[8] The Bill generally aligns with recommendations made by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) and the Maryland Health Care Commission (MHCC) in a report released in January 2019.[9]

The Council introduced Bill 1-25, Public Safety – Emergency Medical Services – Insurance Reimbursement – Amendments, at the request of the County Executive on January 21, 2025.

ANTICIPATED RESJ IMPACTS

To consider the anticipated impact of Bill 1-25 on RESJ in the County, OLO recommends the consideration of two related questions:

- Who would primarily benefit or be burdened by this bill?
- What racial and social inequities could passage of this bill weaken or strengthen?

When appropriate, MCFRS emergency responders may transport community members to an alternative destination aside from an emergency room. They may also provide treatment in place. Bill 1-25 would allow first responders to request insurance information from community members who need these alternative services. This would allow first responders to determine the best course of action – such as transport to insurance-approved health facilities or coordination with the Department of Health and Human Services (DHHS). The Bill would also allow MCFRS to request reimbursement from insurance providers for these services. County residents with or without insurance would continue to have access to these services at no cost out-of-pocket.[10]

OLO anticipates Bill 1-25 will have a minimal impact on RESJ in the County. Bill 1-25 is not expected to change the current level of emergency medical services provided by MCFRS. It is also not expected to change the out-of-pocket cost of these services to County residents. A slight increase in County revenues is expected from this Bill.[11] However, there is no indication the additional revenue will be used to address racial and social inequities or disparities in emergency medical services.

RECOMMENDED AMENDMENTS

The Racial Equity and Social Justice Act requires OLO to consider whether recommended amendments to bills aimed at narrowing racial and social inequities are warranted in developing RESJ impact statements.[12] OLO anticipates Bill 1-25 will have a minimal impact on RESJ in the County. As such, OLO does not offer recommended amendments.

CAVEATS

Two caveats to this racial equity and social justice impact statement should be noted. First, predicting the impact of legislation on racial equity and social justice is a challenging analytical endeavor due to data limitations, uncertainty, and other factors. Second, this RESJ impact statement is intended to inform the legislative process rather than determine whether the Council should enact legislation. Thus, any conclusion made in this statement does not represent OLO's endorsement of, or objection to, the bill under consideration.

CONTRIBUTIONS

OLO staffer Janmarie Peña, Performance Management and Data Analyst, drafted this RESJ impact statement.

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[1] Definition of racial equity and social justice adopted from Marlysa Gamblin et al., "Applying Racial Equity to U.S. Federal Nutrition Programs," Bread for the World and Racial Equity Tools.
[2] Ibid.
[3] Montgomery County Emergency Medical Transport Services, Montgomery County Fire and Rescue Services.
[4] Ibid.
[5] Bill 17-12, Fire and Rescue Service - Emergency Medical Services Transportation - Insurance Reimbursement, Montgomery County Council, Enacted May 15, 2012
[6] Montgomery County Emergency Medical Transport Services FAQ, Montgomery County Fire and Rescue Services.
[7] Introduction Staff Report for Bill 1-25, Montgomery County Council, Introduced January 21, 2025.
[8] Memorandum from the County Executive to the Council President, Introduction Staff Report for Bill 1-25.
[9] "Coverage and Reimbursement for Emergency Medical Services Care Delivery Models and Uncompensated Services", Maryland Health Care Commission and Maryland Institute for Emergency Medical Services Systems, January 2019.
[10] Introduction Staff Report for Bill 1-25 and OLO conversation with MCFRS staff on February 3, 2025.
[11] Fiscal Impact Statement, Introduction Staff Report for Bill 1-25.
[12] Bill 27-19, Administration – Human Rights – Office of Racial Equity and Social Justice – Racial Equity and Social Justice Advisory Committee – Established, Montgomery County Council