

# SENATE BILL 159

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(PRE-FILED)

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By: Senator A. Washington

Requested: October 29, 2025

Introduced and read first time: January 14, 2026

Assigned to: Education, Energy, and the Environment

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## A BILL ENTITLED

1 AN ACT concerning

2 **Emergency Medical Services – Vehicles and Ambulances – Required Supplies,**  
3 **Reviews, and Complaints**

4 FOR the purpose of requiring the Executive Director of the Maryland Institute for  
5 Emergency Medical Services Systems to coordinate the minimum equipment,  
6 supplies, and medications to be available on emergency medical services vehicles;  
7 requiring each county and municipality that operates or contracts emergency  
8 medical services to conduct quarterly reviews of certain data and to certify  
9 completion of each review; requiring each county to establish and maintain a formal  
10 complaint filing system regarding ambulance quality, conduct, or compliance; and  
11 generally relating to emergency medical services vehicles and ambulances.

12 BY repealing and reenacting, without amendments,

13 Article – Education

14 Section 13–501(a), (f), and (g)

15 Annotated Code of Maryland

16 (2022 Replacement Volume and 2025 Supplement)

17 BY repealing and reenacting, with amendments,

18 Article – Education

19 Section 13–510

20 Annotated Code of Maryland

21 (2022 Replacement Volume and 2025 Supplement)

22 BY adding to

23 Article – Education

24 Section 13–519

25 Annotated Code of Maryland

26 (2022 Replacement Volume and 2025 Supplement)

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,  
2 That the Laws of Maryland read as follows:

3 **Article – Education**

4 13–501.

5 (a) In this subtitle the following words have the meanings indicated.

6 (f) “EMS Board” means the State Emergency Medical Services Board.

7 (g) “Institute” means the Maryland Institute for Emergency Medical Services  
8 Systems.

9 13–510.

10 In accordance with the Emergency Medical System plan and other relevant policies  
11 adopted by the EMS Board, the Executive Director shall:

12 (1) Coordinate a statewide system of emergency medical services;

13 (2) Coordinate the five emergency medical service regions in this State;

14 (3) Coordinate the planning and operation of emergency medical services  
15 with the federal, State, and county governments;

16 (4) Coordinate the training of all personnel in the Emergency Medical  
17 Services System and develop the necessary standards for their certification or licensure;

18 (5) Coordinate programs of research and education that relate to  
19 emergency medical services;

20 (6) Coordinate the development of centers for treating emergency injuries  
21 and illnesses;

22 (7) Coordinate the development of specialty referral centers for  
23 resuscitation, treatment, and rehabilitation of the critically ill and injured;

24 **(8) COORDINATE THE MINIMUM EQUIPMENT, SUPPLIES, AND  
25 MEDICATIONS, INCLUDING EQUIPMENT, SUPPLIES, AND MEDICATIONS NEEDED FOR  
26 NEONATAL CARE, TO BE AVAILABLE ON EMERGENCY MEDICAL SERVICES VEHICLES  
27 WITH THE FEDERAL, STATE, AND COUNTY GOVERNMENTS;**

28 **[(8)] (9)** Work closely with the public and private agencies, health care  
29 institutions and universities involved with emergency medical services, the Emergency  
30 Medical Services Advisory Council, and the Medical Management Consultant Group;

1                   **[(9)] (10)** Administer State and federal funds for emergency medical  
2 services in this State;

3                   **[(10)] (11)** Work closely with the Maryland Fire and Rescue Institute, which  
4 is responsible for basic training for emergency medical technicians;

5                   **[(11)] (12)** Assure continued improvement of transportation for emergency,  
6 critically ill, and injured patients by supporting the goals of career and volunteer systems  
7 throughout this State; and

8                   **[(12)] (13)** Implement all programmatic, operational, and administrative  
9 components of the Institute.

10 **13-519.**

11                  **(A) (1)** IN THIS SECTION, “AMBULANCE” MEANS ANY CONVEYANCE  
12 DESIGNED AND CONSTRUCTED OR MODIFIED AND EQUIPPED TO BE USED,  
13 MAINTAINED, OR OPERATED TO TRANSPORT SICK, INJURED, WOUNDED, OR  
14 OTHERWISE INCAPACITATED INDIVIDUALS.

15                  **(2)** “AMBULANCE” INCLUDES A CONVEYANCE DESIGNED AND  
16 CONSTRUCTED OR MODIFIED AND EQUIPPED FOR AEROMEDICAL TRANSPORT.

17                  **(B) (1)** EACH COUNTY AND MUNICIPALITY THAT OPERATES OR  
18 CONTRACTS EMERGENCY MEDICAL SERVICES SHALL:

19                      **(I)** CONDUCT QUARTERLY REVIEWS OF AMBULANCE  
20 PERFORMANCE DATA PUBLISHED BY THE INSTITUTE;

21                      **(II)** CERTIFY COMPLETION OF EACH REVIEW; AND

22                      **(III)** SUBMIT A SUMMARY OF EACH REVIEW TO THE INSTITUTE.

23                  **(2)** A REVIEW CONDUCTED UNDER PARAGRAPH **(1)(I)** OF THIS  
24 SUBSECTION SHALL:

25                      **(I)** ASSESS:

26                          **1.** RESPONSE TIMES;

27                          **2.** SERVICE QUALITY; AND

28                          **3.** COMPLIANCE WITH INSTITUTE STANDARDS;

**(II) IDENTIFY TRENDS AND DEFICIENCIES IN SERVICES; AND**

(III) ALLOW A COUNTY OR MUNICIPALITY TO ADOPT  
MEASURES AND MAKE OPERATIONAL ADJUSTMENTS.

4           (c) (1) EACH COUNTY SHALL ESTABLISH AND MAINTAIN A FORMAL  
5 COMPLAINT FILING SYSTEM TO RECEIVE, INVESTIGATE, AND RESOLVE COMPLAINTS  
6 REGARDING AMBULANCE QUALITY, CONDUCT, OR COMPLIANCE.

**(2) THE FORMAL COMPLAINT FILING SYSTEM SHALL:**

**(I) BE ACCESSIBLE ONLINE AND IN PERSON;**

9 (II) INCLUDE TRACKING, INVESTIGATION TIMELINES, AND  
10 NOTIFICATIONS; AND

13 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July  
14 1, 2026.