



Maryland
Hospital Association

February 15, 2024

To: The Honorable Pamela Beidle, Chair, Senate Finance Committee

Re: Letter of Support- Senate Bill 374 – State Emergency Medical Services Board – Licenses and Certificates – Application Requirements

Dear Chair Beidle:

On behalf of the Maryland Hospital Association's (MHA) 62 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 374.

MHA's [2022 State of Maryland's Health Care Workforce report](#) outlines a roadmap to ensure Maryland has the health care workforce it needs now and into the future. Removing barriers to licensure is one of the top recommendations.

Last year, the General Assembly passed a bill to ensure every qualified health care professional can apply for a license to practice in Maryland. This legislation makes the state more competitive by removing the social security number (SSN) requirement, which can serve as a significant barrier for internationally educated health care workers. Now applicants for a health occupations license can use alternative identification, including an individual taxpayer identification number (ITIN) or alternative documentation as permitted by the federal Social Security Act. The health occupations boards cannot require a SSN or ITIN as a condition of licensure or certification if the applicant does not have one.

This same barrier should be removed for the EMS workforce. Marylanders rely on EMS to provide lifesaving interventions and transportation, often to hospitals. Ensuring that all qualified members of this workforce are eligible for licensure is critical to build a strong health care system.

State emergency medical services are essential to hospital admission and throughput. Without sufficient EMS providers, Marylanders are not able to access necessary treatment. EMS workers are often the first individuals to administer life-saving care to patients and sustain health for these patients while in transit. The General Assembly Hospital Throughput Work Group emphasized the importance of EMS services in overall hospital throughput—noting many patients utilize these services as transportation for admission to hospitals and for discharge to post-acute facilities including nursing homes and skilled nursing facilities.

Since the COVID-19 pandemic, EMS providers, like many other health care workers, have experienced workforce shortages. For EMTs and paramedics, turnover ranges from 20% to 30%

annually often requiring ambulatory services to hire new staff every four years.¹ In 2022, the American Ambulance Association (AAA) recorded a 55% and 39% vacancy rate for part-time paramedics and part-time EMTs respectively.² This data comes from more than 100 EMS organizations representing more than 12,000 EMS employees. Given the limited EMS workforce, high turnover rates, and the downstream impact on hospitals, the hospital field supports the removal of unnecessary requirements like SSN and ITIN as conditions of licensure or certification.

For these reasons, we request a *favorable* report on SB 374.

For more information, please contact:
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¹ American Ambulance Association - 4th Annual Study Shows Worsening EMS Turnover:
<https://ambulance.org/2022/10/17/4th-annual-study-shows-worsening-ems-turnover/>

² Id.