

HB0288/413323/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 288

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “**Delegate Cullison**” and substitute “**Delegates Cullison, Pena–Melnyk, Alston, Bagnall, Guzzone, Hill, Kaiser, R. Lewis, Rosenberg, Taveras, and Woods**”; in line 2, strike “**Food Service Facilities**” and substitute “**Grocery Stores and Restaurants**”; in line 4, strike “owner and operator” and substitute “owners and operators”; in the same line, strike “a certain food service facility” and substitute “certain grocery stores and restaurants, beginning on a certain date.”; strike beginning with “develop” in line 5 down through “requirements” in line 6 and substitute “place an automated external defibrillator in a certain area and maintain the functionality of the automated external defibrillator, granting certain immunities to grocery stores, restaurants, and individuals for certain acts or omissions under certain circumstances; altering the definition of “facility” for the purpose of excluding certain restaurants and grocery stores from the Public Access Automated External Defibrillator Program”; in line 9, strike “food service facilities.” and substitute “grocery stores and restaurants.”

BY repealing and reenacting, with amendments,

Article – Education

Section 13–517(a)

Annotated Code of Maryland
(2022 Replacement Volume)”.

AMENDMENT NO. 2

On page 1, after line 16, insert:

“Article – Education

13–517.

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(a) (1) In this section the following words have the meanings indicated.

(2) “Automated external defibrillator (AED)” means a medical heart monitor and defibrillator device that:

(i) Is cleared for market by the federal Food and Drug Administration;

(ii) Recognizes the presence or absence of ventricular fibrillation or rapid ventricular tachycardia;

(iii) Determines, without intervention by an operator, whether defibrillation should be performed;

(iv) On determining that defibrillation should be performed, automatically charges; and

(v) 1. Requires operator intervention to deliver the electrical impulse; or

2. Automatically continues with delivery of electrical impulse.

(3) “Certificate” means a certificate issued by the EMS Board to a registered facility.

(4) **(I)** “Facility” means an agency, association, corporation, firm, partnership, or other entity.

(II) **“FACILITY” DOES NOT INCLUDE A GROCERY STORE OR RESTAURANT THAT IS SUBJECT TO § 21-330.3 OF THE HEALTH – GENERAL ARTICLE.**

(5) “Jurisdictional emergency medical services operational program” means the institution, agency, corporation, or other entity that has been approved by the EMS Board to provide oversight of emergency medical services for each of the local government and State and federal emergency medical services programs.

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(6) “Program” means the Public Access Automated External Defibrillator Program.

(7) “Regional administrator” means the individual employed by the Institute as regional administrator in each EMS region.

(8) “Regional council” means an EMS advisory body as created by the Code of Maryland Regulations 30.05.

(9) “Regional council AED committee” means a committee appointed by the regional council consisting of:

(i) The regional medical director;

(ii) The regional administrator; and

(iii) Three or more individuals with knowledge of and expertise in AEDs.

(10) “Registered facility” means an organization, business association, agency, or other entity that meets the requirements of the EMS Board for registering with the Program.”;

in line 19, after “(A)” insert **“(1) IN THIS SECTION, THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.**

(2) “AUTOMATED EXTERNAL DEFIBRILLATOR (AED)” MEANS A MEDICAL HEART MONITOR AND DEFIBRILLATOR DEVICE THAT:

(i) IS CLEARED FOR MARKET BY THE FEDERAL FOOD AND DRUG ADMINISTRATION;

(Over)

(II) RECOGNIZES THE PRESENCE OR ABSENCE OF VENTRICULAR FIBRILLATION OR RAPID VENTRICULAR TACHYCARDIA;

(III) DETERMINES, WITHOUT INTERVENTION BY AN OPERATOR, WHETHER DEFIBRILLATION SHOULD BE PERFORMED;

(IV) ON DETERMINING THAT DEFIBRILLATION SHOULD BE PERFORMED, AUTOMATICALLY CHARGES; AND

(V) 1. REQUIRES OPERATOR INTERVENTION TO DELIVER THE ELECTRICAL IMPULSE; OR

2. AUTOMATICALLY CONTINUES WITH DELIVERY OF THE ELECTRICAL IMPULSE.

(3) "GROCERY STORE" MEANS A STORE THAT HAS:

(I) ALL MAJOR FOOD DEPARTMENTS, INCLUDING PRODUCE, MEAT, SEAFOOD, DAIRY, AND CANNED AND PACKAGED GOODS; OR

(II) 1. AT LEAST ONE OF THE MAJOR FOOD DEPARTMENTS; AND

2. AT LEAST 12,000 SQUARE FEET OF FLOOR SPACE.

(B)";

in the same line, strike "A FOOD SERVICE FACILITY" and substitute ":

(1) A GROCERY STORE";

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in line 20, strike “\$400,000” and substitute “\$10,000,000”; in the same line, after “LESS” insert “; **OR**”

(2) A RESTAURANT WITH:

(I) AN ANNUAL GROSS INCOME OF \$1,000,000 OR LESS, EXCLUSIVE OF SALES FOR OFF-PREMISES CONSUMPTION; OR

(II) A SEATING CAPACITY OF LESS THAN 100 INDIVIDUALS”;

in line 21, strike “(B) THE” and substitute “(C) BEGINNING JANUARY 1, 2024, EACH”; in the same line, strike “FOOD SERVICE FACILITY” and substitute “GROCERY STORE OR RESTAURANT”; strike beginning with “DEVELOP” in line 22 down through “ARTICLE” in line 24 and substitute “:

(1) PLACE AN AUTOMATED EXTERNAL DEFIBRILLATOR IN A PROMINENT AREA, ACCESSIBLE TO EMPLOYEES AND CUSTOMERS; AND

(2) MAINTAIN THE FUNCTIONALITY OF THE AUTOMATED EXTERNAL DEFIBRILLATOR.

(D) IN ADDITION TO ANY OTHER IMMUNITIES AVAILABLE UNDER STATUTORY OR COMMON LAW:

(1) A GROCERY STORE OR RESTAURANT IS NOT CIVILLY LIABLE FOR ANY ACT OR OMISSION IN THE PROVISION OF AUTOMATED EXTERNAL DEFIBRILLATION IF THE GROCERY STORE OR RESTAURANT HAS SATISFIED THE REQUIREMENTS UNDER THIS SECTION;

(Over)

(2) AN INDIVIDUAL IS NOT CIVILLY LIABLE FOR ANY ACT OR OMISSION IF:

(i) THE INDIVIDUAL IS ACTING IN GOOD FAITH WHILE RENDERING AUTOMATED EXTERNAL DEFIBRILLATION TO ANOTHER INDIVIDUAL WHO IS A VICTIM OR REASONABLY BELIEVED BY THE INDIVIDUAL TO BE A VICTIM OF A SUDDEN CARDIAC ARREST;

(ii) THE ASSISTANCE OR AID IS PROVIDED IN A REASONABLY PRUDENT MANNER; AND

(iii) THE AUTOMATED EXTERNAL DEFIBRILLATION IS PROVIDED WITHOUT FEE OR OTHER COMPENSATION; AND

(3) A GROCERY STORE, RESTAURANT, OR INDIVIDUAL IS NOT CIVILLY LIABLE FOR FAILING TO RENDER AUTOMATED EXTERNAL DEFIBRILLATION TO AN INDIVIDUAL WHO IS A VICTIM OR IS REASONABLY BELIEVED TO BE A VICTIM OF A SUDDEN CARDIAC ARREST”.

On page 2, in line 1, strike “(C)” and substitute “(E)”; in line 4, strike “AND”; in line 5, strike “FOOD SERVICE FACILITY” and substitute “GROCERY STORE OR RESTAURANT”; in line 6, strike the period and substitute “;AND”

(3) REQUIRE EACH GROCERY STORE AND RESTAURANT SUBJECT TO THIS SECTION TO REGISTER WITH THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS IN ORDER TO:

(i) MAKE ITS LOCATION PUBLICLY AVAILABLE TO EMERGENCY DISPATCHERS; AND

**(II) RECEIVE MAINTENANCE AND RECALL NOTICES FROM
THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS.**

SECTION 2. AND BE IT FURTHER ENACTED, That:

(a) On or before December 1, 2024, the Maryland Institute for Emergency Medical Services Systems shall report to the Senate Finance Committee, the House Health and Government Operations Committee, and the House Economic Matters Committee, in accordance with § 2–1257 of the State Government Article, on:

(1) the grocery stores and restaurants that registered automated external defibrillators in accordance with regulations adopted under § 21–330.3 of the Health – General Article, as enacted by Section 1 of this Act; and

(2) the number of adverse cardiac events that required the use of an automated external defibrillator experienced in the grocery stores and restaurants that registered the automated external defibrillators.

(b) On or before December 1, 2024, the Maryland Institute for Emergency Medical Services Systems, in collaboration with the Maryland Restaurant Association and the Maryland Retailers Association, shall evaluate the impact of expanding the scope of § 21–330.3 of the Health – General Article, as enacted by Section 1 of this Act, to include more restaurants and grocery stores and report its findings and recommendations to the Senate Finance Committee, the House Health and Government Operations Committee, and the House Economic Matters Committee, in accordance with § 2–1257 of the State Government Article.”;

and in line 7, strike “2.” and substitute “3.”.