Government of the District of Columbia
Office of the Chief Financial Officer

Glen Lee
Chief Financial Officer

MEMORANDUM

TO:	**The Honorable Phil Mendelson** **Chairman, Council of the District of Columbia**
FROM:	**Glen Lee** **Chief Financial Officer**
DATE:	**October 30, 2026**
SUBJECT:	**Fiscal Impact Statement – Emergency Medical Services Clarification Amendment Act of 2026**
REFERENCE:	**Bill 26-599, Draft Committee Print as provided to the Office of Revenue Analysis on October 28, 2026**

Conclusion

Funds are not sufficient in the fiscal year 2027 through fiscal year 2030 budget and financial plan to implement the bill. Fire and Emergency Medical Services Department (Fire and EMS) requires $235,000 in fiscal year 2027 and $1.2 million over the financial plan to implement the bill.

Background

District law[1] requires the Mayor to appoint[2] a Medical Director of Fire and EMS who is responsible for overseeing all pre-hospital medical services within Fire and EMS including developing medical policies and protocols, guiding medical training, and overseeing quality assurance. The Medical Director also supervises how pre-hospital care is delivered and works collaboratively with the Fire Chief, their assistants and deputies, and other Fire and EMS personnel.

The subtitle expands the responsibilities of the Medical Director to include supervising and making final decisions on all clinical aspects of pre-hospital emergency medical services provided by Fire and EMS and the Office of Unified Communications (OUC) through:

- Establishing medical policies, procedures, protocols, and dispatch/response plans;
- Overseeing medical training;
- Reporting EMS performance metrics, including dispatch metrics;

[1] D.C. Official Code § 5–404.01.
[2] With the advice and consent of the Council; the Medical Director holds the rank of Assistant Fire Chief and reports directly to the Fire Chief, but may be removed only by the Mayor.

- Making changes to the OUC's dispatch system; and
- Ensuring quality assurance[3] and quality improvement[4] for EMS dispatch and services.

The bill requires the Medical Director to publish an annual summary of quality-assurance findings and corrective actions, without identifying any patient, caller, or employee. The bill adds the OUC Director to the list of individuals with whom the Medical Director must collaborate, and requires the Medical Director provide recommendations to the Mayor on the overall performance of OUC and Fire and EMS.

OUC administers the DC911 call center, which is responsible for providing response to emergency and non-emergency calls in the District. OUC was established in 2005[5] to centralize the functions and activities of the District government's 911 and 311 systems for emergency, non-emergency, and citizen service calls from the Metropolitan Police Department (MPD), Fire and EMS, and customer services operations.[6]

The bill requires OUC mandate, that within one year, all call takers and dispatchers—new hires and existing employees—obtain Emergency Fire Dispatch (EFD) certification[7], Emergency Medical Dispatch (EMD) certification[8], and Emergency Police Dispatch (EPD) certification[9]. The Medical Director is responsible for approving the certification authority and overseeing the medical standards associated with EMD functions.

Financial Plan Impact

Funds are not sufficient in the fiscal year 2027 through fiscal year 2030 budget and financial plan to implement the bill. Fire and EMS requires $235,000 in fiscal year 2027 and $1.2 million over the financial plan to implement the bill.

The bill expands the responsibilities of the Medical Director by extending authority to pre-hospital emergency medical services and related dispatch functions provided by both the Fire and EMS and

[3] The bill defines this as a process taken to ensure that standards and procedures are adhered to and that delivered products or services meet performance requirements.
[4] The bill defines this as an organized system that assesses and evaluates the process to improve the quality of services provided.
[5] Fiscal Year 2005 Budget Support Act of 2004, effective December 7, 2004 (D.C. Law 15-205; D.C. Official Code § 3203, 51 DCR 8441).
[6] A history of the OUC may be accessed here: https://ouc.dc.gov/page/history-ouc.
[7] The bill defines EFD certification as a specialized public safety designation, which shall be approved by the Chief of the Fire and Emergency Medical Services Department, that authorizes telecommunicators to perform analysis, prioritization, and processing of calls while maintaining radio contact with responders to ensure safe, efficient, and effective responses to requests for fire services, in accordance with local, state, or national standards.
[8] The bill defines EMD certification as a specialized public safety designation, which shall be approved by the Medical Director of the Fire and Emergency Medical Services Department, that authorizes telecommunicators to perform medical triage and provide life-saving pre-arrival instructions under the authority of the Medical Director, ensuring a standardized, scientifically-validated response to medical emergencies.
[9] The bill defines EPD certification as a specialized public safety designation, which shall be approved by the Chief of the Metropolitan Police Department, that authorizes telecommunicators to perform analysis, prioritization, and processing of calls while maintaining radio contact with responders to ensure safe, efficient, and effective responses to requests for law enforcement services, in accordance with local, state, or national standards.

OUC. The Medical Director position is currently a full-time role within Fire and EMS. The Medical Director holds the primary executive and legal authority for the entire pre-hospital medical system, while the Assistant Medical Director manages and executes day-to-day clinical oversight, training, and quality improvement programs under that leadership. Fire and EMS currently employs one Assistant Medical Director who provides medical direction for EMS operations, oversees EMS quality assurance, training, and education programs, leads clinical policy development and performance measurement, supervises staff, collaborates with leadership, and participates in major incident response. To meet the requirements of the bill, particularly those involving oversight of OUC, Fire and EMS needs one additional full-time Assistant Medical Director. This position will cost $235,000 in fiscal year 2027 and $1.2 million over the four-year financial plan period. This fiscal year 2027 cost assumes a January 1, 2027 hiring date.

The bill requires the OUC to ensure that all current and newly hired call takers and dispatchers obtain EFD, EMD, and EPD certifications within one year. The Assistant Medical Director position will be responsible for approving the certification authority and overseeing the medical standards associated with EMD functions. OUC and Fire and EMS can implement this requirement using existing training infrastructure and processes and do not require additional resources.

Emergency Medical Services Clarification Amendment Act of 2026
Fiscal Year 2027 – Fiscal Year 2030
($ in thousands)

	FY 2027	FY 2028	FY 2029	FY 2030	Total
Salary[(a)]	$203	$276	$282	$287	$1,048
Fringe[(b)]	$32	$59	$60	$62	$213
TOTAL	$235	$335	$342	$349	$1,260

Table Notes:

(a) One Supervisory Public Safety Medical Officer, Public Safety Excepted Service, Grade 2 (Medical Services). Assumes salary growth of 2.0 percent annually. Fiscal year 2027 includes nine months of costs.

(b) Assumes a fringe rate of 21.2 percent and fringe growth rate of 2.35 annually. Fiscal year 2027 includes nine months of costs.