

Testimony
Senate Bill No. 2100
House Human Services Committee
Representative Matthew Ruby, Chair
March 10, 2025

Good afternoon, Chairman Ruby, and members of the Human Services Committee, I am Chris Price with the Department of Health and Human Services (Department). I appear before you in opposition to Senate Bill No. 2100.

For over a decade, the Department has collaborated extensively with stakeholders across the state to develop and refine the rules governing Emergency Medical Services (EMS) operations and EMS personnel—codified as Article 33-11 and Chapter 33-36-01, respectively. These rules were meticulously crafted to align with industry standards and are grounded in evidence-based practices. Importantly, they were not created in isolation but were thoroughly vetted and ultimately endorsed by the Emergency Medical Services Advisory Council, representing a broad spectrum of expertise and interests within the EMS community.

A key provision of these rules, Paragraph 5.d.1. of Section 33-36-01-03, mandates that EMS instructors be affiliated with a licensed EMS training institution. This requirement was not arbitrarily imposed; it was included at the direct request of the North Dakota EMS Association as part of their *EMS Vision 2025* initiative. This visionary document emerged from an exhaustive, yearslong outreach effort aimed at addressing critical challenges within the EMS field and devising actionable strategies to overcome them.

Senate Bill No. 2100 seeks to weaken a carefully considered provision of the revised rules by eliminating the requirement for Emergency Medical Responder (EMR) and Emergency Medical Technician (EMT) instructors to maintain affiliation with a licensed EMS training institution. Proponents of this bill cite examples of the negative impact of this provision on rural EMS since its adoption last April; however, the affiliation requirement has not yet taken effect and will not be fully implemented for all instructors until July 1, 2026. This phased implementation, aligned with the EMS personnel licensing cycle, allows

stakeholders time to collaborate on the development of revised EMS training institution rules and establish consensus on the instructor affiliation process.

During the phase-in period the Department has continued to approve and register EMR and EMT courses led by non-affiliated instructors, including fifteen (15) of the thirty-nine (39) courses registered since the adoption of the revised rules. It should be noted, in 2024, 80 percent of the 200 EMT students who successfully passed the initial certification examination were trained by instructors affiliated with a licensed EMS training institution—four times the number trained by non-affiliated instructors. This demonstrates that the vast majority of EMT students are already receiving instruction via licensed EMS training institute affiliated instructors, two years before the mandate is fully implemented. Furthermore, since the revised rules took effect, eight additional organizations have obtained licensure as EMS training institutions, indicating that the path to licensure remains accessible.

It also is important to highlight that in 2024, two (2) courses conducted by non-affiliated instructors had a zero (0) percent pass rate, while four (4) others had pass rates of 50 percent or lower. In contrast, all courses conducted by affiliated instructors had pass rates above 53 percent. These low pass rates among non-affiliated instructors underscore the quality concerns that led to the instructor affiliation mandate.

Senate Bill No. 2100 threatens the oversight and accountability necessary to uphold rigorous standards in EMS education.

Opposing this bill is essential to preserving the quality and safety of EMS training in North Dakota.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.