

01/19/2025

House Human Services Committee
600 East Boulevard Avenue
Bismarck, ND 58505

RE: Opposition of House Bill 1339

Dear Chairman Rudy and Members of the Committee,

As a current board member of a rural ambulance service district, I am writing to express my strong opposition to House Bill 1339, which seeks to amend subsection 2 of section 23-27-07 of the North Dakota Century Code to exempt hospital-owned ambulance services from the requirements for forming rural ambulance service districts.

The formation of rural ambulance service districts is a vital process that empowers communities to have a voice in the sustainability and oversight of their local emergency medical services. These districts ensure that decisions regarding funding, governance, and operations are made with direct community input, reflecting the unique needs of the people they serve. Exempting hospital-owned ambulance services from these requirements undermines this critical framework and removes an essential layer of accountability.

From my experience, hospital-owned ambulance services are no different from private providers, whether for-profit or non-profit, in their operational and governance structures. The majority of rural ambulance services, regardless of ownership, are governed by boards responsible for overseeing policies, finances, and service quality. When taxpayers are aiding in a public safety entity, such as EMS, they should be assured that their tax dollars are spent on the intended goal. The taxing districts and their board assure this result. It is only fair that they all adhere to the same regulatory requirements, ensuring consistency and equity in how emergency medical services are managed.

By granting an exemption to hospital-owned services, HB 1339 creates an uneven playing field that could have far-reaching consequences. In rural areas, where emergency medical services are already stretched thin, this legislation risks creating disparities in service provision and potentially undermining community confidence in the system. Such an exemption could also lead to unfair competition, eroding the collaborative efforts that are often necessary to sustain rural EMS providers.

I urge you and your colleagues to reject HB 1339 in its current form and instead focus on policies that maintain fair and consistent regulations for all ambulance service providers. Ensuring equitable oversight is critical to preserving high-quality emergency care and empowering communities to shape the services they depend on.

Thank you for your time and thoughtful consideration. I am happy to discuss my concerns further and share additional insights from my perspective as a rural ambulance district board member.

Sincerely

Lori Grommesh
Treasurer/Board Member
Casselton Rural Ambulance District