

SECOND ENGROSSMENT  
with Senate AmendmentsFifty-seventh  
Legislative Assembly  
of North Dakota

## REENGROSSED HOUSE BILL NO. 1202

Introduced by

Representatives Porter, Severson, Galvin, Pollert

Senators Christmann, Klein

1 A BILL for an Act to create and enact section 23-27-04.5 of the North Dakota Century Code,  
2 relating to the creation of a quick-response unit service pilot program; to amend and reenact  
3 sections 23-27-01, 23-27-02, 23-27-03, 23-27-04, 23-07-04.1, 23-27-04.2, 23-27-04.3, and  
4 23-27-04.4 of the North Dakota Century Code, relating to licensure of emergency medical  
5 services operations; to provide an appropriation; and to provide an expiration date.

6 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

7 **SECTION 1. AMENDMENT.** Section 23-27-01 of the North Dakota Century Code is  
8 amended and reenacted as follows:

9 **23-27-01. Licensing of ~~ambulance~~ emergency medical services operations -**

10 **Exception - Waiver. ~~No surface ambulance~~**

- 11 1. The state department of health shall license emergency medical services  
12 operations. After June 30, 2001, the department shall limit the issuance of a  
13 license for any new emergency medical services operation based on the needs of  
14 the service area if the applicant for the new license was licensed before the  
15 effective date of this Act and was subsequently relicensed under section  
16 23-27-04.5.
- 17 2. Emergency medical services, as hereinafter defined, may not be advertised or,  
18 offered, or provided to the public unless the operator of such service the services  
19 is licensed as an emergency medical services operation by the state health council  
20 department. A license for operators an operator of ambulance service an  
21 emergency medical services operation is nontransferable and the operator must  
22 be separately licensed for each ambulance service which he operation that  
23 operator operates. Each ambulance service which operation that is headquartered  
24 or dispatched from a separate location must be considered a separate ambulance

service operation; however, an operation with a single headquarters site may dispatch vehicles and personnel from more than one location if calls requesting services are received and orders for vehicle dispatch are made at the single headquarters site.

3. The provisions of this chapter do not apply to an operator from another state who is headquartered at a location outside of this state and transports patients across state lines, but ~~no such the operator will be permitted to~~ may not treat patients within this state or pick up patients within this state for transportation to locations within this state, except as provided ~~through regulations~~ by rule.

4. The state health council shall ~~provide through regulations~~ adopt rules for special licenses and waiver provisions for an operator of ~~a surface ambulance service~~ an emergency medical services operation intended for industrial sites not available to the general public.

**SECTION 2. AMENDMENT.** Section 23-27-02 of the North Dakota Century Code is amended and reenacted as follows:

**23-27-02. Definition of ~~surface ambulance~~ emergency medical services.** For the purpose of this chapter, "~~surface ambulance~~ emergency medical services" means ~~any use of a publicly or privately owned vehicle upon the streets or highways of this state for the~~ prehospital medical stabilization or transportation of persons who are sick, injured, wounded, or otherwise incapacitated or helpless by any person who either holds himself out to the public ~~for such a~~ as being in that service or who regularly provides ~~such a that~~ service. The term includes basic life support ambulance services, advanced life support ambulance services, air ambulance services, and quick-response unit services.

**SECTION 3. AMENDMENT.** Section 23-27-03 of the 1999 Supplement to the North Dakota Century Code is amended and reenacted as follows:

**23-27-03. License fees.** The fee for a license to operate an emergency medical services operation and perform ~~ambulance~~ emergency medical services must be set by the state health council at a sum of not more than twenty-five dollars annually, as may be required to defray the costs of administration of the licensing program. Individuals providing emergency medical services may not be assessed this license fee. All license fees must be paid to the

state department of health and deposited with the state treasurer and credited to the state general fund.

**SECTION 4. AMENDMENT.** Section 23-27-04 of the North Dakota Century Code is amended and reenacted as follows:

**23-27-04. Standards for operators.** ~~No surface ambulance service~~ An emergency medical services operation within this state may ~~be operated~~ not operate unless the ~~service operation~~ is licensed in accordance with this chapter and ~~regulations promulgated~~ rules adopted by the state health council. The ~~regulations~~ rules must include, ~~but not be limited to,~~ the following:

1. Time when ~~ambulance service shall~~ operator's services must be available.
2. Type of driver's license needed for drivers of ~~ambulance~~ ground vehicles.
3. Training standards for ~~ambulance driver and attendant~~ operation personnel.
4. Equipment ~~needs and equipment certification~~ and ground vehicle standards.
5. Annual license fees.
6. Number of personnel required for each ~~ambulance~~ run.
7. Such other requirements as may be found necessary to carry out the intent of this chapter.

**SECTION 5. AMENDMENT.** Section 23-27-04.1 of the 1999 Supplement to the North Dakota Century Code is amended and reenacted as follows:

**23-27-04.1. Emergency care or services rendered by officers, employees, or agents of ~~prehospital~~ emergency medical service services operations - Physician medical direction.** ~~No~~ Any officer, employee, or agent of ~~any prehospital~~ an emergency medical ~~service~~ services operation and ~~no~~ any physician licensed in this state who provides medical direction to ~~any prehospital~~ an emergency medical ~~service~~ services operation, who is a volunteer, who in good faith renders emergency care, services, or medical direction, is not liable to the recipient of the emergency care, services, or medical direction for any civil damages resulting from any acts or omissions by the person in rendering the emergency care, services, or medical direction provided the person is properly trained according to law. For the purpose of this section, "volunteer" means an individual who receives no compensation or who is paid expenses, reasonable benefits, nominal fees, or a combination of expenses, reasonable benefits, and nominal fees to perform the services for which the individual volunteered,

provided that the fees do not exceed twenty-four hundred dollars in any calendar year. For a volunteer ~~physicians~~ physician providing medical direction to ~~prehospital~~ an emergency medical services operation, the twenty-four hundred dollar maximum fees amount is ~~to be~~ calculated separately for each ~~prehospital~~ emergency medical ~~service~~ services operation for which the physician volunteered medical direction. This section does not relieve a person from liability for damages resulting from the intoxication, willful misconduct, or gross negligence of the person rendering the emergency care or services.

**SECTION 6. AMENDMENT.** Section 23-27-04.2 of the 1999 Supplement to the North Dakota Century Code is amended and reenacted as follows:

**23-27-04.2. ~~Prehospital emergency~~ Emergency medical services - State assistance.** The state department of health shall assist in the training of personnel of certain ~~prehospital~~ emergency medical services operations as determined by the department and financially shall assist certain ~~prehospital~~ emergency medical services operations as determined by the department in obtaining equipment. Assistance provided under this section must be within the limits of legislative appropriation. The department shall adopt criteria for eligibility for assistance in the training of personnel of various types of ~~prehospital~~ emergency medical services operations. To qualify for financial assistance for equipment, ~~a prehospital~~ an emergency medical ~~service~~ services operation shall certify, in the manner required by the department, that the ~~service operation~~ services operation has fifty percent of the amount of funds necessary for identified equipment acquisitions. The department shall adopt a schedule of eligibility for financial assistance for equipment. The schedule must provide for a direct relationship between the amount of funds certified and the number of responses during the preceding calendar year for the purpose of rendering medical care, transportation, or both, to individuals who were sick or incapacitated. The schedule must require that as the number of responses increases, a greater amount of funds certified is required. The schedule must classify responses and the financial assistance available for various classifications. The department may establish minimum and maximum amounts of financial assistance to be provided ~~a prehospital~~ to an emergency medical ~~service~~ services operation under this section. If applications for financial assistance exceed the amount of allocated and available funds, the department may prorate the funds among the applicants in accordance with criteria adopted by the department. No more than one-half of the funds appropriated by the legislative assembly

each biennium and allocated for training assistance may be distributed in the first year of the biennium.

**SECTION 7. AMENDMENT.** Section 23-27-04.3 of the 1999 Supplement to the North Dakota Century Code is amended and reenacted as follows:

**23-27-04.3. Emergency medical services personnel training, testing, certification, licensure, and quality review.** The state health council shall adopt rules prescribing minimum training, testing, certification, licensure, and quality review standards for emergency medical services personnel. Rules adopted must include a definition of minimum applicable standards, a definition of emergency medical services personnel, provide for a mechanism for certifying or licensing persons who have met the required standards, and provide a mechanism to review and improve the quality of care rendered by emergency medical services personnel. Quality review and improvement information, data, records, and proceedings are not subject to subpoena or discovery or introduction into evidence in any civil action.

**SECTION 8. AMENDMENT.** Section 23-27-04.4 of the 1999 Supplement to the North Dakota Century Code is amended and reenacted as follows:

**23-27-04.4. Supervision of certified or licensed emergency service hospital personnel.** Certified or licensed emergency medical technicians-intermediate and paramedics, who are employed by a hospital and who are working in a nonemergency setting are under the supervision of the hospital's patient services management.

**SECTION 9.** Section 23-27-04.5 of the North Dakota Century Code is created and enacted as follows:

**23-27-04.5. (Effective through June 30, 2003) Quick-response unit service pilot program.** The department shall create and implement a pilot program that creates incentives for basic life support ambulance services and advanced life support ambulance services to convert to quick-response unit services or create quick-response units in areas not already served. During the first year of the program, a maximum of five new quick-response units may receive a one-time five thousand dollar grant under this program and a maximum of twenty converting ambulance services may receive grants in the amount of five thousand dollars each year for a two-year period. During the second year of the program, the department shall distribute any remaining funds to converting ambulance services or to ten additional newly created quick-response units.

1           **SECTION 10. APPROPRIATION.** There is appropriated out of any moneys in the  
2 health care trust fund, not otherwise appropriated, the sum of \$225,000, or so much of the sum  
3 as may be necessary, to the state department of health for the purpose of funding the  
4 quick-response unit service pilot program, for the biennium beginning July 1, 2001, and ending  
5 June 30, 2003. The moneys appropriated must be made available by the office of  
6 management and budget as requested by the state department of health to pay for the actual  
7 costs of the pilot program.