2011 SENATE HUMAN SERVICES

SB 2220

2011 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee

Red River Room, State Capitol

SB 2220 1-24-2011 Job Number 13305

☐ Conference Committee

Committee Clerk Signature 70	Moder
Explanation or reason for introd	uction of bill/resolution:
Relating to performances standard	ds for emergency medical services.
Minutee	Attachments included

Senator Gerald Uglem, Vice Chairman, opened the hearing on SB 2220.

Senator Jerry Klein (District 14) introduced the bill and explained that it was the result of discussions he had during the summer and fall. The ambulance service has come a long way and the volunteers are neighbors and friends. They train for many hours to become certified and to maintain their certification. This issue was before the Administrative Rules Committee this past summer. These rules have been in effect since October 2010. That's when the concerns started being discussed. He provided information on response times. Attachment #1 He spoke about the different categories and the concerns with maintaining the standards.

Representative Robin Weisz (District 14) spoke in favor of SB 2220. He didn't feel there is ever an issue with the ambulances not responding as quickly as possible. The concerns are particularly in the very rural areas.

Senator Spencer Berry asked if there were major problems that made adding "not" necessary.

Rep. Weisz wasn't aware of anything specific outside of the concern that some had when they became aware of the rule.

Senator Spencer Berry asked if there would be a monitoring system that would go into place to check the response times.

Rep. Weisz replied that, if there were complaints because of the response time, he thought the health department would look at it.

There was discussion on the good job the ambulance services do.

Sherril Houser, McClusky Rural Ambulance District, testified in support. Attachment #2 also includes letters of concern and signatures supporting SB 2220.

Tom Nehring (Department of Health) opposed SB 2220. Attachment #3

Senator Gerald Uglem asked if there were any specific ambulance squads that had a problem meeting the 10 min. out of the door.

Mr. Nehring responded there was one in the urban response time that has had some difficulty. They are working with that one to help them meet response time.

Discussion followed that the intent would not be to pull licenses. There is no difficulty in ND meeting the response time standards. The response times and the differences in the categories were explained by Mr. Nehring as well as issues affecting response times.

Senator Spencer Berry asked why it is being perceived as a problem if everyone is in compliance.

Mr. Nehring didn't know. He didn't think the response time was creating an issue. Urban has more difficulty than rural and frontier.

Discussion followed on the rules brought to the Administrative Rules Committee.

Senator Gerald Uglem pointed out that these rules specify that the person on call should be within 10 minutes of the ambulance garage. He didn't feel that was unreasonable.

Mr. Nehring gave examples of alternatives to try to accomplish the quickest response time possible. He explained the fragmented response which is one of those. The most important thing is that the patient is taken care of as quickly as possible and gotten to definitive care as quickly as possible.

Ken Tupa (ND EMS) testified in opposition. He pointed out that the response time standards were directive from the legislature. HB 1162 in 2007 directed EMS to study "minimum requirements of reasonable EMS coverage which must take into account the response times for EMS." This resulted in SB 2050 in 2009 which was an interim study and an interim bill where response times were included in the standards for ambulance operators. Following that were the rules. They feel these standards are achievable, responsible, and that these standards also help determine the definition of reasonable EMS in ND. They help identify coverage needs.

Senator Judy Lee asked (1) if all the emergency service providers belong to the Association, and (2) how many of them are actually active in the work of the Association, and (3) how do they include people who are the emergency service providers in areas that find they don't have the time to participate in the Association activities.

Mr. Tupa didn't have the specific numbers. As far as communication there is regular e-mail communication, a newsletter, website communication, and regional meetings.

Senate Human Services Committee SB 2220 1-24-2011 Page 3

Mr. Nehring explained what the health department did with regard to rule changes. They followed the formal process for rule change and beyond that they also had it on their website for 13 mos. The information was sent to every squad leader within the state of ND. A newsletter was started within the division which included articles dealing with rule changes. He had talked about the rule changes at the town hall meetings. At times there is a communication disconnect but they are trying to correct that.

The hearing on SB 2220 was closed.

Committee discussion: Having the standards can help a squad that is having trouble, qualify for a grant. They won't be shut down. Some areas of the state have some real challenges in trying to meet any kind of time frame. But the frontier areas had a better response rate than the bigger cities.

Senator Gerald Uglem reported that there is a large EMS bill in the House dealing with statewide funding and service areas – HB 1044. He thought that might be a better place to address this if it needs addressing.

Continued discussion was that this has already been studied. If the timeframes are eliminated at some time we are providing a different level of care. This would allow intervention into those few areas that might be having trouble meeting the guidelines.

Attachment #4 is HB 1162 which was passed in the 2007 session and established that the times needed to be there.

Senator Gerald Uglem moved a Do Not Pass.

Seconded by Senator Dick Dever.

Roll call vote 5-0-0. **Motion carried**.

Carrier is **Senator Gerald Uglem**.

Date:	1-24-2011
Roll Call	Vote #

2011 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. 2220

Se	enate HUMAN SERVIC	ES_			Committee
	Check here for Conference Cor				
Le	egislative Council Amendment Numb	er			
	ction Taken: Do Pass 🔀 [Pass	Amended Adop	ot Amendment
	Rerefer to App	oropriati	ons 	Reconsider	
ין	Motion Made By Sen. Uglem		Se	conded By Sen. Dev	
ſ	Senators	Yes	No	Senators	Yes No
	Sen. Judy Lee, Chairman	V	· · · · ·	Sen. Tim Mathern	V
	Sen. Gerald Uglem, V. Chair	V			
	Sen. Dick Dever	V			
	Sen. Spencer Berry	1			
	Total (Yes)			No <u>Ø</u>	
	Absent	<u> </u>			
	Floor Assignment	~_/	lgle	m	
	If the vote is on an amendment, b	riefly inc	licate ir	itent:	

Com Standing Committee Report January 24, 2011 4:31pm

REPORT OF STANDING COMMITTEE

Module ID: s_stcomrep_14_003

Carrier: Uglem

SB 2220: Human Services Committee (Sen. J. Lee, Chairman) recommends DO NOT PASS (5 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2220 was placed on the Eleventh order on the calendar.

2011 TESTIMONY

SB 2220

#!

- b. Has arrived at the scene.
- C. Has left the scene.
- d. Has arrived at the transport destination.
- e. Is available for the next ambulance run.
- 5. An ambulance may respond to the scene of an emergency with a fragmented crew if:
 - a. Any crewmember that is responding to the scene separately from the ambulance has a hand-held radio capable of transmitting and receiving radio traffic on frequencies designated for ambulances by state radio.
 - b. The crewmembers communicate with each other by radio to ensure that a full crew will ultimately arrive at the scene of an emergency and be able to treat and transport patients.
- During the transport phase of an emergency ambulance run, the ambulance must give a report on the patient's condition to the receiving hospital as soon as it is practical. Early notification to the receiving hospital will allow the hospital more time to prepare for the patient's arrival.

History: Effective July 1, 2010.

General Authority: NDCC 23-27-04

Law Implemented: NDCC 23-27-04

33-11-01.2-17. Response times.

- 1. Ground ambulances must meet the following response time standards ninety percent of the time:
 - a. The time of dispatch to the time that the ambulance is en route must not exceed ten minutes.
 - b. Within the city limits of Bismarck, Fargo, Grand Forks, Mandan, Minot, and West Fargo the time from dispatch to the arrival on scene must not exceed nine minutes.
 - c. In rural areas as defined by the United States census and frontier area ambulance services that respond to interstate 94, interstate 29, United States highway 2, or United States highway 83 between Bismarck and Minot, the time from dispatch to the arrival on scene must not exceed twenty minutes.

- d. In frontier areas as defined by the United States census, the time from dispatch to the arrival on scene must not exceed thirty minutes.
- 2. Failure to meet response time standards when calculated in the two-year licensure period will require the ambulance service to develop a comprehensive plan of correction approved by the department which would include:
 - a. An analysis of the barriers to achieving the response time standard.
 - b. A plan to remove or minimize all barriers that have been identified.
 - c. Placing a notice in the official county newspaper notifying the public of the ambulance service's response time deficiency in the format determined by the department.

History: Effective July 1, 2010; amended effective October 1, 2010.

General Authority: NDCC 23-27-04 Law Implemented: NDCC 23-27-04

33-11-01.2-18. Strike team designation. No ambulance service licensed under this chapter may hold itself out as an ambulance strike team unless it is so designated by the department.

History: Effective July 1, 2010. General Authority: NDCC 23-27-04 Law Implemented: NDCC 23-27-04

33-11-01.2-19. Mutual aid agreements. Each licensed ambulance service must have at least one mutual aid agreement with a neighboring licensed ambulance service that can assist when its operational capacity is exceeded. A copy of each mutual aid agreement shall be maintained in the files of each licensee.

History: Effective July 1, 2010. General Authority: NDCC 23-27-04 Law Implemented: NDCC 23-27-04

33-11-01.2-20. Disaster plan. Each licensed ambulance service must complete the disaster plan template as published by the department with appropriate local information. A copy of the completed disaster plan must be placed in each ambulance and one copy must be sent to the department. The disaster plan may include specialized equipment or supplies as required in the state emergency medical services disaster plan as published by the department.

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History: Effective July 1, 2010. General Authority: NDCC 23-27-04 Law Implemented: NDCC 23-27-04 Chairman, and Committee Members, thank you for letting me read this today...

I am Sherril Houser, I serve as President of the McClusky Rural mbulance District. I am speaking for rural ambulance services and concerned citizens of Rural North Dakota. I-also have letters to you from folks in support of this bill.

Last Monday I found out about Bill 2220. This weekend I decided I needed to make some calls to other squads. And then last night, I received an email from NDEMSA it states:

In regards to this Senate Bill 22-20 EMS Advisory Committee voted NOT to support this bill. And that data shows that services are already meeting the response time requirements...The committee felt this would be a step backward. And decreasing standards is not in the best interest for citizens of North Dakota.

This email was from our President of the NDEMSA...As a rural EMT I want to let you know I <u>DO</u> support Bill 22-20. I also have letters to you pm folks in support of the bill.

First----The emails as EMS advisory committee came to this decision of NOT supporting Bill 22-20 by talking to who... it wasn't our squad or any squads that I spoke with this weekend in regards to this Bill. And I contacted a lot of people across the state.

Second---The many people I conversed with this weekend had NEVER HEARD of this response time requirement. Let alone having been asked by the EMS Advisory Board on how their squad felt about it. I never knew anything about this requirement until last speng, when one of our squad members stumbled across the Legislature's Bill. It'd already been passed.

This is the reason no one was here debating this new 10 minute requirement the last Legislature session, when it was passed, is because were not aware of it....The squads I spoke to have the majority of their uad members living further than 10 minutes away from the ambulance bay. And had they known about this new requirement being debated, they'd have been here sharing their concerns.

Thirdly--- The email from NDEMSA states that the services are already meeting this 10 minute requirement. A requirement that most squads didn't even know existed...

Why does it have to be a requirement by law to get licensure then? The squads I spoke to have the majority of their squad members living further than 10 minutes away from the ambulance bay. They told me # 10 minute response time is not practical. And that's why we are not supporting it. It is not because we want to see North Dakotans standards decreased. Our squad takes pride in going above and beyond our call of duty.

requirement 90% of the time. They were livid. This would cost the squads time and money. We are already short on both of them.

Concluding I want to say--- Please, don't make it harder for our services...We are struggling already to stay afloat...We have enough gulations... Enough paperwork... Enough meetings to attend...Enough required Continuing Education hours to fullfill...

We drop everything we are doing at the sound of that beeper going off... we race around our farmyard, home or office and shut down everything, in order to leave, we rush to get dressed for the weather, and we rush to the vehicle, our minds race to try to figure out what the scene we are rushing to will be like...in our rural areas it is usually someone we you know or may be related to...We drive faster than we should to the ambulance bay... we have deer to watch for in the darkness, thick fog to drive through or blizzard conditions to plow through. We push the limits of safety, despite knowing better, we drive way too fast to get to that ambulance bay.... No one that I am aware of is trying to get to the bay last--- we are all trying to get there first... not because it is required to keep our licensure, but because someone needs us.... we take pride in giving our patients the best pre-hospital care possible and as quickly as possible..... We have ough pressure on us when that beeper goes off.

This 10 minute requirement is just another added pressure... I ask that Bill 22-20 be passed, which would take this 10 minute response time away from being a requirement for licensure.... THANK YOU.

Signatures

WILLIAM STATE THE HOUSE



From: CHERYL (REILE) HELM (kch@westriv.com)

Sent: Sun 1/23/11 5:40 PM

To: Sherril Houser (dhousertrucking@hotmail.com)

Dear Chairman Judy Lee and Committee Members,

As someone that is dependent on our rural ambulance service, we would like to show our concern to you in regards to the Bill 2220. This is concerning the 10 minute response time requirement of the performance standards for Licensure. We stand behind our local squad members in supporting this bill. And would like to see this bill passed by the legislature. We feel that our local service is already performing to the best of their ability, as quick a response time as possible. And that their licensure should not be dependent on this time requirement.

Thank You,

Name: Cheryl Helm and Kerry Helm



Address:630 6th Ave NE McClusky, ND 58463

Telephone: 701-363-2292

Delete Prev Next Reply/All Forward/Inline Open Inbox 8 of 8 Inbox Draft Sent Trash

1/23/2011 5:55 Pt

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as quick a response time as possible. And that their licensure should not be dependent on this time requirement. Thank You,

Name: Kevin Korus

Address: 1340 4th St NE; Denhoff, NE

58430

Telephone: 701-884-2435

As someone that is dependent on our rural ambulance service, we would like to show our concern to you in regards to the Bill 2220. This is concerning the 10 minute response time requirement of the performance standards for Licensure. We stand behind our local squad members in supporting this bill. And would like to see this bill passed by the legislature. We feel that our local service is already performing to the best of their ability,

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Name: Sherry Korus

Address:1340 4th St NE; Denhoff ND 58430

Telephone:

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as quick a response time as possible. And that their licensure should not be dependent on this time requirement. Thank You,

Name: Terry Sparrow

Address: 430 Highway 200, NW

McClusky, ND 58463

Telephone: 701-447-2446

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Name: Deb Sparrow

Address: 430 Highway 200, NW

McClusky, ND 58463

Telephone: 701-447-2446

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as quick a response time as possible. And that their licensure should not

be dependent on this time requirement.

Thank You,

Name: Mary Feickert

Address: 1960 21st ST NE Martin ND 58758

Telephone: 701-693-2385

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Thank You,

Name: Laurie Brackett

Address: 394 Hwy 200 NE

McClusky, N. Dak. 58463

Telephone: 701-363-2507

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Thank You,

Name: Martha Houston

Address: 302 2nd St E, McClusky, ND 58463

Telephone: 701.363.2229

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as quick a response time as possible. And that their licensure should not

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Thank You,

Name: Wayne Houston

Address: 302 2nd St East, McClusky, ND 58463

Telephone: 701.363.2368

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Thank You,

Name: Kelly Feickert

Address: 1960 21st ST NE Martin ND 58758

Telephone: 701-693-2385

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Thank You,

Name: Phyllis Dieterle

Address: 661 22nd St NE, Kief, ND 58723

Telephone: 701-626-7470

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Thank You,

Name:

Joe & Alison Nelson

Address:

14301 471st Ave NE McClusky, ND 58463

Telephone: 701-286-6217

Name:	Address:	Telephone:
Marlone Linne	MC Clusky	363-26/2
Name:	Address:	Telephone:
Robert a Number 18		363.2483
Name:	Mellusky N.D.	Telephone:
Irene newharth	ma clusty	363-2483
Name:	Address:	Telephone:
Ed Parsce Name:	166 2 ml S. M Address:	363-2768 Telephone:
Long Boxo	Po.BXX391 mcclusky	

Name:	Address:	Telephone:
TAMMY L. Mordquist	1660 3 Ave NW Mercer, N.D 58559-9424	101-363- 2598
Name:	Address:	Telephone:
Tiola Henne	PO BOT 317 110 3 N & Mc Clushy, 7 0' 5846 3	101-363- 2644
Name:	Address:	Telephone:
Jan & Monsteel	1660 3 Doe NW Mereor N D 58559	25°98
Name:	Address:	Telephone:
Lauvie Macks	113 E Intentation Billhard ND 5803	
Nam <i>e1</i>	Address:	Telephone:
1 roy Krein	1713 EROSS er #5 Bismarck W.D 58801	(701) 224-9390

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ne: Jan DeKrey

Address: 4323 27th St. SE, Tappen, ND 58487

Telephone: (701) 273-4844

Name:	Address:	Telephone:
Luis Sease	m = Chisky n, Dak	363-2617
Name:	Address:	Telephone:
Ralph Siare	mc clusky v D	36376d
Name:	Address:	Telephone:
Sage Whilithis	McClusky, ND	301 - 1274
Name:	Address:	Telephone:
Mildred Swendson	m=Clusky	363-2304
Name:	Address:	Telephone:
Bertrice Frochlich	Moderby n. Sak.	366-3696

Name:	Address:	Telephone:
Jessica Bauer	Po Box 624 McClusky	701-303-222
Name:	Address:	Telephone:
marycayla Erdnann	mcciusky	701-341-7110
Name:	Address:	Telephone:
Willie Ness	In Columby	
Name:	Address:	Telephone:
Dewayne Huschkom	McClusky ND	701- 368-2815
Name:	Address: A	Telephone:
Mary Snyder	mc Clusky n.D	901-363-2741

Name:	Address:	Telephone:
Drig Stown	17. Thy 20 1M = audy	701-343-2781
Name:	Address:	Telephone:
Shuil Anon	1714huz 200 NM M-Clushy	70/-363-2781
Name:	Address:	Telephone:
Lonne Daws	Hankinson ND	701- 242-9894
Name:	Address:	Telephone:
Le ane Schlefran	180 1st AUR NW Mc Clustry, NA 58463	101-363-2349
Name:	Address:	Telephone:
Dallas Henring	Me Clusher MD 58463	101 363-2546

Name:	Address:	Telephone:
Down Habadal	HILM STE McClusky ND	363-2866
Name:	Address:	Telephone:
g.fcall-	McChary ND	363 2126
Name:	Address:	Telephone:
Kint Li rectamen	Mcclusky, ND	365-2779
Name:	Address:	Telephone:
nobelt John	119 2NA STE McCLUSKY NA	363 - 2365
Name:	Address:	Telephone:
Delra materson	Mc Chary ND	363-2779

Name:	Address:	Telephone:
Kelly beconen	40 Ave BE McClusty ND S8463	761-363-9200
Name:	Address:	Telephone:
Toni Larson	PO BOX 284 ND McClusky 58463	WA
Name:	Address:	Telephone:
June Mauch	1740 and ST. S.E. Goodrich, N.D.	N/A
Name:	Address:	Telephone:
Name:	Address:	Telephone:
Buan Com	BZI Nam St S Mc Clusky ND 58467	363-2391

Name:	Address:	Telephone:
Marvin	607 2 NO S + W Apt 14 Mc Cluster, ND S	701-363- 2616
Name:	Address:	Telephone:
Mieder	McClusky, ND SSY	

#3

Testimony Senate Bill 2220 Senate Human Services Committee Monday, January 24, 2011; 10:15 a.m. North Dakota Department of Health

Good morning, Chairwoman Lee and members of the Human Services Committee. My name is Tom Nehring, and I am the director of the Division of Emergency Medical Services and Trauma for the North Dakota Department of Health. I am here today to testify in opposition of Senate Bill 2220.

Using response times as a performance standard is a cornerstone of accepted Emergency Medical Services (EMS) practice across the United States. This standard is not only used for EMS, but for other public safety entities and is used to strategically position resources so the public is ensured a timely response by those trained to protect them. In North Dakota, time of response is used as a foundation to accomplish the definition of reasonable EMS throughout the state.

EMS personnel respond to illnesses and injuries that are time sensitive. In situations that involve medical emergencies such as heart attacks, cardiac arrest, diabetes, stroke and many other potential life threatening situations, the time it takes the ambulance to arrive on the scene can truly be the difference between life and death. In trauma situations, it is well documented that the "Golden Hour" – the hour from the onset of injury to receiving definitive care at a trauma hospital –is essential for survival.

In emergencies, ambulance response time is just one part of a time continuum throughout the health-care system to achieve optimal care of persons suffering acute illness or injury. The sum of all the parts (recognition and notification of an emergency, ambulance response time, prehospital treatment and transport, care rendered at the hospital, possible transport to a larger hospital, definitive care and rehabilitation) will only be as strong as the weakest link.

Setting standards for response times ensures that EMS services are trained and prepared to respond as fast as possible, and ensures the patient's best possible outcome. When responding to an emergency, minutes can be the difference between life and death.

Current performance standard statistics prove that ambulances can and do meet the standards in place for response times. The response time standards in North Dakota are:

- Nine minute response time in urban communities, 90 percent of the time in Fargo, Bismarck, Grand Forks, Minot, Mandan and West Fargo.
- Twenty minute response time in rural communities as well as frontier services along major highway routes, 90 percent of the time.
- Thirty minute response times in frontier areas (areas with less than six people per square mile), 90 percent of the time.

Currently, ambulance services meet the standards a vast majority of the time. Information collected from ambulance run data shows that for frontier ambulances, their response time of less than 31 minutes is met 98.33 percent of the time. For rural ambulances, their response time of less than 21 minutes occurs 90.49 percent of time. In urban areas, the response time of nine minutes is met 89 percent of the time. These numbers illustrate that frontier and rural ambulances currently are able to comply with the standards. There is one urban community we are working with to decrease response times which would put the overall urban response time at 92.1 percent. Taking response times out of the performance standards may cause those percentages to drop.

Removal of performance standards would be a setback in the progress of attaining the best possible EMS system throughout the state. This standard, along with training standards, treatment protocols, equipment standards and appropriate ambulance crews all have been established to give the citizens of the state a reliable, timely, well-trained system of emergency response they expect. Eliminating response time standards would be step back and would threaten a system that has taken 40 years to create and build within our state.

In addition, the EMS Advisory Committee of the Division of Emergency Medical Services and Trauma recognizes the importance of response times as a performance standard and has gone on record in opposition to the removal of the response time performance standard.

This concludes my testimony. I am happy to answer any questions you may have.

Sixtieth Legislative Assembly of North Dakota In Regular Session Commencing Wednesday, January 3, 2007

HOUSE BILL NO. 1162 (Representatives Haas, D. Johnson, Monson, Schmidt) (Senators J. Lee, Warner)

AN ACT to create and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to a state health council study of emergency medical services, county reporting of emergency medical services coverage, and use of property tax levies for emergency medical services; to amend and reenact section 14-10-17.1 of the North Dakota Century Code, relating to consent for a minor to receive emergency medical care; and to provide for a report to the legislative council.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. AMENDMENT. Section 14-10-17.1 of the North Dakota Century Code is amended reenacted as follows:

14-10-17.1. Minor's emergency care. Any A minor may contract for and receive emergency examination, care, or treatment in a life-threatening situation without permission, authority, or the consent of a the minor's parent or guardian. If a minor has an emergency medical condition or the potential for an emergency medical condition, consent to emergency examination, care, or treatment of the minor is implied if reasonable steps to contact the minor's parent or guardian are unsuccessful. This section does not authorize a minor to withhold consent to emergency examination, care, or atment.

SECTION 2. A new section to chapter 23-27 of the North Dakota Century Code is created and enacted as follows:

Study of standards of reasonable coverage - County reporting - Use of property tax levies.

- During the 2007-08 interim, the state health council shall study the minimum requirements of reasonable emergency medical services coverage which must take into account the response time for emergency medical services. Before July 1, 2008, the state health officer shall report to the legislative council the outcome and recommendations of this study.
- The board of county commissioners of every county in this state shall conduct an annual review of the emergency medical services coverage within that county and shall submit an annual report to the state health officer in a format approved by the state department of health.
- 3. A taxing district that levies property taxes for support of emergency medical services shall ensure that every emergency medical services operation that operates in that taxing district receives a benefit of this tax.