



Testimony
Senate Bill 2100
House Human Services Committee
Monday, March 10, 2025
North Dakota Emergency Medical Services Association

Good afternoon, Chairman Ruby and members of the committee. My name is Adam Parker, I am the co-chair of the North Dakota Emergency Medical Services Association's Advocacy Committee. The Association **strongly opposes** SB 2100.

I. This bill seeks to eliminate a requirement that has been debated and discussed for a decade by EMS stakeholders and has consistently been the prevailing idea to ensure quality EMS Education.

Every time the discussion on quality EMS Education is had, ideas are discussed, a healthy debate ensues, and the prevailing idea among stakeholders is to require alignment with training institutes. The proponent of this bill even admitted in his testimony on the Senate that this might be the best idea. It is. Because this is not a new discussion, and we have heard the arguments before. The proponents primary concern is regarding the implementation of the requirement. The EMS Association does not share these concerns.

This bill would tie the hands of the department from making necessary advances in education and ensure the status quo, or worse.

II. The impact of the new rule is greatly exaggerated because limited instructors are not already aligned, and most students are already taught by training institutes and the barrier to entry is low for training institute licensure.

A. The rule impacts would impact only fifteen actively teaching instructors which teach approximately 21% of students.

Information provided by the Department indicates that only 15 actively teaching instructors are not already aligned with a training institute. Furthermore, of recently licensed students, 79% of all students are taught by training institute or training institute aligned instructors.

B. Instructors or agencies can easily become a training institute to meet the requirements of the new rule.

There are 21 training institutes currently licensed, at least 6 of which have been added since the new rule. Licensing requirements are contained in N.D.A.C 33-36-02. Most requirements are necessary even if teaching independently, such as agreements with clinical sites. Other requirements aren't required when teaching independently, but hard to argue, such as



insurance and student handbooks. Upon request, many training institutes will send all the necessary materials (handbooks, policies, etc.) to any prospective training institute. This further reduces the burden of becoming an institute.

Instructors and agencies have flexibility under the new rule to either align or create a training institute. Contrary to some proponents claims the rule regionalizes training, the rule does no such thing. The EMS Association would oppose such regionalization, as we have with other concepts of regionalization of EMS Agencies. Agencies should have the flexibility to implement what is best for their circumstances, and the new rule was carefully crafted, and the EMS Association will continue to advocate during the training institute rule-making process, to accomplish that goal.

C. There is no negative impact because no course has been denied since the implementation of the rule.

Thirty-eight (38) percent of current courses are taught by instructors without a formal training institute affiliation. No course has been denied by the department because of a lack of training institute affiliation. Until the training institute rules are adopted, which would define “affiliate,” the Department has broadly interpreted the word to allow instructors who are not formally affiliated to continue to teach courses. Furthermore, the timing of instructor recertification has further ensured that the alignment rule can be successfully implemented without negative impacts. The Department’s position on this has been widely communicated by both the Department and the EMS Association. So there is no negative impact of the new rule.

The EMS Association does not share the concerns of the proponents of this bill that there is, or will be, a negative impact because of the new rule. The EMS Association is confident that collaboration between the Association, the Department, and current training institutes will lead to successful implementation of the plan after the training institute rules are adopted.

III. The impact feared by the proponents is more likely to be realized if this bill passes.

The proponents of this bill fear the new rule will impede the ability to offer courses in rural areas. The opposite effect is more likely. There is significantly more flexibility allowed under this rule which is likely to have positive impacts on rural instructors’ ability to teach. For example, many rural instructors do not teach enough courses to remain current. However, affiliates of training institutes have more ability to remain current and be able to teach courses when they desire.

Independent instructors would have to have the Department do site surveys for every course they teach. We have routinely heard from our members regarding frustrations around scheduling and availability of the Department for these site surveys. The affiliation requirement addresses this issue and promotes more efficient administration of courses.

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IV. Conclusion

The EMS Association **strongly opposes** this bill because it is unnecessary and will impede any future progress on identifying education quality. Many training institutes that exist today are already affiliating with instructors or have offered to affiliate instructors at no cost. We are confident the decade-long idea can be successfully implemented and will not have the impact proponents fear.

We respectfully request the committee recommend a Do Not Pass on SB 2100. In the alternative, although the EMS Association feels unnecessary for the reasons already stated, the committee could amend the bill to preclude the enforcement of the alignment rule until after December 31, 2026.

Thank you for the opportunity to testify, I would be happy to answer any questions you may have.