

The Council

Legislative Management

The Legislative Management met on January 14 to consider arrangements for the special session to begin on January 21. The committee reviewed and approved proposed amendments of the [House and Joint Rules](#) and the [Senate and Joint Rules](#) recommended by the Legislative Procedure and Arrangements Committee. In addition, the committee approved the agendas for the 1st day of the special session for [the House](#) and [the Senate](#).

The Legislative Management received the reports of the Rural Health Transformation and Legislative Procedure and Arrangements committees. As part of the report of the Legislative Procedure and Arrangements Committee, the Legislative Management approved revisions to the [Legislative Assembly Policy Against Workplace Harassment](#).

Higher Education Funding Review Committee

On January 14, the interim Higher Education Funding Review Committee held its third meeting of the interim to receive information regarding funding for the University of North Dakota School of Medicine and Health Sciences, and to discuss potential enhancements or alternatives to the higher education funding formula. The committee considered but made no recommendation regarding potential funding formulas based primarily on full-time equivalent student enrollment and on-campus face-to-face student enrollment. The committee also received information regarding state funding provided to higher education institutions for dual-credit courses completed by high school students.

Upcoming Meetings

February

- 23** Child Custody Review Task Force
- 25** Emergency Response Services

March

- 26** Water Topics Overview
- 31** Agriculture and Water Management



Rural Health Transformation Committee

On January 13-14, the Rural Health Transformation Committee met to review the results of the state's grant application for the federal Rural Health Transformation Program. On December 29, 2025, the state was notified of the results of its grant application. The state was awarded \$198,936,970 to use for initiatives during federal fiscal year 2026. The state must obligate the funds awarded by October 30, 2026, and spend the funds by September 30, 2027. Any funds not obligated or spent by the deadlines revert to the federal government. The following major initiative areas were included in the grant application, including the percentage of the total grant award allocated to each initiative area and components included in each initiative:

Initiative	Percent of Total Budget	Components
Bring high-quality care closer to home	58.4%	Coordinating and connecting care, ensuring transportation, ensuring safety net service delivery, providing clinics without walls, sustaining revenue, and rightsizing rural care
Connect technology, data, and providers	16.8%	Supporting consumer-focused applications, harnessing new technology, purchasing cooperative technology and infrastructure, and breaking data barriers
Strengthen and stabilize rural health workforce	16.2%	Training for existing workforce, developing technology as an extender, improving retention, and expanding rural training opportunities
Make North Dakota healthy again	8.6%	Investing in value, building connections and resiliency, and establishing a North Dakota Moves Together Program and an Eat Well North Dakota Program

The committee recommended the following bill drafts relating to initiatives in the state's grant application to the Legislative Management for consideration during the January 2026 special legislative session:

- A bill draft to require schools to utilize the Presidential Physical Fitness Test.
- A bill draft to require a nutrition component for physician continuing education requirements.
- A bill draft for the state to join a physician assistant licensure compact.
- A bill draft to expand the scope of practice for pharmacists relating to laboratory testing and prescriptive authority.
- A bill draft to appropriate estimated federal grant funds to be received in federal fiscal years 2026 and 2027 and to provide various exemptions and provisions to allow DHHS to obligate and spend the funds within the federal deadlines.



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