

2025 SENATE HUMAN SERVICES

SB 2033

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2033
1/8/2025
9:31 a.m.

Relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

9:31 a.m. Chairman Lee called the meeting to order.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers. No members absent.

Discussion Topics:

- Compliance of ambulance services
- Availability of Ambulances
- Reimbursement of costs
- Accountability
- Failure to respond

9:32 a.m. Senator Roers testified in favor.

9:33 a.m. Bill Colonic, Ems services, testified in favor.

9:33 a.m. Adam Parker, Chair of ND EMS Association, testified in favor.

10:12 a.m. Christopher Price, Department of Health and Human Services, testified in favor and submitted testimony #28156.

10:17 a.m. Representative Robin Weisz, testified in favor.

10:26 a.m. Chairman Lee adjourned the meeting.

Andrew Ficek, Committee Clerk



Testimony
Senate Bill No. 2033
Senate Human Services Committee
Senator Lee, Chair
January 8, 2025

Chairperson Lee, and members of the Senate Committee, I am Chris Price with the Department of Health and Human Services (Department). I appear before you in support of Senate Bill No. 2033 which seeks to address the pressing issue of distressed ambulance services within our state.

Emergency medical services (EMS) are a cornerstone of public health and safety, providing timely and life-saving care to individuals in need. Yet, rural and underserved communities in North Dakota face unique challenges in maintaining reliable ambulance services. Staffing shortages, financial constraints, and operational difficulties have the potential to place many EMS agencies at risk of failure, creating gaps in service and jeopardizing the health and safety of our residents.

Senate Bill 2033 represents a proactive, structured, and transparent solution to this critical issue by establishing the Distressed Ambulance Service Program. This program is designed to identify struggling ambulance services, assist them with corrective action, and ensure sustainable EMS delivery. I would like to highlight several key components of the bill that underscore its importance:

1. Identification and Accountability

The bill mandates the Department of Health and Human Services to identify EMS providers who fail to comply with federal or state regulations, indicate an intention to cease operations, or face significant service delivery challenges. This ensures that potential service disruptions are detected early, allowing timely intervention.

2. Collaborative Planning

Once an ambulance service is declared distressed, the program ensures the development of an Emergency Medical Services Plan.

This plan involves input from a diverse group of stakeholders, including local governments, medical facilities, adjacent EMS providers, and community members. This collaborative approach fosters local solutions tailored to the specific needs of the affected service area.

3. Transparency and Public Engagement

Public meetings are required at multiple stages of plan development to ensure community input and buy-in.

Transparency is critical to building trust among residents and stakeholders, particularly in rural areas where ambulance services are integral to public safety.

4. Financial and Administrative Support

The creation of the Distressed Ambulance Service Program Fund provides a dedicated funding source to support the program and cover many associated costs. However, it is important to acknowledge that there will be additional administrative expenses to implement and manage the program that may not be fully covered by the fund. While the fund significantly reduces financial

barriers, supplemental resources will be necessary to ensure the program's comprehensive and effective administration.

5. Protecting Public Health and Safety

The bill empowers the department to take necessary actions to safeguard public health if a distressed ambulance service fails to comply with an approved plan. This authority ensures continuity of service and mitigates risks to public safety.

6. Ongoing Monitoring and Reporting

Regular evaluations of plans and program outcomes, as well as interim reports to legislative management, ensure accountability and continuous improvement of the program.

In conclusion, Senate Bill 2033 equips the state with the tools necessary to support and sustain reliable ambulance services, particularly in rural and underserved areas. It demonstrates North Dakota's commitment to ensuring that no community is left without access to critical emergency care. By addressing the root

causes of service instability, this bill strengthens the EMS system and safeguards the well-being of our residents.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2033
1/8/2025
10:41 a.m.

Relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

10:41 a.m. Chairman Lee called the meeting to order.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers. No members absent.

Discussion Topics:

- Failure to respond
- Response time
- People per square mile

10:57 a.m. Senator Hogan moved a Do Pass.

10:57 a.m. Senator K. Roers seconded the motion.

Senators	Vote
Senator Judy Lee	Y
Senator Kent Weston	Y
Senator David A. Clemens	N
Senator Kathy Hogan	Y
Senator Kristin Roers	Y
Senator Desiree Van Oosting	Y

10:58 a.m. Motion Passed 5-1-0.

10:58 a.m. Senator Roers will carry the bill.

11:00 a.m. Chairman Lee closed the meeting.

Andrew Ficek, Committee Clerk

REPORT OF STANDING COMMITTEE
SB 2033 ([25.0113.02000](#))

Human Services Committee (Sen. Lee, Chairman) recommends **DO PASS** (5 YEAS, 1 NAY, 0 ABSENT AND NOT VOTING). SB 2033 was placed on the Eleventh order on the calendar. This bill does not affect workforce development.

2025 SENATE APPROPRIATIONS

SB 2033

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division Harvest Room, State Capitol

SB 2033
1/20/2025

A Bill to Act to create and enact chapter 23-27.2 of North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation

10:32 a.m. Senator Dever opened the hearing.

Members Present: Chairman Dever, Senators Cleary, Davison, Magrum, and Mathern

Discussion Topics:

- Staffing - FTE and Contracting
- Fiscal Note
- Creation of Distressed Ambulance Service Program
- Reevaluate Regulations
- Interim Study

10:32 a.m. Brady Larson, Fiscal Analyst, Legislative Council, clarified FTE positions and referenced fiscal note.

10:42 a.m. Tim Weidrich, Director, ND Health and Human Services, ND Health Response and Licensure, testified in favor.

11:04 a.m. PJ Ringdahl, Site Manager, Ringdahl EMS, ALS Ambulance Services testified in favor.

11:13 a.m. Senator Dever closed the hearing.

Joan Bares, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division Harvest Room, State Capitol

SB 2033
1/21/2025

A Bill for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

9:49 a.m. Chairman Dever opened the hearing.

Members Present: Chairman Dever, Senators Cleary, Davison, Magrum, and Mathern

Discussion Topics:

- New Ambulance Service Program Establishment/Rural Areas
- Volunteer Training
- FTE Funding

9:50 a.m. Chairman Dever led committee discussion on SB 2033 and recommendations for bill moving forward.

10:26 a.m. Chairman Dever closed the hearing.

Joan Bares, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division Harvest Room, State Capitol

SB 2033
1/29/2025

Relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation

2:37 p.m. Chairman Dever opened the hearing.

Members Present: Chairman Dever, Senators Cleary, Davison, Magrum, and Mathern

Discussion Topics:

- New Ambulance Service Program Establishment
- Volunteer Training
- Full-Time Employee Funding
- Contract Funding

2:37 p.m. Chairman Dever opened discussion.

2:49 p.m. Senator Davison moved a Do Not Pass.

2:50 p.m. Senator Magrum seconded.

Roll Call Vote:

Senators	Vote
Senator Dick Dever	Y
Senator Sean Cleary	Y
Senator Kyle Davison	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	N

Motion Passed 4-1-0.

Senator Magrum will carry the bill.

2:52 p.m. Chairman Dever adjourned the meeting.

Joan Bares, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations Committee Harvest Room, State Capitol

SB 2033
2/3/2025

A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

9:13 a.m. Chairman Bekkedahl opened the hearing.

Members Present: Chairman Bekkedahl, Vice-Chairman Erbele, and Senators Burckhard, Cleary, Conley, Davison, Dever, Dwyer, Magrum, Mathern, Meyer, Schaible, Sickler, Sorvaag, Thomas, Wanzek.

Discussion Topics:

- Staffing and Consultant Roles
- Staffing Challenges
- Intent of Policy Language

9:14 a.m. Senator Dever introduced the bill.

9:15 a.m. Senator Roers testified in favor.

9:32 a.m. Senator Dever moved to refer the bill back to the HR Division of Appropriations.

9:33 a.m. Senator Schaible seconded the motion.

Senators	Vote
Senator Brad Bekkedahl	Y
Senator Robert Erbele	Y
Senator Randy A. Burckhard	Y
Senator Sean Cleary	Y
Senator Cole Conley	Y
Senator Kyle Davison	Y
Senator Dick Dever	Y
Senator Michael Dwyer	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	Y
Senator Scott Meyer	Y
Senator Donald Schaible	Y
Senator Jonathan Sickler	Y
Senator Ronald Sorvaag	Y
Senator Paul J. Thomas	Y
Senator Terry M. Wanzek	Y

Motion Passed 16-0-0.

9:33 a.m. Chairman Bekkedahl closed the hearing.

Elizabeth Reiten, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division Harvest Room, State Capitol

SB 2033
2/4/2025

A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

3:30 p.m. Chairman Devers opened the hearing.

Members Present: Chairman Dever, Senators Cleary, Davison, Magrum, and Mathern

Discussion Topics:

- One -Time Funding
- Contracting Consultant

3:30 p.m. Senator Davison read amendment LC 25.0113.02003 and submitted testimony #35310.

3:33 p.m. Chairman Dever closed the hearing.

Joan Bares, Committee Clerk

25.0113.02003
Title.

Prepared by the Legislative Council
staff for Senator Davison
February 3, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO

SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

- 1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; ~~and~~ to provide an appropriation; and to provide a continuing appropriation.

4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

5 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
6 follows:

7 **23-27.2-01. Definitions.**

8 As used in this chapter:

- 9 1. "Department" means the department of health and human services.
10 2. "Distressed ambulance service" means a licensee the department has declared a
11 distressed ambulance service under section 23-27.2-05.
12 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
13 distressed ambulance service to deliver sustainable and reliable emergency medical
14 response and transport services to a patient within an assigned service area.
15 4. "Licensee" means an emergency medical services operation as defined in section
16 23-27-02.
17 5. "Program" means the distressed ambulance service program.

18 **23-27.2-02. Program creation and administration.**

- 19 1. The distressed ambulance service program is hereby created.
20 2. The department shall:

- 1 a. Carry out the administrative functions of the program;
- 2 b. Adopt rules necessary to implement this chapter and manage the program;
- 3 c. Take reasonable measures to ensure reliable ambulance response within a
- 4 distressed ambulance service's assigned service area;
- 5 d. Monitor the implementation of a response approved under section 23-27.2-04;
- 6 e. Monitor the implementation of a plan approved under section 23-27.2-06; and
- 7 f. Annually evaluate issued waivers.
- 8 3. The department may:
- 9 a. Issue waivers; and
- 10 b. Suspend or revoke a distressed ambulance service's license in accordance with
- 11 section 23-27.2-06.
- 12 **23-27.2-03. Licensee evaluation - Notice.**
- 13 1. The department shall identify and evaluate licensees that have:
- 14 a. Failed to comply with federal or state law or regulation;
- 15 b. Indicated an intention to cease operation or change licensure level within sixty
- 16 days; or
- 17 c. Indicated a substantial likelihood of failure to respond to requests for service.
- 18 2. Upon identification of a licensee that meets the criteria under subsection 1, the
- 19 department may provide notice, in accordance with subsection 3, to the licensee by
- 20 first-class mail. If provided, the notice must be sent to the:
- 21 a. Licensee;
- 22 b. Service leader of record;
- 23 c. Medical director of record; and
- 24 d. Political subdivision that has jurisdiction over the licensee, if applicable.
- 25 3. The notice must include:
- 26 a. The deadline for the licensee to respond in accordance with section 23-27.2-04;
- 27 b. If the licensee failed to comply with federal or state law or regulation, the law or
- 28 regulation violated;
- 29 c. A detailed description of the violation or noncompliance;
- 30 d. The corrective action that must be taken by the licensee; and
- 31 e. Any resources available to the licensee to assist in taking corrective action.

23-27.2-04. Licensee - Response.

1. A licensee that receives a notice under section 23-27.2-03 shall respond to the department within forty-five days of the date of the notice. The response must include:
 - a. The licensee's proposed corrective action to address the violation or noncompliance;
 - b. The licensee's proposed time frame in which to take corrective action and become fully compliant; and
 - c. If necessary, a request for a waiver.
2. Within fifteen days of the date of the response, the department shall:
 - a. Approve the response; or
 - b. Request the licensee amend the response.
3. The department may extend the deadline to respond if an amendment to the response is requested under subsection 2.

23-27.2-05. Distressed ambulance service - Declaration and notice.

1. The department may declare a licensee a distressed ambulance service if the licensee:
 - a. Failed to respond to the department in accordance with section 23-27.2-04;
 - b. Failed to make sufficient progress to address the violation or noncompliance described in the notice;
 - c. Failed to take corrective action in accordance with the approved response;
 - d. Indicated an intention to cease operation or change licensure level within sixty days; or
 - e. Indicated a substantial likelihood of failure to respond to requests for service.
2. The department shall provide notice of the declaration by first-class mail to the recipients under subsection 2 of section 23-27.2-03. The notice must include the department's basis for the declaration.

23-27.2-06. Distressed ambulance service - Procedure - Plan.

1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.

- 1 2. The emergency medical services plan must:
- 2 a. Include a detailed planning and implementation timeline to deliver sustainable
- 3 and reliable emergency medical response and transport services to a patient
- 4 within the assigned service area;
- 5 b. Evaluate the impact on the assigned and adjacent service areas; and
- 6 c. Consider input from stakeholders, including:
- 7 (1) The distressed ambulance service;
- 8 (2) The political subdivision that has jurisdiction over the distressed ambulance
- 9 service;
- 10 (3) The county and city governments within the service area;
- 11 (4) Licensed medical facilities;
- 12 (5) Adjacent ambulance services;
- 13 (6) Other emergency medical services within the service area; and
- 14 (7) Other interested parties.
- 15 3. The coordinator shall present a proposed plan at a public meeting held in the
- 16 distressed ambulance service's assigned service area within thirty days of the date of
- 17 assignment. The coordinator shall allow stakeholders and the public the opportunity to
- 18 provide input relating to the plan.
- 19 4. The coordinator shall present a final plan at a second public meeting held in the
- 20 distressed ambulance service's assigned service area within thirty days of the date of
- 21 the first public meeting.
- 22 a. The distressed ambulance service shall approve or reject the department's final
- 23 plan at the second public meeting.
- 24 (1) If the distressed ambulance service approves the plan, the distressed
- 25 ambulance service shall comply with all aspects of the plan.
- 26 (2) If the distressed ambulance service rejects the plan, the service leader of
- 27 record shall present an amended plan to the department within fourteen
- 28 days after the date of the second public meeting.
- 29 b. The department shall approve or reject the amended plan within seven days of
- 30 receipt.

1 5. If the department and distressed ambulance service are unable to agree on a plan, or
2 if the distressed ambulance service fails to comply with any aspect of an approved
3 plan, the department may take action as necessary to protect the health, safety, and
4 welfare of the public, in accordance with section 23-27.2-02.

5 6. The department shall provide notice of a public meeting conducted under this section.
6 The notice must be:

7 a. Published in a newspaper of general circulation within the service area between
8 fourteen and seven days before the meeting; and

9 b. Delivered by first-class mail to the county auditor of each county in the service
10 area at least seven days before the meeting.

11 7. The department may request the distressed ambulance service reimburse the
12 department for costs associated with administering this section and for any reasonable
13 measures taken to ensure reliable ambulance response within the distressed
14 ambulance service's assigned service area. The distressed ambulance service shall
15 reimburse the department within thirty days after receipt of the request.

16 **23-27.2-07. Distressed ambulance service program - Continuing appropriation.**

17 There is created in the state treasury a distressed ambulance service program fund. The
18 fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in
19 the fund. Moneys in the fund are appropriated to the department on a continuing basis for the
20 purposes of administering this chapter, including for the payment of contractor fees and
21 expenses incurred by or for the operation of the program.

22 **23-27.2-08. Distressed ambulance service program - Report to legislative**
23 **management.**

24 Each interim, the department shall provide a report to the legislative management regarding
25 the status of the program. The report must include the provisions of the program, the number of
26 distressed ambulance services, coordinated efforts and activities, program costs and expenses,
27 and the overall effectiveness of the program.

28 **SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -**
29 **DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING.** There is
30 appropriated out of any moneys in the general fund in the state treasury, not otherwise
31 appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the

- 1 department of health and human services for the purpose of contracting with a consultant to
- 2 identify, evaluate, and develop a plan to manage distressed ambulance services, for the
- 3 biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
- 4 section is considered a one-time funding item.

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division Harvest Room, State Capitol

SB 2033
2/5/2025

A Bill for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

9:33 a.m. Senator Dever opened the hearing.

Discussion Topics:

- Committee Action

9:33 a.m. Senator Davison moved amendment LC 25.0113.02003 and referenced previously submitted testimony #35310.

9:34 a.m. Senator Davison withdrew amendment.

9:34 a.m. Senator Davison moved to reconsider final recommendation of Do Not Pass on 1/29/2025.

9:35 a.m. Senator Cleary seconded the motion.

Senators	Vote
Senator Dick Dever	Y
Senator Sean Cleary	Y
Senator Kyle Davison	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	Y

Motion passed 5-0-0.

9:39 a.m. Senator Davison moved amendment LC 25.0113.02003.

9:40 a.m. Senator Mathern seconded the motion.

9:41 a.m. Voice Vote - Motion Passed.

9:41 a.m. Senator Davison moved a Do Pass as Amended.

9:42 a.m. Senator Magrum seconded the motion.

Senators	Vote
Senator Dick Dever	Y
Senator Sean Cleary	Y
Senator Kyle Davison	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	Y

Motion Passed 5-0-0.

Senator Davison will carry the bill.

9:45 a.m. Chairman Dever closed the hearing.

Joan Bares, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations Committee Harvest Room, State Capitol

SB 2033
2/6/2025

A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code, relating to the distressed ambulance service program; to provide for a legislative management report; and to provide a continuing appropriation.

2:44 p.m. Chairman Bekkedahl opened the hearing.

Members Present: Chairman Bekkedahl, Vice-Chairman Erbele, and Senators Burckhard, Cleary, Conley, Davison, Dever, Dwyer, Magrum, Mathern, Meyer, Schaible, Sickler, Sorvaag, Thomas, Wanzek.

Discussion Topics:

- Committee Action

2:45 p.m. Senator Davison introduced the bill and the amendment LC 25.0113.02003 and submitted testimony #36746.

2:47 p.m. Senator Davison moved Amendment LC 25.0113.02003.

2:47 p.m. Senator Schaible seconded the motion.

Senators	Vote
Senator Brad Bekkedahl	Y
Senator Robert Erbele	Y
Senator Randy A. Burckhard	Y
Senator Sean Cleary	Y
Senator Cole Conley	Y
Senator Kyle Davison	Y
Senator Dick Dever	Y
Senator Michael Dwyer	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	Y
Senator Scott Meyer	Y
Senator Donald Schaible	Y
Senator Jonathan Sickler	Y
Senator Ronald Sorvaag	Y
Senator Paul J. Thomas	Y
Senator Terry M. Wanzek	Y

Motion Passed 16-0-0.

2:48 p.m. Senator Davison moved a Do Pass as Amended.

2:48 p.m. Senator Schaible seconded the motion.

Senators	Vote
Senator Brad Bekkedahl	Y
Senator Robert Erbele	Y
Senator Randy A. Burckhard	Y
Senator Sean Cleary	Y
Senator Cole Conley	Y
Senator Kyle Davison	Y
Senator Dick Dever	Y
Senator Michael Dwyer	Y
Senator Jeffery J. Magrum	Y
Senator Tim Mathern	Y
Senator Scott Meyer	Y
Senator Donald Schaible	Y
Senator Jonathan Sickler	Y
Senator Ronald Sorvaag	Y
Senator Paul J. Thomas	Y
Senator Terry M. Wanzek	Y

Motion Passed 16-0-0.

Senator Roers will carry the bill.

2:50 p.m. Chairman Bekkedahl closed the hearing.

Elizabeth Reiten, Committee Clerk

RS 2/6/25
1 of 6

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO

SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

- 1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; ~~and to provide an appropriation; and~~ to provide a continuing appropriation.

4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

5 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
6 follows:

7 **23-27.2-01. Definitions.**

8 As used in this chapter:

9 1. "Department" means the department of health and human services.

10 2. "Distressed ambulance service" means a licensee the department has declared a
11 distressed ambulance service under section 23-27.2-05.

12 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
13 distressed ambulance service to deliver sustainable and reliable emergency medical
14 response and transport services to a patient within an assigned service area.

15 4. "Licensee" means an emergency medical services operation as defined in section
16 23-27-02.

17 5. "Program" means the distressed ambulance service program.

18 **23-27.2-02. Program creation and administration.**

19 1. The distressed ambulance service program is hereby created.

20 2. The department shall:

- 1 a. Carry out the administrative functions of the program;
- 2 b. Adopt rules necessary to implement this chapter and manage the program;
- 3 c. Take reasonable measures to ensure reliable ambulance response within a
- 4 distressed ambulance service's assigned service area;
- 5 d. Monitor the implementation of a response approved under section 23-27.2-04;
- 6 e. Monitor the implementation of a plan approved under section 23-27.2-06; and
- 7 f. Annually evaluate issued waivers.

8 3. The department may:

- 9 a. Issue waivers; and
- 10 b. Suspend or revoke a distressed ambulance service's license in accordance with
- 11 section 23-27.2-06.

12 **23-27.2-03. Licensee evaluation - Notice.**

13 1. The department shall identify and evaluate licensees that have:

- 14 a. Failed to comply with federal or state law or regulation;
- 15 b. Indicated an intention to cease operation or change licensure level within sixty
- 16 days; or
- 17 c. Indicated a substantial likelihood of failure to respond to requests for service.

18 2. Upon identification of a licensee that meets the criteria under subsection 1, the

19 department may provide notice, in accordance with subsection 3, to the licensee by

20 first-class mail. If provided, the notice must be sent to the:

- 21 a. Licensee;
- 22 b. Service leader of record;
- 23 c. Medical director of record; and
- 24 d. Political subdivision that has jurisdiction over the licensee, if applicable.

25 3. The notice must include:

- 26 a. The deadline for the licensee to respond in accordance with section 23-27.2-04;
- 27 b. If the licensee failed to comply with federal or state law or regulation, the law or
- 28 regulation violated;
- 29 c. A detailed description of the violation or noncompliance;
- 30 d. The corrective action that must be taken by the licensee; and
- 31 e. Any resources available to the licensee to assist in taking corrective action.

23-27.2-04. Licensee - Response.

1. A licensee that receives a notice under section 23-27.2-03 shall respond to the department within forty-five days of the date of the notice. The response must include:
 - a. The licensee's proposed corrective action to address the violation or noncompliance;
 - b. The licensee's proposed time frame in which to take corrective action and become fully compliant; and
 - c. If necessary, a request for a waiver.
2. Within fifteen days of the date of the response, the department shall:
 - a. Approve the response; or
 - b. Request the licensee amend the response.
3. The department may extend the deadline to respond if an amendment to the response is requested under subsection 2.

23-27.2-05. Distressed ambulance service - Declaration and notice.

1. The department may declare a licensee a distressed ambulance service if the licensee:
 - a. Failed to respond to the department in accordance with section 23-27.2-04;
 - b. Failed to make sufficient progress to address the violation or noncompliance described in the notice;
 - c. Failed to take corrective action in accordance with the approved response;
 - d. Indicated an intention to cease operation or change licensure level within sixty days; or
 - e. Indicated a substantial likelihood of failure to respond to requests for service.
2. The department shall provide notice of the declaration by first-class mail to the recipients under subsection 2 of section 23-27.2-03. The notice must include the department's basis for the declaration.

23-27.2-06. Distressed ambulance service - Procedure - Plan.

1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.

2. The emergency medical services plan must:

- a. Include a detailed planning and implementation timeline to deliver sustainable and reliable emergency medical response and transport services to a patient within the assigned service area;
- b. Evaluate the impact on the assigned and adjacent service areas; and
- c. Consider input from stakeholders, including:
 - (1) The distressed ambulance service;
 - (2) The political subdivision that has jurisdiction over the distressed ambulance service;
 - (3) The county and city governments within the service area;
 - (4) Licensed medical facilities;
 - (5) Adjacent ambulance services;
 - (6) Other emergency medical services within the service area; and
 - (7) Other interested parties.

3. The coordinator shall present a proposed plan at a public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of assignment. The coordinator shall allow stakeholders and the public the opportunity to provide input relating to the plan.

4. The coordinator shall present a final plan at a second public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of the first public meeting.

a. The distressed ambulance service shall approve or reject the department's final plan at the second public meeting.

(1) If the distressed ambulance service approves the plan, the distressed ambulance service shall comply with all aspects of the plan.

(2) If the distressed ambulance service rejects the plan, the service leader of record shall present an amended plan to the department within fourteen days after the date of the second public meeting.

b. The department shall approve or reject the amended plan within seven days of receipt.

1 5. If the department and distressed ambulance service are unable to agree on a plan, or
2 if the distressed ambulance service fails to comply with any aspect of an approved
3 plan, the department may take action as necessary to protect the health, safety, and
4 welfare of the public, in accordance with section 23-27.2-02.

5 6. The department shall provide notice of a public meeting conducted under this section.
6 The notice must be:

7 a. Published in a newspaper of general circulation within the service area between
8 fourteen and seven days before the meeting; and

9 b. Delivered by first-class mail to the county auditor of each county in the service
10 area at least seven days before the meeting.

11 7. The department may request the distressed ambulance service reimburse the
12 department for costs associated with administering this section and for any reasonable
13 measures taken to ensure reliable ambulance response within the distressed
14 ambulance service's assigned service area. The distressed ambulance service shall
15 reimburse the department within thirty days after receipt of the request.

16 **23-27.2-07. Distressed ambulance service program - Continuing appropriation.**

17 There is created in the state treasury a distressed ambulance service program fund. The
18 fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in
19 the fund. Moneys in the fund are appropriated to the department on a continuing basis for the
20 purposes of administering this chapter, including for the payment of contractor fees and
21 expenses incurred by or for the operation of the program.

22 **23-27.2-08. Distressed ambulance service program - Report to legislative**
23 **management.**

24 Each interim, the department shall provide a report to the legislative management regarding
25 the status of the program. The report must include the provisions of the program, the number of
26 distressed ambulance services, coordinated efforts and activities, program costs and expenses,
27 and the overall effectiveness of the program.

28 **SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -**
29 **DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING.** There is
30 appropriated out of any moneys in the general fund in the state treasury, not otherwise
31 appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the

1 department of health and human services for the purpose of contracting with a consultant to
2 identify, evaluate, and develop a plan to manage distressed ambulance services, for the
3 biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
4 section is considered a one-time funding item.

**REPORT OF STANDING COMMITTEE
SB 2033**

Appropriations Committee (Sen. Bekkedahl, Chairman) recommends **AMENDMENTS** ([25.0113.02003](#)) and when so amended, recommends **DO PASS** (16 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2033 was placed on the Sixth order on the calendar. This bill does not affect workforce development.

25.0113.02003
Title.

Prepared by the Legislative Council
staff for Senator Davison
February 3, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO

SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

- 1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; ~~and~~ to provide an appropriation; and to provide a continuing appropriation.

4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

5 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
6 follows:

7 **23-27.2-01. Definitions.**

8 As used in this chapter:

- 9 1. "Department" means the department of health and human services.
- 10 2. "Distressed ambulance service" means a licensee the department has declared a
11 distressed ambulance service under section 23-27.2-05.
- 12 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
13 distressed ambulance service to deliver sustainable and reliable emergency medical
14 response and transport services to a patient within an assigned service area.
- 15 4. "Licensee" means an emergency medical services operation as defined in section
16 23-27-02.

- 17 5. "Program" means the distressed ambulance service program.

18 **23-27.2-02. Program creation and administration.**

- 19 1. The distressed ambulance service program is hereby created.
- 20 2. The department shall:

- 1 a. Carry out the administrative functions of the program;
- 2 b. Adopt rules necessary to implement this chapter and manage the program;
- 3 c. Take reasonable measures to ensure reliable ambulance response within a
- 4 distressed ambulance service's assigned service area;
- 5 d. Monitor the implementation of a response approved under section 23-27.2-04;
- 6 e. Monitor the implementation of a plan approved under section 23-27.2-06; and
- 7 f. Annually evaluate issued waivers.
- 8 3. The department may:
- 9 a. Issue waivers; and
- 10 b. Suspend or revoke a distressed ambulance service's license in accordance with
- 11 section 23-27.2-06.

12 **23-27.2-03. Licensee evaluation - Notice.**

- 13 1. The department shall identify and evaluate licensees that have:
- 14 a. Failed to comply with federal or state law or regulation;
- 15 b. Indicated an intention to cease operation or change licensure level within sixty
- 16 days; or
- 17 c. Indicated a substantial likelihood of failure to respond to requests for service.
- 18 2. Upon identification of a licensee that meets the criteria under subsection 1, the
- 19 department may provide notice, in accordance with subsection 3, to the licensee by
- 20 first-class mail. If provided, the notice must be sent to the:
- 21 a. Licensee;
- 22 b. Service leader of record;
- 23 c. Medical director of record; and
- 24 d. Political subdivision that has jurisdiction over the licensee, if applicable.
- 25 3. The notice must include:
- 26 a. The deadline for the licensee to respond in accordance with section 23-27.2-04;
- 27 b. If the licensee failed to comply with federal or state law or regulation, the law or
- 28 regulation violated;
- 29 c. A detailed description of the violation or noncompliance;
- 30 d. The corrective action that must be taken by the licensee; and
- 31 e. Any resources available to the licensee to assist in taking corrective action.

23-27.2-04. Licensee - Response.

1. A licensee that receives a notice under section 23-27.2-03 shall respond to the department within forty-five days of the date of the notice. The response must include:
 - a. The licensee's proposed corrective action to address the violation or noncompliance;
 - b. The licensee's proposed time frame in which to take corrective action and become fully compliant; and
 - c. If necessary, a request for a waiver.
2. Within fifteen days of the date of the response, the department shall:
 - a. Approve the response; or
 - b. Request the licensee amend the response.
3. The department may extend the deadline to respond if an amendment to the response is requested under subsection 2.

23-27.2-05. Distressed ambulance service - Declaration and notice.

1. The department may declare a licensee a distressed ambulance service if the licensee:
 - a. Failed to respond to the department in accordance with section 23-27.2-04;
 - b. Failed to make sufficient progress to address the violation or noncompliance described in the notice;
 - c. Failed to take corrective action in accordance with the approved response;
 - d. Indicated an intention to cease operation or change licensure level within sixty days; or
 - e. Indicated a substantial likelihood of failure to respond to requests for service.
2. The department shall provide notice of the declaration by first-class mail to the recipients under subsection 2 of section 23-27.2-03. The notice must include the department's basis for the declaration.

23-27.2-06. Distressed ambulance service - Procedure - Plan.

1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.

- 1 2. The emergency medical services plan must:
- 2 a. Include a detailed planning and implementation timeline to deliver sustainable
- 3 and reliable emergency medical response and transport services to a patient
- 4 within the assigned service area;
- 5 b. Evaluate the impact on the assigned and adjacent service areas; and
- 6 c. Consider input from stakeholders, including:
- 7 (1) The distressed ambulance service;
- 8 (2) The political subdivision that has jurisdiction over the distressed ambulance
- 9 service;
- 10 (3) The county and city governments within the service area;
- 11 (4) Licensed medical facilities;
- 12 (5) Adjacent ambulance services;
- 13 (6) Other emergency medical services within the service area; and
- 14 (7) Other interested parties.
- 15 3. The coordinator shall present a proposed plan at a public meeting held in the
- 16 distressed ambulance service's assigned service area within thirty days of the date of
- 17 assignment. The coordinator shall allow stakeholders and the public the opportunity to
- 18 provide input relating to the plan.
- 19 4. The coordinator shall present a final plan at a second public meeting held in the
- 20 distressed ambulance service's assigned service area within thirty days of the date of
- 21 the first public meeting.
- 22 a. The distressed ambulance service shall approve or reject the department's final
- 23 plan at the second public meeting.
- 24 (1) If the distressed ambulance service approves the plan, the distressed
- 25 ambulance service shall comply with all aspects of the plan.
- 26 (2) If the distressed ambulance service rejects the plan, the service leader of
- 27 record shall present an amended plan to the department within fourteen
- 28 days after the date of the second public meeting.
- 29 b. The department shall approve or reject the amended plan within seven days of
- 30 receipt.

1 5. If the department and distressed ambulance service are unable to agree on a plan, or
2 if the distressed ambulance service fails to comply with any aspect of an approved
3 plan, the department may take action as necessary to protect the health, safety, and
4 welfare of the public, in accordance with section 23-27.2-02.

5 6. The department shall provide notice of a public meeting conducted under this section.
6 The notice must be:

7 a. Published in a newspaper of general circulation within the service area between
8 fourteen and seven days before the meeting; and

9 b. Delivered by first-class mail to the county auditor of each county in the service
10 area at least seven days before the meeting.

11 7. The department may request the distressed ambulance service reimburse the
12 department for costs associated with administering this section and for any reasonable
13 measures taken to ensure reliable ambulance response within the distressed
14 ambulance service's assigned service area. The distressed ambulance service shall
15 reimburse the department within thirty days after receipt of the request.

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17 There is created in the state treasury a distressed ambulance service program fund. The
18 fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in
19 the fund. Moneys in the fund are appropriated to the department on a continuing basis for the
20 purposes of administering this chapter, including for the payment of contractor fees and
21 expenses incurred by or for the operation of the program.

22 **23-27.2-08. Distressed ambulance service program - Report to legislative**
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25 the status of the program. The report must include the provisions of the program, the number of
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- 1 department of health and human services for the purpose of contracting with a consultant to
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- 3 biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
- 4 section is considered a one-time funding item.

2025 HOUSE HUMAN SERVICES

SB 2033

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

SB 2033
3/10/2025

Relating to the distressed ambulance service program; to provide for a legislative management report; to provide an appropriation; and to provide a continuing appropriation.

2:31 p.m. Chairman M. Ruby opened the hearing.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Rios, Rohr

Members Absent: Representative Kiefert

Discussion Topics:

- Ambulance Services and Districts
- EMS Association
- Distressed Ambulances in ND
- Licensure of Ambulances

2:32 p.m. Kristen Roers, ND Senator, introduced the bill.

2:35 p.m. Bill Kalanek, CEO, APT, testified in favor.

2:36 p.m. Adam Parker, Member, North Dakota Emergency Medical Services Association, testified in favor and submitted testimony #40096.

2:55 p.m. Christopher Price, Health Response and Licensure, ND Department of Health and Human Services, testified in favor and submitted testimony #39913.

3:02 p.m. Bob Flath, Commissioner, LaMoure County, testified and submitted testimony in opposition #39689.

Additional written testimony:

Trigg Baker, City Council Member, City of LaMoure, submitted testimony in opposition #39675.

Jennifer McDermid, Treasurer, Kulm Ambulance Corp, submitted testimony in opposition #39630.

Lori Gentzkow, Vice President, Community Volunteer EMS of LaMoure, submitted testimony in opposition #39968

Kimberly Robbins, Citizen, LaMoure County, submitted testimony in opposition #39921

Art Hagebock, LaMoure Printing Company, submitted testimony in opposition #39964

3:08 p.m. Chairman M. Ruby closed the hearing.

Madaline Cooper, Committee Clerk for Jackson Toman, Committee Clerk

Testimony
Senate Bill No. 2033
Senate Human Services Committee
Senator Lee, Chair
March 7, 2025

Chairperson Lee, and members of the Senate Committee, we are representing Kulm Ambulance Corps, Inc., a volunteer ambulance service, whose service area includes parts of LaMoure, Dickey, Logan, and McIntosh counties.

We are appearing before you in opposition of Senate Bill No. 2033, as currently written, which seeks to address the issue of distressed ambulance services in the state of North Dakota.

23-27.2-03 a.: There is no connection between 23-27.2-03 a. and current North Dakota Century Code 23-27-04, which defines standards for operators (licensure). We recommend, if we are licensed and in compliance with 23-27-04, then there should be no other trigger for being designated a distressed ambulance.

23-27.2-05 e.: This criterion is ambiguous. What and who determines substantial likelihood? We recommend removing this criterion and referring to North Dakota Century Code 23-27-04.

23-27.2-07: Monies have been appropriated under section 2, so why is the ambulance responsible for paying for the services provided? We recommend removal of this section.

Thank you for your time, consideration and service to the state of North Dakota. In conclusion, Kulm Ambulance Corps, Inc., feels that this bill strengthens the EMS system in North Dakota but leaves gaps and unanswered questions. Kulm Ambulance Corps, Inc. opposes Senate Bill No. 2033 as is currently written and recommends the above changes to the bill.

Sincerely,

The Board of Kulm Ambulance Corps, Inc.

Aaron Kramlich, president

Doug Hintzman, vice-president

Jenn McDermid, treasurer

Liz Braun, secretary

Angela Mahin, member-at-large

March 8, 2025

To the Honorable Members of the North Dakota Legislative Assembly,

As a member of the LaMoure City Council I am contacting you on behalf of the City of LaMoure and I am compelled to voice my opposition to Senate Bill 2033, which establishes a "distressed ambulance service program" with a continuing appropriation and legislative oversight. While I recognize the importance of supporting ambulance services—especially in our rural areas—I believe this bill represents an overreach by the state that undermines local authority, misallocates resources, and fails to address the real challenges facing our emergency medical services

From a city standpoint, one of my primary concerns is the erosion of local control. Our city, like many others, has worked hard to manage and sustain our ambulance services through local taxes, volunteer efforts, and partnerships tailored to our community's unique needs. SB 2033's top-down approach—designating "distressed" services and funneling state funds—threatens to bypass the expertise and decision-making of local officials who understand our operational realities. Instead of empowering cities and counties to innovate, this bill risks creating a one-size-fits-all program that may not align with the specific demands of local communities.

Economically, SB2033 is a red flag. Our city budget is already a delicate balancing act—funding schools, maintaining infrastructure, and supporting small businesses while keeping taxes manageable. Any new costs or redirected resources this bill might impose would hit us hard

Finally, I question the practicality of this proposal. Identifying "distressed" ambulance services sounds noble, but the criteria remain vague. SB 2033 does little to address the root causes of distress—EMS workforce shortages, inadequate reimbursement rates, or rising operational costs. Our city needs sustainable solutions, not a state program that might prop up struggling services today only to see them falter again tomorrow.

I respectfully urge you to vote against SB 2033. North Dakota's cities and towns are best equipped to manage our ambulance services with targeted support—like grants for training or equipment—rather than a broad, state-driven initiative that risks inefficiency and overreach. Let's work together on policies that respect local governance and deliver real, lasting results for all our communities.

Thank you for your attention to this matter.

Sincerely,
Trigg Baker
City Council Member
LaMoure, North Dakota

Senate bill 2033

Chairman Ruby and members of the House Human Service Committee,

My name is Bob Flath and I am a County Commissioner with LaMoure County, ND.

I also serve as a volunteer firefighter and EMR.

and serve as Chair for the LaMoure County Emergency Planning Committee and have the support of all member of that committee and speak for them as well.

We all stand in opposition to SB 2033

I have taken a deep dive into written and video testimony of these two bills involving ambulance services and found some very interesting things. SB 2033 concerning distressed ambulance services seeks to add an FTE and more than \$200,000 for ambulance regulation/enforcement of this new law. It troubles me that statements made during the final discussion in committee just prior to moving the bill to appropriations that the chairperson admitted to not having any constituents (city, county, ambulance services, Emergency Management, NDACO, League of Cities, etc) involved during interim discussions and took advice solely from the ND EMS Association. The chairperson stated that she believed the local services/constituents had their opportunity to discuss these issues with EMS Association representatives PJ Ringdahl and Adam Parker. You can confirm these statements by listening to video discussion on SB 2033 at 10:50:35am on January 8th. I can guarantee that there are city and county officials that don't even know this Association exists. Both of these individuals potentially stand to gain from distressed or failing ambulance services.

Upon doing some research into the EMS Association I have come to find that the make up of this association is mainly larger and private service providers. I know of only two small service representatives that belong. Also, I find that Adam Parker, the chairman of the Associations Advocacy Committee who testified in support of SB 2033 is also Adam Parker, owner of Gold Star Solutions LLC, a consulting firm specializing in assisting rural ambulance services to find solutions to financial and operational issues. It dawned on me at this point that I had met Adam before during an ambulance meeting I attended as a LaMoure County Commissioner trying to find ways for our LaMoure Ambulance service to continue. This meeting took place some time ago but I do remember one of Adam's solutions was to give his consulting firm \$200,000 annually and his firm would step in and find our solution. Funny how a consultant that makes money from failing ambulance services is advising our state on how to enforce new laws for our ambulance services. I also remember the first move required of our ambulance service would require becoming a District so that we could raise the funds to pay for these services. There are options other than District formation to raise funds and curb the requirement for another large board, or in LaMoure Counties case 3 individual Ambulance District Boards, in communities that struggle to find members for existing boards. I would like to go into more detail as to how this could be done but have some fear that a new rule could easily be created in the next interim to possibly close those doors. I believe there is another bill here that would allow Districts to place consultants on their boards and pay them?! I am sure you could find a consultant willing to sit on all these boards and collect pay from each one.

I would also like to have someone explain what the costs are going to be? The bill just states that a consultant could be hired to come in and fix your service and later in the bill NDHHS is allowed to bill the service or political subdivision whatever the costs are. Is this consultant going to work for \$50/hr, \$100/hr, \$500/hr??? and how many hours are we thinking??? I have been informed that a consulting firm that provides services in ND has travelling EMT's available at \$68/hr. So that can also be added to the bill???

If the state is looking to spend \$200,000 on another FTE why not make this individual a state employee and have them help with advisement and assistance rather than just enforcing rules and forwarding these distressed services to a consultant who will likely advise them to pursue increasing property taxes. I will be the first to admit that added property taxes may be a necessity but do not believe that my constituents wish to pay increased costs for consultants. If money is the only factor being considered in the "fix" to our problem, why would we want to add consulting fees to everything we do?

Thank you for your time in hearing my concerns,

Bob Flath

LaMoure County Commissioner

(701)320-0194

Members of the LaMoure Emergency Planning Committee who stand with me in Opposition of SB 2033:

Grant Mathern, Edgeley Fire

Paul Ostendorf, Edgeley Industry

Jessica Duffy LaMoure County Public Health

Kimberly Robbins LaMoure County Emergency Manager

Art Hagebock Print Media

Sheriff Bob Fernandes

Doug Hintzman Kulm Ambulance

Janice Shannon Edgeley Ambulance Service

Alan Nitschke Jud Fire



Testimony
Senate Bill No. 2033
House Human Services Committee
Representative Matthew Ruby, Chair
March 10, 2025

Good afternoon, Chairperson Ruby, and members of the Human Services Committee, I am Chris Price with the Department of Health and Human Services (Department). I appear before you in support of Senate Bill No. 2033 which seeks to address the pressing issue of distressed ambulance services within our state.

Emergency medical services (EMS) are a cornerstone of public health and safety, providing timely and life-saving care to individuals in need. Yet, rural and underserved communities in North Dakota face unique challenges in maintaining reliable ambulance services. Staffing shortages, financial constraints, and operational difficulties have the potential to place many EMS agencies at risk of failure, creating gaps in service and jeopardizing the health and safety of our residents.

Senate Bill 2033 represents a proactive, structured, and transparent solution to this critical issue by establishing the

Distressed Ambulance Service Program. This program is designed to identify struggling ambulance services, assist them with corrective action, and ensure sustainable EMS delivery. I would like to highlight several key components of the bill that underscore its importance:

1. Identification and Accountability

The bill mandates the Department of Health and Human Services to identify EMS providers who fail to comply with federal or state regulations, indicate an intention to cease operations, or face significant service delivery challenges. This ensures that potential service disruptions are detected early, allowing timely intervention.

2. Collaborative Planning

Once an ambulance service is declared distressed, the program ensures the development of an Emergency Medical Services Plan. This plan involves input from a diverse group of stakeholders, including local governments, medical facilities, adjacent EMS

providers, and community members. This collaborative approach fosters local solutions tailored to the specific needs of the affected service area.

3. Transparency and Public Engagement

Public meetings are required at multiple stages of plan development to ensure community input and buy-in.

Transparency is critical to building trust among residents and stakeholders, particularly in rural areas where ambulance services are integral to public safety.

4. Financial and Administrative Support

The creation of the Distressed Ambulance Service Program Fund provides a dedicated funding source to support the program and cover associated costs.

5. Protecting Public Health and Safety

The bill empowers the department to take necessary actions to safeguard public health if a distressed ambulance service fails to

comply with an approved plan. This authority ensures continuity of service and mitigates risks to public safety.

6. Ongoing Monitoring and Reporting

Regular evaluations of plans and program outcomes, as well as interim reports to legislative management, ensure accountability and continuous improvement of the program.

In conclusion, Senate Bill 2033 equips the state with the tools necessary to support and sustain reliable ambulance services, particularly in rural and underserved areas. It demonstrates North Dakota's commitment to ensuring that no community is left without access to critical emergency care. By addressing the root causes of service instability, this bill strengthens the EMS system and safeguards the well-being of our residents.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.

In Opposition of Senate Bill 2033

Before the House – Human Services Committee,

March 10, 2025

Chairman, Representative Ruby, and members of the Committee,

Thank you for the opportunity to provide written testimony in opposition of Senate Bill 2033. My name is Kimberly Robbins, and I am the LaMoure County Emergency Manager and 9-1-1 Coordinator. I also have maintained my North Dakota Emergency Medical Responder training and volunteer as a driver for the Community Volunteer EMS of LaMoure. I feel thankful to work with the professional individuals that serve as public safety telecommunicators as well as serve alongside the dedicated volunteers of a local ambulance service. Thus, I would ask you to oppose Senate Bill 2033 as this bill has unclear definitions and new authority of the Department of Health and Human Services and the program implementation costs are funded by local ambulance services.

The Bill creates new authority of the Department of Health and Human Services to define “Distressed Ambulance Service”. The Bill references an ambulance may be declared distressed if “indicated a substantial likelihood of failure to respond to requests for service.” Without further information, this is a subjective definition by the Department of Health and Human Services. Specific guidance for local government and ambulance services is needed.

Secondly, the Department of Health and Human Services will assign a coordinator to develop, implement, and monitor an emergency medical services plan. However, this plan does not specifically state Public Safety Answering Points, local 911 coordinators, nor Emergency Managers are included. In many instances, an ambulance may serve in two or more Public Safety Answering Points and counties and this plan does not specifically state that Public Safety Answering Points or local 911 coordinators or emergency managers are even included in the plan or planning process yet the plan will directly affect EMS response areas.

Finally, the bill states that the ambulance service will reimburse the department for all costs associated with measures taken to administer the program. In some areas, this cost will directly come back to county government as the unknown costs from the “Plan” that is suggested, meeting costs, public notices and overall time burden to county government will be the responsibility of the ambulance service or again the local governing agency of the ambulance.

Therefore, I ask you to oppose Senate Bill 2033.

Kimberly Robbins



krobbins@nd.gov

LaMoure, ND

Chairman Ruby and Committee members-

My name is Art Hagebock. I own four weekly newspapers in southeast North Dakota. I am recently retired from being the fire chief in LaMoure for the past fifteen years. I also am an EMR and am a member of our volunteer ambulance service.

I am submitting this testimony in opposition to SB 2033. I am hoping that common sense prevails for this issue. As I read the bill, what is being called a "Distressed Ambulance Service" has no parameters in the bill that determine what a distressed service is. Some bureaucrat or paid consultant will determine if the service is deemed distressed or not. Then without any cost controls put in the bill, the consultant gets to charge the so called distressed ambulance service any amount they choose as there is no controls put in the bill. It also just assumes that they already know who the consultant is going to be because there is nothing spelled out on the qualifications or bid submittal process. The same person that is going to be making money on this is also the same person who has testified for this bill in the Senate. The testimony about the EMS Board representing everyone is wrong. The board has only two members that are from small volunteer services. The rest of the board is made up of larger services and private services. All but the two representatives on the board come from services that will gain financially from this process as it stands right now.

In my opinion, all five bills relating to ambulances circle back to a small group of either individuals or businesses to make financial gain.

March 9, 2025

To the Honorable Members of the North Dakota Legislative Assembly,

We are members of the executive board for Community Volunteer EMS of LaMoure. Our service members proudly volunteer their time and talents to provide the highest quality of prehospital care to all we serve in the counties of LaMoure, Dickey, Ransom, and Barnes. Not only do our service members take call 24/7, respond to 911 calls, recruit new members, but they also work hard on fundraising efforts and educational opportunities for the community on important safety topics such as CPR, First Aid, Stop the Bleed, AED use, ATV safety, and babysitting training courses.

We are writing in **opposition** of Senate Bill No. 2033, as currently written, which seeks to address the issue of distressed ambulance services in the state of North Dakota.

Overall, we feel this proposal takes away all local control of an ambulance service and there is a lack of clarification on many topics, such as the definition of a distressed service and the cost a service will have to pay the state for assistance.

We understand that there was an issue with a service closing abruptly in the past. Please do not punish all EMS for one unfortunate situation.

We work closely and community effectively with our city and county officials, as well as have a network of support by area services. Let's be able to continue to work together for our communities and keep things local!

We ask that you **oppose** this bill.

Thank you for your attention to this matter.

Sincerely,

Community Volunteer EMS of LaMoure Executive Board Members

Jessica Duffy, RN – LaMoure

Lori Gentzkow , CPR Driver– LaMoure

Jason Joy, CPR Driver – LaMoure

Ryan Bohenstingl , CPR Driver– LaMoure

Kelli Just, EMT – Berlin

Nancy Noot, EMT – Marion

Executive Offices
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Bismarck, ND 58503



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www.ndemsa.org

Testimony
Senate Bill 2033
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 a member of the North Dakota Emergency Medical Services Association, and volunteer to co-chair their Advocacy Committee. My day job consists of consulting with and providing legal representation to ambulance services across multiple states. The issues we face regarding EMS in North Dakota are not unique, but one thing I have noticed in my work in other states is North Dakota is far more proactive in addressing challenges faced by EMS. The Association **strongly supports** SB 2033.

Last session, the legislature passed an important bill that required the organization of ambulance districts for many ambulances across North Dakota. That bill helps to ensure local accountability of ambulance services and to allow local communities to develop an EMS system in their area that is sustainable and meets the community's expectations. An interim committee continued the discussion and there was a desire to have additional protection for situations where there is a local agency failure.

This bill accomplishes several critical goals:

- 1) It establishes a process the department must follow when concerns regarding compliance or public safety are identified.
- 2) It requires ambulance services to respond to the department. It allows for an ambulance service to request, and the department to grant, waivers. This is an important provision that will allow local communities flexibility to innovate in system design when challenges arise.
- 3) When the local EMS agency has failed, the provisions protect the neighboring ambulance services from enduring hardship and protects the public by enabling the department to sustain response in the area while a long-term plan is developed.
- 4) Balances the priority of local control with the Department's responsibility as the licensing agency to protect the public, by requiring a collaborative approach to developing, approving, and implementing a plan to address concerns.

The EMS Association **strongly supports** the creation of a distressed ambulance service program to ensure we have a strong EMS system and to mitigate the impact of any local EMS agency failure on the neighboring EMS agencies.

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

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

SB 2033
3/31/2025

Relating to the distressed ambulance service program; to provide for a legislative management report; to provide an appropriation; and to provide a continuing appropriation.

4:29 p.m. Chairman M. Ruby opened the meeting.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios, Rohr

Discussion Topics:

- Definitions of distressed ambulance

4:29 p.m. Representative Fegley introduced amendments LC#25.0113.03001 #44496.

4:41 p.m. Chairman M. Ruby closed the meeting.

Jackson Toman, Committee Clerk

25.0113.03001
Title.

Prepared by the Legislative Council
staff for Representative Fegley
March 28, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO FIRST ENGROSSMENT

ENGROSSED SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

1 A BILL ~~for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,~~
2 ~~relating to the distressed ambulance service program; to provide for a legislative management~~
3 ~~report; to provide an appropriation; and to provide a continuing appropriation for an Act to create~~
4 and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to
5 distressed ambulance services; and to declare an emergency.

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

7 ~~SECTION 1. Chapter 23-27.2 of the North Dakota Century Code is created and enacted as~~
8 ~~follows:~~

9 ~~23-27.2-01. Definitions:~~

10 As used in this chapter:

11 ~~1. "Department" means the department of health and human services.~~

12 ~~2. "Distressed ambulance service" means a licensee the department has declared a~~
13 ~~distressed ambulance service under section 23-27.2-05.~~

14 ~~3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a~~
15 ~~distressed ambulance service to deliver sustainable and reliable emergency medical~~
16 ~~response and transport services to a patient within an assigned service area.~~

17 ~~4. "Licensee" means an emergency medical services operation as defined in section~~
18 ~~23-27-02.~~

19 ~~5. "Program" means the distressed ambulance service program.~~

~~23-27.2-02. Program creation and administration:~~

~~1. The distressed ambulance service program is hereby created:~~

~~2. The department shall:~~

~~a. Carry out the administrative functions of the program:~~

~~b. Adopt rules necessary to implement this chapter and manage the program:~~

~~c. Take reasonable measures to ensure reliable ambulance response within a distressed ambulance service's assigned service area:~~

~~d. Monitor the implementation of a response approved under section 23-27.2-04:~~

~~e. Monitor the implementation of a plan approved under section 23-27.2-06: and~~

~~f. Annually evaluate issued waivers:~~

~~3. The department may:~~

~~a. Issue waivers: and~~

~~b. Suspend or revoke a distressed ambulance service's license in accordance with section 23-27.2-06:~~

~~23-27.2-03. Licensee evaluation - Notice:~~

~~1. The department shall identify and evaluate licensees that have:~~

~~a. Failed to comply with federal or state law or regulation:~~

~~b. Indicated an intention to cease operation or change licensure level within sixty days: or~~

~~c. Indicated a substantial likelihood of failure to respond to requests for service:~~

~~2. Upon identification of a licensee that meets the criteria under subsection 1, the department may provide notice, in accordance with subsection 3, to the licensee by first-class mail. If provided, the notice must be sent to the:~~

~~a. Licensee:~~

~~b. Service leader of record:~~

~~c. Medical director of record: and~~

~~d. Political subdivision that has jurisdiction over the licensee, if applicable:~~

~~3. The notice must include:~~

~~a. The deadline for the licensee to respond in accordance with section 23-27.2-04:~~

~~b. If the licensee failed to comply with federal or state law or regulation, the law or regulation violated:~~

- 1 ~~c. A detailed description of the violation or noncompliance;~~
- 2 ~~d. The corrective action that must be taken by the licensee; and~~
- 3 ~~e. Any resources available to the licensee to assist in taking corrective action.~~
- 4 ~~**23-27.2-04. Licensee - Response.**~~
- 5 ~~1. A licensee that receives a notice under section 23-27.2-03 shall respond to the~~
- 6 ~~department within forty-five days of the date of the notice. The response must include:~~
- 7 ~~a. The licensee's proposed corrective action to address the violation or~~
- 8 ~~noncompliance;~~
- 9 ~~b. The licensee's proposed time frame in which to take corrective action and~~
- 10 ~~become fully compliant; and~~
- 11 ~~c. If necessary, a request for a waiver.~~
- 12 ~~2. Within fifteen days of the date of the response, the department shall:~~
- 13 ~~a. Approve the response; or~~
- 14 ~~b. Request the licensee amend the response.~~
- 15 ~~3. The department may extend the deadline to respond if an amendment to the response~~
- 16 ~~is requested under subsection 2.~~
- 17 ~~**23-27.2-05. Distressed ambulance service - Declaration and notice.**~~
- 18 ~~1. The department may declare a licensee a distressed ambulance service if the~~
- 19 ~~licensee:~~
- 20 ~~a. Failed to respond to the department in accordance with section 23-27.2-04;~~
- 21 ~~b. Failed to make sufficient progress to address the violation or noncompliance~~
- 22 ~~described in the notice;~~
- 23 ~~c. Failed to take corrective action in accordance with the approved response;~~
- 24 ~~d. Indicated an intention to cease operation or change licensure level within sixty~~
- 25 ~~days; or~~
- 26 ~~e. Indicated a substantial likelihood of failure to respond to requests for service.~~
- 27 ~~2. The department shall provide notice of the declaration by first-class mail to the~~
- 28 ~~recipients under subsection 2 of section 23-27.2-03. The notice must include the~~
- 29 ~~department's basis for the declaration.~~

~~23-27.2-06. Distressed ambulance service - Procedure - Plan.~~

~~1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.~~

~~2. The emergency medical services plan must:~~

~~a. Include a detailed planning and implementation timeline to deliver sustainable and reliable emergency medical response and transport services to a patient within the assigned service area;~~

~~b. Evaluate the impact on the assigned and adjacent service areas; and~~

~~c. Consider input from stakeholders, including:~~

~~(1) The distressed ambulance service;~~

~~(2) The political subdivision that has jurisdiction over the distressed ambulance service;~~

~~(3) The county and city governments within the service area;~~

~~(4) Licensed medical facilities;~~

~~(5) Adjacent ambulance services;~~

~~(6) Other emergency medical services within the service area; and~~

~~(7) Other interested parties.~~

~~3. The coordinator shall present a proposed plan at a public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of assignment. The coordinator shall allow stakeholders and the public the opportunity to provide input relating to the plan.~~

~~4. The coordinator shall present a final plan at a second public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of the first public meeting.~~

~~a. The distressed ambulance service shall approve or reject the department's final plan at the second public meeting.~~

~~(1) If the distressed ambulance service approves the plan, the distressed ambulance service shall comply with all aspects of the plan.~~

~~(2) If the distressed ambulance service rejects the plan, the service leader of record shall present an amended plan to the department within fourteen days after the date of the second public meeting.~~

~~b. The department shall approve or reject the amended plan within seven days of receipt.~~

~~5. If the department and distressed ambulance service are unable to agree on a plan, or if the distressed ambulance service fails to comply with any aspect of an approved plan, the department may take action as necessary to protect the health, safety, and welfare of the public, in accordance with section 23-27.2-02.~~

~~6. The department shall provide notice of a public meeting conducted under this section. The notice must be:~~

~~a. Published in a newspaper of general circulation within the service area between fourteen and seven days before the meeting; and~~

~~b. Delivered by first class mail to the county auditor of each county in the service area at least seven days before the meeting.~~

~~7. The department may request the distressed ambulance service reimburse the department for costs associated with administering this section and for any reasonable measures taken to ensure reliable ambulance response within the distressed ambulance service's assigned service area. The distressed ambulance service shall reimburse the department within thirty days after receipt of the request.~~

~~**23-27.2-07. Distressed ambulance service program - Continuing appropriation.**~~

~~There is created in the state treasury a distressed ambulance service program fund. The fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in the fund. Moneys in the fund are appropriated to the department on a continuing basis for the purposes of administering this chapter, including for the payment of contractor fees and expenses incurred by or for the operation of the program.~~

~~**23-27.2-08. Distressed ambulance service program - Report to legislative management.**~~

~~Each interim, the department shall provide a report to the legislative management regarding the status of the program. The report must include the provisions of the program, the number of~~

~~distressed ambulance services, coordinated efforts and activities, program costs and expenses,
and the overall effectiveness of the program.~~

~~SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -~~

~~DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING.~~ There is
appropriated out of any moneys in the general fund in the state treasury, not otherwise
appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the
department of health and human services for the purpose of contracting with a consultant to
identify, evaluate, and develop a plan to manage distressed ambulance services, for the
biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
section is considered a one-time funding item.

SECTION 1. A new section to chapter 23-27 of the North Dakota Century Code is created
and enacted as follows:

Distressed ambulance service.

1. As used in this section:

a. "Department" means the department of health and human services.

b. "Distressed ambulance service" means a licensee that:

(1) Self-indicates to the department a substantial likelihood of closure within the
next year; or

(2) Is identified by the department as failing to comply with federal or state law
or regulation and is likely to face closure within the next year.

c. "Emergency medical services plan" or "plan" means a detailed improvement plan
for a distressed ambulance service developed by the department and the
distressed ambulance work group to deliver sustainable and reliable emergency
medical response and transport services to a patient within an assigned service
area.

**2. If a licensee is identified by the department as a distressed ambulance service, the
department shall identify stakeholders and schedule an initial public meeting with the
stakeholders within forty-five days. The department shall notify the distressed
ambulance service of the department's intent to schedule a public meeting. If the
distressed ambulance service does not respond to the notice within forty-five days, the
department has an additional fifteen days to schedule the initial public meeting.**

3. The stakeholders identified and notified by the department of the initial public meeting must include:
 - a. The political subdivision that has jurisdiction over the distressed ambulance service.
 - b. The county and city governments within the service area.
 - c. Licensed medical facilities.
 - d. Adjacent ambulance services.
 - e. Other emergency medical services within the service area.
4. The department shall provide notice of an initial public meeting conducted under this section. The notice must be:
 - a. Published in a newspaper of general circulation within the service area between fourteen and seven days before the meeting.
 - b. Delivered by first-class mail to the county auditor of each county in the service area at least seven days before the meeting.
5. The department shall facilitate the initial distressed ambulance service meeting. The meeting must focus on identifying the distressed ambulance service's strengths, weaknesses, potential opportunities, and threats.
6. Following the initial meeting, a distressed ambulance work group must be created to develop an emergency medical services plan.
 - a. A distressed ambulance work group must include:
 - (1) At least one representative of the distressed ambulance service.
 - (2) A representative of the county commissioner.
 - (3) A representative of each impacted city council.
 - (4) A representative of the impacted law enforcement agencies.
 - (5) A representative of the impacted school board.
 - (6) A citizen representative.
 - b. An emergency medical services plan may include:
 - (1) Recruitment and training initiatives.
 - (2) Review of available grant programs and one-time funding opportunities issued by the state or other entities.

- 1 (3) The issuance of a waiver by the department allowing adjacent ambulances
- 2 to assist in coverage.
- 3 (4) Consideration of regional ambulance service establishment.
- 4 7. If the work group determines the distressed ambulance service's license must be
- 5 downgraded, the department shall divide the service in accordance with department
- 6 rules. An applicable tax district must be divided to the adjacent ambulance service
- 7 without a vote.
- 8 8. The department shall monitor the distressed ambulance service and distressed
- 9 ambulance work group.
- 10 9. The department may adopt rules to administer this section.
- 11 **SECTION 2. EMERGENCY.** This Act is declared to be an emergency measure.

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

SB 2033

4/2/2025

Relating to the distressed ambulance service program; to provide for a legislative management report; to provide an appropriation; and to provide a continuing appropriation.

3:50 p.m. Chairman M. Ruby opened the meeting.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios
Members Absent: Representative Rohr

Discussion Topics:

- Committee action

3:50 p.m. Representative Fegley discussed amendments, LC#25.0113.03002 #44590.

3:58 p.m. Representative Fegley moved to adopt LC#25.0113.03002 with changes to training of staff.

4:00 p.m. Representative Holle seconded the motion.

Representatives	Vote
Representative Matthew Ruby	Y
Representative Kathy Frelich	Y
Representative Karen Anderson	Y
Representative Mike Beltz	Y
Representative Macy Bolinske	Y
Representative Jayme Davis	Y
Representative Gretchen Dobervich	Y
Representative Cleyton Fegley	Y
Representative Jared Hendrix	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Nico Rios	Y
Representative Karen Rohr	AB

4:01 p.m. Motion passed 12-0-1.

4:02 p.m. Vice-chairman Frelich moved a Do Pass as amended.

4:02 p.m. Representative Fegley seconded the motion.

Representatives	Vote
Representative Matthew Ruby	Y

Representative Kathy Frelich	Y
Representative Karen Anderson	Y
Representative Mike Beltz	Y
Representative Macy Bolinske	Y
Representative Jayme Davis	Y
Representative Gretchen Dobervich	Y
Representative Cleyton Fegley	Y
Representative Jared Hendrix	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Nico Rios	Y
Representative Karen Rohr	AB

4:03 p.m. Motion passed 12-0-1.

Representative Fegley will carry the bill.

4:03 p.m. Chairman M. Ruby closed the meeting.

Jackson Toman, Committee Clerk

April 2, 2025 CO

Sixty-ninth
Legislative Assembly
of North Dakota

**PROPOSED AMENDMENTS TO
FIRST ENGROSSMENT**

4/2/25
1068

ENGROSSED SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; to provide an appropriation; and to provide a continuing appropriation for an Act to create
4 and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to
5 distressed ambulance services; and to declare an emergency.

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

7 ~~SECTION 1. Chapter 23-27.2 of the North Dakota Century Code is created and enacted as~~
8 ~~follows:~~
9 ~~23-27.2-01. Definitions.~~
10 ~~As used in this chapter:~~
11 ~~1. "Department" means the department of health and human services.~~
12 ~~2. "Distressed ambulance service" means a licensee the department has declared a~~
13 ~~distressed ambulance service under section 23-27.2-05.~~
14 ~~3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a~~
15 ~~distressed ambulance service to deliver sustainable and reliable emergency medical~~
16 ~~response and transport services to a patient within an assigned service area.~~
17 ~~4. "Licensee" means an emergency medical services operation as defined in section~~
18 ~~23-27-02.~~
19 ~~5. "Program" means the distressed ambulance service program.~~

~~23-27.2-02. Program creation and administration.~~

~~1. The distressed ambulance service program is hereby created.~~

~~2. The department shall:~~

~~a. Carry out the administrative functions of the program;~~

~~b. Adopt rules necessary to implement this chapter and manage the program;~~

~~c. Take reasonable measures to ensure reliable ambulance response within a distressed ambulance service's assigned service area;~~

~~d. Monitor the implementation of a response approved under section 23-27.2-04;~~

~~e. Monitor the implementation of a plan approved under section 23-27.2-06; and~~

~~f. Annually evaluate issued waivers.~~

~~3. The department may:~~

~~a. Issue waivers; and~~

~~b. Suspend or revoke a distressed ambulance service's license in accordance with section 23-27.2-06.~~

~~23-27.2-03. Licensee evaluation - Notice.~~

~~1. The department shall identify and evaluate licensees that have:~~

~~a. Failed to comply with federal or state law or regulation;~~

~~b. Indicated an intention to cease operation or change licensure level within sixty days; or~~

~~c. Indicated a substantial likelihood of failure to respond to requests for service.~~

~~2. Upon identification of a licensee that meets the criteria under subsection 1, the department may provide notice, in accordance with subsection 3, to the licensee by first-class mail. If provided, the notice must be sent to the:~~

~~a. Licensee;~~

~~b. Service leader of record;~~

~~c. Medical director of record; and~~

~~d. Political subdivision that has jurisdiction over the licensee, if applicable.~~

~~3. The notice must include:~~

~~a. The deadline for the licensee to respond in accordance with section 23-27.2-04;~~

~~b. If the licensee failed to comply with federal or state law or regulation, the law or regulation violated;~~

- 1 ~~e. A detailed description of the violation or noncompliance;~~
- 2 ~~d. The corrective action that must be taken by the licensee; and~~
- 3 ~~e. Any resources available to the licensee to assist in taking corrective action.~~

4 ~~**23-27.2-04. Licensee Response.**~~

- 5 ~~1. A licensee that receives a notice under section 23-27.2-03 shall respond to the~~
- 6 ~~department within forty-five days of the date of the notice. The response must include:~~
- 7 ~~a. The licensee's proposed corrective action to address the violation or~~
- 8 ~~noncompliance;~~
- 9 ~~b. The licensee's proposed time frame in which to take corrective action and~~
- 10 ~~become fully compliant; and~~
- 11 ~~c. If necessary, a request for a waiver.~~
- 12 ~~2. Within fifteen days of the date of the response, the department shall:~~
- 13 ~~a. Approve the response; or~~
- 14 ~~b. Request the licensee amend the response.~~
- 15 ~~3. The department may extend the deadline to respond if an amendment to the response~~
- 16 ~~is requested under subsection 2.~~

17 ~~**23-27.2-05. Distressed ambulance service - Declaration and notice.**~~

- 18 ~~1. The department may declare a licensee a distressed ambulance service if the~~
- 19 ~~licensee:~~
- 20 ~~a. Failed to respond to the department in accordance with section 23-27.2-04;~~
- 21 ~~b. Failed to make sufficient progress to address the violation or noncompliance~~
- 22 ~~described in the notice;~~
- 23 ~~c. Failed to take corrective action in accordance with the approved response;~~
- 24 ~~d. Indicated an intention to cease operation or change licensure level within sixty~~
- 25 ~~days; or~~
- 26 ~~e. Indicated a substantial likelihood of failure to respond to requests for service.~~
- 27 ~~2. The department shall provide notice of the declaration by first class mail to the~~
- 28 ~~recipients under subsection 2 of section 23-27.2-03. The notice must include the~~
- 29 ~~department's basis for the declaration.~~

~~23-27.2-06. Distressed ambulance service - Procedure - Plan.~~

~~1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.~~

~~2. The emergency medical services plan must:~~

~~a. Include a detailed planning and implementation timeline to deliver sustainable and reliable emergency medical response and transport services to a patient within the assigned service area;~~

~~b. Evaluate the impact on the assigned and adjacent service areas; and~~

~~c. Consider input from stakeholders, including:~~

~~(1) The distressed ambulance service;~~

~~(2) The political subdivision that has jurisdiction over the distressed ambulance service;~~

~~(3) The county and city governments within the service area;~~

~~(4) Licensed medical facilities;~~

~~(5) Adjacent ambulance services;~~

~~(6) Other emergency medical services within the service area; and~~

~~(7) Other interested parties.~~

~~3. The coordinator shall present a proposed plan at a public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of assignment. The coordinator shall allow stakeholders and the public the opportunity to provide input relating to the plan.~~

~~4. The coordinator shall present a final plan at a second public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of the first public meeting.~~

~~a. The distressed ambulance service shall approve or reject the department's final plan at the second public meeting.~~

~~(1) If the distressed ambulance service approves the plan, the distressed ambulance service shall comply with all aspects of the plan.~~

- 1 ~~(2) If the distressed ambulance service rejects the plan, the service leader of~~
2 ~~record shall present an amended plan to the department within fourteen~~
3 ~~days after the date of the second public meeting.~~
- 4 ~~b. The department shall approve or reject the amended plan within seven days of~~
5 ~~receipt.~~
- 6 ~~5. If the department and distressed ambulance service are unable to agree on a plan, or~~
7 ~~if the distressed ambulance service fails to comply with any aspect of an approved~~
8 ~~plan, the department may take action as necessary to protect the health, safety, and~~
9 ~~welfare of the public, in accordance with section 23-27.2-02.~~
- 10 ~~6. The department shall provide notice of a public meeting conducted under this section.~~
11 ~~The notice must be:~~
- 12 ~~a. Published in a newspaper of general circulation within the service area between~~
13 ~~fourteen and seven days before the meeting; and~~
- 14 ~~b. Delivered by first class mail to the county auditor of each county in the service~~
15 ~~area at least seven days before the meeting.~~
- 16 ~~7. The department may request the distressed ambulance service reimburse the~~
17 ~~department for costs associated with administering this section and for any reasonable~~
18 ~~measures taken to ensure reliable ambulance response within the distressed~~
19 ~~ambulance service's assigned service area. The distressed ambulance service shall~~
20 ~~reimburse the department within thirty days after receipt of the request.~~
- 21 ~~**23-27.2-07. Distressed ambulance service program - Continuing appropriation.**~~
22 ~~There is created in the state treasury a distressed ambulance service program fund. The~~
23 ~~fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in~~
24 ~~the fund. Moneys in the fund are appropriated to the department on a continuing basis for the~~
25 ~~purposes of administering this chapter, including for the payment of contractor fees and~~
26 ~~expenses incurred by or for the operation of the program.~~
- 27 ~~**23-27.2-08. Distressed ambulance service program - Report to legislative**~~
28 ~~**management.**~~
- 29 ~~Each interim, the department shall provide a report to the legislative management regarding~~
30 ~~the status of the program. The report must include the provisions of the program, the number of~~

~~distressed ambulance services, coordinated efforts and activities, program costs and expenses,
and the overall effectiveness of the program.~~

~~SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -
DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING.~~ There is
appropriated out of any moneys in the general fund in the state treasury, not otherwise
appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the
department of health and human services for the purpose of contracting with a consultant to
identify, evaluate, and develop a plan to manage distressed ambulance services, for the
biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
section is considered a one-time funding item.

SECTION 1. A new section to chapter 23-27 of the North Dakota Century Code is created
and enacted as follows:

Distressed ambulance service - Distressed ambulance work group.

1. As used in this section:

a. "Distressed ambulance service" means a licensee that:

**(1) Self-indicates to the department a substantial likelihood of closure within the
next year; or**

**(2) Is identified by the department as failing to comply with federal or state law
or regulation and is likely to face closure within the next year.**

**b. "Emergency medical services plan" or "plan" means a detailed improvement plan
for a distressed ambulance service developed by the department and the
distressed ambulance work group to deliver sustainable and reliable emergency
medical response and transport services to a patient within an assigned service
area.**

**2. If a licensee is identified by the department as a distressed ambulance service, the
department shall identify stakeholders and schedule an initial public meeting with the
stakeholders within forty-five days. The department shall notify the distressed
ambulance service of the department's intent to schedule a public meeting. If the
distressed ambulance service does not respond to the notice within forty-five days, the
department has an additional fifteen days to schedule the initial public meeting.**

- 1 3. The stakeholders identified and notified by the department of the initial public meeting
2 must include:
 - 3 a. The political subdivision that has jurisdiction over the distressed ambulance
4 service.
 - 5 b. The county and city governments within the service area.
 - 6 c. Licensed medical facilities.
 - 7 d. Adjacent ambulance services.
 - 8 e. Other emergency medical services within the service area.
- 9 4. The department shall provide notice of an initial public meeting conducted under this
10 section. The notice must be:
 - 11 a. Published in a newspaper of general circulation within the service area between
12 fourteen and seven days before the meeting.
 - 13 b. Delivered by first-class mail to the county auditor of each county in the service
14 area at least seven days before the meeting.
- 15 5. The department shall facilitate the initial distressed ambulance service meeting. The
16 meeting must focus on identifying the distressed ambulance service's strengths,
17 weaknesses, potential opportunities, and threats.
- 18 6. Following the initial meeting, a distressed ambulance work group must be created to
19 develop an emergency medical services plan.
 - 20 a. A distressed ambulance work group must include:
 - 21 (1) At least one representative of the distressed ambulance service.
 - 22 (2) A representative of the county commissioner.
 - 23 (3) A representative of each impacted city council.
 - 24 (4) A representative of the impacted law enforcement agencies.
 - 25 (5) A representative of the impacted school board.
 - 26 (6) A citizen representative.
 - 27 b. An emergency medical services plan may include:
 - 28 (1) Recruitment and training initiatives.
 - 29 (2) Review of available grant programs and one-time funding opportunities
30 issued by the state or other entities for the hiring of staff.

- 1 (3) The issuance of a waiver by the department allowing adjacent ambulances
- 2 to assist in coverage.
- 3 (4) Consideration of regional ambulance service establishment.
- 4 7. If the work group determines the distressed ambulance service's license must be
- 5 downgraded, the department shall divide the service in accordance with department
- 6 rules. An applicable tax district must be divided to the adjacent ambulance service
- 7 without a vote.
- 8 8. The department shall monitor the distressed ambulance service and distressed
- 9 ambulance work group.
- 10 9. The department may adopt rules to administer this section.
- 11 **SECTION 2. EMERGENCY.** This Act is declared to be an emergency measure.

**REPORT OF STANDING COMMITTEE
ENGROSSED SB 2033**

Human Services Committee (Rep. M. Ruby, Chairman) recommends **AMENDMENTS** ([25.0113.03003](#)) and when so amended, recommends **DO PASS** (12 YEAS, 0 NAYS, 1 ABSENT OR EXCUSED AND NOT VOTING). Engrossed SB 2033 was placed on the Sixth order on the calendar.

SB 2033

Sixty-ninth
Legislative Assembly

~~distressed ambulance services, coordinated efforts and activities, program costs and expenses,
and the overall effectiveness of the program.~~

~~SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -
DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING. There is
appropriated out of any moneys in the general fund in the state treasury, not otherwise
appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the
department of health and human services for the purpose of contracting with a consultant to
identify, evaluate, and develop a plan to manage distressed ambulance services, for the
biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
section is considered a one-time funding item.~~

SECTION 1. A new section to chapter 23-27 of the North Dakota Century Code is created
and enacted as follows:

Distressed ambulance service - Distressed ambulance work group.

1. As used in this section:

a. "Department" means the department of health and human services.

b. "Distressed ambulance service" means a licensee that:

**(1) Self-indicates to the department a substantial likelihood of closure within the
next year; or**

**(2) Is identified by the department as failing to comply with federal or state law
or regulation and is likely to face closure within the next year.**

**c. "Emergency medical services plan" or "plan" means a detailed improvement plan
for a distressed ambulance service developed by the department and the
distressed ambulance work group to deliver sustainable and reliable emergency
medical response and transport services to a patient within an assigned service
area.**

**2. If a licensee is identified by the department as a distressed ambulance service, the
department shall identify stakeholders and schedule an initial public meeting with the
stakeholders within forty-five days. The department shall notify the distressed
ambulance service of the department's intent to schedule a public meeting. If the
distressed ambulance service does not respond to the notice within forty-five days, the
department has an additional fifteen days to schedule the initial public meeting.**

- 1 3. The stakeholders identified and notified by the department of the initial public meeting
2 must include:
 - 3 a. The political subdivision that has jurisdiction over the distressed ambulance
4 service.
 - 5 b. The county and city governments within the service area.
 - 6 c. Licensed medical facilities.
 - 7 d. Adjacent ambulance services.
 - 8 e. Other emergency medical services within the service area.
- 9 4. The department shall provide notice of an initial public meeting conducted under this
10 section. The notice must be:
 - 11 a. Published in a newspaper of general circulation within the service area between
12 fourteen and seven days before the meeting.
 - 13 b. Delivered by first-class mail to the county auditor of each county in the service
14 area at least seven days before the meeting.
- 15 5. The department shall facilitate the initial distressed ambulance service meeting. The
16 meeting must focus on identifying the distressed ambulance service's strengths,
17 weaknesses, potential opportunities, and threats.
- 18 6. Following the initial meeting, a distressed ambulance work group must be created to
19 develop an emergency medical services plan.
 - 20 a. A distressed ambulance work group must include:
 - 21 (1) At least one representative of the distressed ambulance service.
 - 22 (2) A representative of the county commissioner.
 - 23 (3) A representative of each impacted city council.
 - 24 (4) A representative of the impacted law enforcement agencies.
 - 25 (5) A representative of the impacted school board.
 - 26 (6) A citizen representative.
 - 27 b. An emergency medical services plan may include:
 - 28 (1) Recruitment and training initiatives.
 - 29 (2) Review of available grant programs and one-time funding opportunities
30 issued by the state or other entities for the hiring of staff.

1 (3) The issuance of a waiver by the department allowing adjacent ambulances
2 to assist in coverage ~~when staff is in training~~.

3 (4) Consideration of regional ambulance service establishment.

4 7. If the work group determines the distressed ambulance service's license must be
5 downgraded, the department shall divide the service in accordance with department
6 rules. An applicable tax district must be divided to the adjacent ambulance service
7 without a vote.

8 8. The department shall monitor the distressed ambulance service and distressed
9 ambulance work group.

10 9. The department may adopt rules to administer this section.

11 **SECTION 2. EMERGENCY.** This Act is declared to be an emergency measure.

2025 CONFERENCE COMMITTEE

SB 2033

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Lincoln Room, State Capitol

SB 2033
4/17/2025
Conference Committee

A BILL for an Act to create and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to distressed ambulance services; and to declare an emergency.

10:00 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Senator Clemens, Senator Hogan, Senator Roers, Representative Fegley, Representative Rios, Representative Anderson.

Discussion Topics:

- Grant funding
- Program discontinuation
- Public awareness
- Educational outreach

10:01 a.m. Representative Fegley opened discussion and submitted testimony #45054.

10:15 a.m. Chairman Lee discussed potential program discontinuation.

10:30 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

Sixty-ninth
Legislative Assembly

- 1 ~~(2) If the distressed ambulance service rejects the plan, the service leader of~~
- 2 ~~record shall present an amended plan to the department within fourteen~~
- 3 ~~days after the date of the second public meeting.~~
- 4 ~~b. The department shall approve or reject the amended plan within seven days of~~
- 5 ~~receipt.~~
- 6 ~~5. If the department and distressed ambulance service are unable to agree on a plan, or~~
- 7 ~~if the distressed ambulance service fails to comply with any aspect of an approved~~
- 8 ~~plan, the department may take action as necessary to protect the health, safety, and~~
- 9 ~~welfare of the public, in accordance with section 23-27.2-02.~~
- 10 ~~6. The department shall provide notice of a public meeting conducted under this section.~~
- 11 ~~The notice must be:~~
- 12 ~~a. Published in a newspaper of general circulation within the service area between~~
- 13 ~~fourteen and seven days before the meeting; and~~
- 14 ~~b. Delivered by first-class mail to the county auditor of each county in the service~~
- 15 ~~area at least seven days before the meeting.~~
- 16 ~~7. The department may request the distressed ambulance service reimburse the~~
- 17 ~~department for costs associated with administering this section and for any reasonable~~
- 18 ~~measures taken to ensure reliable ambulance response within the distressed~~
- 19 ~~ambulance service's assigned service area. The distressed ambulance service shall~~
- 20 ~~reimburse the department within thirty days after receipt of the request.~~
- 21 ~~**23-27.2-07. Distressed ambulance service program - Continuing appropriation.**~~
- 22 ~~There is created in the state treasury a distressed ambulance service program fund. The~~
- 23 ~~fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in~~
- 24 ~~the fund. Moneys in the fund are appropriated to the department on a continuing basis for the~~
- 25 ~~purposes of administering this chapter, including for the payment of contractor fees and~~
- 26 ~~expenses incurred by or for the operation of the program.~~
- 27 ~~**23-27.2-08. Distressed ambulance service program - Report to legislative**~~
- 28 ~~**management.**~~
- 29 ~~Each interim, the department shall provide a report to the legislative management regarding~~
- 30 ~~the status of the program. The report must include the provisions of the program, the number of~~

~~distressed ambulance services, coordinated efforts and activities, program costs and expenses,~~
~~and the overall effectiveness of the program.~~

~~SECTION 2. APPROPRIATION - DEPARTMENT OF HEALTH AND HUMAN SERVICES -~~

~~DISTRESSED AMBULANCE SERVICE PROGRAM - ONE-TIME FUNDING.~~ There is
appropriated out of any moneys in the general fund in the state treasury, not otherwise
appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the
department of health and human services for the purpose of contracting with a consultant to
identify, evaluate, and develop a plan to manage distressed ambulance services, for the
biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
section is considered a one-time funding item.

SECTION 1. A new section to chapter 23-27 of the North Dakota Century Code is created
and enacted as follows:

Distressed ambulance service - Distressed ambulance workgroup.

1. As used in this section:

a. "Distressed ambulance service" means a licensee that:

(1) Self-indicates to the department a substantial likelihood of closing within the
next year; or

(2) Is identified by the department as failing to comply with federal or state law
or regulation and is likely to close within the next year.

b. "Emergency medical services plan" or "plan" means a detailed improvement plan
for a distressed ambulance service developed by the department and the
distressed ambulance workgroup to deliver sustainable and reliable emergency
medical response and transport services to a patient within an assigned service
area.

2. If a licensee is identified by the department as a distressed ambulance service, the
department shall identify stakeholders and schedule an initial public meeting with the
stakeholders within forty-five days. The department shall notify the distressed
ambulance service of the department's intent to schedule a public meeting. If the
distressed ambulance service does not respond to the notice within forty-five days, the
department has an additional fifteen days to schedule the initial public meeting.

- 1 3. The stakeholders identified and notified by the department of the initial public meeting
- 2 must include:
- 3 a. The political subdivision that has jurisdiction over the distressed ambulance
- 4 service.
- 5 b. The county and city governments within the service area.
- 6 c. Licensed medical facilities.
- 7 d. Adjacent ambulance services.
- 8 e. Other emergency medical services within the service area.
- 9 4. The department shall provide notice of an initial public meeting conducted under this
- 10 section. The notice must be:
- 11 a. Published in a newspaper of general circulation within the service area between
- 12 fourteen and seven days before the meeting.
- 13 b. Delivered by first-class mail to the county auditor of each county in the service
- 14 area at least seven days before the meeting.
- 15 5. The department shall facilitate the initial distressed ambulance service meeting. The
- 16 meeting must focus on identifying the distressed ambulance service's strengths,
- 17 weaknesses, potential opportunities, and threats.
- 18 6. Following the initial meeting, a distressed ambulance workgroup must be created to
- 19 develop an emergency medical services plan. A licensee identified as a distressed
- 20 ambulance service must cooperate with the department in the facilitation of services.
- 21 a. A distressed ambulance workgroup must include:
- 22 (1) At least one representative of the distressed ambulance service.
- 23 (2) A representative of the county commissioner.
- 24 (3) A representative of each impacted city council.
- 25 (4) A representative of each impacted adjacent ambulance service.
- 26 (5) A representative of the impacted law enforcement agencies.
- 27 (6) A representative of the impacted school board.
- 28 (7) A citizen representative.
- 29 b. An emergency medical services plan may include:
- 30 (1) Recruitment and training initiatives.

- 1 (2) Review of available grant programs and one-time funding opportunities
- 2 issued by the state or other entities for the hiring of staff.
- 3 (3) The issuance of a waiver by the department allowing adjacent ambulances
- 4 to assist in coverage.
- 5 (4) Adjustment of department grant programs to assist in hiring.
- 6 (5) Consideration of regional ambulance service establishment.
- 7 7. If the workgroup determines the distressed ambulance service's license must be
- 8 downgraded, the department shall divide the service in accordance with department
- 9 rules. An applicable tax district must be divided to the adjacent ambulance service
- 10 without a vote.
- 11 8. The department shall monitor the distressed ambulance service and distressed
- 12 ambulance workgroup.
- 13 9. A distressed ambulance service may not discontinue the provision of emergency
- 14 services unless the licensee gives a minimum of one month prior notice to the
- 15 department.
- 16 10. The department may adopt rules to administer this section.
- 17 **SECTION 2. EMERGENCY.** This Act is declared to be an emergency measure.

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Lincoln Room, State Capitol

SB 2033
4/21/2025
Conference Committee

A BILL for an Act to create and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to distressed ambulance services; and to declare an emergency.
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10:01 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers.

Discussion Topics:

- Work group transition
- Early Intervention
- Third-party oversight
- Debt resolution

10:02 a.m. Senator Roers opened discussion on proposed amendment submitted testimony #45101.

10:18 a.m. Tim Wiedrich, Health Response and Licensure Section, answered committee questions.

10:30 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

25.0113.03005
Title.

Prepared by the Legislative Council
staff for Senator Roers
April 18, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO FIRST ENGROSSMENT

ENGROSSED SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

In place of amendment (25.0113.03003) adopted by the House, Engrossed Senate Bill No. 2033 is amended by amendment (25.0113.03005) as follows:

1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; ~~to provide an appropriation; and~~ to provide a continuing appropriation; and to declare an
4 emergency.

5 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

6 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
7 follows:

8 **23-27.2-01. Definitions.**

9 As used in this chapter:

10 1. "Department" means the department of health and human services.

11 2. "Distressed ambulance service" means a licensee ~~the~~:

12 a. That self-indicates a substantial likelihood of closure within the next year; or

13 b. The department has declared a distressed ambulance service under section

14 23-27.2-05.

15 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
16 distressed ambulance service ~~developed by the department and the distressed~~
17 ambulance workgroup to deliver sustainable and reliable emergency medical response
18 and transport services to a patient within an assigned service area.

19 4. "Licensee" means an emergency medical services operation as defined in section

20 23-27-02.

1 5. "Program" means the distressed ambulance service program.

2 **23-27.2-02. Program creation and administration.**

3 1. The distressed ambulance service program is hereby created.

4 2. The department shall:

5 a. Carry out the administrative functions of the program;

6 b. Adopt rules necessary to implement this chapter and manage the program;

7 c. Take reasonable measures to ensure reliable ambulance response within a
8 distressed ambulance service's assigned service area;

9 d. Monitor the implementation of a response approved under section 23-27.2-04;

10 e. Monitor the implementation of a plan approved under section 23-27.2-06; and

11 f. Annually evaluate issued waivers.

12 3. The department may:

13 a. Issue waivers; and

14 b. Suspend or revoke a distressed ambulance service's license in accordance with
15 section 23-27.2-06.

16 **23-27.2-03. Licensee evaluation - Notice.**

17 1. The department shall identify and evaluate licensees that have:

18 a. Failed to comply with federal or state law or regulation;

19 b. Indicated an intention to cease operation or change licensure level within sixty
20 days; or

21 c. Indicated a substantial likelihood of failure to respond to requests for service.

22 2. Upon identification of a licensee that meets the criteria under subsection 1, the
23 department may provide notice, in accordance with subsection 3, to the licensee by
24 first-class mail. If provided, the notice must be sent to the:

25 a. Licensee;

26 b. Service leader of record;

27 c. Medical director of record; and

28 d. Political subdivision that has jurisdiction over the licensee, if applicable.

29 3. The notice must include:

30 a. The deadline for the licensee to respond in accordance with section 23-27.2-04;

- b. If the licensee failed to comply with federal or state law or regulation, the law or regulation violated;
- c. A detailed description of the violation or noncompliance;
- d. The corrective action that must be taken by the licensee; and
- e. Any resources available to the licensee to assist in taking corrective action.

23-27.2-04. Licensee - Response.

1. A licensee that receives a notice under section 23-27.2-03 shall respond to the department within forty-five days of the date of the notice. The response must include:
 - a. The licensee's proposed corrective action to address the violation or noncompliance;
 - b. The licensee's proposed time frame in which to take corrective action and become fully compliant; and
 - c. If necessary, a request for a waiver.
2. Within fifteen days of the date of the response, the department shall:
 - a. Approve the response; or
 - b. Request the licensee amend the response.
3. The department may extend the deadline to respond if an amendment to the response is requested under subsection 2.

23-27.2-05. Distressed ambulance service - Declaration and notice.

1. The department may declare a licensee a distressed ambulance service if the licensee:
 - a. Failed to respond to the department in accordance with section 23-27.2-04;
 - b. Failed to make sufficient progress to address the violation or noncompliance described in the notice;
 - c. Failed to take corrective action in accordance with the approved response;
 - d. Indicated an intention to cease operation or change licensure level within sixty days; or
 - e. Indicated a substantial likelihood of failure to respond to requests for service.
2. The department shall provide notice of the declaration by first-class mail to the recipients under subsection 2 of section 23-27.2-03. The notice must include the department's basis for the declaration.

23-27.2-06. Distressed ambulance service - ~~Procedure~~Workgroup - Plan.

- ~~1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.~~
- ~~2. The emergency medical services plan must:~~
 - ~~a. Include a detailed planning and implementation timeline to deliver sustainable and reliable emergency medical response and transport services to a patient within the assigned service area;~~
 - ~~b. Evaluate the impact on the assigned and adjacent service areas; and~~
 - ~~c. Consider input from stakeholders, including:~~
 - ~~(1) The distressed ambulance service;~~
 - ~~(2) The political subdivision that has jurisdiction over the distressed ambulance service;~~
 - ~~(3) The county and city governments within the service area;~~
 - ~~(4) Licensed medical facilities;~~
 - ~~(5) Adjacent ambulance services;~~
 - ~~(6) Other emergency medical services within the service area; and~~
 - ~~(7) Other interested parties.~~
- ~~3. The coordinator shall present a proposed plan at a public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of assignment. The coordinator shall allow stakeholders and the public the opportunity to provide input relating to the plan.~~
- ~~4. The coordinator shall present a final plan at a second public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of the first public meeting.~~
 - ~~a. The distressed ambulance service shall approve or reject the department's final plan at the second public meeting.~~
 - ~~(1) If the distressed ambulance service approves the plan, the distressed ambulance service shall comply with all aspects of the plan.~~

~~(2) If the distressed ambulance service rejects the plan, the service leader of record shall present an amended plan to the department within fourteen days after the date of the second public meeting.~~

~~b. The department shall approve or reject the amended plan within seven days of receipt.~~

~~5. If the department and distressed ambulance service are unable to agree on a plan, or if the distressed ambulance service fails to comply with any aspect of an approved plan, the department may take action as necessary to protect the health, safety, and welfare of the public, in accordance with section 23-27.2-02.~~

~~6. The department shall provide notice of a public meeting conducted under this section. The notice must be:~~

~~a. Published in a newspaper of general circulation within the service area between fourteen and seven days before the meeting; and~~

~~b. Delivered by first-class mail to the county auditor of each county in the service area at least seven days before the meeting.~~

~~7. The department may request the distressed ambulance service reimburse the department for costs associated with administering this section and for any reasonable measures taken to ensure reliable ambulance response within the distressed ambulance service's assigned service area. The distressed ambulance service shall reimburse the department within thirty days after receipt of the request.~~ If a licensee is

identified by the department as a distressed ambulance service, the department shall:

a. Identify stakeholders and schedule an initial public meeting with the stakeholders within forty-five days.

b. Notify the distressed ambulance service of the department's intent to schedule a public meeting. If the distressed ambulance service does not respond to the notice within forty-five days, the department has an additional fifteen days to schedule the initial public meeting.

2. The stakeholders identified and notified by the department of the initial public meeting must include:

a. The political subdivision that has jurisdiction over the distressed ambulance service.

- 1 b. The county and city governments within the service area.
- 2 c. Licensed medical facilities.
- 3 d. Adjacent ambulance services.
- 4 e. Other emergency medical services within the service area.
- 5 3. The department shall provide notice of an initial public meeting conducted under this
- 6 section. The notice must be:
- 7 a. Published in a newspaper of general circulation within the service area between
- 8 fourteen and seven days before the meeting.
- 9 b. Delivered by first-class mail to the county auditor of each county in the service
- 10 area at least seven days before the meeting.
- 11 4. The department shall facilitate the initial distressed ambulance service meeting. The
- 12 meeting must focus on identifying the distressed ambulance service's strengths,
- 13 weaknesses, potential opportunities, and threats.
- 14 5. Within fifteen days of the initial meeting, a distressed ambulance workgroup must be
- 15 created to develop, in collaboration with the department, an emergency medical
- 16 services plan.
- 17 a. A distressed ambulance workgroup must include the following individuals
- 18 appointed by the commissioner of the department:
- 19 (1) At least one representative of the distressed ambulance service.
- 20 (2) One representative of the county commission of a county within the
- 21 distressed ambulance service's assigned service area.
- 22 (3) One representative of an impacted city council.
- 23 (4) One representative of the impacted law enforcement agencies.
- 24 (5) One representative of the impacted health care facilities.
- 25 (6) One representative of the impacted school board.
- 26 (7) One representative of an adjacent ambulance service.
- 27 (8) One representative of the ambulance district board.
- 28 (9) A citizen representative.
- 29 b. An emergency medical services plan may include:
- 30 (1) Recruitment and training initiatives.

1 (2) Review of available grant programs and one-time funding opportunities
2 issued by the state or other entities for the hiring of staff.

3 (3) Consideration of regional ambulance service establishment.

4 6. The workgroup shall present a final plan to the department and the ambulance district
5 board within thirty days of the date of the workgroup's first meeting.

6 7. If the workgroup determines the distressed ambulance service's licensure level must
7 change, the department shall divide the service in accordance with department rules.
8 An applicable tax district must be divided to the adjacent ambulance service without a
9 vote and in accordance with chapter 11-28.3.

10 **23-27.2-07. Distressed ambulance service program - Continuing appropriation.**

11 There is created in the state treasury a distressed ambulance service program fund. The
12 fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in
13 the fund. Moneys in the fund are appropriated to the department on a continuing basis for the
14 purposes of administering this chapter, including for the payment of contractor fees and
15 expenses incurred by or for the operation of the program.

16 **23-27.2-08. Distressed ambulance service program - Report to legislative**
17 **management.**

18 Each interim, the department shall provide a report to the legislative management regarding
19 the status of the program. The report must include the provisions of the program, the number of
20 distressed ambulance services, coordinated efforts and activities, program costs and expenses,
21 and the overall effectiveness of the program.

22 ~~— SECTION 2. APPROPRIATION – DEPARTMENT OF HEALTH AND HUMAN SERVICES –~~
23 ~~DISTRESSED AMBULANCE SERVICE PROGRAM – ONE-TIME FUNDING.~~ There is
24 ~~appropriated out of any moneys in the general fund in the state treasury, not otherwise~~
25 ~~appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the~~
26 ~~department of health and human services for the purpose of contracting with a consultant to~~
27 ~~identify, evaluate, and develop a plan to manage distressed ambulance services, for the~~
28 ~~biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this~~
29 ~~section is considered a one-time funding item.~~

30 **SECTION 2. EMERGENCY.** This Act is declared to be an emergency measure.

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Lincoln Room, State Capitol

SB 2033
4/22/2025
Conference Committee

A BILL for an Act to create and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to distressed ambulance services; and to declare an emergency.
--

10:06 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Senator Clemens, Senator Roers, Representative Fegley, Representative Anderson, Representative Rios.

Discussion Topics:

- Code compliance concerns
- Work group stakeholders
- Public exclusion
- Administrative Rules Committee process

10:07 a.m. Allyson Hicks, General Counsel with the Department of Health and Human Services, answered committee questions.

10:39 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2033
4/23/2025
Conference Committee

A BILL for an Act to create and enact a new section to chapter 23-27 of the North Dakota Century Code, relating to distressed ambulance services; and to declare an emergency.

10:01 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Senator Roers, Senator Clemens, Representative Fegley, Representative Rios, Representative K. Anderson.

Discussion Topics:

- Local support level
- Staffing gaps

10:01 a.m. Senator Roers opened discussion on submitted testimony #45177.

10:04 a.m. Allyson Hicks, General Counsel Department of Health and Human Services, answered committee.

10:05 a.m. Tim Wiedrich, Section Chief, ND EMS, answered committee questions.

10:22 a.m. Chris Price, Director of Emergency Medical Systems with North Dakota Department of Health and Human Services, answered committee questions.

10:29 a.m. Senator Roers moved Amendment LC#25.0113.03006 in place of House Amendment LC#25.0113.03003.

10:31 a.m. Senator Clemens seconded the motion.

Motion passed 6-0-0.

Senator Roers will carry the bill.

Representative Fegley will carry the bill.

10:33 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

April 23, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

**PROPOSED AMENDMENTS TO
FIRST ENGROSSMENT**

VC 4/23/25
1 of 6

ENGROSSED SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

In place of amendment (25.0113.03003) adopted by the House, Engrossed Senate Bill No. 2033 is amended by amendment (25.0113.03006).

- 1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; ~~to provide an appropriation;~~ and to provide a continuing appropriation.

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

5 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
6 follows:

7 **23-27.2-01. Definitions.**

8 As used in this chapter:

- 9 1. "Department" means the department of health and human services.
10 2. "Distressed ambulance service" means a licensee the department has declared a
11 distressed ambulance service under section 23-27.2-05.
12 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
13 distressed ambulance service to deliver sustainable and reliable emergency medical
14 response and transport services to a patient within an assigned service area.
15 4. "Licensee" means an emergency medical services operation as defined in section
16 23-27-02.
17 5. "Program" means the distressed ambulance service program.

18 **23-27.2-02. Program creation and administration.**

- 19 1. The distressed ambulance service program is hereby created.
20 2. The department shall:

- 1 a. Carry out the administrative functions of the program;
- 2 b. Adopt rules necessary to implement this chapter and manage the program;
- 3 c. Take reasonable measures to ensure reliable ambulance response within a
- 4 distressed ambulance service's assigned service area;
- 5 d. Monitor the implementation of a response approved under section 23-27.2-04;
- 6 e. Monitor the implementation of a plan approved under section 23-27.2-06; and
- 7 f. Annually evaluate issued waivers.

8 3. The department may:

- 9 a. ~~Issue waivers~~ Waive specific provisions of chapter 23-27 or rules adopted under
- 10 chapter 23-27 for a defined period of time, provided such waiver does not
- 11 adversely affect the health and safety of the public; and
- 12 b. Suspend or revoke a distressed ambulance service's license in accordance with
- 13 section 23-27.2-06.

14 **23-27.2-03. Licensee evaluation - Notice.**

15 1. The department shall identify and evaluate licensees that have:

- 16 a. ~~Failed~~ A substantial likelihood to fail to comply with federal or state law or
- 17 regulation;
- 18 b. Indicated an intention to cease operation or change licensure level within sixty
- 19 days; or
- 20 c. Indicated a substantial likelihood of failure to respond to requests for service.

21 2. Upon identification of a licensee that meets the criteria under subsection 1, the

22 department may provide notice, in accordance with subsection 3, to the licensee by

23 first-class mail. If provided, the notice must be sent to the:

- 24 a. Licensee;
- 25 b. Service leader of record;
- 26 c. Medical director of record; and
- 27 d. Political subdivision that has jurisdiction over the licensee, if applicable.

28 3. The notice must include:

- 29 a. The deadline for the licensee to respond in accordance with section 23-27.2-04;
- 30 b. ~~If the licensee failed to comply with federal or state law or regulation, the law or~~
- 31 regulation violated;

1 ~~_____ e. A detailed description of the violation or noncompliance~~ circumstances of the
2 licensee under subsection 1;

3 ~~d.c.~~ The proposed corrective action that must be taken by the licensee; and

4 ~~e.d.~~ Any resources available to the licensee to assist in taking corrective action.

5 **23-27.2-04. Licensee - Response.**

6 1. A licensee that receives a notice under section 23-27.2-03 shall respond to the
7 department within forty-five days of the date of the notice. The response must include:

8 a. The licensee's proposed corrective action to address the violation or
9 noncompliance criteria under subsection 1 of section 23-27.2-03;

10 b. The licensee's proposed time frame in which to take corrective action and
11 become fully compliant; and

12 c. If necessary, a request for a waiver.

13 2. Within fifteen days of the date of the response, the department shall:

14 a. Approve the response; or

15 b. Request the licensee amend the response.

16 3. The department may extend the deadline to respond if an amendment to the response
17 is requested under subsection 2.

18 **23-27.2-05. Distressed ambulance service - Declaration and notice.**

19 1. The department may declare a licensee a distressed ambulance service if the
20 licensee:

21 a. Failed to respond to the department in accordance with section 23-27.2-04;

22 b. Failed to make sufficient progress to address the violation or
23 noncompliance circumstances described in the notice;

24 c. Failed to take corrective action in accordance with the approved response;

25 d. Indicated an intention to cease operation or change licensure level within sixty
26 days; or

27 e. Indicated a substantial likelihood of failure to respond to requests for service.

28 2. The department shall provide notice of the declaration by first-class mail to the
29 recipients under subsection 2 of section 23-27.2-03. The notice must include the
30 department's basis for the declaration.

23-27.2-06. Distressed ambulance service - Procedure - Plan.

1. The department shall assign a coordinator to the distressed ambulance service within seven days of the date of the notice of declaration. The coordinator may be an employee of the department or a contractor. The coordinator shall develop, implement, and monitor an emergency medical services plan.
2. The emergency medical services plan must:
 - a. Include a detailed planning and implementation timeline to deliver sustainable and reliable emergency medical response and transport services to a patient within the assigned service area;
 - b. Evaluate the impact on the assigned and adjacent service areas; and
 - c. Consider input from stakeholders, including:
 - (1) The distressed ambulance service;
 - (2) The political subdivision that has jurisdiction over the distressed ambulance service;
 - (3) The county and city governments within the service area;
 - (4) Licensed medical facilities;
 - (5) Adjacent ambulance services;
 - (6) Other emergency medical services within the service area; and
 - (7) Other interested parties.
3. The coordinator shall present a proposed plan at a public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of assignment. The coordinator shall allow stakeholders and the public the opportunity to provide input relating to the plan.
4. The coordinator shall present a final plan at a second public meeting held in the distressed ambulance service's assigned service area within thirty days of the date of the first public meeting.
 - a. The distressed ambulance service shall approve or reject the department's final plan at the second public meeting.
 - (1) If the distressed ambulance service approves the plan, the distressed ambulance service shall comply with all aspects of the plan.

(2) If the distressed ambulance service rejects the plan, the service leader of record shall present an amended plan to the department within fourteen days after the date of the second public meeting.

b. The department shall approve or reject the amended plan within seven days of receipt.

5. If the department and distressed ambulance service are unable to agree on a plan, or if the distressed ambulance service fails to comply with any aspect of an approved plan, the department may take action as necessary to protect the health, safety, and welfare of the public, in accordance with section 23-27.2-02.

6. The department shall provide notice of a public meeting conducted under this section. The notice must be:

a. Published in a newspaper of general circulation within the service area between fourteen and seven days before the meeting; and

b. Delivered by first-class mail to the county auditor of each county in the service area at least seven days before the meeting.

7. The department may request the distressed ambulance service reimburse the department for ~~direct costs associated with administering~~ incurred in the administration of this section and for any reasonable measures taken to ensure reliable ambulance response within the distressed ambulance service's assigned service area. The distressed ambulance service shall reimburse the department within thirty days after receipt of the request.

23-27.2-07. Distressed ambulance service program - Continuing appropriation.

There is created in the state treasury a distressed ambulance service program fund. The fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in the fund. Moneys in the fund are appropriated to the department on a continuing basis for the purposes of administering this chapter, including for the payment of contractor fees and expenses incurred by or for the operation of the program.

23-27.2-08. Distressed ambulance service program - Report to legislative management.

Each interim, the department shall provide a report to the legislative management regarding the status of the program. The report must include the provisions of the program, the number of

distressed ambulance services, coordinated efforts and activities, program costs and expenses,
and the overall effectiveness of the program.

~~SECTION 2. APPROPRIATION DEPARTMENT OF HEALTH AND HUMAN SERVICES~~

~~DISTRESSED AMBULANCE SERVICE PROGRAM ONE-TIME FUNDING.~~ There is
appropriated out of any moneys in the general fund in the state treasury, not otherwise
appropriated, the sum of \$150,000, or so much of the sum as may be necessary, to the
department of health and human services for the purpose of contracting with a consultant to
identify, evaluate, and develop a plan to manage distressed ambulance services, for the
biennium beginning July 1, 2025, and ending June 30, 2027. The funding provided in this
section is considered a one-time funding item.

SB 2033 042325 1031 AM Roll Call Vote

Final Recommendation

SB 2033

Date Submitted: April 23, 2025, 10:31 a.m.

Recommendation: In Place Of

Amendment LC #: 25.0113.03006

Engrossed LC #: N/A

Description:

Motioned By: Roers, Kristin

Seconded By: Clemens, David A.

House Carrier: Fegley, Clayton

Senate Carrier: Roers, Kristin

Emergency Clause: None

Vote Results: 6 - 0 - 0

Sen. Lee, Judy	Yea
Sen. Roers, Kristin	Yea
Sen. Clemens, David A.	Yea
Rep. Fegley, Clayton	Yea
Rep. Rios, Nico	Yea
Rep. Anderson, Karen A.	Yea

**REPORT OF CONFERENCE COMMITTEE
ENGROSSED SB 2033**

Your conference committee (Sens. Lee, Roers, Clemens and Reps. Fegley, Rios, K. Anderson) recommends that in place of amendment [25.0113.03003](#) adopted by the House, Engrossed SB 2033 is amended by amendment [25.0113.03006](#).

Engrossed SB 2033 was placed on the Seventh order of business on the calendar.

Sixty-ninth
Legislative Assembly
of North Dakota

SENATE BILL NO. 2033

Introduced by

Legislative Management

(Health Services Committee)

1 A BILL for an Act to create and enact chapter 23-27.2 of the North Dakota Century Code,
2 relating to the distressed ambulance service program; to provide for a legislative management
3 report; and to provide a continuing appropriation.

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

5 **SECTION 1.** Chapter 23-27.2 of the North Dakota Century Code is created and enacted as
6 follows:

7 **23-27.2-01. Definitions.**

8 As used in this chapter:

9 1. "Department" means the department of health and human services.

10 2. "Distressed ambulance service" means a licensee the department has declared a
11 distressed ambulance service under section 23-27.2-05.

12 3. "Emergency medical services plan" or "plan" means a detailed improvement plan for a
13 distressed ambulance service to deliver sustainable and reliable emergency medical
14 response and transport services to a patient within an assigned service area.

15 4. "Licensee" means an emergency medical services operation as defined in section
16 23-27-02.

17 5. "Program" means the distressed ambulance service program.

18 **23-27.2-02. Program creation and administration.**

19 1. The distressed ambulance service program is hereby created.

20 2. The department shall:

21 a. Carry out the administrative functions of the program;

22 b. Adopt rules necessary to implement this chapter and manage the program;

23 c. Take reasonable measures to ensure reliable ambulance response within a
24 distressed ambulance service's assigned service area;

- d. Monitor the implementation of a response approved under section 23-27.2-04;
- e. Monitor the implementation of a plan approved under section 23-27.2-06; and
- f. Annually evaluate issued waivers.

3. The department may:

- a. ~~Issue waivers~~ Waive specific provisions of chapter 23-27 or administrative rules adopted under chapter 23-27 for a specific period of time provided such waiver does not adversely affect the health and safety of the public; and
- b. Suspend or revoke a distressed ambulance service's license in accordance with section 23-27.2-06.

23-27.2-03. Licensee evaluation - Notice.

1. The department shall identify and evaluate licensees that have:

- a. ~~Failed~~ The substantial likelihood to fail to comply with federal or state law or regulation;
- b. Indicated an intention to cease operation or change licensure level within sixty days; or
- c. Indicated a substantial likelihood of failure to respond to requests for service.

2. Upon identification of a licensee that meets the criteria under subsection 1, the department may provide notice, in accordance with subsection 3, to the licensee by first-class mail. If provided, the notice must be sent to the:

- a. Licensee;
- b. Service leader of record;
- c. Medical director of record; and
- d. Political subdivision that has jurisdiction over the licensee, if applicable.

3. The notice must include:

- a. The deadline for the licensee to respond in accordance with section 23-27.2-04;
- b. ~~If the licensee failed to comply with federal or state law or regulation, the law or regulation violated;~~
- e. A detailed description of the ~~violation or noncompliance~~ circumstances that led the licensee to meet the criteria under subsection 1;
- d. The ~~proposed~~ corrective action that must be taken by the licensee; and
- e. Any resources available to the licensee to assist in taking corrective action.

23-27.2-04. Licensee - Response.

1. A licensee that receives a notice under section 23-27.2-03 shall respond to the department within forty-five days of the date of the notice. The response must include:

1 a. The licensee's proposed corrective action to address the ~~violation or~~
2 ~~noncompliance~~ criteria under subsection 1;

3 b. The licensee's proposed time frame in which to take corrective action and
4 become fully compliant; and

5 c. If necessary, a request for a waiver.

6 2. Within fifteen days of the date of the response, the department shall:

7 a. Approve the response; or

8 b. Request the licensee amend the response.

9 3. The department may extend the deadline to respond if an amendment to the response
10 is requested under subsection 2.

11 **23-27.2-05. Distressed ambulance service - Declaration and notice.**

12 1. The department may declare a licensee a distressed ambulance service if the
13 licensee:

14 a. Failed to respond to the department in accordance with section 23-27.2-04;

15 b. Failed to make sufficient progress to address ~~the violation or noncompliance~~
16 circumstances described in the notice;

17 c. Failed to take corrective action in accordance with the approved response;

18 d. Indicated an intention to cease operation or change licensure level within sixty
19 days; or

20 e. Indicated a substantial likelihood of failure to respond to requests for service.

21 2. The department shall provide notice of the declaration by first-class mail to the
22 recipients under subsection 2 of section 23-27.2-03. The notice must include the
23 department's basis for the declaration.

24 **23-27.2-06. Distressed ambulance service - Procedure - Plan.**

25 1. The department shall assign a coordinator to the distressed ambulance service within
26 seven days of the date of the notice of declaration. The coordinator may be an
27 employee of the department or a contractor. The coordinator shall develop, implement,
28 and monitor an emergency medical services plan.

29 2. The emergency medical services plan must:

- 1 a. Include a detailed planning and implementation timeline to deliver sustainable
2 and reliable emergency medical response and transport services to a patient
3 within the assigned service area;
- 4 b. Evaluate the impact on the assigned and adjacent service areas; and
5 c. Consider input from stakeholders, including:
 - 6 (1) The distressed ambulance service;
 - 7 (2) The political subdivision that has jurisdiction over the distressed ambulance
8 service;
 - 9 (3) The county and city governments within the service area;
 - 10 (4) Licensed medical facilities;
 - 11 (5) Adjacent ambulance services;
 - 12 (6) Other emergency medical services within the service area; and
 - 13 (7) Other interested parties.
- 14 3. The coordinator shall present a proposed plan at a public meeting held in the
15 distressed ambulance service's assigned service area within thirty days of the date of
16 assignment. The coordinator shall allow stakeholders and the public the opportunity to
17 provide input relating to the plan.
- 18 4. The coordinator shall present a final plan at a second public meeting held in the
19 distressed ambulance service's assigned service area within thirty days of the date of
20 the first public meeting.
- 21 a. The distressed ambulance service shall approve or reject the department's final
22 plan at the second public meeting.
 - 23 (1) If the distressed ambulance service approves the plan, the distressed
24 ambulance service shall comply with all aspects of the plan.
 - 25 (2) If the distressed ambulance service rejects the plan, the service leader of
26 record shall present an amended plan to the department within fourteen
27 days after the date of the second public meeting.
- 28 b. The department shall approve or reject the amended plan within seven days of
29 receipt.
- 30 5. If the department and distressed ambulance service are unable to agree on a plan, or
31 if the distressed ambulance service fails to comply with any aspect of an approved

1 plan, the department may take action as necessary to protect the health, safety, and
2 welfare of the public, in accordance with section 23-27.2-02.

3 6. The department shall provide notice of a public meeting conducted under this section.
4 The notice must be:

5 a. Published in a newspaper of general circulation within the service area between
6 fourteen and seven days before the meeting; and

7 b. Delivered by first-class mail to the county auditor of each county in the service
8 area at least seven days before the meeting.

9 7. The department may request the distressed ambulance service reimburse the
10 department for costs associated with administering this section and for any reasonable
11 measures taken to ensure reliable ambulance response within the distressed
12 ambulance service's assigned service area. The distressed ambulance service shall
13 reimburse the department within thirty days after receipt of the request.

14 **23-27.2-07. Distressed ambulance service program - Continuing appropriation.**

15 There is created in the state treasury a distressed ambulance service program fund. The
16 fund consists of all moneys transferred to the fund and all interest and earnings upon moneys in
17 the fund. Moneys in the fund are appropriated to the department on a continuing basis for the
18 purposes of administering this chapter, including for the payment of contractor fees and
19 expenses incurred by or for the operation of the program.

20 **23-27.2-08. Distressed ambulance service program - Report to legislative**
21 **management.**

22 Each interim, the department shall provide a report to the legislative management regarding
23 the status of the program. The report must include the provisions of the program, the number of
24 distressed ambulance services, coordinated efforts and activities, program costs and expenses,
25 and the overall effectiveness of the program.