SECOND ENGROSSMENT

Fifty-seventh Legislative Assembly of North Dakota

REENGROSSED HOUSE BILL NO. 1202

Introduced by

Representatives Porter, Severson, Galvin, Pollert

Senators Christmann, Klein

1 A BILL for an Act to create and enact section 23-27-04.5 of the North Dakota Century Code,

2 relating to the creation of a quick-response unit service pilot program; to amend and reenact

3 sections 23-27-01, 23-27-02, 23-27-03, 23-27-04, 23-07-04.1, 23-27-04.2, 23-27-04.3, and

4 23-27-04.4 of the North Dakota Century Code, relating to licensure of emergency medical

5 services operations; to provide an appropriation; and to provide an expiration date.

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

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

9 **23-27-01.** Licensing of ambulance services - Exception - Waiver. No surface

10 ambulance

111.The state department of health shall license emergency medical services12operations. After June 30, 2001, the department may limit the issuance of a13license for any new emergency medical services operation based on the needs of14the service area.

<u>Emergency medical</u> services, as hereinafter defined, may not be advertised or,
 offered, or provided to the public unless the operator of such service the services
 is licensed as an emergency medical services operation by the state health council
 department. A license for operators an operator of ambulance service an

19 <u>emergency medical services operation</u> is nontransferable and the operator must

- 20 be separately licensed for each ambulance service which he operation that
- 21 <u>operator</u> operates. Each ambulance service which <u>operation that</u> is headquartered
- 22 or dispatched from a separate location must be considered a separate ambulance
- 23 service operation; however, an operation with a single headquarters site may
- 24 dispatch vehicles and personnel from more than one location if calls requesting

1	services are received and orders for vehicle dispatch are made at the single		
2	headquarters site.		
3	3. The provisions of this chapter do not apply to an operator from another state w		
4	is headquartered at a location outside of this state and transports patients ac		
5	state lines, but no such <u>the</u> operator will be permitted to <u>may not treat patie</u>		
6	within this state or pick up patients within this state for transportation to locatio		
7	within this state, except as provided through regulations by rule.		
8	<u>4.</u>	The state health council shall provide through regulations adopt rules for special	
9	licenses and waiver provisions for an operator of a surface ambulance service		
10	emergency medical services operation intended for industrial sites not availab		
11		the general public.	
12	SECTION 2. AMENDMENT. Section 23-27-02 of the North Dakota Century Code is		
13	amended and reenacted as follows:		
14	23-27-02. Definition of surface ambulance emergency medical services. For the		
15	purpose of this chapter, "surface ambulance emergency medical services" means any use of a		
16	publicly or privately owned vehicle upon the streets or highways of this state for the medical		
17	stabilization or transportation of persons who are sick, injured, wounded, or otherwise		
18	incapacitated or helpless by any person who either holds himself out to the public for such a <u>as</u>		
19	being in that service or who regularly provides such a that service. The term includes basic life		
20	support ambulance services, advanced life support ambulance services, and quick-response		
21	unit services.		
22	SECTION 3. AMENDMENT. Section 23-27-03 of the 1999 Supplement to the North		
23	Dakota Cen	tury Code is amended and reenacted as follows:	
24	23-27-03. License fees. The fee for a license to operate an emergency medical		
25	services operation and perform ambulance emergency medical services must be set by the		
26	state health council at a sum of not more than twenty-five dollars annually, as may be required		
27	to defray the costs of administration of the licensing program. Individuals providing emergency		
28	medical services may not be assessed this license fee. All license fees must be paid to the		
29	state department of health and deposited with the state treasurer and credited to the state		
30	general fund.		

1	SECTION 4. AMENDMENT. Section 23-27-04 of the North I	Dakota Century Code is		
2	amended and reenacted as follows:			
3	23-27-04. Standards for operators. No surface ambulance service An emergency			
4	medical services operation within this state may be operated not operated	rate unless the service		
5	operation is licensed in accordance with this chapter and regulations	promulgated rules		
6	adopted by the state health council. The regulations rules must include, but not be limited to,			
7	the following:			
8	1. Time when ambulance service shall operator's services i	<u>must</u> be available.		
9	2. Type of driver's license needed for drivers of ambulance	ground vehicles.		
10	0 3. Training standards for ambulance driver and attendant o	peration personnel.		
11	1 4. Equipment needs and equipment certification and ground	d vehicle standards.		
12	2 5. Annual license fees.			
13	3 6. Number of personnel required for each ambulance run.			
14	4 7. Such other requirements as may be found necessary to a	carry out the intent of this		
15	5 chapter.			
16	6 SECTION 5. AMENDMENT. Section 23-27-04.1 of the 1999	Supplement to the North		
17	Dakota Century Code is amended and reenacted as follows:			
18	23-27-04.1. Emergency care or services rendered by officers, employees, or			
19	agents of prehospital emergency medical service services operations - Physician			
20	medical direction. No Any officer, employee, or agent of any prehospital an emergency			
21	medical service services operation and no any physician licensed in this state who provides			
22	medical direction to any prehospital an emergency medical service services operation, who is a			
23	volunteer, who in good faith renders emergency care, services, or medical direction, is not			
24	liable to the recipient of the emergency care, services, or medical direction for any civil			
25	damages resulting from any acts or omissions by the person in rendering the emergency care,			
26	services, or medical direction provided the person is properly trained according to law. For the			
27	purpose of this section, "volunteer" means an individual who receives no compensation or who			
28	is paid expenses, reasonable benefits, nominal fees, or a combination of expenses, reasonable			
29	benefits, and nominal fees to perform the services for which the individual volunteered,			
30	provided that the fees do not exceed twenty-four hundred dollars in any calendar year. For \underline{a}			
31	volunteer physicians physician providing medical direction to prehospital an emergency			

1 medical services operation, the twenty-four hundred dollar maximum fees amount is to be 2 calculated separately for each prehospital emergency medical service services operation for 3 which the physician volunteered medical direction. This section does not relieve a person from 4 liability for damages resulting from the intoxication, willful misconduct, or gross negligence of 5 the person rendering the emergency care or services.

6

31

biennium.

SECTION 6. AMENDMENT. Section 23-27-04.2 of the 1999 Supplement to the North 7 Dakota Century Code is amended and reenacted as follows:

8 23-27-04.2. Prehospital emergency Emergency medical services - State 9 assistance. The state department of health shall assist in the training of personnel of certain 10 prehospital emergency medical services operations as determined by the department and 11 financially shall assist certain prehospital emergency medical services operations as 12 determined by the department in obtaining equipment. Assistance provided under this section 13 must be within the limits of legislative appropriation. The department shall adopt criteria for 14 eligibility for assistance in the training of personnel of various types of prehospital emergency 15 medical services operations. To qualify for financial assistance for equipment, a prehospital an 16 emergency medical service services operation shall certify, in the manner required by the 17 department, that the service operation has fifty percent of the amount of funds necessary for 18 identified equipment acquisitions. The department shall adopt a schedule of eligibility for 19 financial assistance for equipment. The schedule must provide for a direct relationship 20 between the amount of funds certified and the number of responses during the preceding 21 calendar year for the purpose of rendering medical care, transportation, or both, to individuals 22 who were sick or incapacitated. The schedule must require that as the number of responses 23 increases, a greater amount of funds certified is required. The schedule must classify 24 responses and the financial assistance available for various classifications. The department 25 may establish minimum and maximum amounts of financial assistance to be provided a 26 prehospital to an emergency medical service services operation under this section. If 27 applications for financial assistance exceed the amount of allocated and available funds, the 28 department may prorate the funds among the applicants in accordance with criteria adopted by 29 the department. No more than one-half of the funds appropriated by the legislative assembly 30 each biennium and allocated for training assistance may be distributed in the first year of the

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

3 23-27-04.3. Emergency medical services personnel training, testing, certification, 4 licensure, and quality review. The state health council shall adopt rules prescribing minimum 5 training, testing, certification, licensure, and quality review standards for emergency medical 6 services personnel. Rules adopted must include a definition of minimum applicable standards, 7 a definition of emergency medical services personnel, provide for a mechanism for certifying or 8 licensing persons who have met the required standards, and provide a mechanism to review 9 and improve the quality of care rendered by emergency medical services personnel. Quality 10 review and improvement information, data, records, and proceedings are not subject to 11 subpoena or discovery or introduction into evidence in any civil action. 12 SECTION 8. AMENDMENT. Section 23-27-04.4 of the 1999 Supplement to the North 13 Dakota Century Code is amended and reenacted as follows: 14 23-27-04.4. Supervision of certified or licensed emergency service hospital 15 **personnel.** Certified or licensed emergency medical technicians-intermediate and paramedics, 16 who are employed by a hospital and who are working in a nonemergency setting are under the 17 supervision of the hospital's patient services management. 18 SECTION 9. Section 23-27-04.5 of the North Dakota Century Code is created and 19 enacted as follows: 20 23-27-04.5. (Effective through June 30, 2003) Quick-response unit service pilot 21 **program.** The department shall create and implement a pilot program that creates incentives 22 for basic life support ambulance services and advanced life support ambulance services to 23 convert to quick-response unit services or create quick-response units in areas not already 24 served. During the first year of the program, a maximum of five new quick-response units may 25 receive a one-time five thousand dollar grant under this program and a maximum of twenty 26 converting ambulance services may receive grants in the amount of five thousand dollars each 27 year for a two-year period. During the second year of the program, the department shall 28 distribute any remaining funds to converting ambulance services or to ten additional newly 29 created quick-response units. 30 SECTION 10. APPROPRIATION. There is appropriated out of any moneys in the

31 health care trust fund, not otherwise appropriated, the sum of \$225,000, or so much of the sum

- 1 as may be necessary, to the state department of health for the purpose of funding the
- 2 quick-response unit service pilot program, for the biennium beginning July 1, 2001, and ending
- 3 June 30, 2003. The moneys appropriated must be made available by the office of
- 4 management and budget as requested by the state department of health to pay for the actual
- 5 costs of the pilot program.