Good afternoon Chairman Weisz and members of the Committee. My name is Chris Price and I am the Director of the Division of Emergency Medical Systems for the North Dakota Department of Health. I am here to provide testimony in support of House Bill 1337.

Imagine having to secure a Minnesota driver’s license just to travel to the Twin Cities or a South Dakota driver’s license just to visit the Black Hills. This would be burdensome and inconvenient and may even dissuade you from taking those trips. Imagine again, if these trips were required by your job and you had no choice but to conform. Again, not a very desirable situation. This is the challenge facing EMS professionals throughout the United States.

Since the early 1970’s, states have been issuing licenses to EMS personnel. As a means of regulating how prehospital care is delivered and protecting the public, EMS personnel licensure is as necessary and important as that of physicians, nurses, and other healthcare providers. However, not all EMS professionals function in a single state. Many operate in border areas or work in the air medical field and may respond to multiple states, while others prefer to provide staffing at remote, large scale planned events or as part of a wildland firefighting effort. Presently, these EMS professionals must secure licensure from each state in which they intend to practice.

House Bill 1337 presents an alternative. It addresses this issue, and others, via an interstate compact that recognizes the day-to-day movement of EMS personnel across state lines, extending a privilege to practice under authorized circumstances based on the home state license of the EMS personnel. Interstate compacts are tested, flexible and defensible means to address issues presented by state borders. States share responsibility for cross-border activities rather than each state addressing the same issue in a different manner. Some of you may be familiar with the interstate compacts that address nursing, physicians, and emergency management and I am confident that you, or someone you know, has benefited from the driver’s license interstate compact. North Dakota is a participant in 30 existing interstate compacts covering a wide variety of medical and non-medical disciplines.
In addition to extending the privilege to practice of EMS personnel under limited, authorized circumstances in interstate compact member states, House Bill 1337 enables the ready exchange of information between states through a coordinated database of EMS personnel licensure, adverse actions imposed by state EMS offices and significant investigatory findings that may impact EMS personnel licensure. In other words, House Bill 1337 promotes the highest level of public protection to patients cared for in the EMS system by EMS personnel. House Bill 1337 also provides legal standing or other appropriate protections to EMS personnel when practicing in participating states. A unique provision of House Bill 1337 provides an opportunity to support veterans, active members of the military, members of the national guard and reserves and their spouses with a clear and prompt pathway to licensure.

Though House Bill 1337 authorizes participation in an interstate compact, it does not permit state laws, rules, or authority to be superseded. EMS personnel are expected to be licensed and follow the laws and rules of the state in which they are licensed. Accordingly, House Bill 1337 does not provide for automatic reciprocity for EMS personnel licensure between states. This activity remains within the purview of each member state.

The Department of Health does have a concern about the specific funding language contained in the legislation but believes this may be adequately addressed via a funding cap or other appropriate strategy.

For EMS personnel, House Bill 1337 will remove obstacles and provide protections when it is necessary to provide care across state lines. This benefit will be extended to over 200 North Dakota EMS personnel upon nationwide adoption of the compact. For patients, it provides greater assurance that their caregivers are following nationally-recognized standards and are held to the highest level of accountability.

Thank for the opportunity to testify in support of House Bill 1337. I am happy to answer any questions you may have.