



# NORTH DAKOTA RURAL EMS ASSISTANCE FUND GRANT PROGRESS REPORT

NORTH DAKOTA DEPARTMENT OF HEALTH  
DIVISION OF EMERGENCY MEDICAL SYSTEMS  
SFN (8-2017)



This funding area compliance/progress report must be completed and submitted to the Division of Emergency Medical Systems (DEMS) twice per grant year (December 1, 2017 and June 1, 2018).

Failure to submit reports appropriately may impact current and / or future grant cycles. Reports submitted after the deadline, sent by facsimile (fax), submitted in handwriting, or otherwise not in accordance with the instructions WILL NOT be accepted.

Attach extra pages as necessary.

Date of Report	Funding Area Number
Legal Entity/Service	Federal Tax ID#
Mailing Address	
City	ZIP Code
Contact Person	
Email Address	Daytime Telephone Number
Total Amount Applied For	Total Amount Awarded
Percentage of Award Requested as of Report Date	
Has your use of awarded funds maintained compliance with legislative intent as outlined in ND Century Code 23-46 (attached)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Explain:	

Describe how funds received through the Rural EMS Assistance Fund have been utilized to address weakness as identified by the *Attributes of Successful Rural Ambulance Service Assessment*.

--

Describe how funds received through the Rural EMS Assistance Fund have been utilized for quality improvement efforts and/or an effort to move towards an integrated EMS system.

Describe how funds received through the Rural EMS Assistance Fund have helped to ease the financial needs of the agency as well as efforts towards obtaining future funding at a local level.

### Signature of Authorized Representative

As the person completing this compliance/progress report, I certify that the information contained within is true and correct to the best of my knowledge.

Signature of Authorized Representative	Date
--	------

Submit completed report to:



North Dakota Department of Health  
Division of Emergency Medical Systems  
1720 Burlington Drive  
Bismarck, ND 58504

or email: [dems@nd.gov](mailto:dems@nd.gov)

## **CHAPTER 23-46**

### **EMERGENCY MEDICAL SERVICES**

#### **23-46-01. Definitions.**

For purposes of this chapter:

1. "Emergency medical services funding area" means a geographic area eligible for state assistance and includes one or more licensed ambulance operations.
2. "Minimum reasonable cost" means the cost of operating one transporting ambulance service or the sum of the cost to operate one transporting ambulance service and any combination of one substation and one quick response unit.
3. "Required local matching funds" means revenue generated by the provision of emergency medical services, local mill levies, local sales tax, local donations, and in-kind donations of services.

#### **23-46-02. Emergency medical services advisory council.**

The state department of health shall establish an emergency medical services advisory council. The council must include at least three representatives appointed by an emergency medical services organization, one individual to represent basic life support and one individual to represent advanced life support, both appointed by the state health officer, and other members designated by the state health officer, not to exceed a total of fourteen members. The department shall consider the recommendations of the council on the plan for integrated emergency medical services in the state, development of emergency medical services funding areas, development of the emergency medical services funding areas application process and budget criteria, and other issues relating to emergency medical services as determined by the state health officer. Council members are entitled to reimbursement for expenses in the manner provided in section 44-08-04. The department shall establish by policy the length of terms and the method for rotation of membership.

#### **23-46-03. Emergency medical services funding areas.**

The state department of health shall establish and update biennially a plan for integrated emergency medical services in this state. The plan must identify ambulance operations areas, emergency medical services funding areas that require state financial assistance to operate a minimally reasonable level of emergency medical services, and a minimum reasonable cost for an emergency medical services operation. The department shall designate emergency medical services funding areas based on criteria adopted by the health council and published in the North Dakota Administrative Code.

#### **23-46-04. State financial assistance for emergency medical services - Confidential information - Annual allocation.**

Emergency medical services operations that request financial assistance from the state must provide requested fiscal information to the state department of health for use in financial assistance determinations. All information provided to the department under this section is confidential. The state department of health shall determine annually the allocation amount of state financial assistance for each emergency medical services funding area based on the department's determination of:

1. The minimum annual funding necessary to operate the emergency medical services operation or service designated to operate in the ambulance funding area, based on the financial needs unique to each emergency medical services funding area.
2. Required local matching funds commensurate with at least ten dollars per capita within the emergency medical services funding area.

#### **23-46-05. State financial assistance for emergency medical services - Distribution**

**limit.** During the first year of the biennium, the state department of health may not distribute more than one million two hundred fifty thousand dollars of the biennial legislative appropriation for state financial assistance for emergency medical services.