

2026 South Dakota Legislature

Senate Bill 89**AMENDMENT 89A
FOR THE INTRODUCED BILL**

1 **An Act to require that counties and municipalities provide emergency medical**
2 **services within their jurisdictions and create a task force to study the**
3 **provision of emergency medical services as an essential service and the**
4 **funding thereof.**

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:

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7 **Section 1. That § 34-11-1 be AMENDED:**

8 **34-11-1.** A county or municipality may:
9 (1) Provide or contract for the provision of ambulance services; and
10 (2) Contract contract with another political subdivision or other person for the provision of
11 moneys to support ambulance services.

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13 **Section 2. That a NEW SECTION be added to chapter 34-11:**

14 Each county and municipality shall ensure that a minimum level of emergency medical service
15 is available within its jurisdiction for prehospital emergency medical treatment and transport.

16 The department shall promulgate rules, in accordance with chapter 1-26, to establish the
17 minimum levels of emergency medical service that must be available within a county and
18 municipality. The rules must address:

19 (1) Contracts for services;

20 (2) Response times;

1 (3) Required staff and licensed personnel;

2 (4) Treatment and transport protocols; and

3 (5) Quality assurance standards.

4 **Section 1.** The Executive Board of the Legislative Research Council shall establish the
5 Emergency Medical Services Funding Task Force. The task force shall:

6 (1) Examine funding mechanisms to support counties and municipalities in the
7 provision of emergency medical services as an essential service;

8 (2) Seek input from relevant stakeholders on the provision of emergency medical
9 services as an essential service; and

10 (3) Provide to the executive board, no later than November 1, 2026, a report
11 containing findings and recommendations for legislative proposals related to the
12 funding of emergency medical services in this state; and

13 (4) Review planned expenditures of the Rural Health Transformation program and
14 evaluate opportunities to incorporate the funds into emergency medical services
15 funding strategies.

16 The task force shall meet no more than five times during the 2026 interim. The
17 task force is dissolved upon the delivery of the task force's report to the executive board.

18 **Section 2.** The Emergency Medical Services Funding Task Force consists of:

19 (1) The chairs of the health and human services committees of the House of
20 Representatives and the Senate;

21 (2) The chairs of the taxation committees of the House of Representatives and the
22 Senate;

23 (3) Four members of the House of Representatives, one of whom must be a member
24 of the minority party, appointed by the Executive Board of the Legislative Research
25 Council; and

26 (4) Three members of the Senate, one of whom must be a member of the minority
27 party, appointed by the executive board.

28 If the chair of a committee is unable to serve on the task force, the Executive Board
29 of the Legislative Research Council may appoint another member of the committee to
30 serve in the chair's place.

31 **Section 4.** Sections 1 and 2 of this Act are effective beginning July 1, 2028.