

**TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH  
CHAPTER 642. EMERGENCY RESPONSE SYSTEMS STABILIZATION AND  
IMPROVEMENT REVOLVING FUND.**

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking.

**PROPOSED RULES:**

Subchapter 5. Scoring  
310:642-5-1 [AMENDED]

**SUMMARY:**

Senate Joint Resolution (SJR) 22 revoked OAC 310:642-5-1(2) (H) and (I), which were part of the formula used to calculate awards granted under Chapter 642. References to the revoked subparagraphs (H) and (I) were inadvertently left in the immediately preceding subparagraph. The proposed language is an amendment to OAC 310:642-5-1(1), which removes the remaining references to (H) and (I) and conforms the section to the current descriptions.

**AUTHORITY:**

Commissioner of Health, Title 63 O.S. § 1-104

**COMMENT PERIOD:**

December 1, 2023 through the close of the Department's normal business hours, 5 PM, on January 2, 2024. Interested persons may informally discuss the proposed rules with the contact person identified below; or may, through the close of the Department's normal business hours, 5 PM, on January 2, 2024 submit written comment to the contact person identified below, or may, at the hearing, ask to present written or oral views.

**PUBLIC HEARING:**

Pursuant to 75 O.S. § 303(A), the public hearing for the proposed rulemaking in this chapter shall be on January 4, 2024 at the Oklahoma State Department of Health Auditorium, 123 Robert S. Kerr Avenue, Oklahoma City, Oklahoma 73102 from 9:30 AM to 12:30 PM. The meeting may adjourn earlier if all attendees who signed up to comment have completed giving their comments. The alternate date and time in the event of an office closure due to inclement weather is January 9, 2024 in the Auditorium, from 9:30 AM to 12:30 PM. Those wishing to present oral comments should be present at that time to register to speak. The hearing will close at the conclusion of those registering to speak. Interested persons may attend for the purpose of submitting data, views or concerns, orally or in writing, about the rule proposal described and summarized in this Notice. Validated parking will be provided for the parking lot located at the east corner of Broadway and Robert S. Kerr Avenue, subject to availability.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, on the increase in the level of direct costs such as fees, and indirect costs such as reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity due to compliance with the proposed rule. Business entities may submit this information in writing through January 2, 2024, to the contact person identified below.

**COPIES OF PROPOSED RULES:**

The proposed rules may be obtained for review from the contact person identified below or via the agency website at [www.ok.gov/health](http://www.ok.gov/health).

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S., § 303(D), a rule impact statement is available through the contact person identified below or via the agency website at [www.ok.gov/health](http://www.ok.gov/health).

**CONTACT PERSON:**

Audrey C. Talley, Agency Rule Liaison, Oklahoma State Department of Health, 123 Robert S. Kerr Avenue, Oklahoma City, OK 73102, phone (405) 426-8563, e-mail [AudreyT@health.ok.gov](mailto:AudreyT@health.ok.gov).

**INITIAL RULE IMPACT STATEMENT**

(This document may be revised based on comment received during the public comment period.)

**TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH  
CHAPTER 642. EMERGENCY RESPONSE SYSTEMS STABILIZATION AND  
IMPROVEMENT REVOLVING FUND**

**1. DESCRIPTION:**

Senate Joint Resolution (SJR) 22 revoked OAC 310:642-5-1(2) (H) and (I), which were part of the formula used to calculate awards granted under Chapter 642. References to the revoked subparagraphs (H) and (I) were inadvertently left in the immediately preceding subparagraph. The proposed language is an amendment to OAC 310:642-5-1(1), which removes the remaining references to (H) and (I) and conforms the section to the current descriptions.

**2. DESCRIPTION OF PERSONS AFFECTED AND COST IMPACT RESPONSE:**

EMS Agencies, Training Programs, and other EMS related entities are affected by this change. The proposed amendments remove confusion caused by the error. There is no cost impact.

**3. DESCRIPTION OF PERSONS BENEFITING, VALUE OF BENEFIT AND EXPECTED HEALTH OUTCOMES:**

There are no expected health outcomes affiliated with this change.

**4. ECONOMIC IMPACT, COST OF COMPLIANCE, AND FEE CHANGES: COST OF COMPLIANCE AND FEE CHANGES:**

There is no economic impact or fee increase.

**5. COST AND BENEFITS OF IMPLEMENTATION AND ENFORCEMENT TO THE AGENCY:**

There are no anticipated new costs to the proposed amendment. The administrative costs for the fund will have little to no impact.

**6. IMPACT ON POLITICAL SUBDIVISIONS:**

There will be no impact on political subdivisions and it will not require their cooperation in implementing or enforcing the proposed amendment.

**7. ADVERSE EFFECT ON SMALL BUSINESS:**

There is no known adverse economic effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act.

**8. EFFORTS TO MINIMIZE COSTS OF THE RULE:**

There are no less costly means currently identified.

9. **EFFECT ON PUBLIC HEALTH AND SAFETY:**

The removal of confusion caused by the error in the subparagraph will facilitate EMS entities that seek to avail themselves of the grant program in Chapter 642. The public will benefit from the ability of the EMS entities to receive the grants awarded under the chapter.

10. **DETRIMENTAL EFFECTS ON PUBLIC HEALTH AND SAFETY WITHOUT ADOPTION:**

Failing to adopt the amendment to remove the typographical errors will create a conflict between statute (SJR 22) and OAC 310:642-5-1(1) (H) and (I) and OAC 310:642-5-1(2).

11. **PREPARATION AND MODIFICATION DATES:**

This rule impact statement was prepared on October 23, 2023.

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**SUBCHAPTER 5. SCORING**

**310:642-5-1. OERSSIRF funding priority point system**

Proposals shall be ranked based on the total number of points awarded by the Department consistent with this Chapter.

(1) The following formula shall be used to rank funding proposals:  $T = S + M + D + H + E + AR + PM + PG + PE$ , where:

- (A) ~~T = Total points~~
- (B) S = Statutory purposes
- (C) ~~(B)~~ M = Multiple jurisdictions
- (D) ~~(C)~~ D = Population density
- (E) ~~(D)~~ H = Distance to the nearest level I or II trauma center
- (F) ~~(E)~~ E = Number of project-area EMTs
- (G) ~~(F)~~ AR = Amount of funding requested
- (H) ~~(G)~~ PM = Project matching
- (I) ~~PG = Previous funding assistance~~
- (J) ~~PE = Previous funding evaluation~~

(2) Points may be awarded as described below:

(A) **Statutory purposes (S):** Points shall be awarded for each of the relevant statutory purposes of the proposal as follows:

- (i) Funding assessment activities: 50 points
- (ii) Stabilization and/or reorganization of at-risk emergency medical services: 100 points
- (iii) Development of regional EMS: 50 points
- (iv) Training for emergency medical directors: 50 points
- (v) Access to training front line emergency medical services personnel: 100 points
- (vi) Capital and equipment needs: 50 points

(B) **Multiple jurisdictions (M):** Points shall be awarded for projects addressing the EMS needs of multiple jurisdictions, as follows:

- (i) Two cities or towns: 25 points
- (ii) Three cities or towns: 50 points
- (iii) County wide: 100 points
- (iv) Multi-county: 150 points
- (v) State wide: 200 points

(C) **Population density (D):** Points shall be awarded for projects encompassing areas of lowest per-mile population density as recorded by the United States Census Bureau, as follows:

- (i) 5,000.0 to 8,968.1: 0 points
- (ii) 1,000.0 to 4,999.9: 10 points
- (iii) 200.0 to 999.9: 20 points
- (iv) 79.6 to 199.9: 30 points
- (v) 30.0 to 79.5: 40 points
- (vi) 10.0 to 29.9: 50 points
- (vii) Less than 10.0: 100 points

(D) **Distance to trauma center (H):** Points shall be awarded for project areas where the average distance between the furthest and closest points within the project area to a trauma center classified by the State of Oklahoma or the American College of Surgeons as level I or II, as follows:

- (i) 0-25 miles: 0 points
  - (ii) 25-49 miles: 10 points
  - (iii) 50-74 miles: 20 points
  - (iv) 75-99 miles: 30 points
  - (v) 100-124 miles: 40 points
  - (vi) 125-149 miles: 50 points
  - (vii) 150 miles and over: 100 points
- (E) **EMTs (E):** Points shall be awarded for proposals encompassing project areas with fewer resident licensed EMTs at any level of licensure as recorded by the Department as follows:
- (i) 100 or more resident EMTs: 0 points
  - (ii) 50-99 resident EMTs: 20 points
  - (iii) 25-49 resident EMTs: 40 points
  - (iv) 0-24 resident EMTs: 60 points
- (F) **Amount of funding requested (AR):** Points under this category for amount of funding requested are determined as follows:
- (i) \$400,001 to \$500,000: -50 points
  - (ii) \$300,001 to \$400,000: -40 points
  - (iii) \$200,001 to \$300,000: -30 points
  - (iv) \$100,001 to \$200,000: -20 points
  - (v) \$80,000 to \$100,000: 10 points
  - (vi) \$60,000 to \$79,999: 20 points
  - (vii) \$40,000 to \$59,999: 30 points
  - (viii) \$20,000 to \$39,999: 50 points
  - (ix) Any AR greater than \$500,000 shall be denied
- (G) **Project matching (PM).** If the proposal proposes the use of matching funds, points shall be awarded consistent with the following formula:
- (i) 90% of the requested funds: 90 points
  - (ii) 80% of the requested funds: 80 points
  - (iii) 70% of the requested funds: 70 points
  - (iv) 60% of the requested funds: 60 points
  - (v) 50% of the requested funds: 50 points
  - (vi) 40% of the requested funds: 40 points
  - (vii) 30% of the requested funds: 30 points
  - (viii) 20% of the requested funds: 20 points
  - (ix) 10% of the requested funds: 10 points