CHAPTER 342
HB 1568-FN - FINAL VERSION

05/15/2024 1727s
05/23/2024 2160s
13Jun2024... 2346EBA

2024 SESSION

24-2108
05/08

HOUSE BILL ***1568-FN***

AN ACT relative to reimbursement for ambulance services under the state Medicaid plan and making an appropriation therefor.

SPONSORS: Rep. Sellers, Graf. 18; Rep. McGough, Hills. 12; Sen. Innis, Dist 7

COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill directs the department of health and human services to submit an amendment to the state Medicaid plan regarding reimbursement for ambulance services. The bill also makes an appropriation to the department of health and human services for this purpose.

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Explanation: Matter added to current law appears in ***bold italics.***
Matter removed from current law appears [~~in brackets and struckthrough.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Four

AN ACT relative to reimbursement for ambulance services under the state Medicaid plan and making an appropriation therefor.

Be it Enacted by the Senate and House of Representatives in General Court convened:

342:1 New Paragraph; Commissioner of the Department of Health and Human Services; State Medicaid Plan Amendment Regarding Ambulance Services. Amend RSA 126-A:5 by inserting after paragraph XXXIV the following new paragraph:

XXXV. The commissioner shall submit to the Centers for Medicare and Medicaid Services (CMS) an amendment to the state Medicaid plan to provide reimbursement for ambulance services when care is provided in response to an emergency call to a member's home or on a scene, when an ambulance is dispatched, and treatment is provided to the patient without the patient being transported to another site.

(a) Providers shall be eligible for Medicaid reimbursement when the provider has documented that:

(1) The response originated through an emergency call; and

(2) The patient consents to evaluation and treatment, and one of the following outcomes has occurred:

(A) After the evaluation, and when indicated, treatment, the licensed paramedic or emergency medical technician (EMT) and the patient agree there is no need for transportation by ambulance;

(B) The patient does not request and actively refuses transport to an emergency department for evaluation; or

(C) The patient is stable for referral to the patient's physician, other community resource, and the patient has the ability, including mental capacity and transportation resources, to obtain assistance and medically indicated follow-up.

(b) Providers shall also be eligible for Medicaid reimbursement when the provider has documented that the response originated through an emergency call, resuscitation efforts were terminated, and the patient is deceased.

342:2 Contingency. Section 1 of this act shall take effect on the date the Centers for Medicare and Medicaid Services certifies the approval of the amendment to the state Medicaid plan to the director of legislative services and the secretary of state.

342:3 Appropriation; Department of Health and Human Services. The sum of $500,000, for the biennium ending June 30, 2025, is appropriated to the department of health and human services for the purposes of this act. The department may accept and expend any available matching federal funds

without the approval of the fiscal committee of the general court. The governor is authorized to draw a warrant for said sum from any money in the treasury not otherwise appropriated.

342:4 Contingency. If SB 554 of the 2024 legislative session becomes law, RSA 126-A:5, XXXV as inserted by section 1 of this act shall be renumbered to read as RSA 126-A:5, XXXVI.

342:5 Effective Date.

I. Section 1 of this act shall take effect as provided in section 2 of this act.

II. The remainder of this act shall take effect upon its passage.

Approved: August 02, 2024
Effective Date:
I. Section I effective as provided in section 2
II. Remainder effective August 2, 2024