

HB 343 - AS INTRODUCED

2021 SESSION

21-0413

05/10

HOUSE BILL **343**

AN ACT relative to billing for ambulance services.

SPONSORS: Rep. Weston, Graf. 8; Rep. Luneau, Merr. 10; Rep. Marsh, Carr. 8

COMMITTEE: Commerce and Consumer Affairs

ANALYSIS

This bill prohibits balance billing for ambulance services under the managed care law and requires insurers to reimburse ambulance providers directly.

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 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to billing for ambulance services.

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

1 1 New Paragraph; Emergency Medical and Trauma Services; Definition of Private Safety
2 Agency. Amend RSA 153-A:2 by inserting after paragraph XVI-a the following new paragraph:

3 XVI-b. "Private safety agency" means a private entity which provides emergency police, fire,
4 ambulance, or medical services.

5 2 New Paragraph; Emergency Medical and Trauma Services; Definition of Public Safety Agency.
6 Amend RSA 153-A:2 by inserting after paragraph XVIII the following new paragraph:

7 XVIII-a. "Public safety agency" means a functional division of a public agency which
8 provides firefighting, law enforcement, ambulance, medical, rescue or other emergency services.

9 3 New Section; Emergency Medical and Trauma Services; Ambulance Billing; Payment for
10 Reasonable Value of Services; Prohibition of Balance Billing. Amend RSA 153-A by inserting after
11 section 20-a the following new section:

12 153-A:20-b Ambulance Billing; Payment for Reasonable Value of Services, Prohibition of
13 Balance Billing.

14 I. When a commercially insured patient is covered by a managed care plan, as defined under
15 RSA 420-J:3, XXV, a private safety agency or public safety agency shall not bill the patient for fees
16 or amounts other than copayments, deductibles, or coinsurance, if the service is covered under the
17 patient's health insurance plan.

18 II. Pursuant to paragraph I, fees for ambulance services submitted to an insurance carrier
19 for payment shall be limited to a commercially reasonable value, based on payments for similar
20 services from New Hampshire insurance carriers to New Hampshire ambulance providers.

21 III. In the event of a dispute between a provider and an insurance carrier relative to the
22 reasonable value of a service under this section, the insurance commissioner shall have exclusive
23 jurisdiction under RSA 420-J:8-f to determine if the fee is commercially reasonable. The provider
24 and the insurance carrier shall each make best efforts to resolve any dispute prior to applying to the
25 insurance commissioner for resolution, which shall include presenting to the other party evidence
26 supporting its contention that the fee level it is proposing is commercially reasonable. The
27 department of insurance may require the parties to engage in mediation prior to rendering a
28 decision.

29 4 New Section; Managed Care Law; Reasonable Value of Ambulance Services. Amend RSA 420-
30 J by inserting after section 8-f the following new section:

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1 420-J:8-g Reasonable Value of Ambulance Services. In the event of a dispute between a health
2 care provider and an insurance carrier relative to the reasonable value of a service under RSA
3 415:27, the commissioner shall have exclusive jurisdiction to determine if the fee is commercially
4 reasonable, with consideration of the actual, often higher costs of the service in rural communities.
5 Either the provider or the insurance carrier may petition for a hearing under RSA 400-A:17. The
6 petition shall include the appealing party's evidence and methodology for asserting that the fee is
7 reasonable, and shall detail the efforts made by the parties to resolve the dispute prior to petitioning
8 the commissioner for review.

9 5 New Subparagraph; Managed Care Law; Rulemaking. Amend RSA 420-J:7, II by inserting
10 after subparagraph (e) the following new subparagraph:

11 (f) Carriers shall offer an ambulance service provider a commercially reasonable
12 payment, including ambulance services provided through the 911 service.

13 6 Report. The insurance commissioner shall make a report on or before July 1, 2022 detailing
14 the impact of RSA 153-A:20-b as inserted by section 3 of this act and RSA 420-J:8-f as inserted by
15 section 4 of the act on health insurance premium rates to the chairpersons of the house and senate
16 committees having jurisdiction over insurance issues.

17 7 Reimbursement for Ambulance Service Providers; Individual. Amend RSA 415:6-q to read as
18 follows:

19 415:6-q Reimbursement for Ambulance Service Providers. Each insurer that issues or renews
20 any individual policy, plan, or contract of accident or health insurance that constitutes health
21 coverage under RSA 420-G:2, IX, and that provides benefits for medically necessary ambulance
22 services shall reimburse the ambulance service provider directly, ~~[or by a check payable to the~~
23 ~~insured and the ambulance service provider]~~ subject to the terms and conditions of the policy, plan,
24 or contract. Nothing in this section shall preclude an insurer from negotiating with and
25 subsequently entering into a contract with a non-participating ambulance provider that establishes
26 rates of reimbursement for emergency medical services.

27 8 Reimbursement for Ambulance Service Providers; Group. Amend RSA 415:18-v to read as
28 follows:

29 415:18-v Reimbursement for Ambulance Service Providers. Each insurer that issues or renews
30 any policy of group or blanket accident or health insurance that constitutes health coverage under
31 RSA 420-G:2, IX, and that provides benefits for medically necessary ambulance services shall
32 reimburse the ambulance service provider directly, ~~[or by a check payable to the insured and the~~
33 ~~ambulance service provider]~~ subject to the terms and conditions of the policy, plan, or contract.
34 Nothing in this section shall preclude an insurer from negotiating with and subsequently entering
35 into a contract with a non-participating ambulance provider that establishes rates of reimbursement
36 for emergency medical services.

37 9 Effective Date. This act shall take effect January 1, 2022.