FIRST REGULAR SESSION

HOUSE BILL NO. 912

101ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE HENDERSON.

2044H.01I

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DANA RADEMAN MILLER, Chief Clerk

AN ACT

To amend chapter 375, RSMo, by adding thereto three new sections relating to air ambulance services, with a delayed effective date.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 375, RSMo, is amended by adding thereto three new sections, to be known as sections 375.1400, 375.1405, and 375.1410, to read as follows:

375.1400. 1. Any air ambulance service or other entity that directly or indirectly, whether through an affiliated entity, agreement with a third-party entity, or otherwise, solicits air ambulance membership subscriptions, accepts air ambulance membership applications, or charges air ambulance membership fees shall be considered an entity engaged in the business of insurance and an insurer, as defined in section 375.932.

- 2. An air ambulance membership shall be considered insurance and an insurance product.
- 3. An air ambulance membership may be considered secondary insurance coverage or a supplement to any insurance coverage.
- 4. The department of commerce and insurance shall regulate air ambulance memberships according to the provisions of this section.
 - 375.1405. 1. An air carrier operating air ambulance services shall, within one year of the effective date of this section, implement a patient advocacy program, which shall include, at a minimum, the following components:
- 4 (1) A dedicated patient hotline number and dedicated patient resource email 5 address to process patient billing and claims and to address patient questions, complaints, 6 and concerns;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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7 (2) A dedicated patient advocacy page on the website of the provider of the air 8 ambulance services clearly marked with the words "patient portal" or "patient advocacy" 9 that is easily located by navigating the website and that contains resources for patients that are clearly written and comprehensive including, but not limited to:

- (a) A layperson's explanation of what to expect during the claims process;
- **(b)** Frequently asked questions and answers;
 - (c) Frequently used forms;

- (d) Information about the financial assistance or charity care program offered by the provider of the air ambulance services;
- (e) Contact information for the U.S. Department of Transportation's Office of Aviation Consumer Protection and state and federal health and insurance regulatory agencies and departments; and
 - (f) Other health consumer informational resources;
- (3) Dedicated individuals assigned to review patient complaints and disputes about air ambulance billing and to respond to patients, governmental agencies, and any other concerned parties no later than three months from the date a complaint is received;
- (4) Inclusion of the patient hotline number and email address required under subdivision (1) of this subsection and the address of the patient advocacy web page required under subdivision (2) of this subsection on all patient communication materials including, but not limited to, websites, brochures, letters, invoices, and billing statements that are sent to or made available to patients;
- (5) Mandatory yearly patient advocacy training for all personnel of the provider of the air ambulance services who have direct interaction with patients or their family members through written, verbal, or electronic communication; and
- (6) A financial assistance or charity care program to assist patients suffering financial hardship with resolving any unpaid balance owed to the provider of the air ambulance services.
- 2. The provisions of this section shall not be enforced in a manner that conflicts with federal law or any federal preemption of state regulation of air carriers.
 - 375.1410. An entity selling air ambulance membership products shall make the following general disclosures in writing in at least twelve-point bold-type font on any advertisement, marketing material, brochure, or contract terms and conditions made available to prospective members or the public:
 - (1) If eligible and covered by Medicaid or Medicaid managed care, the prospective member is already covered with no out-of-pocket cost liability for air ambulance services; and

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(2) If eligible and covered under Medicare or a Medicare supplemental plan, the prospective member might already be covered for air ambulance services and should consult a representative of the Medicare program or a representative of his or her Medicare Advantage or Medicare supplemental plan to determine the level of existing coverage the prospective member has for air ambulance services and out-of-pocket costs and whether the plan provider recommends additional supplemental insurance coverage.

Section B. The enactment of sections 375.1400, 375.1405, and 375.1410 of this act shall become effective on January 1, 2022.

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