SECOND REGULAR SESSION

HOUSE BILL NO. 2149

102ND GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE DINKINS.

4671H.01I DANA RADEMAN MILLER, Chief Clerk

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to payments to ambulance providers.

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

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be
2 known as section 376.684, to read as follows:

376.684. 1. As used in this section, unless the context indicates otherwise, the
2 **following terms mean:**
3 **(1) "Ambulance provider", any ambulance service, as defined in section 190.100.**
4 **The term "ambulance provider" shall not include an air ambulance provider;**
5 **(2) "Clean claim", a claim that has no defect or impropriety, including any lack**
6 **of required substantiating documentation or particular circumstance requiring special**
7 **treatment that prevents timely payment from being made on the claim;**
8 **(3) "Covered services", those emergency ambulance services that an enrollee is**
9 **entitled to receive under the terms of a health benefit plan;**
10 **(4) "Enrollee", the same meaning given to the term in section 376.1350;**
11 **(5) "Health benefit plan", the same meaning given to the term in section**
12 **376.1350;**
13 **(6) "Health carrier", the same meaning given to the term in section 376.1350;**
14 **(7) "Out-of-network ambulance provider", an ambulance provider that does not**
15 **contract with the health carrier of the enrollee receiving the covered services.**

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.

16 **2. The minimum allowable reimbursement rate under any health benefit plan**
17 **issued by any health carrier to an out-of-network ambulance provider for providing**
18 **emergency services shall be:**
19 **(1) At the rates set or approved, whether in contract or ordinance, by a local**
20 **governmental entity in the jurisdiction in which the covered services originate, or as**
21 **provided for in section 190.105; or**
22 **(2) In the absence of rates as provided in subdivision (1) of this subsection, three**
23 **hundred twenty-five percent of the current published rate for ambulance services, as**
24 **established by the Centers for Medicare and Medicaid Services under Title XVIII of the**
25 **Social Security Act for the same service provided in the same geographic area, or the**
26 **ambulance provider's billed charges, whichever is less.**
27 **3. Payment made in compliance with this section shall be considered payment in**
28 **full for the covered services provided, except for any co-payment, coinsurance,**
29 **deductible, and other cost-sharing amounts required to be paid by the enrollee. An**
30 **ambulance provider is prohibited from billing the enrollee for any additional amounts**
31 **for paid covered services.**
32 **4. All co-payment, coinsurance, deductible, and other cost-sharing amounts**
33 **provided by subsection 3 of this section shall not exceed the in-network co-payment,**
34 **coinsurance, deductible, and other cost-sharing amounts for the covered services**
35 **received by the enrollee.**
36 **5. A health carrier shall, within thirty days after receipt of a clean claim for**
37 **covered services, promptly remit payment for ambulance services directly to the**
38 **ambulance provider and shall not send payment to an enrollee.**
39 **6. If the claim is not a clean claim, the health carrier shall, within thirty days**
40 **after receipt of the claim, send a written notice acknowledging the date of the receipt of**
41 **the claim and shall specify:**
42 **(1) That the health carrier is declining to pay all or part of the claim and the**
43 **specific reason or reasons for the denial; or**
44 **(2) That additional information is necessary to determine if all or part of the**
45 **claim is payable and the specific additional information that is required.**
46 **7. To the extent that this section conflicts with section 376.690 or any other**
47 **provision of law, this section shall prevail.**

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