

HOUSE No. 3557

Section 23 contained in the engrossed Bill making appropriations for the fiscal year 2013 to provide for supplementing certain existing appropriations and for certain other activities and projects (see House, No. 3539), which had been returned by His Excellency the Governor with recommendation of amendment (for message, see House, No. 3554). July 11, 2013.

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act relative to reimbursement for ambulance services.

Whereas, The deferred operation of this act would tend to defeat its purpose, which is to establish forthwith reimbursement for ambulance services, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public convenience.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 176D of the General Laws is hereby amended by inserting after
2 section 3B the following section:-

3 Section 3C. (a) As used in this section, the following words shall, unless the context
4 clearly requires otherwise, have the following meanings:-

5 “Ambulance service provider”, a person or entity licensed by the department of public
6 health pursuant to section 6 of chapter 111C to establish or maintain an ambulance service.

7 “Emergency ambulance services”, emergency services that an ambulance service
8 provider is authorized to render pursuant to its ambulance service license when a condition or
9 situation in which an individual has a need for immediate medical attention, or where the
10 potential for such need is perceived by the individual, a bystander or an emergency medical
11 services provider.

12 “Insurance policy” and “insurance contract”, a contract of insurance, motor vehicle
13 insurance, indemnity, medical or hospital service, dental or optometric, suretyship or annuity
14 issued, proposed for issuance or intended for issuance by any insurer.

15 “Insured”, an individual entitled to ambulance services benefits pursuant to an insurance
16 policy or insurance contract.

17 “Insurer”, a person, as defined in section 1 of chapter 176D; any health maintenance
18 organization, as defined in section 1 of chapter 176G; a non-profit hospital service corporation
19 organized pursuant to chapter 176A; any organization, as defined in section 1 of chapter 176I,
20 that participates in a preferred provider arrangement, as defined in said section 1 of said chapter
21 176I; any carrier offering a small group health insurance plan pursuant to chapter 176J; any
22 company, as defined in section 1 of chapter 175; any employee benefit trust; any self-insurance
23 plan; and any company possessing a certificate, as defined in section 34A of chapter 90, and
24 authorized to issue a policy of motor vehicle liability insurance pursuant to section 113A of
25 chapter 175 that provides insurance for the expense of medical coverage.

26 (b) Notwithstanding the provisions of any general or special law to the contrary, in any
27 instance in which an ambulance service provider that provides an emergency ambulance service
28 to an insured is not an ambulance service provider under contract to the insurer maintaining or
29 providing the insured’s insurance policy or insurance contract, the insurer maintaining or
30 providing such insurance policy or insurance contract shall pay the ambulance service provider
31 directly and promptly for the emergency ambulance service rendered to the insured.
32 Notwithstanding any prohibition against an insured’s assigning benefits under the insured’s
33 insurance policy or insurance contract, such payment shall be made to the ambulance service
34 provider; provided that the insured executes an assignment of benefits to the ambulance service
35 provider. In the event that an insured is either incapable or unable as a practical matter to execute
36 an assignment of benefits under an insurance policy or insurance contract pursuant to which an
37 assignment of benefits is not prohibited, or in connection with an insurance policy or insurance
38 contract that contains a prohibition against any such assignment of benefits, such payment shall
39 be made to the ambulance service provider regardless of any such incapacity or inability. An
40 ambulance service provider shall not be considered to have been paid for an emergency
41 ambulance service rendered to an insured if the insurer makes payment for the emergency
42 ambulance service to the insured. An ambulance service provider shall have a right of action
43 against an insurer that fails to make a payment to it pursuant to this subsection.

44 (c) Payment to an ambulance service provider pursuant to subsection (b) shall be at a rate
45 equal to the rate established by the municipality where the patient was transported from.

46 (d) An ambulance service provider receiving payment for an ambulance service in
47 accordance with subsections (b) and (c) shall be deemed to have been paid in full for the
48 ambulance service provided to the insured, and shall have no further right or recourse to further
49 bill the insured for said ambulance service with the exception of coinsurance, co-payments or
50 deductibles for which the insured is responsible under the insured’s insurance policy or insurance
51 contract.

52 (e) No term or provision of this section shall be construed as limiting or adversely
53 affecting an insured's right to receive benefits under any insurance policy or insurance contract
54 providing insurance coverage for ambulance services. No term or provision of this section shall
55 create an entitlement on behalf of an insured to coverage for ambulance services if the insured's
56 insurance policy or insurance contract provides no coverage for ambulance services.