

**HOUSE . . . . . No. 1054**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***Paul McMurtry and Angelo L. D'Emilia***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

**An Act relative to ambulance billing.**

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Paul McMurtry</i>	<i>11th Norfolk</i>	<i>1/17/2019</i>
<i>Angelo L. D'Emilia</i>	<i>8th Plymouth</i>	<i>1/24/2019</i>
<i>Steven S. Howitt</i>	<i>4th Bristol</i>	<i>1/24/2019</i>
<i>RoseLee Vincent</i>	<i>16th Suffolk</i>	<i>1/28/2019</i>
<i>Ann-Margaret Ferrante</i>	<i>5th Essex</i>	<i>1/29/2019</i>
<i>Joseph D. McKenna</i>	<i>18th Worcester</i>	<i>1/30/2019</i>
<i>Peter Capano</i>	<i>11th Essex</i>	<i>1/30/2019</i>
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	<i>1/31/2019</i>
<i>Paul R. Feeney</i>	<i>Bristol and Norfolk</i>	<i>1/31/2019</i>
<i>Harold P. Naughton, Jr.</i>	<i>12th Worcester</i>	<i>2/1/2019</i>

**HOUSE . . . . . No. 1054**

By Messrs. McMurtry of Dedham and D'Emilia of Bridgewater, a petition (accompanied by bill, House, No. 1054) of Paul McMurtry, Angelo L. D'Emilia and others relative to payment for ambulance services provided to certain insured individuals. Financial Services.

**The Commonwealth of Massachusetts**

**In the One Hundred and Ninety-First General Court  
(2019-2020)**

An Act relative to ambulance billing.

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

1 Chapter 176D of the General Laws is hereby amended by inserting after section 3B the  
2 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 under section 6 of chapter 111C to establish or maintain an ambulance service except non-  
7 profit corporations licensed to operate critical care ambulance services that perform both ground  
8 and air transports.

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

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

16 "Insured", an individual entitled to ambulance services benefits under an insurance policy  
17 or insurance contract.

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

27 "Municipally Established Ambulance Rates", rates for emergency ambulance service  
28 established annually by a municipality for the current procedure codes and definitions for  
29 ambulance service published by the Centers for Medicare and Medicaid Services under Title  
30 XVIII of the Social Security Act.

31 (b) Notwithstanding any general or special provision of law to the contrary, in any  
32 instance in which an ambulance service provider provides an emergency ambulance service to an  
33 insured but is not an ambulance service provider under contract to the insurer maintaining or  
34 providing the insured's insurance policy or insurance contract, the insurer maintaining or

35 providing such insurance policy or insurance contract shall pay the ambulance service provider  
36 directly and promptly for the emergency ambulance service rendered to the insured. Such  
37 payment shall be made to the ambulance service provider notwithstanding that the insured's  
38 insurance policy or insurance contract contains a prohibition against the insured assigning  
39 benefits thereunder so long as the insured executes an assignment of benefits to the ambulance  
40 service provider and such payment shall be made to the ambulance service provider in the event  
41 an insured is either incapable or unable as a practical matter to execute an assignment of benefits  
42 under an insurance policy or insurance contract pursuant to which an assignment of benefits is  
43 not prohibited, or in connection with an insurance policy or insurance contract that contains a  
44 prohibition against any such assignment of benefits. An ambulance service provider shall not be  
45 considered to have been paid for an emergency ambulance service rendered to an insured if the  
46 insurer makes payment for the emergency ambulance service to the insured. An ambulance  
47 service provider shall have a right of action against an insurer that fails to make a payment to it  
48 under this subsection.

49 (c) Payment to an ambulance service provider under subsection (b) shall be at a rate equal  
50 to the rate established by the municipality from which the patient was transported.

51 (d) Municipalities shall report their municipally established ambulance rates to CHIA that  
52 were in effect as of April 30, 2019; and to CHIA annually on or before April 30 to be included in  
53 the CHIA Transparency Initiative.

54 (e) Municipalities shall not increase their municipally established ambulance rates by a  
55 percentage that exceeds the current Health Care Cost Growth Benchmark set by the Health  
56 Policy Commission unless approved by the secretary of health and human services.

57 (f) An ambulance service provider receiving payment for an ambulance service in  
58 accordance with subsections (b) and (c) shall be deemed to have been paid in full for the  
59 ambulance service provided to the insured, and shall have no further right or recourse to further  
60 bill the insured for said ambulance service with the exception of coinsurance, co-payments or  
61 deductibles for which the insured is responsible under the insured's insurance policy or insurance  
62 contract.

63 (g) No term or provision of this section 3C shall be construed as limiting or adversely  
64 affecting an insured's right to receive benefits under any insurance policy or insurance contract  
65 providing insurance coverage for ambulance services. No term or provision of this section 3C  
66 shall create an entitlement on behalf of an insured to coverage for ambulance services if the  
67 insured's insurance policy or insurance contract provides no coverage for ambulance services".

68 (h) A municipality may appeal to the secretary for a municipally established ambulance  
69 rate increase that is in excess of the current Health Care Cost Benchmark. There shall be an  
70 ambulance service advisory council to advise the secretary on such requests. The council shall be  
71 appointed by the secretary and consist of the following members or a designee: (i) the secretary  
72 of public safety and security; (ii) the commissioner of the group insurance commission; (iii) a  
73 representative of the Fire Chiefs Association of Massachusetts; (iv) the president of the  
74 Massachusetts Municipal Association; (v) the president of the Massachusetts Association of  
75 Health Plans, Inc.; (vi) the president of the Professional Fire Fighters of Massachusetts; (vii) a  
76 representative of the Massachusetts Ambulance Association, Incorporated; and (viii) the  
77 president of a commercial insurer. The council shall make recommendations for rate increases in  
78 excess of the current Health Care Cost Benchmark that consider (A) cost differences associated

79 with differences in geography that impact services; (B) differences in distances travelled for  
80 services; (C) the actual cost of providing services and readiness; and (D) quality of care.