

SENATE No. 634

The Commonwealth of Massachusetts

PRESENTED BY:

Patrick M. O'Connor

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 payments for use of ambulance services.

PETITION OF:

NAME:

Patrick M. O'Connor

DISTRICT/ADDRESS:

Plymouth and Norfolk

SENATE No. 634

By Mr. O'Connor, a petition (accompanied by bill, Senate, No. 634) of Patrick M. O'Connor for legislation relative to insurance payments for use of ambulance services. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 499 OF 2017-2018.]

The Commonwealth of Massachusetts

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

An Act relative to payments for use of ambulance services.

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 have the following
4 meanings, unless the context clearly requires otherwise:-

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 may render under its ambulance service license when a condition or situation in which
9 an individual has a need for immediate medical attention or if the individual, bystander or

10 emergency medical services provider perceives the potential for the need for immediate medical
11 attention.

12 “Insurance policy” and “insurance contract”, any policy, contract, agreement, plan or
13 certificate of insurance issued, delivered or renewed within the commonwealth that provides
14 coverage for expenses incurred by an insured for transportation services rendered by an
15 ambulance service provider.

16 “Insured”, an individual entitled to ambulance services benefits pursuant to an insurance
17 policy 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 (b) In any instance in which an ambulance service provider provides an emergency
28 ambulance service to an insured, but is not an ambulance service provider under contract to the
29 insurer maintaining or providing the insured’s insurance policy or insurance contract, the insurer
30 maintaining or providing such insurance policy or insurance contract shall pay the ambulance
31 service provider directly and promptly for the emergency ambulance service rendered to the

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

44 (c) With the exception of non-profit corporations licensed to operate critical care
45 ambulance services that perform both ground and air transports, payment to an ambulance
46 service provider under subsection (b) shall be at a rate equal to the rate established by the
47 municipality from where the patient was transported.

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

54 (e) No term or provision of this section 3C shall be construed as limiting or adversely
55 affecting an insureds right to receive benefits under any insurance policy or insurance contract
56 providing insurance coverage for ambulance services. No term or provision of this section 3C
57 shall create an entitlement on behalf of an insured to coverage for ambulance services if the
58 insureds insurance policy or insurance contract provides no coverage for ambulance services.