

HOUSE No. 1198

The Commonwealth of Massachusetts

PRESENTED BY:

Daniel J. Hunt

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 to improve patient access to non-emergency medical transportation.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Daniel J. Hunt</i>	<i>13th Suffolk</i>	<i>1/14/2025</i>
<i>Chynah Tyler</i>	<i>7th Suffolk</i>	<i>6/16/2025</i>

HOUSE No. 1198

By Representative Hunt of Boston, a petition (accompanied by bill, House, No. 1198) of Daniel J. Hunt relative to payment of patient access to non-emergency medical transportation. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 1050 OF 2023-2024.]

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Fourth General Court
(2025-2026)**

An Act to improve patient access to non-emergency medical transportation.

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 32A of the General Laws, as appearing in the 2020 Official
2 Edition, is hereby amended by adding the following new section:-

3 Section xx. If required by the commission, any prior authorization for nonemergency
4 ambulance and wheelchair van transportation to inpatient and outpatient dialysis treatment,
5 inpatient and outpatient behavioral health services, and inpatient and outpatient post-acute care,
6 shall be valid for a minimum of 3 business days.

7 SECTION 2. Chapter 118E of the General Laws is hereby amended by inserting the
8 following new section:-

9 Section XX. (a) The division and its contracted health insurers, health plans, health
10 maintenance organizations, behavioral health management firms and third-party administrators
11 under contract to a Medicaid managed care organization or primary care clinician plan shall issue
12 payments to eligible providers, as defined by regulation 101 CMR 327.00, and nonpublic
13 ambulance service providers, as defined by regulation 101 CMR 327.00, in an amount no less
14 than 2 and one half times the determined rates for authorized ambulance and wheelchair van
15 services for: ambulance service, advanced life support, nonemergency transport (101 CMR
16 327.00 Code A0426); ambulance service, basic life support, nonemergency transport (101 CMR
17 327.00 Code A0428); nonemergency wheelchair van transportation (101 CMR 327.00 Code
18 A0130); nonemergency wheelchair transportation with loaded mileage (101 CMR 327.00 Code
19 S0215) and; nonemergency wheelchair transportation with patient attendant or escort (101 CMR
20 327.00 Code T2001) when transporting covered members to inpatient and outpatient dialysis
21 treatment, inpatient and outpatient behavioral health services, and inpatient and outpatient post-
22 acute care, inclusive. Any required prior authorization for these services shall be valid for a
23 minimum of 3 business days.

24 (b) The executive office shall promulgate regulations as necessary to carry out this
25 section.

26 SECTION 3. Chapter 175 of the General Laws, as so appearing, is hereby amended by
27 adding the following new section:-

28 Section XX. If required by a policy, contract, agreement, plan or certificate of insurance
29 issued, delivered or renewed within or without the commonwealth, which is considered
30 creditable coverage under section 1 of chapter 111M, any prior authorization for nonemergency

31 ambulance and wheelchair van transportation to inpatient and outpatient dialysis treatment,
32 inpatient and outpatient behavioral health services, and inpatient and outpatient post-acute care,
33 shall be valid for a minimum of 3 business days.

34 SECTION 4. Chapter 176A of the General Laws, as so appearing, is hereby amended by
35 adding the following new section:-

36 Section XX. If required by a contract between a subscriber and the corporation under an
37 individual or group hospital service plan that is delivered, issued or renewed within the
38 commonwealth, any prior authorization for nonemergency ambulance and wheelchair van
39 transportation to inpatient and outpatient dialysis treatment, inpatient and outpatient behavioral
40 health services, and inpatient and outpatient post-acute care, shall be valid for a minimum of 3
41 business days.

42 SECTION 5. Chapter 176B of the General Laws, as so appearing, is hereby amended by
43 adding the following new section:-

44 Section XX. If required by a subscription certificate under an individual or group medical
45 service agreement delivered, issued or renewed within the commonwealth, any prior
46 authorization for nonemergency ambulance and wheelchair van transportation to inpatient and
47 outpatient dialysis treatment, inpatient and outpatient behavioral health services, and inpatient
48 and outpatient post-acute care, shall be valid for a minimum of 3 business days.

49 SECTION 6. Chapter 176G of the General Laws, as so appearing, is hereby amended by
50 adding the following new section:-

51 Section xx. If required by an individual or group health maintenance contract that is
52 issued or renewed within or without the commonwealth, any prior authorization for
53 nonemergency ambulance and wheelchair van transportation to inpatient and outpatient dialysis
54 treatment, inpatient and outpatient behavioral health services, and inpatient and outpatient post-
55 acute care, shall be valid for a minimum of 3 business days.

56

57 SECTION 7.

58 Section XX. a) Notwithstanding the provisions of any general or special law to the
59 contrary, the health policy commission, in collaboration with center for information and analysis,
60 shall study the adequacy of reimbursement rates of MassHealth and commercial carriers for
61 nonemergency medical transportation, including but not limited to, the role of external economic
62 factors on the development, sustainability, and retention of the emergency medical service
63 workforce, such as the increases in the minimum wage and competition from for-profit
64 industries.