

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

ROS

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33

L.D. 1832

Date: 3/15/24

(Filing No. H-826)

HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

Reproduced and distributed under the direction of the Clerk of the House.

**STATE OF MAINE
HOUSE OF REPRESENTATIVES
131ST LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 1164, L.D. 1832, "An Act to Require Reimbursement of Fees for Treatment Rendered by Public and Private Ambulance Services"

Amend the bill by striking out the title and substituting the following:

'An Act to Continue the Study of Community Paramedicine and to Make Changes Related to Health Insurance Coverage and Prior Authorization Requirements for Certain Ambulance Service Providers'

Amend the bill by striking out the emergency preamble.

Amend the bill by striking out everything after the enacting clause and inserting the following:

'Sec. 1. 24-A MRSA §4303-C, sub-§2, ¶B, as amended by PL 2021, c. 222, §1, is further amended to read:

B. Except as provided for ambulance services in paragraph ~~D~~ D-1, unless the carrier and out-of-network provider agree otherwise, a carrier shall reimburse the out-of-network provider or enrollee, as applicable, for health care services rendered at the greater of:

- (1) The carrier's median network rate paid for that health care service by a similar provider in the geographic area where the service was provided; and
- (2) The median network rate paid by all carriers for that health care service by a similar provider in the geographic area where the service was provided as determined by the all-payer claims database maintained by the Maine Health Data Organization or, if Maine Health Data Organization claims data is insufficient or otherwise inapplicable, another independent medical claims database specified by the superintendent;

Sec. 2. 24-A MRSA §4303-C, sub-§2, ¶D-1 is enacted to read:

COMMITTEE AMENDMENT

ROS

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35

D-1. Unless the carrier and out-of-network provider agree otherwise, a carrier shall reimburse an out-of-network provider for ambulance services that are covered emergency services at the rate applicable to the out-of-network provider pursuant to section 4303-F.

Sec. 3. 24-A MRSA §4303-F, sub-§1, ¶E, as enacted by PL 2023, c. 468, §2, is amended to read:

E. A carrier may not require an a ground ambulance service provider to obtain prior authorization before transporting an enrollee to a hospital, between hospitals or from a hospital to a nursing home, hospice care facility or other health care facility, as defined in Title 22, section 328, subsection 8. A carrier may not require an air ambulance service provider to obtain prior authorization before transporting an enrollee to a hospital or between hospitals for urgent care.

Sec. 4. 24-A MRSA §4303-F, sub-§3, as enacted by PL 2021, c. 241, §3, is amended to read:

3. Exemption. ~~This~~ Except as provided in subsection 1, paragraph E, this section does not apply to air ambulance services.

Sec. 5. Authority to report out legislation. Based on recommendations from stakeholders after further study, the joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters may report out legislation to the 132nd Legislature in 2025 related to reimbursement by health insurance carriers for health care services provided by community paramedicine personnel as described in the Maine Revised Statutes, Title 32, section 84, subsection 4.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

This amendment replaces the bill and changes the title. The amendment enacts a provision enacted by the 130th Legislature and repealed October 1, 2021 that clarifies the reimbursement rate to be paid to out-of-network ambulance service providers for covered emergency services. The amendment prohibits a health insurance carrier from requiring an air ambulance service provider to obtain prior authorization before transporting an enrollee to a hospital or between hospitals for urgent care. The amendment also authorizes the joint standing committee of the Legislature having jurisdiction over health coverage, insurance and financial services matters to report out, after further study, legislation to the 132nd Legislature in 2025 related to reimbursement by health insurance carriers for health care services provided by community paramedicine personnel.

COMMITTEE AMENDMENT