

SENATE BILL 745

C3, E4, J1

0lr2704
CF HB 1524

By: ~~Senator Colburn~~ Senators Colburn, Astle, Della, Exum, Garagiola, Glassman, Kelley, Kittleman, Klausmeier, Middleton, and Pugh

Introduced and read first time: February 10, 2010

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted with floor amendments

Read second time: April 8, 2010

CHAPTER _____

1 AN ACT concerning

2 **Health Insurance – Ambulance Service Providers – ~~Direct Reimbursement~~**
3 **Assignment of Benefits**

4 FOR the purpose of requiring health insurers, nonprofit health service plans, and
5 health maintenance organizations to reimburse an ambulance service provider
6 directly for certain covered services under certain circumstances; providing that
7 an ambulance service provider is entitled to direct reimbursement under certain
8 circumstances; providing that an insured, a subscriber, or an enrollee of certain
9 health insurance carriers may not be liable to certain ambulance service
10 providers for certain services under certain circumstances; prohibiting certain
11 ambulance service providers from taking certain actions against an insured, a
12 subscriber, or an enrollee under certain circumstances; authorizing the
13 ambulance service providers to collect certain payments from an insured, a
14 subscriber, or an enrollee under certain circumstances; providing for the
15 application of this Act; defining ~~a certain term~~ certain terms; and generally
16 relating to reimbursement by insurers, nonprofit health service plans, and
17 health maintenance organizations for transportation by ambulance.

18 BY adding to

19 Article – Health – General
20 Section 19–706(cccc)
21 Annotated Code of Maryland
22 (2009 Replacement Volume)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike-out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 BY adding to
 2 Article – Insurance
 3 Section ~~15-716~~ 15-134
 4 Annotated Code of Maryland
 5 (2006 Replacement Volume and 2009 Supplement)

6 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
 7 MARYLAND, That the Laws of Maryland read as follows:

8 **Article – Health – General**

9 19-706.

10 (CCCC) THE PROVISIONS OF ~~§ 15-716~~ § 15-134 OF THE INSURANCE
 11 ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.

12 **Article – Insurance**

13 ~~15-716.~~ 15-134.

14 (A) (1) ~~IN THIS SECTION, “AMBULANCE” MEANS ANY CONVEYANCE~~
 15 ~~DESIGNED AND CONSTRUCTED OR MODIFIED AND EQUIPPED TO BE USED,~~
 16 ~~MAINTAINED, OR OPERATED TO TRANSPORT INDIVIDUALS WHO ARE SICK,~~
 17 ~~INJURED, WOUNDED, OR OTHERWISE INCAPACITATED~~ THE FOLLOWING WORDS
 18 HAVE THE MEANINGS INDICATED.

19 (2) “AMBULANCE” MEANS ANY CONVEYANCE DESIGNED AND
 20 CONSTRUCTED OR MODIFIED AND EQUIPPED TO BE USED, MAINTAINED, OR
 21 OPERATED TO TRANSPORT INDIVIDUALS WHO ARE SICK, INJURED, WOUNDED,
 22 OR OTHERWISE INCAPACITATED.

23 (3) “AMBULANCE SERVICE PROVIDER” MEANS A PROVIDER OF
 24 AMBULANCE SERVICES THAT:

25 (I) IS OWNED, OPERATED, OR UNDER THE JURISDICTION OF
 26 A POLITICAL SUBDIVISION OF THE STATE OR A VOLUNTEER FIRE COMPANY OR
 27 VOLUNTEER RESCUE SQUAD; OR

28 (II) HAS CONTRACTED TO PROVIDE AMBULANCE SERVICES
 29 FOR A POLITICAL SUBDIVISION OF THE STATE.

30 (4) “ASSIGNMENT OF BENEFITS” MEANS THE TRANSFER BY AN
 31 INSURED, A SUBSCRIBER, OR AN ENROLLEE OF HEALTH CARE COVERAGE
 32 REIMBURSEMENT BENEFITS OR OTHER RIGHTS UNDER A HEALTH INSURANCE
 33 POLICY OR CONTRACT.

1 **(5) “CARRIER” MEANS:**

2 **(I) AN INSURER THAT PROVIDES BENEFITS ON AN**
3 **EXPENSE-INCURRED BASIS;**

4 **(II) A NONPROFIT HEALTH SERVICE PLAN; OR**

5 **(III) A HEALTH MAINTENANCE ORGANIZATION.**

6 **~~(B) THIS SECTION APPLIES TO EACH INDIVIDUAL OR GROUP HEALTH~~**
7 **~~INSURANCE POLICY OR CONTRACT THAT IS ISSUED OR DELIVERED IN THE~~**
8 **~~STATE BY AN INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH~~**
9 **~~MAINTENANCE ORGANIZATION.~~**

10 **~~(C) AN INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH~~**
11 **~~MAINTENANCE ORGANIZATION~~ A CARRIER SHALL REIMBURSE AN AMBULANCE**
12 **SERVICE PROVIDER THAT OBTAINS AN ASSIGNMENT OF BENEFITS FROM AN**
13 **INSURED, A SUBSCRIBER, OR AN ENROLLEE DIRECTLY FOR COVERED SERVICES**
14 **PROVIDED TO THE INSURED, SUBSCRIBER, ENROLLEE, OR ANY OTHER**
15 **INDIVIDUAL COVERED BY ~~THE~~ A POLICY OR CONTRACT ISSUED BY THE**
16 **CARRIER.**

17 **~~(D) AN AMBULANCE SERVICE PROVIDER IS ENTITLED TO DIRECT~~**
18 **~~REIMBURSEMENT UNDER THIS SECTION WHETHER OR NOT;~~**

19 **~~(1) THE AMBULANCE THAT PROVIDED THE SERVICE IS OWNED,~~**
20 **~~OPERATED, OR UNDER THE JURISDICTION OF A UNIT OF STATE GOVERNMENT, A~~**
21 **~~POLITICAL SUBDIVISION OF THE STATE, OR A VOLUNTEER FIRE COMPANY OR~~**
22 **~~VOLUNTEER RESCUE SQUAD;~~**

23 **~~(2) THE TRANSPORTATION BY AMBULANCE IS IN RESPONSE TO AN~~**
24 **~~EMERGENCY MEDICAL CONDITION; OR~~**

25 **~~(3) THE AMBULANCE SERVICE PROVIDER IS AN IN-NETWORK OR~~**
26 **~~OUT-OF-NETWORK PROVIDER.~~**

27 **(C) (1) THIS SUBSECTION APPLIES TO AN AMBULANCE SERVICE**
28 **PROVIDER THAT RECEIVES DIRECT REIMBURSEMENT UNDER SUBSECTION (B)**
29 **OF THIS SECTION.**

30 **(2) EXCEPT AS PROVIDED IN PARAGRAPH (4) OF THIS**
31 **SUBSECTION, AN INSURED, SUBSCRIBER, OR ENROLLEE MAY NOT BE LIABLE TO**
32 **AN AMBULANCE SERVICE PROVIDER FOR COVERED SERVICES.**

1 **(3) AN AMBULANCE SERVICE PROVIDER OR A REPRESENTATIVE**
2 **OF THE AMBULANCE SERVICE PROVIDER MAY NOT:**

3 **(I) COLLECT OR ATTEMPT TO COLLECT FROM AN INSURED,**
4 **A SUBSCRIBER, OR AN ENROLLEE OF A CARRIER ANY MONEY OWED TO THE**
5 **AMBULANCE SERVICE PROVIDER BY THE CARRIER FOR COVERED SERVICES**
6 **RENDERED TO THE INSURED, SUBSCRIBER, OR ENROLLEE BY THE AMBULANCE**
7 **SERVICE PROVIDER; OR**

8 **(II) MAINTAIN ANY ACTION AGAINST AN INSURED,**
9 **SUBSCRIBER, OR ENROLLEE OF A CARRIER TO COLLECT OR ATTEMPT TO**
10 **COLLECT ANY MONEY OWED TO THE AMBULANCE SERVICE PROVIDER BY THE**
11 **CARRIER FOR COVERED SERVICES RENDERED TO THE INSURED, SUBSCRIBER,**
12 **OR ENROLLEE BY THE AMBULANCE SERVICE PROVIDER.**

13 **(4) AN AMBULANCE SERVICE PROVIDER OR A REPRESENTATIVE**
14 **OF THE AMBULANCE SERVICE PROVIDER MAY COLLECT OR ATTEMPT TO**
15 **COLLECT FROM AN INSURED, A SUBSCRIBER, OR AN ENROLLEE OF A CARRIER:**

16 **(I) ANY COPAYMENT, DEDUCTIBLE, OR COINSURANCE**
17 **AMOUNT OWED BY THE INSURED, SUBSCRIBER, OR ENROLLEE FOR COVERED**
18 **SERVICES RENDERED TO THE INSURED, SUBSCRIBER, OR ENROLLEE BY THE**
19 **AMBULANCE SERVICE PROVIDER;**

20 **(II) IF MEDICARE IS THE PRIMARY INSURER AND THE**
21 **CARRIER IS THE SECONDARY INSURER, ANY AMOUNT UP TO THE MEDICARE**
22 **APPROVED OR LIMITING AMOUNT, AS SPECIFIED UNDER THE FEDERAL SOCIAL**
23 **SECURITY ACT, THAT IS NOT OWED TO THE AMBULANCE SERVICE PROVIDER BY**
24 **MEDICARE OR THE CARRIER AFTER COORDINATION OF BENEFITS HAS BEEN**
25 **COMPLETED, FOR MEDICARE COVERED SERVICES RENDERED TO THE INSURED,**
26 **SUBSCRIBER, OR ENROLLEE BY THE AMBULANCE SERVICE PROVIDER; AND**

27 **(III) ANY PAYMENT OR CHARGES FOR SERVICES THAT ARE**
28 **NOT COVERED SERVICES.**

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
30 policies, contracts, and health benefit plans issued, delivered, or renewed in the State
31 on or after October 1, 2010.

32 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
33 October 1, 2010.