

Chapter 605

(Senate Bill 682)

AN ACT concerning

~~Medical Assistance Program and Health Insurance~~ **Emergency Medical Services Providers – Coverage and Reimbursement of Services – Reports and Plan**

FOR the purpose of requiring the ~~Maryland Department of Health to reimburse certain emergency medical services providers for certain services provided to Maryland Medical Assistance Program recipients; requiring insurers, nonprofit health service plans, and health maintenance organizations that provide health insurance benefits under certain insurance policies or contracts to provide coverage for certain services provided by certain emergency medical services providers; defining certain terms; making a conforming change; providing for the application of this Act~~ Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems, in consultation with certain entities, jointly to develop a certain plan, identify a certain process, study and make recommendations regarding certain matters, and submit certain reports on or before a certain date; providing for the construction of this Act; and generally relating to the coverage and reimbursement of services provided by emergency medical services providers.

~~BY repealing and reenacting, with amendments,
Article — Health — General
Section 15 — 114.1
Annotated Code of Maryland
(2015 Replacement Volume and 2017 Supplement)~~

~~BY adding to
Article — Insurance
Section 15 — 853
Annotated Code of Maryland
(2017 Replacement Volume)~~

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

~~Article — Health — General~~

~~15 — 114.1.~~

~~(a) (1) In this section[, “emergency”] THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.~~

~~(2) "EMERGENCY MEDICAL SERVICES PROVIDER" HAS THE MEANING STATED IN § 13-516 OF THE EDUCATION ARTICLE.~~

~~(3) "EMERGENCY service transporter" means a public entity or volunteer fire, rescue, or emergency medical service that provides emergency medical services.~~

~~(4) "MOBILE INTEGRATED HEALTH SERVICE" MEANS A COMMUNITY BASED PREVENTIVE, PRIMARY, CHRONIC, PREADMISSION, OR POSTADMISSION HEALTH CARE SERVICE OR TRANSPORT PROVIDED BY AN EMERGENCY MEDICAL SERVICES PROVIDER TO AN INDIVIDUAL TO REDUCE THE UNNECESSARY USE OF 911 AND TRANSPORTS TO HOSPITAL EMERGENCY DEPARTMENTS FOR MINOR MEDICAL CONDITIONS.~~

~~(b) [If] SUBJECT TO SUBSECTION (C) OF THIS SECTION, IF an emergency service transporter charges for its services and requests reimbursement from the Program, the Department shall reimburse the emergency service transporter, in an amount as specified by regulations adopted by the Department, for the cost of:~~

~~(1) Transportation the emergency service transporter provides to a Program recipient to a facility in response to a 911 call; and~~

~~(2) Medical services the emergency service transporter provides to the Program recipient while transporting the Program recipient to a facility in response to a 911 call.~~

~~(c) (1) THE DEPARTMENT SHALL REIMBURSE AN EMERGENCY MEDICAL SERVICES PROVIDER FOR MOBILE INTEGRATED HEALTH SERVICES PROVIDED TO A PROGRAM RECIPIENT.~~

~~(2) THE SERVICES SUBJECT TO REIMBURSEMENT UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL INCLUDE:~~

~~(i) HEALTH CARE SERVICES, INCLUDING HEALTH ASSESSMENTS, CHRONIC DISEASE MONITORING AND EDUCATION, MEDICATION COMPLIANCE, IMMUNIZATIONS AND VACCINATIONS, LABORATORY SPECIMEN COLLECTION, HOSPITAL DISCHARGE FOLLOW-UP CARE, AND MINOR MEDICAL PROCEDURES, PROVIDED BY AN EMERGENCY MEDICAL SERVICES PROVIDER THAT ARE:~~

~~1. WITHIN THE SCOPE OF PRACTICE OF THE PROVIDER;~~
~~AND~~

~~2. PROVIDED IN A HOME OR ANY OTHER COMMUNITY BASED SETTING TO A PROGRAM RECIPIENT WHO DOES NOT REQUIRE EMERGENCY MEDICAL TRANSPORT; AND~~

~~(H) TRANSPORTATION PROVIDED BY THE EMERGENCY MEDICAL SERVICES PROVIDER TO A PROGRAM RECIPIENT WITH A LOW ACUITY HEALTH CONDITION TO AND FROM A LOCATION IN WHICH URGENT HEALTH CARE SERVICES ARE PROVIDED TO INDIVIDUALS.~~

~~[(c)] (D) The Department shall adopt any regulations necessary to carry out this section.~~

~~Article Insurance~~

~~15-853.~~

~~(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.~~

~~(2) "EMERGENCY MEDICAL SERVICES PROVIDER" HAS THE MEANING STATED IN § 13-516 OF THE EDUCATION ARTICLE.~~

~~(3) "MOBILE INTEGRATED HEALTH SERVICE" HAS THE MEANING STATED IN § 15-114.1 OF THE HEALTH GENERAL ARTICLE.~~

~~(B) THIS SECTION APPLIES TO:~~

~~(1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN EXPENSE INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND~~

~~(2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.~~

~~(C) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR MOBILE INTEGRATED HEALTH SERVICES PROVIDED BY AN EMERGENCY MEDICAL SERVICES PROVIDER TO AN INSURED OR ENROLLEE.~~

~~(2) THE SERVICES FOR WHICH COVERAGE IS REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL INCLUDE:~~

~~(I) HEALTH CARE SERVICES, INCLUDING HEALTH ASSESSMENTS, CHRONIC DISEASE MONITORING AND EDUCATION, MEDICATION COMPLIANCE, IMMUNIZATIONS AND VACCINATIONS, LABORATORY SPECIMEN COLLECTION, HOSPITAL DISCHARGE FOLLOW UP CARE, AND MINOR MEDICAL PROCEDURES, PROVIDED BY AN EMERGENCY MEDICAL SERVICES PROVIDER THAT ARE:~~

~~1. WITHIN THE SCOPE OF PRACTICE OF THE PROVIDER;~~
AND

~~2. PROVIDED IN A HOME OR ANY OTHER COMMUNITY-BASED SETTING TO AN INSURED OR ENROLLEE WHO DOES NOT REQUIRE EMERGENCY MEDICAL TRANSPORT; AND~~

~~(II) TRANSPORTATION PROVIDED BY THE EMERGENCY MEDICAL SERVICES PROVIDER TO AN INSURED OR ENROLLEE WITH A LOW ACUITY HEALTH CONDITION TO AND FROM A LOCATION IN WHICH URGENT HEALTH CARE SERVICES ARE PROVIDED TO INDIVIDUALS.~~

~~SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after January 1, 2019.~~

(a) (1) The Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems, in consultation with the Maryland Department of Health, the Health Services Cost Review Commission, the Maryland Hospital Association, the Maryland State Medical Society, the Maryland Nurses Association, and managed care organizations in the State, jointly shall:

(i) develop a statewide plan for the reimbursement of services provided by emergency medical services providers to Maryland Medical Assistance Program recipients, including:

1. mobile integrated health services;
2. emergency medical services without transport; and
3. emergency medical services with transport to an alternative destination; and

(ii) identify a process for obtaining Medicare reimbursement for the services specified under item (i) of this paragraph.

(2) On or before January 1, 2019, the Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems jointly shall submit

a report that includes the plan developed and a description of the process identified under paragraph (1) of this subsection to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.

(3) This subsection may not be construed to preclude the Maryland Department of Health from initiating reimbursement for any of the services specified in paragraph (1)(i) of this subsection before the submission of the report required under paragraph (2) of this subsection.

(b) (1) The Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems, in consultation with the Maryland Department of Health, the Health Services Cost Review Commission, the Maryland Hospital Association, the Maryland State Medical Society, the Maryland Nurses Association, and commercial health insurers, nonprofit health service plans, and health maintenance organizations in the State, jointly shall study and make recommendations regarding the desirability and feasibility of reimbursement for services provided by emergency medical services providers to enrollees of health insurers, nonprofit health service plans, and health maintenance organizations, including:

(i) mobile integrated health services;

(ii) emergency medical services without transport; and

(iii) emergency medical services with transport to an alternative destination.

(2) On or before January 1, 2019, the Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems jointly shall submit a report on the findings and recommendations from the study required under paragraph (1) of this subsection, including any legislative proposals, to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.

(3) This subsection may not be construed to preclude a health insurer, nonprofit health service plan, or health maintenance organization from initiating reimbursement for any of the services specified in paragraph (1) of this subsection before the submission of the report required under paragraph (2) of this subsection.

SECTION ~~2~~ 2. AND BE IT FURTHER ENACTED, That this Act shall take effect ~~October~~ July 1, 2018.

Approved by the Governor, May 15, 2018.