01-22 16:28 H.B. 301

1

31

Ambulance Provider Payment Amendments

2025 GENERAL SESSION STATE OF UTAH

Chief Sponsor: A. Cory Maloy 2 3 **LONG TITLE** 4 **General Description:** 5 This bill amends provisions related to ambulance billing and charges. 6 **Highlighted Provisions:** 7 This bill: defines terms; 8 9 codifies a base rate for ground ambulance transports; 10 provides a method for updating the base rate each year; 11 prohibits a ground ambulance provider from charging rates that exceed established rates; 12 prohibits balance billing; and 13 requires an insurer to allow for established rates. 14 **Money Appropriated in this Bill:** 15 None 16 **Other Special Clauses:** 17 None **Utah Code Sections Affected:** 18 19 AMENDS: 20 53-2d-503, as last amended by Laws of Utah 2024, Chapter 240 21 **ENACTS:** 22 **31A-22-627.1**, Utah Code Annotated 1953 23 24 Be it enacted by the Legislature of the state of Utah: 25 Section 1. Section 31A-22-627.1 is enacted to read: 31A-22-627.1. Ground ambulance reimbursement. 26 27 (1) As used in this section: 28 (a) "Adjusted base rate" means the same as that term is defined in Section 53-2d-503. (b) "Base rate" means the same as that term is defined in Section 53-2d-503. 29 30 (2) For a rate established in a rule created under Section 53-2d-503 that is not the base rate,

a health benefit plan shall consider a correctly charged amount under the rate established

H.B. 301 01-22 16:28

32		by the rule as an allowable expense for a claim.
33	<u>(3)</u>	Before July 1, 2026, a health benefit plan shall consider a correctly charged amount that
34		is equal to the base rate as an allowable expense for a claim.
35	<u>(4)</u>	Beginning on July 1, 2026, a health benefit plan shall consider a correctly charged
36		amount that is equal to the adjusted base rate as an allowable expense for a claim.
37	<u>(5)</u>	A health benefit plan shall make a payment for rates described in this section directly to
38		the provider, including an out-of-network provider, not later than:
39		(a) 30 days after the day the health benefit plan receives an electronic claim for the
40		services that includes all information necessary to pay the claim; or
41		(b) 45 days after the day the health benefit plan receives a nonelectronic claim for the
42		services that includes all information necessary to pay the claim.
43		Section 2. Section 53-2d-503 is amended to read:
44		53-2d-503 . Establishment of maximum rates.
45	(1)	[The] As used in this section:
46		(a) "Adjusted base rate" means, for each transport type described in Subsection (5)(a),
47		the sum of:
48		(i) the previous year's base rate or adjusted base rate if the adjusted base rate was
49		published; and
50		(ii) the product of the applicable rate described in Subsection (1)(a)(i) multiplied by
51		the previous 12-month medical care consumer price index published in June.
52		(b)(i) "Balance bill" means the practice of a healthcare provider billing an individual
53		for the difference between the individual's billed charges and the amount the
54		individual's health benefit plan allows for a covered service, except for any
55		applicable deductible, copayment, or coinsurance amounts.
56		(ii) "Balance bill" does not include:
57		(A) billing an uninsured individual for services provided;
58		(B) billing an individual for services that a health benefit plan determines are
59		unnecessary; or
60		(C) billing an individual for a claim that was denied by the individual's health
61		benefit plan.
62		(c)(i) "Base rate" means the rate a ground ambulance provider charges for:
63		(A) transporting an individual to a hospital or patient receiving facility;
64		(B) supplies used when transporting the individual;
65		(C) providing procedures during transport; and

01-22 16:28 H.B. 301

66	(D) administering medications during transport.
67	(ii) "Base rate" does not include charges for:
68	(A) the cost of medications; or
69	(B) mileage.
70	(d) "Medical care consumer price index rate" means the percentage rate for medical care
71	published each month by the United States Bureau of Labor Statistics to measure
72	inflation.
73	(2) Except as provided for the base rate described in Subsection (5), the bureau shall, after
74	receiving recommendations under Subsection [(2)] (3), establish maximum rates for
75	ground ambulance providers and paramedic providers that are just and reasonable.
76	[(2)] (3) The committee may make recommendations to the bureau on the maximum rates
77	that should be set under Subsection $[(1)]$ (2).
78	[(3)] (4)(a) Ground ambulance providers and paramedic providers may not charge fees
79	for transporting a patient when the provider does not transport the patient.
80	(b) The provisions of Subsection $[(3)(a)]$ $(4)(a)$ do not apply to ambulance providers or
81	paramedic providers in a geographic service area which contains a town as defined in
82	Subsection 10-2-301(2)(f).
83	(5)(a) The base rate is as follows:
84	(i) for emergency medical technician ground ambulance transport, \$1,234.92;
85	(ii) for advanced emergency medical technician ground ambulance transport,
86	\$1,630.31;
87	(iii) for paramedic ground ambulance transport, \$2,383.73; and
88	(iv) subject to Subsection (5)(b), for a transport described in Subsection (5)(a)(i) or
89	(ii) that has a paramedic on board, \$2,383.73.
90	(b) A ground ambulance provider may charge the rate described in Subsection (5)(a)(iv)
91	or the associated adjusted base rate if:
92	(i) a designated emergency medical service dispatch center dispatches a licensed
93	paramedic provider to treat the individual;
94	(ii) the licensed paramedic provider has initiated advanced life support;
95	(iii) online medical control directs that a paramedic remain with the patient during
96	transport; and
97	(iv) the licensed ground ambulance provider has a reimbursement for paramedic
98	services agreement with a paramedic licensed provider for the service provided.
99	(c) Reginning July 1, 2026, and each July 1 thereafter, the bureau shall calculate and

H.B. 301 01-22 16:28

100	publish the adjusted base rate in rule.
101	(d) The bureau may only publish an adjusted base rate once each year.
102	(6)(a) For rates established in rules created under this section that are not the base rate, a
103	ground ambulance provider or paramedic provider may not charge an amount greater
104	than the amount authorized in the rule created under this section.
105	(b) For the base rate, a ground ambulance provider or paramedic provider may not
106	charge an amount greater than the base rate described in Subsection (5)(a), unless the
107	amount does not exceed the adjusted base rate published in rule.
108	(c) A ground ambulance provider or paramedic provider may not balance bill.
109	Section 3. Effective Date.
110	This bill takes effect on May 7, 2025.