

**REVENUE: No revenue impact**

**FISCAL: Minimal fiscal impact, no statement issued**

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**Action:** Do Pass

**Vote:** 9 - 0 - 0

**Yeas:** Clem, Conger, Harker, Kennemer, Keny-Guyer, Lively, Thompson, Weidner, Greenlick

**Nays:** 0

**Exc.:** 0

**Prepared By:** Tyler Larson, Administrator

**Meeting Dates:** 3/13, 3/18

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**WHAT THE MEASURE DOES:** Requires health insurer that provide coverage of ambulance care and transportation pay ambulance care and transportation provider directly.

**ISSUES DISCUSSED:**

- Personal story from provider of insurer reimbursing insured rather than the provider for ambulance care
- Cost shifting due to uncompensated care
- Impact of non-payment on small businesses and fire districts

**EFFECT OF COMMITTEE AMENDMENT:** No amendment.

**BACKGROUND:** Insurers that provide coverage for ambulance care and transportation currently must make payments jointly to provider of services and to insured, unless the policy provides for direct payment to the provider. Providers assert that some payments from insurers are being sent directly to the insureds and not always remitted to the ambulance care providers. This process leaves care providers uncompensated, forcing them to shift costs to the patients and insurers who do pay for services received.

House Bill 2969 requires that health insurers reimburse ambulance care providers directly.