FISCAL: Minimal fiscal impact, no statement issued	
Action:	Do Pass
Vote:	4 - 0 - 1
Yeas:	Knopp, Kruse, Steiner Hayward, Monnes Anderson
Nays:	0
Exc.:	Shields
Prepared By:	Sandy Thiele-Cirka, Administrator
Meeting Dates:	4/18, 4/23

REVENUE: No revenue impact

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

ISSUES DISCUSSED:

- Impact on non-profit and small businesses
- Importance to pay provider directly
- Cost-shift
- Personal experience

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: Currently, insurers providing coverage for ambulance care and transportation must make payments jointly to provider of services and to the insured, unless the policy provides for direct payment to the provider. Providers assert that some payments from insurers are being sent directly to the insured and are not always remitted directly 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 health insurers reimburse ambulance care providers directly.