

Ground Ambulance and Patient Billing Advisory Committee

Request

Ensure the congressionally mandated Ground Ambulance and Patient Billing Advisory Committee completes its work and sends its recommendations to Congress before legislation addressing balance billing is enacted. Congress should protect patients and ground ambulance services by making sure the prohibition on balance billing is coupled with policies that remove the patient from the middle and ensure that private insurers reimburse ground ambulance service organizations at equitable rates.

Background

When developing the No Surprises Act, Congress recognized that ground ambulance service organizations are health care first responders providing critical emergency 9-1-1 medical care and transport services to communities in addition to inter-facility transports linking patients to health care network providers in a region. Ground ambulance service organizations are also both governmental and non-governmental entities which are locally heavily regulated, which often includes rates set and monitored by local communities. Congress therefore created the Ground Ambulance and Patient Billing Advisory Committee to protect the U.S. emergency medical Services (EMS) system, maintain patient access to higher acuity facilities, and better understand local oversight and regulation when addressing balance billing by ground ambulance service organizations.

Ground ambulance service organizations are unlike other health care providers and suppliers because their rates are often determined by local and State laws. To ensure the efficient use of resources, many communities designate a particular entity as the sole provider of emergency medical services for a particular geographic area. The designated ambulance service supplier or provider is required by law to provide all emergency medical services for that area and is not permitted to refuse to respond to an emergency situation once initiated by an individual.

Local governments set rates consistent with performance requirements, including distances traveled, response time mandates, and quality of care standards. These requirements are based on national protocols but tailored slightly to address each community's unique characteristics to ensure that the people in their area have access to a robust 9-1-1 EMS system and ambulance interfacility mobile healthcare transports. Balance billing may occur when commercial insurers refuse to pay these rates or to negotiate with the ground ambulance service organizations.

The Congress charged the Advisory Committee with "reviewing options to improve the disclosure of charges and fees for ground ambulance services, better inform consumers of insurance options for such services, and protect consumers from balance billing." Given the fact that these small, locally regulated suppliers and providers are already struggling to keep their doors open and serve the patients in their communities, Congress sought to protect patient access to ground ambulance services from insurance company practices while respecting the oversight and regulations of state and local jurisdictions. It also recognized the need to address the market imbalance that allows some insurers to force unfair and unsustainable rates on smaller ground ambulance services organizations.

Congress should allow this process to unfold as intended in the No Surprises Act. It should review the recommendations of the Advisory Committee and take the patient out of the middle, while also ensuring that the rates paid by insurance companies are sufficient enough for communities to continue to have access to often lifesaving emergency 9-1-1 and critical non-emergency ambulance services.