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HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

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STATE OF MAINE
SENATE
132ND LEGISLATURE
SECOND REGULAR SESSION

COMMITTEE AMENDMENT " " to S.P. 614, L.D. 1530, "An Act to Improve the Sustainability of Emergency Medical Services in Maine"

Amend the bill by striking out everything after the enacting clause and inserting the following:

'Sec. 1. 24-A MRS §4303-F, as amended by PL 2025, c. 34, §1 and affected by §2, is further amended by amending the section headnote to read:

§4303-F. Reimbursement for ambulance services and nontransporting emergency medical services; participation of ambulance and nontransporting emergency medical service providers in carrier networks

Sec. 2. 24-A MRS §4303-F, sub-§1, as amended by PL 2025, c. 34, §1 and affected by §2, is further amended to read:

1. Reimbursement for ambulance and nontransporting emergency medical services. With respect to a bill for covered services rendered by an ambulance service or nontransporting emergency medical service provider, a carrier shall reimburse the ambulance service or nontransporting emergency medical service provider or enrollee, as applicable, as follows.

A. If the ambulance service or nontransporting emergency medical service provider participates in the carrier's network, the carrier shall reimburse at the ambulance service provider's or nontransporting emergency medical service provider's rate or 200% 300% of the Medicare rate for that service, whichever is less, plus any adjustment required by paragraph C.

B. If the ambulance service or nontransporting emergency medical service provider is an out-of-network provider, the carrier shall reimburse at the ambulance service provider's or nontransporting emergency medical service provider's rate or 180% 280% of the Medicare rate for that service, whichever is less, plus any adjustment required by paragraph C.

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1 C. If the ambulance service or nontransporting emergency medical service provider is  
2 located in a rural or super rural area as designated by the federal Department of Health  
3 and Human Services, Centers for Medicare and Medicaid Services and eligible for  
4 additional Medicare reimbursement for services that were provided to a Medicare  
5 enrollee, the carrier shall increase the reimbursement to that ambulance service  
6 provider or nontransporting emergency medical service provider in the same amount  
7 as the additional Medicare reimbursement.

8 D. If, on the effective date of this subsection in the case of an ambulance service  
9 provider or, on or after January 1, 2027 in the case of a nontransporting emergency  
10 medical service provider, an ambulance service provider's or a nontransporting  
11 emergency medical service provider's charge for ambulance services is below ~~200%~~  
12 300% of the Medicare rate for that service, the ambulance service provider or  
13 nontransporting emergency medical service provider may not increase the charge for  
14 that service by more than 5% annually.

15 E. A carrier may not require a ground ambulance service provider to obtain prior  
16 authorization before transporting an enrollee to a hospital, between hospitals or from a  
17 hospital to a nursing home, hospice care facility or other health care facility, as defined  
18 in Title 22, section 328, subsection 8. A carrier may not require an air ambulance  
19 service provider that is a nonprofit organization to obtain prior authorization before  
20 transporting an enrollee to a hospital or between hospitals for urgent care.

21 F. Notwithstanding this subsection, a carrier shall reimburse an ambulance service  
22 provider or nontransporting emergency medical service provider for the administration  
23 and dispensing of naloxone hydrochloride or another opioid overdose-reversing  
24 medication as authorized under Title 32, section 86, subsection 4.

25 G. A carrier may not be required to reimburse twice for covered services when both  
26 an ambulance service provider and a nontransporting emergency medical service  
27 provider respond to the same request for emergency services.

28 Notwithstanding this subsection, a carrier is not required to reimburse an ambulance service  
29 provider at the reimbursement rates required in this subsection for covered services  
30 delivered through community paramedicine in accordance with Title 32, section 84,  
31 subsection 4 and a carrier may require an ambulance service provider to obtain prior  
32 authorization before providing services through community paramedicine.

33 As used in this subsection, "nontransporting emergency medical service" has the same  
34 meaning as in Title 32, section 83, subsection 14.

35 **Sec. 3. Application.** This Act applies to all policies, contracts and certificates  
36 executed, delivered, issued for delivery, continued or renewed in this State on or after  
37 January 1, 2027. For purposes of this Act, all contracts are deemed to be renewed no later  
38 than the next yearly anniversary of the contract date.'

39 Amend the bill by relettering or renumbering any nonconsecutive Part letter or section  
40 number to read consecutively.

### SUMMARY

41 This amendment replaces the bill. The amendment provides that care that is provided  
42 at the scene of an emergency medical services event by an ambulance service or  
43

1 nontransporting emergency medical service is reimbursable care regardless of whether a  
2 patient is transported to another facility, including the administration of overdose-reversing  
3 medications that do not result in patient transport to a facility. The amendment specifies  
4 that a carrier is not required to reimburse twice for the same request for emergency services.

5 The amendment also increases the reimbursement rate paid to ambulance service  
6 providers and nontransporting emergency medical service providers from 200% of the  
7 Medicare rate to 300% of the Medicare rate for covered services.

8 The amendment applies to health plans issued on or after January 1, 2027.

9 **FISCAL NOTE REQUIRED**

10 **(See attached)**