

# **WEST VIRGINIA LEGISLATURE**

## **2017 REGULAR SESSION**

**Introduced**

### **Senate Bill 276**

BY SENATOR MILLER

[Introduced February 13, 2017; Referred  
to the Committee on Banking and Insurance; and then  
to the Committee on the Judiciary]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,  
2 designated §33-15-4o; to amend said code by adding thereto a new section, designated  
3 §33-16-3aa; to amend said code by adding thereto a new section, designated §33-24-7p;  
4 to amend said code by adding thereto a new section, designated §33-25-8m; and to  
5 amend said code by adding thereto a new section, designated §33-25A-8o, all relating to  
6 collection of air ambulance fees for emergency treatment or air transportation rendered to  
7 persons covered by certain insurance plans; allowing providers of air ambulance services  
8 not under contract with certain insurance plans to collect an amount up to the equivalent  
9 paid for federal reimbursement for services rendered to covered employees or  
10 dependents; and requiring providers of air ambulance services that enter into a  
11 subscription service agreement with employees or dependents covered by certain  
12 insurance plans to accept the subscription fee as payment in full for services rendered.

*Be it enacted by the Legislature of West Virginia:*

1 That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new  
2 section, designated §33-15-4o; that said code be amended by adding thereto a new section,  
3 designated §33-16-3aa; that said code be amended by adding thereto a new section, designated  
4 §33-24-7p; that said code be amended by adding thereto a new section, designated §33-25-8m;  
5 and that said code be amended by adding thereto a new section, designated §33-25A-8o, all to  
6 read as follows:

**ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE.**

**§33-15-4o. Air-ambulance fees.**

1 (a) Notwithstanding any provision of this code to the contrary, any air-ambulance provider  
2 which does not have a contract with an insurer under this article, that provides air transportation  
3 or related emergency or treatment services to an individual who is insured by the insurer, shall  
4 bill the insurer before submitting any bill to the insured. The air-ambulance provider may not  
5 collect from the insured an amount for those services which exceeds the reimbursement amount

6 then in effect for the federal Medicare program, including any applicable Geographic Practice  
7 Cost Index. The insurer shall apply all amounts collected by the air-ambulance provider from the  
8 insured to the insured's deductible. The air-ambulance provider may seek to recover additional  
9 amounts from the insurer, subject to the provisions of subsection (b) of this section.

10 (b) If an air-ambulance provider has entered into a subscription service agreement with  
11 an individual insured by the insurer, and the individual is in good standing with the agreement,  
12 the air-ambulance provider shall accept the fee or cost of the subscription service agreement as  
13 payment in full for any air-ambulance transport and related emergency treatment or services,  
14 which the air-ambulance provider may provide to that employee or dependent of an employee.

## **ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.**

### **§33-16-3aa. Air-ambulance fees.**

1 (a) Notwithstanding any provision of this code to the contrary, any air-ambulance provider  
2 which does not have a contract with an insurer under this article, that provides air transportation  
3 or related emergency or treatment services to an individual who is insured by the insurer, shall  
4 bill the insurer before submitting any bill to the insured. The air-ambulance provider may not  
5 collect from the insured an amount for those services which exceeds the reimbursement amount  
6 then in effect for the federal Medicare program, including any applicable Geographic Practice  
7 Cost Index. The insurer shall apply all amounts collected by the air-ambulance provider from the  
8 insured to the insured's deductible. The air-ambulance provider may seek to recover additional  
9 amounts from the insurer, subject to the provisions of subsection (b) of this section.

10 (b) If an air-ambulance provider has entered into a subscription service agreement with  
11 an individual insured by the insurer, and the individual is in good standing with the agreement,  
12 the air-ambulance provider shall accept the fee or cost of the subscription service agreement as  
13 payment in full for any air-ambulance transport and related emergency treatment or services,  
14 which the air-ambulance provider may provide to that employee or dependent of an employee.

**ARTICLE 24. HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE CORPORATIONS, DENTAL SERVICE CORPORATIONS AND HEALTH SERVICE CORPORATIONS.**

**§33-24-7p. Air-ambulance fees.**

1        (a) Notwithstanding any provision of this code to the contrary, any air-ambulance provider  
2 which does not have a contract with an insurer under this article, that provides air transportation  
3 or related emergency or treatment services to an individual who is insured by the insurer, shall  
4 bill the insurer before submitting any bill to the insured. The air-ambulance provider may not  
5 collect from the insured an amount for those services which exceeds the reimbursement amount  
6 then in effect for the federal Medicare program, including any applicable Geographic Practice  
7 Cost Index. The insurer shall apply all amounts collected by the air-ambulance provider from the  
8 insured to the insured's deductible. The air-ambulance provider may seek to recover additional  
9 amounts from the insurer, subject to the provisions of subsection (b) of this section.

10        (b) If an air-ambulance provider has entered into a subscription service agreement with  
11 an individual insured by the insurer, and the individual is in good standing with the agreement,  
12 the air-ambulance provider shall accept the fee or cost of the subscription service agreement as  
13 payment in full for any air-ambulance transport and related emergency treatment or services,  
14 which the air-ambulance provider may provide to that employee or dependent of an employee.

**ARTICLE 25. HEALTH CARE CORPORATIONS.**

**§33-25-8m. Air-ambulance fees.**

1        (a) Notwithstanding any provision of this code to the contrary, any air-ambulance provider  
2 which does not have a contract with an insurer under this article, that provides air transportation  
3 or related emergency or treatment services to an individual who is insured by the insurer, shall  
4 bill the insurer before submitting any bill to the insured. The air-ambulance provider may not  
5 collect from the insured an amount for those services which exceeds the reimbursement amount

6 then in effect for the federal Medicare program, including any applicable Geographic Practice  
7 Cost Index. The insurer shall apply all amounts collected by the air-ambulance provider from the  
8 insured to the insured's deductible. The air-ambulance provider may seek to recover additional  
9 amounts from the insurer, subject to the provisions of subsection (b) of this section.

10 (b) If an air-ambulance provider has entered into a subscription service agreement with  
11 an individual insured by the insurer, and the individual is in good standing with the agreement,  
12 the air-ambulance provider shall accept the fee or cost of the subscription service agreement as  
13 payment in full for any air-ambulance transport and related emergency treatment or services,  
14 which the air-ambulance provider may provide to that employee or dependent of an employee.

**ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.**

**§33-25A-8o. Air-ambulance fees.**

1 (a) Notwithstanding any provision of this code to the contrary, any air-ambulance provider  
2 which does not have a contract with an insurer under this article, that provides air transportation  
3 or related emergency or treatment services to an individual who is insured by the insurer, shall  
4 bill the insurer before submitting any bill to the insured. The air-ambulance provider may not  
5 collect from the insured an amount for those services which exceeds the reimbursement amount  
6 then in effect for the federal Medicare program, including any applicable Geographic Practice  
7 Cost Index. The insurer shall apply all amounts collected by the air-ambulance provider from the  
8 insured to the insured's deductible. The air-ambulance provider may seek to recover additional  
9 amounts from the insurer, subject to the provisions of subsection (b) of this section.

10 (b) If an air-ambulance provider has entered into a subscription service agreement with  
11 an individual insured by the insurer, and the individual is in good standing with the agreement,  
12 the air-ambulance provider shall accept the fee or cost of the subscription service agreement as  
13 payment in full for any air-ambulance transport and related emergency treatment or services,  
14 which the air-ambulance provider may provide to that employee or dependent of an employee.

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NOTE: The purpose of this bill is to protect West Virginia's insured citizens from excessive charges from air-ambulance providers.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.