

Sixty-ninth
Legislative Assembly
of North Dakota

**FIRST ENGROSSMENT
with Senate Amendments**

ENGROSSED HOUSE BILL NO. 1322

Introduced by

Representative Weisz

Senator Roers

1 A BILL for an Act to create and enact a new section to chapter 23-27 and a new section to
2 chapter 26.1-47 of the North Dakota Century Code, relating to ambulance service balanced
3 billing and provider reimbursement; to amend and reenact section 23-27-04.8 of the North
4 Dakota Century Code, relating to emergency medical services communication; to provide for a
5 legislative management study; and to provide an appropriation.

6 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

7 **SECTION 1. AMENDMENT.** Section 23-27-04.8 of the North Dakota Century Code is
8 amended and reenacted as follows:

9 **23-27-04.8. Emergency medical services operation communications.**

10 The department shall use pagers as a communication method and may regulate the
11 ~~communications methods and~~ protocols for emergency medical services operations in a
12 manner consistent with the protocols established by the department of emergency services.

13 **SECTION 2.** A new section to chapter 23-27 of the North Dakota Century Code is created
14 and enacted as follows:

15 **Balance billing prohibited - Enforcement.**

- 16 1. For purposes of this section, "ambulance service provider" means a service entity
17 licensed under chapter 23-27 as a basic life support or advanced life support
18 ambulance service. The term does not include an air ambulance provider.
19 2. An ambulance service provider may not collect or bill more than the covered
20 individual's deductible, coinsurance, copayment, or other cost-sharing amount the
21 covered individual would be responsible for if services were provided by a participating
22 ambulance service provider.

1 **SECTION 3.** A new section to chapter 26.1-47 of the North Dakota Century Code is created
2 and enacted as follows:

3 **Ambulance insurance coverage - Direct payment required - Determination of**
4 **reimbursement rate for out-of-network ambulance service providers.**

5 1. As used in this section:

6 a. "Ambulance service provider" means a service entity licensed under chapter
7 23-27 as a basic life support or advanced life support ambulance service. The
8 term does not include an air ambulance provider.

9 b. "Covered person" means an individual eligible to receive coverage of covered
10 services by a health care insurer under a health benefit plan.

11 c. "Covered services" means medically necessary patient care or transportation
12 provided by ambulance service providers.

13 d. "Health care insurer" means an entity subject to state insurance regulation that
14 provides health benefit coverage in this state. The term includes:

15 (1) An insurance company;

16 (2) A health maintenance organization;

17 (3) A hospital or medical service corporation; and

18 (4) A risk-based provider organization.

19 e. "Medicare reimbursement rate" means the reimbursement rate for a particular
20 health care service provided under the Health Insurance for the Aged and
21 Disabled Act, title XVIII of the federal Social Security Act of 1965 [42 U.S.C.
22 1395 et seq.], as amended.

23 2. All reimbursements made by a health care insurer for the provision of ambulance
24 services to a covered individual must be paid directly to the ambulance service
25 provider or the provider's designee.

26 3. If a covered person receives ambulance services from an out-of-network ambulance
27 service provider, the health care insurer shall pay the ambulance service provider the
28 lesser of:

29 a. Two hundred fifty percent of the Medicare reimbursement rate for the same
30 service in the same geographic area; or

31 b. The ambulance provider's billed charges.

1 4. Any rate the health care insurer pays under this section may not be required to include
2 the coinsurance, copayment, and deductible owed or already paid by the covered
3 person.

4 5. The insurance commissioner may adopt rules to implement and enforce this section.

5 **SECTION 4. LEGISLATIVE MANAGEMENT STUDY - DELINQUENT BILLING**

6 **REIMBURSEMENT.** During the 2025-26 interim, the legislative management shall consider
7 studying the feasibility and desirability of establishing a delinquent billing reimbursement grant
8 system for ambulance service providers. The study must include input from stakeholders,
9 including the insurance department, and a survey of ambulance service providers. The
10 legislative management shall report its findings and recommendations, together with any
11 legislation required to implement the recommendations, to the seventieth legislative assembly.

12 **SECTION 5. APPROPRIATION - LEGISLATIVE COUNCIL - DELINQUENT BILLING**

13 **REIMBURSEMENT - ONE-TIME FUNDING.** There is appropriated out of any moneys in the
14 general fund in the state treasury, not otherwise appropriated, the sum of \$20,000, or so much
15 of the sum as may be necessary, to the legislative council for the purpose of contracting for
16 consulting services for the study provided for in section 3 of this Act, for the biennium beginning
17 July 1, 2025, and ending June 30, 2027. The appropriation provided in this section is a one-time
18 funding item.