

Sixty-ninth
Legislative Assembly
of North Dakota

FIRST ENGROSSMENT

Introduced by

ENGROSSED HOUSE BILL NO. 1322

Representative Weisz

Senator Roers

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

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

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

8 **23-27-04.8. Emergency medical services operation communications.**

9 The department ~~shall use pagers or third-party vendors and cell phones as a communication-~~
10 ~~method and~~ may regulate the primary communications methods and protocols for emergency
11 medical services operations while permitting secondary communications through other devices,
12 such as cell phones. The regulations must be in a manner consistent with the protocols established
13 by the department of emergency services.

14 **SECTION 2.** A new chapter to title 23 of the North Dakota Century Code is created and
15 enacted as follows:

16 **Definitions.**

- 17 1. "Ambulance service provider" means a service entity licensed under chapter 23-27 as
18 a basic life support or advanced life support ambulance service. The term does not
19 include an air ambulance provider.
- 20 2. "Balance bill" means the amount an ambulance service provider may charge and
21 collect from a covered individual for the provision of ambulance services, equaling the
22 difference between the amount paid by the health care insurer and the amount the
23 ambulance service provider billed.

- 1 3. "Covered person" means an individual eligible to receive coverage of covered services
2 by a health care insurer under a health benefit plan.
- 3 4. "Covered services" means medically necessary patient care or transportation provided
4 by ambulance service providers.
- 5 5. "Health care insurer" means an entity subject to state insurance regulation that
6 provides health benefit coverage in this state. The term includes:
- 7 a. An insurance company;
8 b. A health maintenance organization;
9 c. A hospital or medical service corporation; and
10 d. A risk-based provider organization.
- 11 6. "Medicare reimbursement rate" means the reimbursement rate for a particular health
12 care service provided under the Health Insurance for the Aged and Disabled Act, title
13 XVII of the federal Social Security Act of 1965 [42 U.S.C. 1395 et seq.], as amended.

14 **Direct payment required - Determination of reimbursement rate for out-of-network**
15 **ambulance service providers.**

- 16 1. All reimbursements made by a health care insurer for the provision of ambulance
17 services to a covered individual must be paid directly to the ambulance service
18 provider or the provider's designee.
- 19 2. If a covered person receives ambulance services from an out-of-network ambulance
20 service provider, the health care insurer shall pay the ambulance service provider the
21 lesser of:
- 22 a. Two hundred fifty percent of the Medicare reimbursement rate for the same
23 service in the same geographic area; or
24 b. The ambulance provider's billed charges.
- 25 3. Any rate the health care insurer pays under this section may not be required to include
26 the coinsurance, copayment, and deductible owed or already paid by the covered
27 person.

28 **Balance billing prohibited - Enforcement.**

- 29 1. An ambulance service provider may not collect or bill more than the covered
30 individual's deductible, coinsurance, copayment, or other cost-sharing amount the

1 covered individual would be responsible for if services were provided by a participating
2 ambulance service provider.

3 2. The insurance commissioner may adopt rules to implement and enforce this section.

4 **SECTION 3. LEGISLATIVE MANAGEMENT STUDY - DELINQUENT BILLING**

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

11 **SECTION 4. APPROPRIATION - LEGISLATIVE COUNCIL - DELINQUENT BILLING**

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