STATE OF NEW YORK

363--B

2017-2018 Regular Sessions

IN SENATE

(Prefiled)

January 4, 2017

Introduced by Sens. LITTLE, AKSHAR, BROOKS, CARLUCCI, FUNKE, GALLIVAN, HELMING, MURPHY -- read twice and ordered printed, and when printed to be committed to the Committee on Local Government -- reported favorably from said committee and committed to the Committee on Finance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- recommitted to the Committee on Local Government in accordance with Senate Rule 6, sec. 8 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the general municipal law and the town law, in relation to authorizing fees and charges for emergency medical services; and to amend the insurance law, in relation to payments to prehospital emergency medical services providers

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Subdivision 4 of section 209-b of the general municipal law, as amended by chapter 718 of the laws of 1958, is amended to read as follows:

4. Fees and charges [~~prohibited~~] **authorized**. **(a)** emergency and general ambulance service**, including emergency medical service as defined in section three thousand one of the public health law,** authorized pursuant to this section [~~shall~~] **may** be furnished without cost to the person served**; provided, however, that the authorities having control of a fire department or fire company that have authorized such fire department or fire company to provide such service or services may fix a schedule of fees or charges to be paid by persons requesting such service or services. The authorities having control of a fire department or fire company may provide for the collection of fees and charges or may formulate rules and regulations for the collection thereof by the fire department or fire company. When fees and charges are authorized pursu-**

EXPLANATION--Matter in *italics* (underscored) is new; matter in brackets [-] is old law to be omitted.

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ant to this subdivision, the fees and charges collected shall be disbursed in accordance with a written contract entered into between the authority having control of a fire department or fire company and the fire department or fire company itself. The acceptance by any fireman of any personal remuneration or gratuity, directly or indirectly, from a person served shall be a ground for his expulsion or suspension as a member of the fire department or fire company.

(b) Notwithstanding the provisions of paragraph (a) of this subdivision, a basic life support service which establishes a schedule of fees for service shall enter into a contract with a provider or providers of advanced life support services to provide such advanced life support services. Such contract shall at a minimum establish the fees for advanced life support services and the means by which said provider will be reimbursed when the ambulance service bills for emergency medical service.

§ 2. Paragraph (e) of subdivision 1 of section 122-b of the general municipal law, as amended by chapter 303 of the laws of 1980, is amended to read as follows:

(e) [~~No~~] A contract [~~shall~~] may be entered into pursuant to the provisions of this section for the services of an emergency rescue and first aid squad of a fire department or fire company which is subject to the provisions of section two hundred nine-b of [~~the general municipal law~~] this chapter;

§ 3. Subdivision 1 of section 184 of the town law, as amended by chapter 599 of the laws of 1994, is amended to read as follows:

1. Whenever the town board shall have established or extended a fire protection district pursuant to the provisions of this article, the town board shall provide for the furnishing of fire protection within the district and for that purpose may (a) contract with any city, village, fire district or incorporated fire company maintaining adequate and suitable apparatus and appliances for the furnishing of fire protection in such district or (b) may acquire by gift or purchase such apparatus and appliances for use in such district and may contract with any city, village, fire district or incorporated fire company for operation, maintenance, and repair of the same and for the furnishing of fire protection in such district, or both. The contract may also provide for the furnishing of (1) emergency service in case of accidents, calamities or other emergencies in connection with which the services of firefighters would be required and (2) general ambulance service subject, however, to the provisions of section two hundred nine-b of the general municipal law. In the event that the fire department or fire company furnishing fire protection within the district pursuant to contract does not maintain and operate an ambulance then a separate contract may be made for the furnishing within the district of emergency ambulance service or general ambulance service, or both, with any city, village or fire district the fire department of which, or with an incorporated fire company having its headquarters outside the district which, maintains and operates an ambulance subject, however, in the case of general ambulance service, to the provisions of section two hundred nine-b of the general municipal law, or with an ambulance service, certified or registered pursuant to article thirty of the public health law[~~, which is not organized under the provisions of section two hundred nine-b of the general municipal law~~]. Any such contract with any such ambulance service permitted herein shall be subject to the provisions of this section.

§ 4. Section 3224-a of the insurance law is amended by adding a new subsection (k) to read as follows:

(k) Payments to nonparticipating or nonpreferred providers of ambulance services licensed under article thirty of the public health law. (1) Whenever an insurer or an organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law provides that any health care claims submitted under contracts or agreements issued or entered into pursuant to this article or article forty-two, forty-three or forty-seven of this chapter and article forty-four of the public health law are payable to a participating or preferred provider of ambulance services for services rendered, the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall be required to pay such benefits either directly to any similarly licensed nonparticipating or nonpreferred provider at the usual and customary charge, which shall not be excessive or unreasonable, when the provider has rendered such services, has a written assignment of benefits, and has caused written notice of such assignment to be given to the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law or jointly to such nonparticipating or nonpreferred provider and to the insured, subscriber, or other covered person; provided, however, that in either case the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall be required to send such benefit payments directly to the provider who has the written assignment. When payment is made directly to a provider of ambulance services as authorized by this section, the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall give written notice of such payment to the insured, subscriber, or other covered person.

(2) An insurer shall provide reimbursement for those services prescribed by this section at rates negotiated between the insurer and the provider of such services. In the absence of agreed upon rates, an insurer shall pay for such services at the usual and customary charge, which shall not be excessive or unreasonable.

(3) Nothing contained in this section shall be deemed to prohibit the payment of different levels of benefits or from having differences in coinsurance percentages applicable to benefit levels for services provided by participating or preferred providers and nonparticipating or nonpreferred providers.

The provisions of this section shall not apply to policies that do not include coverage for ambulance services.

§ 5. Subparagraphs (C) and (D) of paragraph 24 of subsection (i) of section 3216 of the insurance law, as added by chapter 506 of the laws of 2001, are amended to read as follows:

(C) An insurer shall provide reimbursement for those services prescribed by this section at rates negotiated between the insurer and the provider of such services. In the absence of agreed upon rates, an insurer shall pay for such services at the usual and customary charge, which shall not be excessive or unreasonable. The insurer shall send such payments directly to the provider of such ambulance services, if the ambulance service includes an executed assignment of benefits form with the claim.

(D) The provisions of this paragraph shall have no application to transfers of patients between hospitals or health care facilities by an ambulance service as described in subparagraph (A) of this paragraph **unless such services are covered under the policy**.

§ 6. Subparagraphs (C) and (D) of paragraph 15 of subsection (l) of section 3221 of the insurance law, as added by chapter 506 of the laws of 2001, are amended to read as follows:

(C) An insurer shall provide reimbursement for those services prescribed by this section at rates negotiated between the insurer and the provider of such services. In the absence of agreed upon rates, an insurer shall pay for such services at the usual and customary charge, which shall not be excessive or unreasonable. **The insurer shall send such payments directly to the provider of such ambulance services, if the ambulance service includes an executed assignment of benefits form with the claim.**

(D) The provisions of this paragraph shall have no application to transfers of patients between hospitals or health care facilities by an ambulance service as described in subparagraph (A) of this paragraph **unless such services are covered under the policy**.

§ 7. Paragraphs 3 and 4 of subsection (aa) of section 4303 of the insurance law, as added by chapter 506 of the laws of 2001, are amended to read as follows:

(3) An insurer shall provide reimbursement for those services prescribed by this section at rates negotiated between the insurer and the provider of such services. In the absence of agreed upon rates, an insurer shall pay for such services at the usual and customary charge, which shall not be excessive or unreasonable. **The insurer shall send such payments directly to the provider of such ambulance services, if the ambulance service includes an executed assignment of benefits form with the claim.**

(4) The provisions of this subsection shall have no application to transfers of patients between hospitals or health care facilities by an ambulance service as described in paragraph one of this subsection **unless such services are covered under the policy**.

§ 8. This act shall take effect on the ninetieth day after it shall have become a law, except that sections four, five, six and seven of this act shall take effect January 1, 2020, and shall apply to health care claims submitted on or after such date.