
July 21, 2023

Office of Insurance Commissioner (OIC)
5000 Capitol Blvd SE
Tumwater, WA 98501

TO: the Office of the Insurance Commissioner Policy Group
FROM: Mike Battis, President, Washington Ambulance Association
RE: Ground Ambulance Balance Billing Study Advisory Group

The Washington Ambulance Association (WAA) appreciates the great work by the Office of the Insurance Commissioner (OIC) and the other members of the Ground Ambulance Balance Billing Study Advisory Group. This is an incredibly important issue for patients and providers in Washington State.

The WAA has great concerns regarding the potential patient impacts of Balance Billing on Ground Ambulance Transports provided by all EMS agencies. Our highest priority is making sure ambulance transport services remain readily accessible to residents in Washington. As discussed, there are three different patient categories when it comes to ground ambulance transport services: commercial payors, Medicaid, and Medicare. Medicaid and Medicare reimbursement rates are fixed and below the actual cost of service causing greater cost burden to shift to commercial payors in order to maintain service availability. As the advisory group begins drafting its recommendations and submitting them to the legislature, we share the goal of balancing service accessibility for patients with affordability and consumer transparency.

A robust and accessible ground ambulance service is incredibly important for the entire healthcare system. Excluding ground ambulance from balanced billing or finding ways to ensure access is maintained through adequate reimbursement rates should be the priority of the legislature. If ground ambulance is simply included in balanced billing without finding ways to address reimbursement for the cost of services, patient access to ambulance services will be critically jeopardized. If ambulance services (both public and private) are not allowed to bill services properly and maintain financial solvency, many agencies will simply cease to exist and patient access to care will be severely limited.

If the intent of the legislature is to bring ground ambulance under the Balance Billing Prohibition Act (BBPA) we ask that they consider the following options:

- If the provider operates under Regulated Rates sanctioned/approved by city, county, state, or tribal governments then the qualifying payment amount (QPA) will be set at least equal to the government approved rate.
- If there is no government rate established than payment amount should be set at least equal to 350% of Medicare, including the rural and super-rural bonus payments. This is consistent with what has been proposed and adopted in other states.
- We request agencies be allowed to bill patients for non-covered services, e.g., non-medically necessary transports.

- We need a mechanism to work through resolving issues regarding improper payments by insurance plans/commercial carriers, as in the recent Regence matter that only gained traction through consumer complaints. The current independent dispute resolution (IDR) process is not working to resolve these issues, and agencies need a course of action to mitigate improper payment amounts. Resolutions of improper payments by commercial insurance below the qualifying payment amount should involve patient's awareness and assistance. The dispute resolution process needs to be independent and affordable so as not to discourage utilization.

We appreciate your consideration and thank you for including the WAA in the advisory committee. We hope that the legislature appreciates the complexities of EMS and does not enact legislation that creates access to care issues.

If you have any questions or concerns, please don't hesitate to contact us.

Respectfully,



Mike Battis

President

Washington Ambulance Association

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