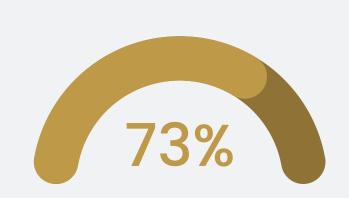


At a Glance

Background

In 2019, there were approximately 2.8 million EGMT transports in CA, operated by over 700 public and private ambulance service providers.



A 2018 analysis of large employer claims found that 73% of EGMT transports in CA included an out-of-network charge.

Policy Context



A "surprise medical bill" is a bill from an out-of-network provider or facility that was not expected by the patient or that came from an out-of-network provider not chosen by the patient.



Current CA state law protects against surprise billing by individual doctors that are not chosen by consumers but are out-of-network. The law does not apply to out-of-network EGMT services.

Bill Summary



AB 2709 requires health care service plans or health insurance policies to reduce balance billing for out-of-network emergency ground medical transport (EGMT) providers in California. An enrollee or member who receives coverage for services from a noncontracting ground ambulance provider would not be required to pay more than the same costsharing amount required for services from a contracting ground ambulance provider. The bill would also prohibit non-contracting ground ambulance providers from billing a higher amount. In addition, AB 2709 would limit plan exposure to the greater of the Average Contracted Rate (ACR) or 125% of Medicare.

Benefit Coverage, Utilization, & Cost Impacts

Benefit coverage would not increase due to AB 2709.

However, prices paid by health plans, insurers, and consumers for out-of-network EGMT services would change.

Health plans and insurers will pay an additional \$910 per unit, while enrollees would see a \$970 decrease due to a \$230 reduction in cost sharing and a \$740 reduction in balance billed charges.



CHBRP projects no
estimated impact to
utilization of EGMT services
due to AB 2709.



AB 2709 would increase total net annual expenditures by \$4,711,000 or 0.003% due to a 0.037% change for total health insurance premiums paid by employers and enrollees.

Insurance Subject to the Mandate



Enrollees in DMHC-regulated plans with EMS coverage



Enrollees in CDI-regulated policies with EMS coverage



Beneficiaries of Medi-Cal Managed Care plans