

FIRST REGULAR SESSION

SENATE BILL NO. 485

101ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR GANNON.

2254S.01I

ADRIANE D. CROUSE, Secretary

AN ACT

To amend chapter 375, RSMo, by adding thereto three new sections relating to air ambulance services, with a delayed effective date.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 375, RSMo, is amended by adding thereto
2 three new sections, to be known as sections 375.1400, 375.1405,
3 and 375.1410, to read as follows:

375.1400. 1. Any air ambulance service or other
2 entity that directly or indirectly, whether through an
3 affiliated entity, agreement with a third-party entity, or
4 otherwise, solicits air ambulance membership subscriptions,
5 accepts air ambulance membership applications, or charges
6 air ambulance membership fees shall be considered an entity
7 engaged in the business of insurance and an insurer, as
8 defined in section 375.932.

9 2. An air ambulance membership shall be considered
10 insurance and an insurance product.

11 3. An air ambulance membership may be considered
12 secondary insurance coverage or a supplement to any
13 insurance coverage.

14 4. The department of commerce and insurance shall
15 regulate air ambulance memberships according to the
16 provisions of this section.

375.1405. 1. An air carrier operating air ambulance
2 services shall, within one year of the effective date of

3 this section, implement a patient advocacy program, which
4 shall include, at a minimum, the following components:

5 (1) A dedicated patient hotline number and dedicated
6 patient resource email address to process patient billing
7 and claims and to address patient questions, complaints, and
8 concerns;

9 (2) A dedicated patient advocacy page on the website
10 of the provider of the air ambulance services clearly marked
11 with the words "patient portal" or "patient advocacy" that
12 is easily located by navigating the website and that
13 contains resources for patients that are clearly written and
14 comprehensive including, but not limited to:

15 (a) A layperson's explanation of what to expect during
16 the claims process;

17 (b) Frequently asked questions and answers;

18 (c) Frequently used forms;

19 (d) Information about the financial assistance or
20 charity care program offered by the provider of the air
21 ambulance services;

22 (e) Contact information for the U.S. Department of
23 Transportation's Office of Aviation Consumer Protection and
24 state and federal health and insurance regulatory agencies
25 and departments; and

26 (f) Other health consumer informational resources;

27 (3) Dedicated individuals assigned to review patient
28 complaints and disputes about air ambulance billing and to
29 respond to patients, governmental agencies, and any other
30 concerned parties no later than three months from the date a
31 complaint is received;

32 (4) Inclusion of the patient hotline number and email
33 address required under subdivision (1) of this subsection
34 and the address of the patient advocacy web page required

under subdivision (2) of this subsection on all patient communication materials including, but not limited to, websites, brochures, letters, invoices, and billing statements that are sent to or made available to patients;

(5) Mandatory yearly patient advocacy training for all personnel of the provider of the air ambulance services who have direct interaction with patients or their family members through written, verbal, or electronic communication; and

(6) A financial assistance or charity care program to assist patients suffering financial hardship with resolving any unpaid balance owed to the provider of the air ambulance services.

2. The provisions of this section shall not be enforced in a manner that conflicts with federal law or any federal preemption of state regulation of air carriers.

375.1410. An entity selling air ambulance membership products shall make the following general disclosures in writing in at least twelve-point bold-type font on any advertisement, marketing material, brochure, or contract terms and conditions made available to prospective members or the public:

(1) If eligible and covered by Medicaid or Medicaid managed care, the prospective member is already covered with no out-of-pocket cost liability for air ambulance services; and

(2) If eligible and covered under Medicare or a Medicare supplemental plan, the prospective member might already be covered for air ambulance services and should consult a representative of the Medicare program or a representative of his or her Medicare Advantage or Medicare supplemental plan to determine the level of existing

17 coverage the prospective member has for air ambulance
18 services and out-of-pocket costs and whether the plan
19 provider recommends additional supplemental insurance
20 coverage.

Section B. The enactment of sections 375.1400,
2 375.1405, and 375.1410 of this act shall become effective on
3 January 1, 2022.

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