

SENATE BILL NO. 292

INTRODUCED BY T. FACEY, R. LYNCH, V. RICCI, G. VANCE

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A BILL FOR AN ACT ENTITLED: "AN ACT REVISING DEBT REPORTING LAWS RELATED TO AMBULANCE BILLS; PROHIBITING REPORTS TO CONSUMER REPORTING AGENCIES OF UNTIMELY PAYMENTS ON BALANCE BILLS UNDER CERTAIN CIRCUMSTANCES; PROVIDING DEFINITIONS; PROVIDING A NOTIFICATION REQUIREMENT; AMENDING SECTION 50-6-306, MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE AND A RETROACTIVE APPLICABILITY DATE."

WHEREAS, individuals in a medical crisis that requires ambulance services may be faced with unexpectedly high bills with the potential to propel them into bankruptcy even after their insurance, if they have any, has paid on the ambulance bills; and

WHEREAS, individuals are responsible for paying ambulance bills with vendors they have selected themselves but often individuals in highly critical medical emergencies are unable to make the decisions on who is providing their ambulance service yet they still are expected to pay a bill over which they had no control.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Balance billing information -- notification to ambulance companies

-- definitions. (1) (a) Subject to one of the conditions under subsection (1)(b), an ambulance service licensed in this state may not submit to a consumer reporting agency information intended to affect a patient's credit report because the patient has not made full payment of a bill for ambulance services.

(b) The prohibition under subsection (1)(a) is effective if:

(i) the patient's insurer has paid for the ambulance services based on the in-network or out-of-network charges outlined in the patient's insurance plan; or

(ii) an uninsured patient has paid toward the bill and filed with the attorney general's office a complaint regarding the bill as being an unfair trade practice because the bill is not based on usual and customary charges in the state.

(2) An ambulance service that transfers a bill to a collection agency shall state that the collection agency may not report as delinquent to a consumer reporting agency a bill covered by subsection (1).



1 (3) For the purposes of this section, the following definitions apply:

2 (a) "Ambulance service" means a person licensed under 50-6-306 who provides ground or air ambulance
3 transport.

4 (b) "Consumer reporting agency" has the meaning provided in 30-14-1726.

5 (c) "Credit report" has the meaning provided in 30-14-1726.

6 (d) "Insurance plan" has the meaning of "health insurance coverage" under 33-22-140.

7 (e) "Insurer" has the meaning of a health insurance issuer as provided in 33-22-140 and includes issuers
8 of health insurance under Title 2 and Title 20.

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10 **Section 2.** Section 50-6-306, MCA, is amended to read:

11 **"50-6-306. License required.** (1) A person may not conduct or operate an emergency medical service
12 without first obtaining a license from the department. A separate license is required for each type and level of
13 service.

14 (2) Applications for a license must be made in writing to the department on forms specified by the
15 department.

16 (3) Each license must be issued for a specific term not to exceed 2 years. Renewal may be obtained by
17 paying the required license fee and demonstrating compliance with department rules.

18 (4) The license is not transferable.

19 (5) The department shall notify an ambulance service at the time of licensing or licensing renewal of the
20 reporting limitation of [section 1]."

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22 NEW SECTION. **Section 3. Codification instruction.** [Section 1] is intended to be codified as an
23 integral part of Title 30, chapter 14, part 1, and the provisions of Title 30, chapter 14, part 1, apply to [section 1].

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25 NEW SECTION. **Section 4. Effective date.** [This act] is effective on passage and approval.

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27 NEW SECTION. **Section 5. Retroactive applicability.** [This act] applies retroactively, within the
28 meaning of 1-2-109, to reports as of [the effective date of this act] of ambulance bills incurred for services
29 provided in the state prior to [the effective date of this act] and paid in part to the extent of an insurance policy
30 or for which a record exists of a complaint made to the insurance commissioner's office prior to [the effective date

1 of this act].

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