

**SENATE
STATE OF MINNESOTA
NINETIETH SESSION**

S.F. No. 428

(SENATE AUTHORS: RELPH, Schoen, Hayden and Abeler)

DATE
01/30/2017

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OFFICIAL STATUS
Introduction and first reading
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to human services; expanding the scope of a medical assistance rate increase
1.3 for ambulance services; amending Minnesota Statutes 2016, section 256B.0625,
1.4 subdivision 17a.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2016, section 256B.0625, subdivision 17a, is amended to
1.7 read:

1.8 Subd. 17a. **Payment for ambulance services.** (a) Medical assistance covers ambulance
1.9 services. Providers shall bill ambulance services according to Medicare criteria.
1.10 Nonemergency ambulance services shall not be paid as emergencies. Effective for services
1.11 rendered on or after July 1, 2001, medical assistance payments for ambulance services shall
1.12 be paid at the Medicare reimbursement rate or at the medical assistance payment rate in
1.13 effect on July 1, 2000, whichever is greater.

1.14 (b) Effective for services provided on or after July 1, 2016, medical assistance payment
1.15 rates for ambulance services identified in this paragraph are increased by five percent.
1.16 Capitation payments made to managed care plans and county-based purchasing plans for
1.17 ambulance services provided on or after January 1, 2017, shall be increased to reflect this
1.18 rate increase. The increased rate described in this paragraph applies to ambulance service
1.19 providers whose base of operations as defined in section 144E.10 is located:

1.20 (1) outside the metropolitan counties listed in section 473.121, subdivision 4, and outside
1.21 the cities of Duluth, Mankato, Moorhead, St. Cloud, and Rochester; or

1.22 (2) within a municipality with a population of less than 1,000.

2.1 (c) Effective for services provided on or after July 1, 2017, medical assistance payment
2.2 rates for ambulance services that do not qualify for a payment rate increase under paragraph
2.3 (b) are increased by five percent. Capitation payments made to managed care plans and
2.4 county-based purchasing plans for ambulance services provided on or after January 1, 2018,
2.5 shall be increased to reflect this rate increase.