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1	EMERGENCY MEDICAL SERVICES AMENDMENTS
2	2015 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Curtis S. Bramble
5	House Sponsor: Brad R. Wilson
6 7	LONG TITLE
8	General Description:
9	This bill enacts provisions related to an assessment on ambulance service providers.
10	Highlighted Provisions:
11	This bill:
12	 imposes a uniform assessment on ambulance service providers;
13	 directs the Division of Health Care Financing to collect the assessment;
13	 gives the division the authority to impose a penalty on an ambulance service
15	provider that declines to pay the assessment; and
16	 provider that declines to pay the assessment, and provides for the administration of the funds collected through the assessment.
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17	Money Appropriated in this Bill: None
18	
19	Other Special Clauses:
20	This bill provides a special effective date.
21	Utah Code Sections Affected:
22	ENACTS:
23	26-37a-101, Utah Code Annotated 1953
24	26-37a-102 , Utah Code Annotated 1953
25	26-37a-103 , Utah Code Annotated 1953
26	26-37a-104 , Utah Code Annotated 1953
27	26-37a-105 , Utah Code Annotated 1953
28	26-37a-106 , Utah Code Annotated 1953
29	26-37a-107 , Utah Code Annotated 1953

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26-37a-108 , Utah Code Annotated 1953
Be it enacted by the Legislature of the state of Utah:
Section 1. Section 26-37a-101 is enacted to read:
CHAPTER 37a. AMBULANCE SERVICE PROVIDER ASSESSMENT
Part 1. General Provisions
<u>26-37a-101.</u> Title.
This chapter is known as "Ambulance Service Provider Assessment."
Section 2. Section 26-37a-102 is enacted to read:
26-37a-102. Definitions.
As used in this chapter:
(1) "Ambulance provider" means:
(a) an ambulance provider as defined in Section 26-8a-102; or
(b) a non-911 service provider as defined in Section 26-8a-102.
(2) "Assessment" means the Medicaid ambulance provider assessment established by
this chapter.
(3) "Division" means the Division of Health Care Financing within the department.
(4) "Non-federal portion" means the non-federal share the division needs to seed
amounts that will support fee-for-service ambulance provider rates, as described in Section
<u>26-27a-105.</u>
(5) "Total transports" means the number of total ambulance transports applicable to a
given fiscal year, as determined under Subsection 26-37a-104(5).
Section 3. Section 26-37a-103 is enacted to read:
26-37a-103. Assessment, collection, and payment of ambulance service provider
assessment.
(1) An ambulance service provider shall pay an assessment to the division:
(a) in the amount designated in Section 26-37a-104;
(b) in accordance with this chapter;

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58	(c) quarterly, on a day determined by the division by rule made under Subsection
59	(2)(b); and
60	(d) no more than 15 business days after the day on which the division issues the
61	ambulance service provider notice of the assessment.
62	(2) The division shall:
63	(a) collect the assessment described in Subsection (1);
64	(b) determine, by rule made in accordance with Title 63G, Chapter 3, Utah
65	Administrative Rulemaking Act, standards and procedures for implementing and enforcing the
66	provisions of this chapter; and
67	(c) transfer assessment proceeds to the state treasurer for deposit into the Ambulance
68	Service Provider Assessment Expendable Revenue Fund created in Section 26-37a-107.
69	Section 4. Section 26-37a-104 is enacted to read:
70	26-37a-104. Calculation of assessment.
71	(1) The division shall calculate a uniform assessment per transport as described in this
72	section.
73	(2) The assessment due from a given ambulance service provider equals the
74	non-federal portion divided by total transports, multiplied by the number of transports for the
75	ambulance service provider.
76	(3) The division shall apply any quarterly changes to the assessment rate, calculated as
77	described in Subsection (2), uniformly to all assessed ambulance service providers.
78	(4) The assessment may not generate more than the total of:
79	(a) an annual amount of \$20,000 to offset Medicaid administration expenses; and
80	(b) the non-federal portion.
81	(5) (a) For each state fiscal year, the division shall calculate total transports using data
82	from the Emergency Medical System as follows:
83	(i) for state fiscal year 2016, the division shall use ambulance service provider
84	transports during the 2014 calendar year; and
85	(ii) for a fiscal year after 2016, the division shall use ambulance service provider

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86	transports during the calendar year ending 18 months before the end of the fiscal year.
87	(b) If an ambulance service provider fails to submit transport information to the
88	Emergency Medical System, the division may audit the ambulance service provider to
89	determine the ambulance service provider's transports for a given fiscal year.
90	Section 5. Section 26-37a-105 is enacted to read:
91	26-37a-105. Medicaid ambulance service provider adjustment under
92	fee-for-service rates.
93	The division shall, if the assessment imposed by this chapter is approved by the Centers
94	for Medicare and Medicaid Services, for fee-for-service rates effective on or after July 1, 2015,
95	reimburse an ambulance service provider in an amount up to the Emergency Medical Services
96	Ambulance Rates adopted annually by the department.
97	Section 6. Section 26-37a-106 is enacted to read:
98	26-37a-106. Penalties.
99	The division shall require an ambulance service provider that fails to pay an assessment
100	due under this chapter to pay the division, in addition to the assessment, a penalty determined
101	by the division by rule made in accordance with Title 63G, Chapter 3, Utah Administrative
102	Rulemaking Act.
103	Section 7. Section 26-37a-107 is enacted to read:
104	<u>26-37a-107.</u> Ambulance Service Provider Assessment Expendable Revenue Fund.
105	(1) There is created an expendable special revenue fund known as the "Ambulance
106	Service Provider Assessment Expendable Revenue Fund."
107	(2) The fund shall consist of:
108	(a) the assessments collected by the division under this chapter;
109	(b) the penalties collected by the division under this chapter;
110	(c) donations to the fund; and
111	(d) appropriations by the Legislature.
112	(3) Money in the fund shall be used:
113	(a) to support fee-for-service rates; and

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114	(b) to reimburse money to an ambulance service provider that is collected by the
115	division from the ambulance service provider through a mistake made under this chapter.
116	Section 8. Section 26-37a-108 is enacted to read:
117	26-37a-108. Repeal of assessment.
118	(1) This chapter is repealed when, as certified by the executive director of the
119	department, any of the following occurs:
120	(a) an action by Congress that disqualifies the assessment imposed by this chapter from
121	state Medicaid funds available to be used to determine the federal financial participation takes
122	legal effect; or
123	(b) an action, decision, enactment, or other determination by the Legislature or by any
124	court, officer, department, or agency of the state or federal government takes effect that:
125	(i) disqualifies the assessment from counting toward state Medicaid funds available to
126	be used to determine federal financial participation for Medicaid matching funds; or
127	(ii) creates for any reason a failure of the state to use the assessments for the Medicaid
128	program as described in this chapter.
129	(2) If this chapter is repealed under Subsection (1):
130	(a) money in the Ambulance Service Provider Assessment Expendable Revenue Fund
131	that was derived from assessments imposed by this chapter, deposited before the determination
132	made under Subsection (1), shall be disbursed under Section 26-37a-107 to the extent federal
133	matching is not reduced due to the impermissibility of the assessments; and
134	(b) any funds remaining in the special revenue fund shall be refunded to each
135	ambulance service provider in proportion to the amount paid by the ambulance service
136	provider.
137	Section 9. Effective date.
138	This bill takes effect on July 1, 2015.