

Amendment to SB 407-FN

1 Amend the title of the bill by replacing it with the following:

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3 AN ACT establishing a ground ambulance cost reporting program and a study by an
4 independent actuarial and accounting expert of the cost of providing ground
5 ambulance services in the state.
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7 Amend the bill by replacing all after the enacting clause with the following:

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9 1 Managed Care Law; Establishing a Ground Ambulance Cost Reporting Program and
10 Providing for a Study by an Independent Actuarial and Accounting Expert of Ground Ambulance
11 Costs and Ground Ambulance Reimbursement Rates.

12 I. Beginning on the effective date of this section, the commissioner shall oversee the process
13 provided for in this section of contracting with an independent actuarial and accounting expert to
14 conduct a study of the costs incurred and revenue collected by ground ambulance providers related to
15 the provision of ground ambulance services in the state, including the cost of sustaining a reasonable
16 operating margin in support of the expectation that ground ambulance providers in the state
17 maintain readiness to meet demand for services. The commissioner of the department of safety shall
18 collaborate with the commissioner in collecting cost and revenue reports, as designed by the
19 actuarial and accounting contractor, from all ground ambulance providers in the state. The
20 actuarial and accounting contractor may make use of the Medicare ground ambulance cost reporting
21 template if deemed appropriate by the contractor for the purposes set out in this section. The
22 commissioner of the department of safety shall have authority to enforce this reporting requirement
23 upon ground ambulance providers under the general supervision and specific enforcement authority
24 conferred by RSA 153-A and shall work with the commissioner to set a deadline for ground
25 ambulance providers to submit their cost reports that is sufficient to facilitate the completion of the
26 study and report provided for in this section in a timely manner.

27 II. Based on the information provided through the cost and revenue reports, the actuarial
28 and accounting contractor shall be directed to summarize the cost and revenue information collected
29 and to derive an illustrative statewide cost-based default rate schedule appropriate for fully-insured
30 commercial payers for use in reimbursing nonparticipating ground ambulance providers. The
31 schedule may be based on a percentage of Medicare rates, or it may be an independently developed
32 schedule. The schedule may vary based on geographic region. Reimbursement under the
33 illustrative schedule shall be designed to cover the costs attributable to the provision of covered

Amendment to SB 407-FN
- Page 2 -

1 services assuming that all public and commercial ground ambulance payers in the state are paying
2 at the same rate and assuming that the rate of subsidization of ground ambulance services in the
3 state through public funds remains constant. Costs shall include the cost of pre-hospital care and
4 the cost of sustaining a reasonable operating margin as necessary to fulfill the expectation that
5 ground ambulance providers in the state maintain readiness to meet future demand for services.
6 Cost estimates shall be based on the assumption that services shall be provided in a reasonably cost-
7 effective manner. The illustrative rate schedule shall be accompanied by an actuarial estimate of
8 the impact on premiums for fully-insured coverage in the state. For this purpose, the commissioner
9 shall provide the contractor with access to all payer claims data. The contractor shall produce a final
10 report by December 31, 2024, detailing the information required to be produced under this section
11 and such other supplemental information as shall be directed by the commissioner. The
12 commissioner shall assist the contractor as necessary to complete the study and report in a timely
13 manner. The report shall be submitted to the president of the senate, the speaker of the house of
14 representatives, the house and senate policy committees with jurisdiction over commerce and health
15 and human services issues, the governor, and the state library.

16 III. The cost of the ground ambulance cost and actuarial study and illustrative rate schedule
17 development shall be financed by the New Hampshire health plan established under RSA 404-G.
18 The New Hampshire health plan shall have authority to carry out a one-time special assessment of
19 assessable entities as defined in RSA 404-G:2 to generate a funding level that is estimated to be
20 sufficient to retain a qualified actuarial vendor to carry out the tasks provided for in this section.
21 With the approval of the commissioner, the New Hampshire health plan shall select a qualified
22 actuarial and accounting vendor through a competitive bidding process to work with the
23 commissioner and the commissioner of the department of safety to carry out the relevant provisions
24 of this section. The performance of this special assessment and the selection and compensation of a
25 qualified actuarial vendor shall be deemed to be a “program” of the New Hampshire health plan as
26 defined in RSA 404-G:2, IX. The commissioner shall have the authority to waive the formal plan of
27 operation requirement under RSA 404-G:5 as necessary facilitate the timely process of retaining a
28 qualified contractor under this section and meeting the December 31, 2024 deadline for obtaining an
29 expert study and report.

30 2 Effective Date. This act shall take effect upon its passage.

2024-1641h

AMENDED ANALYSIS

This bill provides for a statewide ground ambulance cost reporting program and a study by an independent actuarial and accounting expert of the cost of providing ground ambulance services in the state. The study shall include an illustrative ground ambulance rate schedule which is such that, if fully insured health carriers were to use this schedule in reimbursing nonparticipating ground ambulance providers, it would be sufficient to cover the reasonable cost of providing efficiently delivered care and a reasonable operating margin, assuming all payers in the state are paying at the same rate.