



June 21, 2024

Sydney Rogalla
Policy & Legislative Affairs Division
Washington Office of the Insurance Commissioner
P.O. Box 40260
Olympia, WA 98504-0260
Submitted via email to: rulescoordinator@oic.wa.gov

Re: Comments relating to implementation of SSB 5986 and updates to the Balance Billing Protection Act

Dear Ms. Rogalla,

The Association of Washington Healthcare Plans (AWHP) appreciates the opportunity to review and provide feedback on the CR-101 relating to implementation of SSB 5986 and updates to the Balance Billing Protection Act. AWHP greatly appreciates the continued partnership with the Office of Insurance Commissioner on this topic, especially the important implementation conversations taking place in the Ground Ambulance Advisory Group with ground ambulance services organizations (GASOs) and local government entities (LGEs).

While carriers prepare to implement the expansion of the Balance Billing Protection Act, there are key regulatory concerns we think can be addressed either in the rulemaking process or as ongoing topics in the implementation work group. We encourage OIC to take a plain-language approach to implementing the prescriptive SSB 5986 legislative language, and the situations the legislature intended to address.

In terms of rulemaking, AWHP has a few key considerations for OIC.

Clarity is needed around expectations to provide reimbursement for ground ambulance services provided outside of a GASO's typical area of contracted services, under memorandums of understanding (MOUs) or similar agreements solely filed between GASOs. Similarly, AWHP asks that OIC set clear expectations around which facilities should be included in covered health care facilities and ensure consistency with SSB 5986. While guidance can help prevent some incorrect reimbursements, OIC should also give consideration as to how GASOs and carriers should resolve reimbursement disputes.

AWHP understands the OIC will be building out a publicly accessible database cataloging the contracted rates for GASOs. AWHP suggests using this rulemaking to set a clear expectation for the timeline OIC expects GASOs to notify of new contracted rates. Similarly, OIC should clarify what expectations exist for carriers incorporating these contracted rates. Carriers are not privy to ongoing negotiations of GASOs and LGEs and do not have control over the effective date of newly agreed upon rates. Without advance notice of changes in negotiated rates, carriers will be forced to continuously track rate changes, react to new rates that are already in effect, and be forced to reprocess claims to account for the new reimbursement rates agreed upon between an LGE and a GASO.

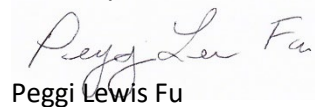
To avoid imposing significant burdens and unnecessary administrative costs on carriers, AWHP strongly encourages the adoption of a structured, consistent timeline that provides carriers with advance notice of rate changes to afford carriers the opportunity to update claim systems prior to the effective date of rate changes. Providing consistent expectations for reimbursement will greatly reduce disputes between carriers and GASOs regarding which rate is applicable based on when the ground ambulance services were rendered. While notification of new rates and a publicly accessible database provide transparency into the cost of ground ambulance services, carriers need advance notification of new rates and an opportunity to effectuate new rates in their systems to make the legislative changes a resounding success. A variable and unstructured schedule increases the risk for reimbursement disputes and reprocessing claims for members. Standardizing the time frame allows carriers to build predictable processes, which provides less opportunity for reimbursement rate disputes. The absence of a dispute resolution system for these types of disputes further reinforces the need for regularity in the collection of GASO rates.

During the Ground Ambulance Advisory Group meetings, we recommend that the OIC include the following conversation topics:

- Coordination with carriers for data calls to inform the legislative reporting obligations, and where possible to identify existing data sources (e.g., All Payer Claims Database) to reference in legislative reports.
- Timeframes for collecting contracted rates that account for carriers needing to update payment policies and make internal reimbursement changes.
- Expectations as to when the publicly accessible database with contracted rates will go-live for carriers' reference.

We appreciate your consideration of our comments and our continued collaboration as the OIC works on this key area of health care. Please do not hesitate to contact me with any questions or to discuss further.

Sincerely,



Peggi Lewis Fu

Executive Director

Association of Washington Healthcare Plans