



Balance Billing Protection Act & Ground Ambulance Services

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What is 'surprise' or 'balance' billing?

- When you see a doctor or other health care provider, you may owe certain out-of-pocket costs, such as a copayment, coinsurance, and/or a deductible. These costs are known as cost-shares or cost-sharing.
- Providers, facilities, ground and air ambulance providers may not have a signed contract with your plan. Out-of-network or non-participating providers often bill you the difference between what your plan agreed to pay, and the full amount charged for the service. This is called "balance billing."
- "Surprise billing" is an unexpected balance bill. This can happen when you can't control who is involved in your care.

When does 'surprise billing' happen?

Most often, it happens with emergency services, air and ground ambulance transportation, or when someone has a procedure at an in-network hospital or outpatient surgical facility, but they are treated by an out-of-network provider.



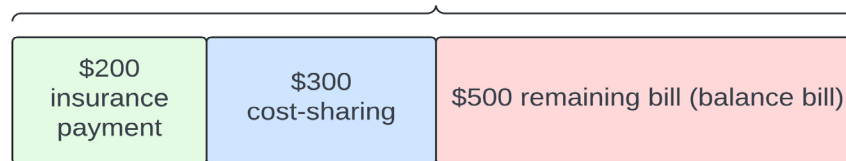
When does 'surprise billing' happen?

Example: An out-of-network ground ambulance provides emergency transport from the scene of car accident to the nearest hospital.



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Total cost of service: \$1,000



Why banning balance billing matters?

Fair Health Prices Washington conducted a survey in June 2024 of 1,000 Washington residents:

- 31% of residents surveyed live in a household with medical debt.



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Why banning balance billing matters?

- 63% of residents surveyed could not or would struggle to pay an unexpected \$500 medical bill.
- In the [2023 report to the legislature on ground ambulance balance billing](#), the OIC found that the average balance bill consumers receive for an emergency ground ambulance transport is \$500. This is in addition to the normal cost-sharing consumers experience when receiving medical care.



State BBPA & Federal No Surprises Act

- Washington state banned balance billing starting in 2020, with passage of the Balance Billing Protection Act (BBPA).
 - The BBPA has been amended twice since then to expand balance billing protections.
- Congress also banned balance billing starting in 2022, with passage of the No Surprises Act.

State BBPA & Federal No Surprises Act

WA Balance Billing Protection Act (2019) ~Effective January 1, 2020

- Comprehensive law- considered a “specified state law” under the federal No Surprises Act (NSA)

E2SHB 1688 ([Chapter 48.49 RCW](#)) ~Effective March 31, 2022

- Aligns the BBPA and NSA, but retains key BBPA consumer protections (e.g., consumers cannot be asked to waive their balance billing protections)
- Adds coverage of and prohibits balance billing for behavioral health crisis services

[SSB 5986\(Chapter 48.49 RCW\)](#) ~Effective January 1, 2025

- The NSA does not prohibit balance billing for ground ambulance services.
- SSB 5986 adds balance billing protections for covered emergency and non-emergency ground ambulance transports.
- All BBPA consumer protections apply.
- Establishes rate formula for nonparticipating ground ambulance transports.

Key provisions of SSB 5986

- Applies to health plans issued or renewed on or after January 1, 2025.
- Protects consumers from receiving balance bills for **covered** emergency and non-emergency ground ambulance transports occurring in Washington State.
 - **Does not protect consumers from balance billing for ground ambulance transports occurring in other states.**
- Requires coverage of transport to behavioral health crisis centers, as an alternative to a hospital emergency department.
- Applies to **fully insured** commercial health plans and Washington's public and school employee programs (**PEBB and SEBB**).
- **Self-funded group health plans, including union plans, can voluntarily opt-in.** To date, approximately 450 self-funded group health plans, covering over 500,000 people, have opted in to participate in the BBPA.

Balance Billing – Consumer Protections

What other consumer protections go along with the balance billing prohibition?

- Cost-sharing is the same as if services had been received from an in-network ground ambulance service organization.
- Cost-sharing must be applied to your deductible and out-of-pocket limit.
- Overpayments must be refunded to you, with interest.

Balance Billing – Consumer Protections

Responsibilities of providers

- Health plans must tell you what providers, facilities, air and ground ambulance providers are in their network on their website or if you ask.
- Providers, facilities, air and ground ambulances must tell you what provider networks they participate in on their website or if you ask.
- [Notice](#) must be provided to you detailing your rights under the BBPA and to let you know when you can and cannot be balanced billed. The notice is on our website and translated into the [top 12 languages](#).

Balance Billing-Consumer Protections

Can you be asked to waive your balance billing protections?

- For health plans subject to the BBPA, consumers **cannot** be asked to waive their balance billing protections.
- For self-funded group health plans that have not opted into the BBPA, the NSA governs. In some limited situations, medical providers can ask you to consent to waive your balance billing protections, but **you are never required to give your consent**. Please contact your employer or health plan for more information.

What to do if you've been wrongly billed

If you think you've been wrongly balanced billed, contact the OIC at 800-562-6900 or [submit a complaint online](#).

OIC will determine if your plan and the services you received are subject to the BBPA.

If there appears to be a violation, OIC will contact the provider/facility/ground ambulance and offer them an opportunity to cure the alleged violation.

If OIC determines a pattern of unresolved violations has occurred, OIC can refer the provider/facility/ground ambulance to DOH/disciplinary authority for investigation and possible enforcement.

Locally Set Rate Submission

Under [RCW 48.49.205](#) local governmental entities that have established or contracted rates for ground ambulance services must submit those rates to the OIC. The OIC is *proposing* the following, pending completion of notice and comment rulemaking:

- First rate submissions were due by October 16, 2024.
- All future rate updates:
 - By November 1 of each year to take effect by January 1 of the following year (i.e., November 1, 2025, for an effective date of January 1, 2026).
 - Exceptions may be filed if there is a risk to the financial viability of the ground ambulance.

Locally Set Rate Submission, *continued*

- Per [RCW 48.49.205](#) the OIC will maintain a publicly accessible database for these rates.
- Health Carriers and other interested parties [may sign-up for email alerts](#) about updated rates soon.

A public database of these rates will be available after the first rates are submitted.

Next steps

Complete rulemaking for [R2024-01 ~ Implementation of SSB 5986 and updates to the Balance Billing Protection Act.](#)

- Updates to OIC website
 - [Ground ambulance services and surprise billing](#)
 - [Ground ambulance advisory group](#)
- Complete webinar series and post webinars to updated OIC website page.
- Launch collection of ground ambulance rates and establish publicly accessible database on OIC website.

Resources

[CMS No Surprises Act website](#)

[Consolidated Appropriations Act](#)

Washington State law

- [SSB 5986 \(Chapter 218, Laws of 2024\)](#)
- [Summary of SSB 5986](#)

Proposed Rulemaking

- [R2024-01 Implementation of SSB 5986 and updates to the Balance Billing Protection Act](#)
- [Ground Ambulance Advisory Committee](#)

Questions?

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