

**Bill Summary**  
1<sup>st</sup> Session of the 58<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>SB 824</b>
<b>Version:</b>	<b>INT</b>
<b>Request No.:</b>	<b>1385</b>
<b>Author:</b>	<b>Sen. Pederson</b>
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**Bill Analysis**

SB 824 creates the Ambulance Service Provider Access Payment Program Act. The measure directs the Oklahoma Health Care Authority to assess ambulance service providers an ambulance service provider access payment program fee. Government-run, Medicaid eligible, non-emergency, or air-based ambulance services shall not be subject to the fee. The rate shall be determined annually as outlined in the measure, though the maximum rate shall never exceed the maximum rate allowed by federal law or regulation. Any provider operating more than 1 ambulance service shall pay the ambulance service provider access payment program fee for each ambulance service separately. The program shall cease to operate if federal financial participation pursuant to Title XIX of the Social Security Act is not available. The Authority is also directed to establish the rules and penalties associated with the program.

Monies derived from the fee shall be deposited into the newly created Ambulance Service Provider Access Payment Program Fund. The Authority shall collect the fee every quarter and must submit notice of the fee at least 30 days in advance to affected services. Providers shall have 30 days to review the notice and to verify the rate. Assessments shall be due on the 15<sup>th</sup> of the first month in each quarter. The Authority is directed to pay all quarterly ambulance service provider access payments within 10 days of the due date for quarterly assessment payments. Every provider shall be eligible to receive payment. Ambulance service provider access payments shall not be used to offset any other payment by Medicaid for services to Medicaid beneficiaries.

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