

SUBJECT: Medicaid payments for ambulance transport

COMMITTEE: Public Health — committee substitute recommended

VOTE: 6 ayes — Gray, Coleman, Delisi, Glaze, Hilderbran, Maxey
0 nays
3 absent — Capelo, McClendon, Uresti

WITNESSES: For — Rachel B. Harracksingh, Texas Ambulance Association and Life Ambulance Service
Against — None

BACKGROUND: Medicare is a two-part federal health-insurance program for disabled or elderly citizens. Part A covers hospital insurance, and qualifying individuals receive Part A coverage without premium payments. Part B covers physician and related health services, and all enrollees must pay a monthly premium. Both Part A and Part B have coinsurance and deductible requirements.

Medicaid is a state and federally funded health-insurance program for the poor and disabled. The Texas Medicaid program also pays the premiums and deductibles of low-income Medicare recipients so that Medicare will pick up the cost of rendered services.

DIGEST: CSHB 897 would amend the state Medicaid law to require Medicaid to pay the Medicare deductibles and coinsurance for ambulance service provided to individuals eligible for both Medicaid and Medicare. It would authorize the Texas Health and Human Services Commission to seek a federal waiver or authorization if necessary.

The bill would take effect September 1, 1999, and would apply only to ambulance payments on or after that date.

SUPPORTERS SAY: CSHB 897 simply would place into statute the current operations of the state Medicaid program regarding ambulance services and Medicare payments that help Medicaid recipients pay the deductible and coinsurance not covered by

Medicare for these vital services. In these times of changing health-care financing strategies and federal cutbacks in Medicare reimbursements, this bill would help ambulance services meet their total costs in providing care to their service areas.

OPPONENTS
SAY:

No apparent opposition.

NOTES:

The committee substitute removed a requirement in the original bill that Medicaid pay the difference between the community's customary rate for ambulance services and the maximum Medicare allowable charge for the services. The fiscal note for the original bill stated that it would have increased state spending by \$14.7 million per year.