

Amendment - 1st Reading-white - Requested by: Llew Jones - (H) Appropriations

- 2025

69th Legislature 2025

Drafter: Julie Johnson,

HB0056.002.001

HOUSE BILL NO. 56

INTRODUCED BY E. BUTTREY

BY REQUEST OF THE ECONOMIC AFFAIRS INTERIM COMMITTEE

A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING AN AMBULANCE PROVIDER ASSESSMENT FEE; ESTABLISHING PROCEDURES FOR COLLECTING AND DISTRIBUTING THE ASSESSMENT FEE; ALLOWING AUDITING OF AMBULANCE PROVIDER REPORTS AND PAYMENTS; ALLOWING FOR PENALTIES AND INTEREST; REQUIRING REVENUES GENERATED BY THE ASSESSMENT FEE TO BE USED FOR SUPPLEMENTING AMBULANCE PROVIDER MEDICAID PAYMENTS; PROVIDING DEFINITIONS; PROVIDING RULEMAKING AUTHORITY; PROVIDING A STATUTORY APPROPRIATION; AMENDING SECTION 17-7-502, MCA; PROVIDING FOR CONTINGENT VOIDNESS; AND PROVIDING A CONTINGENT EFFECTIVE DATE AND A TERMINATION DATE."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Definitions. As used in [sections 1 through 13], the following definitions apply:

- (1) (a) "Ambulance provider" means a person licensed pursuant to 50-6-306 to provide ground ambulance transport, including transport for a municipal fire or police department or other government entity.
- (b) The term does not include:
 - (i) an entity that exclusively provides air ambulance services; or
 - (ii) an entity operated by the United States, an Indian tribe, or any facility authorized under the Indian Health Care Improvement Act.
- (2) "Assessment fee" means the ambulance provider assessment fee as provided in [section 2].
- (3) "Department" means the department of revenue provided for in 2-15-1301.
- (4) "Emergency ambulance services" means any service delivered by an ambulance provider other than air ambulance services.
- (5) (a) "Net operating revenue" means gross revenue collected by ambulance providers for the

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(2) [Section 14] is intended to be codified as an integral part of Title 53, chapter 6, part 1, and the provisions of Title 53, chapter 6, part 1, apply to [section 14].

NEW SECTION. Section 18. Contingent effective date. [This act] is effective on approval by the United States department of health and human services of all waivers and approvals necessary to implement the assessment fee and supplemental payments as provided in [sections 1 through 15]. The department of public health and human services shall notify the code commissioner within 15 days of the occurrence of the contingency.

NEW SECTION. Section 19. Contingent voidness. (1) [Sections 1 through 15] are void on the date that federal law or policy is amended so that the assessment fee collected pursuant to [sections 1 through 15] may not be considered as the state's share in claiming federal financial participation under the medicaid program. The department of public health and human services shall submit certification of the change in federal law or policy to the code commissioner within 15 days of the occurrence of the contingency.

(2) If [sections 1 through 15] are rendered void under the provisions of this section, all fees received or collected by the department of revenue prior to the date on which the act becomes void must be deposited in accordance with [section 2], and a person or party may not receive a refund of any fees received or collected by the department prior to the date on which [sections 1 through 15] become void.

(3) If the United States department of health and human services fails to approve the ambulance provider supplemental payments, [sections 1 through 15] are void. The department of public health and human services shall notify the code commissioner within 15 days of the occurrence of the contingency.

NEW SECTION. Section 20. Termination. [This act] terminates June 30, 2033.

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