



HOUSE BILL 489: Insurance Coverage Emergency Ambulance Trans.

2025-2026 General Assembly

Committee:	House Insurance. If favorable, re-refer to Rules, Calendar, and Operations of the House	Date:	April 29, 2025
Introduced by:	Reps. Loftis, Potts, Huneycutt, Lambeth	Prepared by:	Bill Patterson*
Analysis of:	Second Edition		Committee Co-Counsel

OVERVIEW: House Bill 489 would:

- *Require insurers to cover emergency ambulance transportation by in and out-of-network providers.*
- *Require the same cost-sharing requirement for treatment by an out-of-network provider as the requirement for an in-network provider.*
- *Set a minimum allowable reimbursement rate for emergency ambulance transportation by an out-of-network provider.*
- *Limit the cost-sharing requirement for emergency transportation services.*

CURRENT LAW: The law does not currently require insurers to cover emergency transport of a person to a medical facility. The current requirement is that all insurers cover emergency services that are necessary to stabilize and screen a person who is covered under the plan.

BILL ANALYSIS:

Section 1.(a) of the bill would:

- Require insurers to cover emergency services to transport a covered person to a medical facility.
- Require coverage for services by an out-of-network provider if the covered person did not have an opportunity to choose their ambulance transportation provider because of an emergency.
- Define covered person, emergency medical transportation, and out-of-network provider.
- Set the minimum allowable reimbursement rate to be paid to an out-of-network ambulance service provider for emergency medical transportation. That rate would be 100% of a rate set by an ambulance franchise granted by the county in which the ambulance service originated. If that rate does not exist, then the minimum allowable reimbursement rate would be the lesser of:
 - 400% of the most recently published Medicare rate for ambulance services by the Centers for Medicare and Medicaid Services for the same services provided in the same geographic area.
 - The charges by the out-of-network ambulance service provider.
- Limits the cost-sharing requirement for emergency transportation services.
- Allow self-funded group plans regulated by ERISA to opt into the coverage and the applicable requirements.

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- Make technical changes.

Section 1.(b) would make a technical correction to remove redundant definitions for terms defined elsewhere in Article 3 of Chapter 58.

EFFECTIVE DATE: Section 1.(a) of the act would be effective October 1, 2025, and would apply to insurance contracts issued, renewed, or amended on or after that date and ambulance services provided on or after that date. The remainder of the act would be effective when it becomes law.

Stewart Sturkie, counsel to House Health, substantially contributed to this summary.