



Tom Bell
President and CEO

TO: House Corrections and Juvenile Justice Committee

FROM: Chad Austin
Senior Vice President, Government Relations

DATE: February 7, 2013

RE: House Bill 2064

The Kansas Hospital Association appreciates the opportunity to provide comments on House Bill 2064 which amends K.S.A. 22-4612 by adding “an operator permitted by the emergency medical services board” to the definition of health care provider.

The history of this statute can be traced back to the passage of House Bill 2893 during the 2006 Kansas legislative session. House Bill 2893 was achieved because the two sides, hospitals and local law enforcement agencies, had issues in conflict that needed to be corrected. For hospitals, it was the practice of “un-arresting” individuals in custody to avoid paying for services. For the Kansas Sheriff’s Association the issue was payment rates. In the end, both sides agreed that if providers would accept Medicaid payment rates for services rendered then the practice of “un-arresting” would be discontinued. It was a win-win for both sides.

House Bill 2064 attempts to extend this agreement to operators of emergency medical services. According to the KBEMS Web site, there are 170 EMS operators in the State of Kansas. Of these, 26 are considered hospital-based EMS services. After visiting with several of the hospital-based EMS providers, it is our understanding that many of them are currently accepting the Medicaid rate as payment for services rendered to individuals in custody. Under Medicaid, ambulance services are typically classified as Advanced Life Support, Basic Life Support or Volunteer. In addition, they are separated by emergent and non-emergent transports and the level of acuity for the patient. Below are a few examples of the Medicare and Medicaid rates for EMS services.

A0427 Advanced Life Support, emergency transport, Level I:	Medicare: \$392;	Medicaid \$180
A0429 Basic Life Support, emergency transport:	Medicare \$330;	Medicaid \$150
A0428 Basic Life support, non-emergency transport:	Medicare \$206;	Medicaid \$40

We would strongly urge the committee to thoughtfully consider the impact of forcing Medicaid rates on providers for populations that do not meet Medicaid criteria.

Thank you for your consideration of our comments.

Kansas Hospital Association

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