

Act 84 Participation Form Bulletin
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FYI. Information Shared from the PA DOH & Ambulance Association of PA...

In December of 2015, the legislature passed and Governor Wolf signed Act 84 of 2015 (HB 857). This law reauthorizes the CHIP program and allows an EMS Agency properly dispatched by a PSAP to an emergency call, the ability to accept direct payment from the patient's insurer if that service is not in-network or contracted with that insurer. This law creates NO mandate on an EMS Agency to participate.

This permits your EMS Agency to make a business decision to EITHER:

1. Accept existing in-network rates FOR EMERGENCY SERVICES from an out of network insurer you choose to permit payment directly to your EMS Agency. If you accept this option you may not balance bill the patient but may collect co-payments, co-insurance or deductibles.
2. DO NOTHING - your current situation remains the same where payment is routinely made to the beneficiary and you are free to follow your normal billing process.

SHOULD YOUR EMS AGENCY DECIDE TO ACCEPT DIRECT PAYMENT FROM AN OUT OF NETWORK INSURER

As prescribed in the law, the Bureau of EMS has provided a Form for the EMS Agency to complete to determine which insurer an EMS agency would like to accept direct payment from. The Bureau of EMS has published a link to the direct pay form under the EMS Quick Links, at <http://www.health.pa.gov/My%20Health/Emergency%20Medical%20Services/Pages/default.aspx#.V-1MYfArLIU>.

If your EMS agency chooses to accept direct pay, you must fill in this form and list each selected out of network insurer by October 15th. Also prescribed in the law, the EMS Agency must complete this process annually by October 15th for the following calendar year.

SHOULD YOUR EMS AGENCY DECIDE TO NOT ACCEPT DIRECT PAYMENT FROM AN OUT OF NETWORK INSURER DO ABSOLUTELY NOTHING!