

SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION

S.F. No. 1326

(SENATE AUTHORS: HAUSCHILD and Lang)

DATE	D-PG	OFFICIAL STATUS
02/13/2025	375	Introduction and first reading Referred to Health and Human Services

1.1

A bill for an act

1.2

relating to health; increasing medical assistance payment rates for ambulance

1.3

services; amending Minnesota Statutes 2024, section 256B.0625, subdivision 17a.

1.4

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

1.5

Section 1. Minnesota Statutes 2024, section 256B.0625, subdivision 17a, is amended to

1.6

read:

1.7

Subd. 17a. **Payment for ambulance services.** (a) Medical assistance covers ambulance

1.8

services. Providers shall bill ambulance services according to Medicare criteria.

1.9

Nonemergency ambulance services shall not be paid as emergencies. Effective for services

1.10

rendered on or after July 1, 2001, medical assistance payments for ambulance services shall

1.11

be paid at the Medicare reimbursement rate or at the medical assistance payment rate in

1.12

effect on July 1, 2000, whichever is greater.

1.13

(b) Effective for services provided on or after July 1, 2016, medical assistance payment

1.14

rates for ambulance services identified in this paragraph are increased by five percent.

1.15

Capitation payments made to managed care plans and county-based purchasing plans for

1.16

ambulance services provided on or after January 1, 2017, shall be increased to reflect this

1.17

rate increase. The increased rate described in this paragraph applies to ambulance service

1.18

providers whose base of operations as defined in section 144E.10 is located:

1.19

(1) outside the metropolitan counties listed in section 473.121, subdivision 4, and outside

1.20

the cities of Duluth, Mankato, Moorhead, St. Cloud, and Rochester; or

1.21

(2) within a municipality with a population of less than 1,000.

2.1 (c) Effective for services provided statewide on or after January 1, 2026, medical
2.2 assistance payment rates for ambulance services are increased by ... percent. Capitation
2.3 payments made to managed care plans and county-based purchasing plans for ambulance
2.4 services provided on or after January 1, 2026, must be increased to reflect this rate increase.

2.5 ~~(e)~~ (d) Effective for the first day of each calendar quarter in which the price of gasoline
2.6 as posted publicly by the United States Energy Information Administration exceeds \$3.00
2.7 per gallon, the commissioner shall adjust the rate paid per mile in paragraph (a) by one
2.8 percent up or down for every increase or decrease of ten cents for the price of gasoline. The
2.9 increase or decrease must be calculated using a base gasoline price of \$3.00. The percentage
2.10 increase or decrease must be calculated using the average of the most recently available
2.11 price of all grades of gasoline for Minnesota as posted publicly by the United States Energy
2.12 Information Administration.

2.13 ~~(d)~~ (e) Managed care plans and county-based purchasing plans must provide a fuel
2.14 adjustment for ambulance services rates when fuel exceeds \$3 per gallon. If, for any contract
2.15 year, federal approval is not received for this paragraph, the commissioner must adjust the
2.16 capitation rates paid to managed care plans and county-based purchasing plans for that
2.17 contract year to reflect the removal of this provision. Contracts between managed care plans
2.18 and county-based purchasing plans and providers to whom this paragraph applies must
2.19 allow recovery of payments from those providers if capitation rates are adjusted in accordance
2.20 with this paragraph. Payment recoveries must not exceed the amount equal to any increase
2.21 in rates that results from this paragraph. This paragraph expires if federal approval is not
2.22 received for this paragraph at any time.