

## **HOUSE AMENDMENT 1 TO hb1654.**

deleting lines 10, and 11 on page 1 and substituting therefor the following:  
"TRANSPORTATION SERVICE PROVIDERS; AND FOR OTHER"

AND

by deleting lines 17, 18, and 19 on page 1 and substituting therefor:  
"SERVICE PROVIDERS."

AND

by deleting lines 24 through 36 of page 1 and lines 1 through 7 on page 2 and substituting therefor the following:

"SECTION 1. (a) Every insurance policy, other than a policy excluded pursuant to subsection (d), providing for medical transportation services that is sold, delivered, issued for delivery, renewed, or offered for sale in this state by an insurer shall contain a provision providing for direct reimbursement to the provider of covered medical transportation service, if the provider has not received payment for those services from any other source.

(b) This section shall not apply if the provider for the medical transportation services has entered into a contract for direct payment with the insurer.

(c) For the purpose of this section, 'direct reimbursement' means the insurer shall pay the medical transportation service directly, pursuant to a claim filed by the insured and the medical transportation provider shall not demand payment from the insured until having received payment from the insurer. Upon receiving payment from the insurer, the medical transportation provider may demand payment from the insured for any unpaid portion of the provider's fee.

(d) This act shall not apply to any health care policy, whether such policy is in the form of a health maintenance organization evidence of coverage or health care plan as defined in Arkansas Code § 23-76-102(3) and § 23-76-102(4), or a disability policy governed by Arkansas Code §§ 23-84-101 - 23-85-138, or a group and blanket disability insurance policy governed by Arkansas Code §§ 23-86-101 - 23-86-118, a Medicare supplement policy, or any other form."