



OFFICE OF THE GOVERNOR

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JB PRITZKER
GOVERNOR

August 27, 2021

To the Honorable Members of
The Illinois House,
102nd General Assembly:

Today I veto House Bill 684 from the 102nd General Assembly, a bill that seeks to amend Chapter 305 Article 5 of the Medical Assistance Article in the Illinois Public Aid Code to exempt non-emergency ground ambulance services from Illinois' managed care medical assistance program.

My administration appreciates the hard work of the sponsors of this legislation in the House and Senate. However, if enacted, this legislation has the potential to disrupt care and reduce the quality of provided medical transportation services to some of the most vulnerable Illinoisans.

Currently, when an enrollee in the medical assistance program needs non-emergency ambulance transportation, they can contact their MCO, and the MCO's transportation broker is contractually obligated to locate a ride in a timely fashion. If HB 684 were enacted, a consumer would be forced to use the vendor contracted with by the fee-for-services program—a vendor that is not contractually bound to provide timely services. Consumers would be forced into the uncertain position of not knowing which of their healthcare services are covered by their MCO and whether they will be able to secure transport in a timely fashion. During the COVID-19 pandemic, the Department of Healthcare and Family Services (HFS) received consumer complaints regarding the difficulty of securing transport from the fee-for-service vendor to get to non-emergency healthcare services like check-ups and dialysis.

I understand that ambulance providers, like all healthcare industries, have faced unprecedented challenges during COVID-19 and have risen to meet the healthcare needs of the COVID-19 pandemic. That is why I recently signed multiple pieces of legislation to help address concerns that the industry has raised in the past year, from workforce shortage to payment structure. Many of those pieces of legislation were negotiated along with the ambulance providers, but there was no similar willingness by industry to negotiate HB 684.

I recently signed the following bills, which were supported by the Ambulance Association:

- SB1740 allows non-emergency ambulance providers to provide their own in-house driver safety training programs provided they are approved by IDPH

- HB2864 allows specified medical professionals in rural settings to serve as EMTs, helping to alleviate the burden on rural EMS programs
- SB693 includes industry language that requires IDPH to allow for alternative staffing models in non-emergency ambulance trips. These alternative staffing models would allow an EMR, who has less training than an EMT, to ride with an EMT, instead of the current requirement that there be 2 EMTs.
- SB2325 creates a \$2 million funding pool for payments to non-emergency ambulance providers for valid appeals of claims previously denied by HFS

In addition, as mandated by previous legislation, 17 months ago HFS created a complaints portal for ambulance providers to submit grievances regarding the MCO system. To date, only 4 complaints have been submitted by ambulance providers.

My administration is committed to working with stakeholders and our partners in the General Assembly to improve the managed care system in Illinois. For example, I was proud to sign the Black Caucus's Health & Human Services bill, which brings a higher standard of oversight and accountability to the program and the companies that administer it. Unfortunately, HB684 moves the state further away from ensuring every Illinoisian has access to quality, affordable healthcare.

Therefore, pursuant to Section 9(b) of Article IV of the Illinois Constitution of 1970, I hereby return House Bill 684, entitled "AN ACT concerning public aid," with the foregoing objections, vetoed in its entirety.

Sincerely,

Governor JB Pritzker