

Navigating the No Surprises Act:

Case studies on the role of our emergency medical air transport benefit

The Federal No Surprises Act (NSA) was enacted in 2020 in order to help provide protections from certain unexpected medical bills. While the NSA does not apply to ground transport bills, it does limit surprise billing from air ambulance providers — but insurance companies can still pass on certain costs to patients.

MASA offers protection from these out-of-pocket costs with our emergency medical air transport benefit. The following three case examples show how our solutions helped resolve billing issues for different air ambulance transports.



Case study 1: \$80,000 out-of-network emergency medical air transport



Problem

MASA member Kara required an interfacility transport to a higher-level hospital due to complications from a stroke. Her original emergency air ambulance bill was nearly \$80,000. The bill was accepted as medically necessary by her primary insurance, but the ambulance provider was not in the healthcare network. The amount the insurance provider initially suggested for payment to the ambulance company did not satisfy the ambulance provider. Ultimately, the bill was submitted to the NSA's IDR process for settlement.



Solution

While all air ambulance providers are required to submit to IDR in this instance (see below), Kara also sent the statement she received from the ambulance company to MASA, showing the total cost of the ride. Her MASA claims manager listed MASA as a secondary payor on the dispute and monitored the progress of Kara's bill through the IDR process. Primary insurance was required by the IDR process to pay \$29,000. Kara's out-of-pocket responsibility was over \$7,000. MASA paid her portion in full, leaving Kara with \$0 out-of-pocket.



Case summary

Total charges: Nearly \$80k

Member responsibility: \$7k+

Health insurance paid: \$29k

After MASA: \$0



The No Surprises Act federal dispute process is not fast — it is severely backlogged. We've seen it take anywhere from six weeks to more than a year before the final ambulance bill reaches MASA.

— MASA Claims Manager

What is the IDR process?

All air ambulance providers are required by the federal No Surprises Act to submit their bill to the IDR (independent dispute resolution) process if they do not have a network agreement with the patient's primary health insurance company and cannot agree on rates for a service or items. The Departments of Health and Human Services, Labor, and the Treasury manage the process and decide what the settled payment should be, largely based on the national median in-network rate for the service. Once the IDR process is complete, the ambulance provider can send the patient the final bill, which will indicate the primary insurance payment amount.



Case study 2:

\$94,000 emergency medical air transport bill



Problem

MASA member Claire experienced a severe injury that required an emergency air transport. The ambulance provider was out of Claire's health insurance network. Afterwards, she received an air ambulance statement showing a total charge of \$94,000. Claire's primary insurance and ambulance provider could not agree on rates for the service, so her bill was sent to the NSA's Independent Dispute Resolution (IDR) process.



Solution

IDR required Claire's primary insurance to pay \$92,000. Claire was obligated to pay over \$2,000. As a MASA member through her employer's group benefits, Claire submitted her bill to us, leaving her with \$0 out-of-pocket.



Case summary

Total charges: \$94k **Member responsibility:** \$2k+

Health insurance paid: \$92k **After MASA:** \$0



At MASA, we are focused on applying a solution, so members can focus on their recovery.

– MASA claims team

Case study 3:

\$175,000 “not medically necessary” air transfer



Problem

After surgery, MASA member Janice had complications requiring an air transport from her hospital in Nebraska to another facility in Colorado that could offer a higher level of care. Her doctor signed off on the transport stating it was medically necessary, but her primary insurance denied the bill stating she should have been transported by ground ambulance instead. Janice was left responsible for the total cost of the air ambulance bill — nearly \$175,000. Since her insurance deemed the flight not medically necessary, her bill was excluded from the Independent Dispute Resolution (IDR) NSA process.



Solution

Janice submitted her bill to MASA. MASA negotiated a settlement with the provider, leaving the member with \$0 out-of-pocket expense.



Case summary

Total charges: Nearly \$175k **Member responsibility:** Nearly \$175k

Health insurance paid: \$0 **After MASA:** \$0



This is becoming increasingly common. The doctor will order a transport that they deem medically necessary, and, after the fact, the primary insurance denies the claim. This leaves people like Janice on their own to cover the full bill out-of-pocket.

– Briana Gringo, MASA COO