

AMENDMENTS TO HOUSE BILL NO. 1553

Sponsor: REPRESENTATIVE BAKER

Printer's No. 2033

1 Amend Bill, page 1, line 4, by striking out "facilities" and
2 inserting
3 providers

4 Amend Bill, page 1, line 15, by striking out "Insurers" and
5 inserting
6 Communications, Records and Enforcement

7 Amend Bill, page 5, line 21, by striking out "hospital" and
8 inserting
9 hospitalist

10 Amend Bill, page 5, line 25, by inserting after "The "
11 past, present or future

12 Amend Bill, page 6, by inserting between lines 14 and 15

13 (11) A policy under which benefits are provided by the
14 Federal Government to active or former military personnel and
15 their dependents.

16 Amend Bill, page 6, line 15, by striking out "(11)" and
17 inserting

18 (12)

19 Amend Bill, page 6, line 27, by inserting after "plan. "

20 Nothing in this definition shall be construed to prohibit an
21 authorized representative from acting on behalf of an insured.

22 Amend Bill, page 6, line 28, by striking out "the" where it
23 occurs the second time and inserting

24 accident and health

25 Amend Bill, page 7, line 3, by striking out the period after

1 "1921" and inserting
2 , including section 630 and Article XXIV of The Insurance
3 Company Law of 1921.
4 Amend Bill, page 7, line 16, by striking out "can provide a
5 reasonable basis" and inserting
6 an individual would reasonably believe could be used
7 Amend Bill, page 7, lines 29 and 30, by striking out "a
8 substantial amount of the same" and inserting
9 substantially the full
10 Amend Bill, page 8, line 6, by striking out "entity provides
11 a substantial amount of its" and inserting
12 health care practitioners provide a substantial
13 amount of their
14 Amend Bill, page 8, line 9, by striking out "to" and
15 inserting
16 of
17 Amend Bill, page 8, line 10, by inserting after "the"
18 entity's
19 Amend Bill, page 9, lines 2 through 23, by striking out all
20 of said lines and inserting
21 "Surprise balance bill." As follows:
22 (1) A balance bill for any of the following:
23 (i) A covered emergency service provided to an
24 insured by an out-of-network provider, not including a
25 bill for an emergency medical service for which an
26 emergency medical services agency has registered with the
27 Department of Health for direct reimbursement under
28 section 635.7 of the Insurance Company Law of 1921.
29 (ii) A covered service provided to an insured by an
30 out-of-network provider at an in-network facility when
31 the insured did not know the provider was out-of-network
32 or did not choose to receive the service from the out-of-
33 network provider.
34 (iii) A covered service provided to an insured by an
35 out-of-network provider, in conjunction with a health
36 care service for which the insured presented for care to
37 an in-network provider, when the insured did not know the
38 provider was out-of-network or did not choose to receive
39 the service from the out-of-network provider.

(iv) A covered service provided to an insured by an out-of-network provider at an in-network facility when the insured did not have the ability to make an informed choice of the provider of the health care service.

(2) The term does not include any of the following:

(i) A balance bill for a health care service rendered by an out-of-network provider when an in-network provider is available and the insured has elected to receive the service from an out-of-network provider rather than an in-network provider.

(ii) A health care service for which an entity, other than an insurer under a health insurance policy, is responsible.

(3) Nothing in this definition shall be construed to prohibit an insurer from appropriately utilizing reasonable medical management techniques.

Amend Bill, page 10, by inserting between lines 1 and 2

"Usual, customary and reasonable rate." The seventy-fifth percentile of all charged amounts for a particular health care service performed by a provider which is in the same or similar specialty and provided in the same geographic area as reported in a benchmarking database maintained by a nonprofit organization designated by the commissioner and not affiliated with an insurer or provider.

Amend Bill, page 10, lines 9 and 10, by striking out ", but not earlier than 10 business days prior to admission or date of service" and inserting

and there are 10 business days between the date when the health care service is scheduled and the date when the health care service is scheduled to be provided

Amend Bill, page 10, lines 12 through 14, by striking out "Nothing in this act shall prohibit an insurer from" in line 12 and all of lines 13 and 14 and inserting

Notice provided less than 10 business days before the date when the health care service will be provided shall not be considered fair notice to allow the insured to make an informed choice to receive a health care service from an out-of-network provider.

Amend Bill, page 10, line 20, by striking out "providers" and inserting

provider

Amend Bill, page 11, line 10, by inserting after "service"

1 covered by this act

2 Amend Bill, page 11, line 22, by striking out "Assignment of

3 benefits" and inserting

4 Form submission

5 Amend Bill, page 11, lines 23 through 28, by striking out all

6 of lines 23 through 27 and "(2)" in line 28

7 Amend Bill, page 12, lines 1 through 4, by striking out

8 "Submission" in line 1, all of lines 2 and 3 and "to the out-of-

9 network provider." in line 4

10 Amend Bill, page 12, lines 23 through 25, by striking out all

11 of lines 23 and 24 and "(iii)" in line 25 and inserting

12 (ii)

13 Amend Bill, page 12, line 26, by striking out "affected" and

14 inserting

15 effected

16 Amend Bill, page 12, line 27, by striking out "(iv)" and

17 inserting

18 (iii)

19 Amend Bill, page 12, line 30, by striking out "(v)" and

20 inserting

21 (iv)

22 Amend Bill, page 13, line 24, by inserting after "The "

23 out-of-network

24 Amend Bill, page 14, line 2, by striking out "paragraph" and

25 inserting

26 section

27 Amend Bill, page 15, by inserting between lines 1 and 2

28 (3) Nothing in this section shall supersede existing

29 agreements between insurers and providers in instances of

30 surprise balance billing.

31 Amend Bill, page 15, line 2, by striking out all of said line

1 and inserting

2 (b) Health care service payments.--

3 (1) If an insurer receives a

4 Amend Bill, page 15, line 3, by striking out "and bill from

5 an insured"

6 Amend Bill, page 15, line 4, by striking out "bill" and

7 inserting

8 claim

9 Amend Bill, page 15, line 6, by striking out all of said line

10 and inserting

11 (2) Payment under paragraph (1) shall be in accordance

12 with the following:

13 (i) If the claim by the out-of-network provider in

14 excess of \$500, either party may initiate the independent

15 dispute resolution process under section 304.

16 (ii) If the claim by the out-of-network provider is

17 \$500 or less, the insurer shall reimburse the out-of-

18 network provider the greater of:

19 (A) the amount that would have been paid for the

20 claim under the insured's health insurance policy had

21 the service which is the subject of the claim been

22 rendered by an in-network provider; or

23 (B) the usual, customary and reasonable rate for

24 the out-of-network provider's services.

25 (iii) The insurer shall pay, in accordance with the

26 prompt

27 Amend Bill, page 15, line 11, by striking out all of said

28 line and inserting

29 (iv) Payment under subparagraph (i) shall be made

30 directly

31 Amend Bill, page 15, line 13, by striking out all of said

32 line and inserting

33 (v) The insurer and out-of-network provider may

34 reach an agreement as to

35 Amend Bill, page 15, line 14, by inserting after "the"

36 out-of-network

37 Amend Bill, page 15, line 17, by inserting after "the" where

1 it occurs the first time
2 out-of-network
3 Amend Bill, page 15, line 19, by striking out all of said
4 line and inserting
5 (vi) If the out-of-network provider and insurer do
6 not reach an
7 Amend Bill, page 15, line 22, by inserting after "the " where
8 it occurs the first time
9 out-of-network
10 Amend Bill, page 15, line 23, by inserting after "The "
11 out-of-network
12 Amend Bill, page 15, line 24, by inserting after "the "
13 out-of-network
14 Amend Bill, page 15, line 26, by striking out ", including"
15 and inserting
16 to include
17 Amend Bill, page 16, line 26, by striking out "insurer and
18 provider" and inserting
19 the insurer and provider for any dispute
20 Amend Bill, page 17, line 7, by striking out "the" and
21 inserting
22 a
23 Amend Bill, page 17, line 23, by inserting after "shall"
24 each
25 Amend Bill, page 19, line 18, by striking out "offer" and
26 inserting
27 offers
28 Amend Bill, page 19, line 24, by striking out "between the
29 parties" and inserting
30 to the prevailing party
31 Amend Bill, page 20, line 7, by striking out "comply with all

1 of the following"

2 Amend Bill, page 20, line 8, by striking out "Maintaining"
3 and inserting

4 Maintain

5 Amend Bill, page 20, line 16, by striking out "Documenting"
6 and inserting

7 Document

8 Amend Bill, page 20, line 20, by striking out "Reporting" and
9 inserting

10 Report

11 Amend Bill, page 20, line 28, by striking out "Protecting"
12 and inserting

13 Protect

14 Amend Bill, page 21, line 3, by striking out the period after
15 "regulations" and inserting

16 and shall be confidential as nonpublic personal health
17 information.

18 Amend Bill, page 21, line 4, by striking out "Reporting" and
19 inserting

20 Report

21 Amend Bill, page 21, lines 10 through 18, by striking out all
22 of said lines and inserting

23 This chapter applies to surprise balance bills. Nothing in
24 this act shall prohibit an insurer from appropriately utilizing
25 prior authorization or other reasonable medical management
26 techniques.

27 Amend Bill, page 21, line 20, by striking out all of said
28 line and inserting

29 COMMUNICATIONS, RECORDS AND ENFORCEMENT

30 Amend Bill, page 23, line 10, by striking out all of said
31 line and inserting

32 confidential information. Confidential information under

1 this section shall not be subject

2 Amend Bill, page 23, line 15, by striking out "A discovery or
3 admissible evidence" and inserting

4 Discovery or admissible evidence

5 Amend Bill, page 23, line 17, by inserting after "disclose"
6 confidential

7 Amend Bill, page 23, line 18, by striking out "which meets
8 the criteria under subsection (a)"

9 Amend Bill, page 23, lines 28 and 29, by striking out
10 "information which meets the criteria under subsection (a)" and
11 inserting

12 confidential information

13 Amend Bill, page 23, line 30, by inserting after "the" where
14 it occurs the first time

15 aggregated

16 Amend Bill, page 24, lines 2 and 3, by striking out
17 "information which meets the criteria under subsection (a)" and
18 inserting

19 confidential information

20 Amend Bill, page 25, line 27, by inserting after "of"

21 and may be subject to the penalties provided for in

22 Amend Bill, page 25, line 30, by inserting after "of" where
23 it occurs the first time

24 and may be subject to the penalties provided for in

25 Amend Bill, page 26, line 6, by inserting after "of" where it
26 occurs the first time

27 and may be subject to the penalties provided for in

28 Amend Bill, page 27, line 5, by inserting after "may" where
29 it occurs the first time

30 each

31 Amend Bill, page 27, by inserting between lines 6 and 7

1 Section 702. Publication of benchmarking databases.
2 (a) Databases.--The department shall compile and maintain a
3 list of benchmarking databases maintained by nonprofit
4 organizations not affiliated with an insurer or provider.
5 (b) Publication.--The department shall publish the list of
6 benchmarking databases on the department's publicly accessible
7 Internet website and annually in the Pennsylvania Bulletin on or
8 before July 1.

9 Amend Bill, page 27, line 7, by striking out "702" and
10 inserting
11 703