
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1415

Session of
1995

INTRODUCED BY LAWLESS, BUXTON, DEMPSEY, BEBKO-JONES, DURHAM,
MANDERINO, FICHTER, CORNELL, KING, TRICH, VAN HORNE,
MAYERNIK, L. I. COHEN AND PETTIT, APRIL 20, 1995

SENATOR HOLL, BANKING AND INSURANCE, IN SENATE, AS AMENDED,
JUNE 25, 1996

AN ACT

1 Requiring reimbursement by insurers for certain services
2 performed by a hospital emergency facility.

3 The General Assembly of the Commonwealth of Pennsylvania
4 hereby enacts as follows:

5 Section 1. Definitions.

6 The following words and phrases when used in this act shall
7 have the meanings given to them in this section unless the
8 context clearly indicates otherwise:

9 "Insurer." The term means:

10 (1) Any insurance company, association or reciprocal,
11 nonprofit hospital plan corporation.

12 (2) A nonprofit professional health service plan.

13 (3) A health maintenance organization organized and
14 regulated under the act of December 29, 1972 (P.L.1701,
15 No.364), known as the Health Maintenance Organization Act.

16 (4) A risk-assuming preferred provider organization

1 organized and regulated under the act of May 17, 1921
2 (P.L.682, No.284), known as The Insurance Company Law of
3 1921.

4 (5) A preferred provider with a "health management
5 gatekeeper" role for primary care physicians organized and
6 regulated as a health services corporation or a preferred
7 provider organization subject to the provisions of section
8 630 of The Insurance Company Law of 1921.

9 (6) A fraternal benefit society subject to the
10 provisions of the act of December 14, 1992 (P.L.835, No.134),
11 known as the Fraternal Benefit Societies Code.

12 "MEDICAL EMERGENCY." A MEDICAL CONDITION WITH ACUTE SYMPTOMS <—
13 OF SEVERITY OR SEVERE PAIN FOR WHICH:

14 (1) CARE IS SOUGHT AS SOON AS POSSIBLE AFTER THE MEDICAL
15 CONDITION BECOMES EVIDENT TO THE PATIENT OR THE PATIENT'S
16 PARENT OR GUARDIAN; AND

17 (2) THE ABSENCE OF IMMEDIATE MEDICAL ATTENTION COULD
18 RESULT IN:

19 (I) PLACING HEALTH IN SERIOUS JEOPARDY;

20 (II) SERIOUS IMPAIRMENT TO BODILY FUNCTIONS;

21 (III) SERIOUS DYSFUNCTION OF ANY BODY PART; OR

22 (IV) OTHER SERIOUS MEDICAL CONSEQUENCES.

23 Section 2. Reimbursement.

24 (A) REQUIREMENT.--An insurer shall reimburse an insured or <—
25 provider for MEDICALLY NECESSARY services that are provided in a <—
26 hospital emergency facility ~~after the recent onset of a medical~~ <—
27 ~~condition that manifests itself by symptoms of sufficient~~
28 ~~severity, including severe pain, that the absence of immediate~~
29 ~~medical attention could reasonably be expected by a prudent~~
30 ~~layperson, who possesses an average knowledge of health and~~

1 ~~medicine, to result in:~~
2 ~~(1) placing the patient's health in serious jeopardy;~~
3 ~~(2) serious impairment to bodily functions; or~~
4 ~~(3) serious dysfunction of any bodily organ or part.~~ DUE <—
5 TO A MEDICAL EMERGENCY.
6 (B) INFORMATION.--A HOSPITAL EMERGENCY FACILITY SHALL
7 PROVIDE TO AN INSURER, WITH ANY CLAIM FOR REIMBURSEMENT OF
8 SERVICES, INFORMATION ON THE PRESENTING SYMPTOMS OF THE INSURED
9 AS WELL AS THE SERVICES PROVIDED.
10 (C) FACTORS CONSIDERED.--AN INSURER SHALL CONSIDER BOTH THE
11 PRESENTING SYMPTOMS AND THE SERVICES PROVIDED IN PROCESSING A
12 CLAIM FOR REIMBURSEMENT OF EMERGENCY SERVICES.
13 Section 3. Effective date.
14 This act shall take effect in ~~60~~ 180 days. <—